



Research Report

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A Longitudinal Comparison of Enrollment Patterns of Students Receiving Special Education Services in Chicago Charter and Neighborhood Public Schools

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About this Report

This report presents a longitudinal comparison of patterns of special education enrollment in two types of Chicago Public Schools (CPS): neighborhood public schools and charter schools. Public schools in categories other than charter or neighborhood (e.g., magnet, gifted, classical, special education, or contract schools) are excluded from the present analysis. The report identifies how patterns of enrollment for students with individualized education programs (IEPs) have played out across neighborhood and charter categories, at different school levels (elementary vs. high school), over the past five to eight years. We address the following questions:

1. How does the proportion of students with individualized education programs IEPs in CPS charter schools compare over time to that in CPS neighborhood public schools?
2. How do differences in the proportions of students with IEPs in charter and neighborhood schools vary by disability categories?

The analysis is based on two data sources: (1) annual school enrollment and demographic reports from the CPS district¹ to examine total enrollment patterns of students with IEPs, and (2) the Special Education Funding And Child Tracking System (FACTS) from the Illinois State Board of Education (ISBE) to track enrollment patterns by disability categories. The FACTS serves as “the primary approval process for children with disabilities who are eligible for state pupil categorical reimbursements.” According to ISBE, “[e]ach student eligible for state reimbursement, even if only for part of the school year, must be listed and approved on FACTS in order for funding to be claimed”

(Special Education Funding and Child Tracking, p. 1).²

Our analysis includes a combination of descriptive and inferential statistics. We computed and graphed percentages of IEP enrollments to examine enrollment patterns over time. We also examined whether differences in special education enrollment rates were statistically significant using multilevel longitudinal data analysis methods. Specifically, these analyses compared special education enrollment trends for neighborhood and charter schools taking into account variability in enrollment for each school across an eight-year period.

Significance of the Report

At least three compelling reasons underscore the significance of this report. First, although charter schools are granted a level of autonomy, they are expected to follow the same federal laws that protect and give rights to students with disabilities in neighborhood public schools. These laws include the Individuals with Disabilities Education Act (IDEA), Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act (ADA).³ Not only do these laws ensure that all students are provided with a free appropriate public education (FAPE) and that students are taught in the least restrictive environment (LRE), but they also prohibit any form of discrimination and exclusion.⁴ Therefore, any systematic differences in provision of education to students with disabilities have potentially serious legal and civil rights implications for the policy of expanding charter schools in place of neighborhood public schools.

A second motivation for this report stems from the fact that the bulk of the research examining special education enrollment in charter schools does not examine

differences across disability categories. Students receiving special education services are a highly heterogeneous group. The differences among the instructional services and funding needed to meet the individual needs of students with different disabilities are as distinct as the differences between the services needed for students with IEPs and those without. For instance, students with IEPs in the *Learning Disabilities* (LD) category tend to need far less extensive services, modifications, and assistive technology than students with autism, sensory impairments (e.g., blind, deaf), or significant intellectual disabilities. Indeed, many instructional strategies used with students with learning disabilities (such as direct and explicit instruction, the use of graphic organizers, etc.) overlap with the instructional strategies used for students who do not receive special education, but struggle to learn.⁵

A third rationale is the need for an analysis that is focused specifically on Chicago. Research at the national and state levels has documented that charter schools tend to enroll lower proportions of students with IEPs than traditional neighborhood schools.⁶ The third largest public school district in the nation, Chicago, has also been an early adopter of the national charter school initiative, and thus a laboratory for this and other market-driven educational policies.⁷ As the number of charter schools in the district has increased dramatically over the last decade, Chicago provides an important case study of the ways this policy impacts services for students with disabilities over the years. In the last five school years (2009-10 to 2013-14), the number of charter schools in Chicago has increased by almost 50%, now serving over 55,000 students, almost one sixth of the district. This increase in charter schools has been coupled with the closings of neighborhood schools, with a record 50 schools closed in the last school year alone. These policies raise crucial questions about how services to students with disabilities are affected by the increase in charter schools and decrease in neighborhood schools.

Key findings

The results from our analysis are summarized here and detailed in the sections that follow:

1. Charters continue to serve a smaller percentage of students with IEPs than neighborhood public schools, but the percentage of students with IEPs enrolled in charter schools has increased each year, now approaching the proportional rate at which they are enrolled in neighborhood schools (about 13%). However, charter elementary schools tended to enroll over three percent fewer students with IEPs than elementary neighborhood schools on average across the eight-year period. These differences in overall IEP enrollment, however, were not found in the comparison between charter and neighborhood high schools.
2. There are significant differences between charter and neighborhood schools in the enrollment rates for students in the various disability categories, and these differences have mainly remained or increased over time, suggesting a persistent pattern of differential services for students with disabilities. Specifically, we found three trends:
 - Charter schools enroll significantly larger proportions of students in the LD and Other Health Impairments (OHI)

Although charter schools are granted a level of autonomy, they are expected to follow the same federal laws that protect and give rights to students with disabilities in neighborhood public school

Acronyms

ADA: Americans with Disabilities Act

ED: Emotional Disabilities

IDEA: Individuals with Disabilities Education Act

IEPs: individualized education programs

LD: Learning Disability

OHI: Other Health Impairment

SLI: Speech and Language Impairment

- categories when compared to neighborhood schools;
- Charter schools enroll significantly smaller proportions of students with Speech and Language Impairments (SLI) and with a range of disabilities requiring more extensive support needs, compared to neighborhood public schools. These include Intellectual Disabilities, Sensory Impairments (Deaf, Blind, Visually or Hearing Impaired), Autism, Physical Impairments, Multiple Disabilities, Traumatic Brain Injury, and Developmental Delays.
- Neighborhood and charter schools enroll similar proportions of students in the Emotional Disabilities (ED) category.

These three trends have been consistent across the last eight school years. The implications of these findings for students in both charter and neighborhood schools and for the expansion of charter schools in the district are explored in the discussion.

Findings

1. How does the proportion of students with IEPs in CPS charter schools compare to that in CPS neighborhood schools?

As shown in Figure 1, the proportion of CPS students receiving special education in charter schools has increased over recent years, almost reaching the proportions of students receiving special education in neighborhood schools by 2013-14. In that year, students receiving special education accounted for 12.53% of the total enrollment of students in charter schools, while accounting for 12.75% in neighborhood schools. Neighborhood schools continue to enroll larger proportion of students receiving special education than charter schools, but the statistical significance of this difference disappears by the 2013-14 school year.

Worth noting is the wide range of proportions of students with IEPs across charter schools. For example, in the 2013-14 school year, the proportion of students with IEPs in charter schools ranged from 4% (Learn 7 Elementary School) to 26% (Chicago Talent Development High School).

Interestingly, the percentage difference is greater at the elementary school level than at the high school level, as seen in Figure 2. Our statistical analyses indicated that over the past five years elementary charter schools (8.5%) enrolled on average four percent fewer students than neighborhood schools (12.8%). Though the percentage of students with IEPs in charter elementary schools has also increased each year, it has also increased slightly in neighborhood schools each year. Thus, by the 2013-14 school year, the proportion of students receiving special education services in elementary neighborhood schools (12.1%) was still more than two percentage points higher than in charter elementary schools (9.8%). As such, the difference in the number of students with an IEP remains statistically different in elementary charter and neighborhood schools.

The overall gap between charter and neighborhood high schools serving students with IEPs has narrowed to less than half a percentage point by 2013-14. This is due to two longitudinal trends in the data. First, the proportion of students receiving special education in charter high schools increased by 1.2%; and second, the proportion of students receiving special

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education in neighborhood high schools decreased by 0.5%. Our analysis suggested that the percentage difference between charter and neighborhood high schools is not statistically significant.

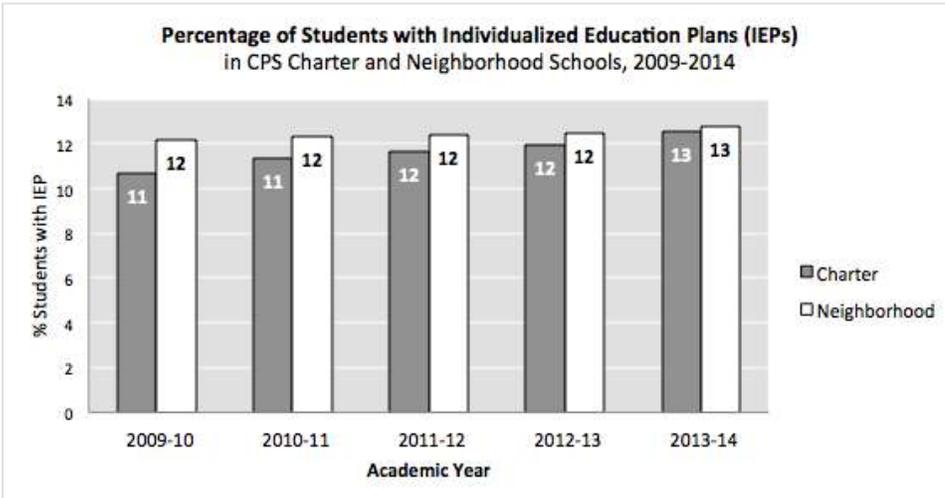


Figure 1. % of Students with IEPs in CPS Charter and Neighborhood Schools

2. How do the proportions of students with IEPs in charter and neighborhood schools vary by disability categories?

Our analysis indicated that special education enrollments differed a great deal across the different disability categories, when comparing CPS neighborhood and charter schools. We found three trends: (a) charter schools enroll larger proportions of students in the LD and OHI categories when compared to neighborhood schools; (b) charter schools enroll smaller proportions of students with SLI and with a range of extensive support needs, when compared to neighborhood schools; and (c) neighborhood and charter schools enroll similar proportions of students in the ED category. These trends have been consistent across the last eight school years.

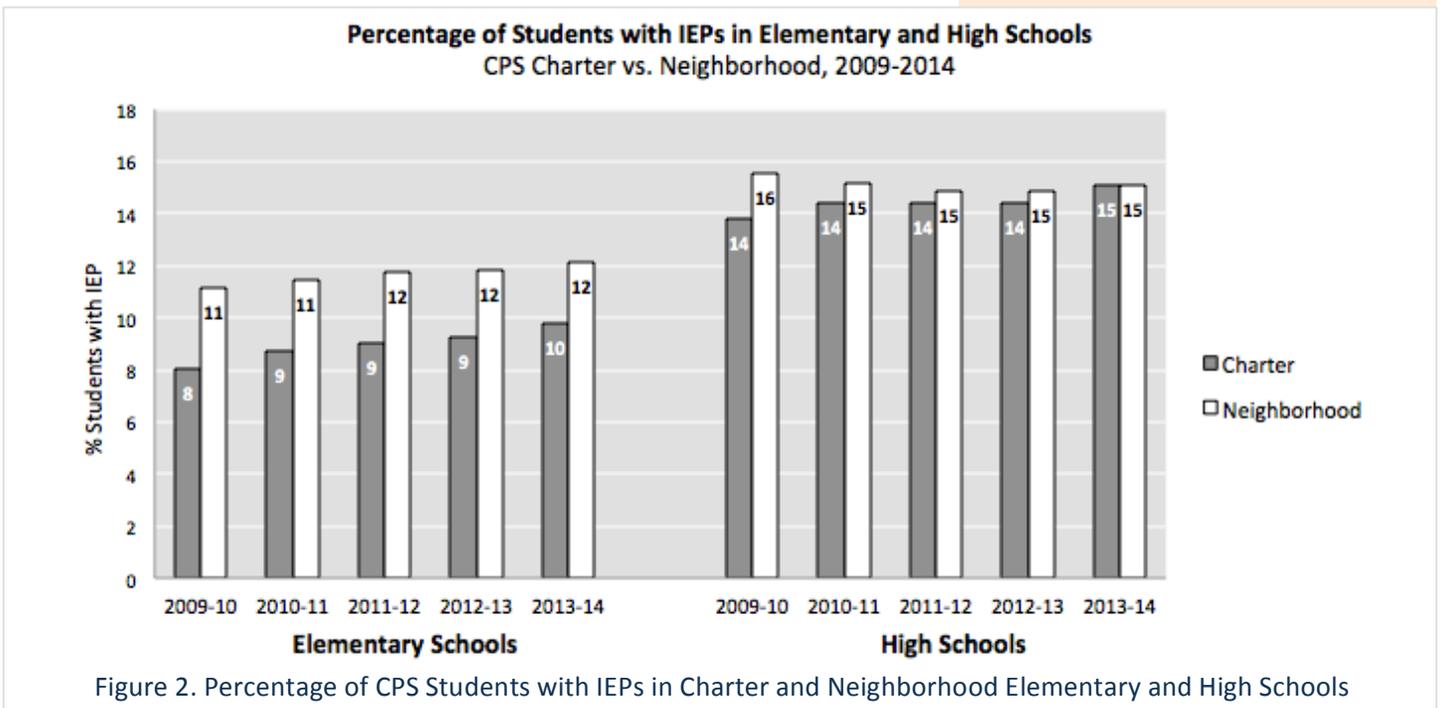


Figure 2. Percentage of CPS Students with IEPs in Charter and Neighborhood Elementary and High Schools

2a. Charter schools enroll disproportionately large numbers of students with LD and OHI

In general, we found a declining trend in the proportion of students in the LD category in both neighborhood and charter schools. This change is more evident in neighborhood schools, where the decline shows a seven percent difference point difference between 2005-06 and 2012-13, while the charter schools' decline shows a five percent point difference.

In addition, out of the total special education enrollment in charter schools, the percentage of students in the LD category has lingered around 70%. This is, on average, 15 percentage points higher than the enrollment found in CPS neighborhood public schools, and almost double the rates for the state of Illinois (37%)⁸ and the nation (38%).⁹ These differences were found to be statistically significant.

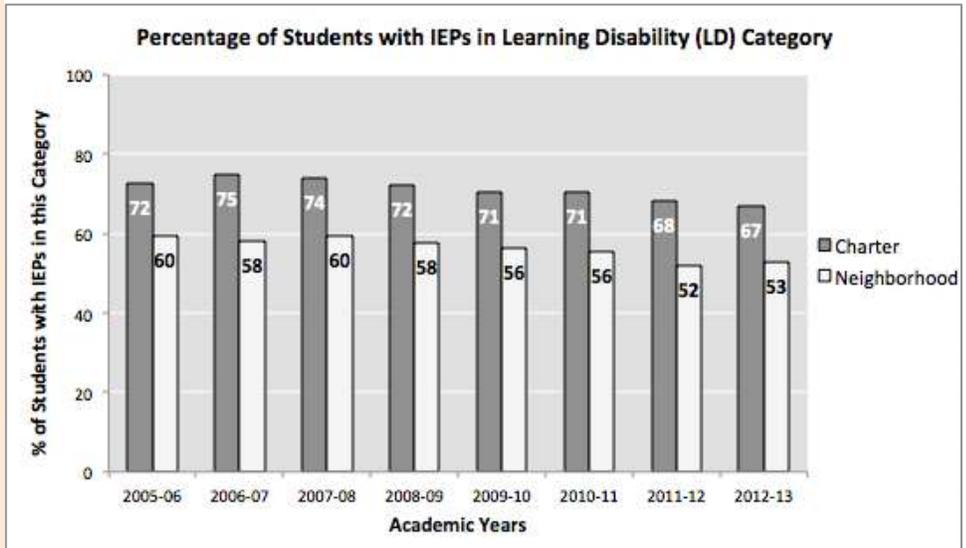


Figure 3. Percentage of CPS Students with IEPs in a Learning Disabilities (LD) category, in Charter and neighborhood public schools.

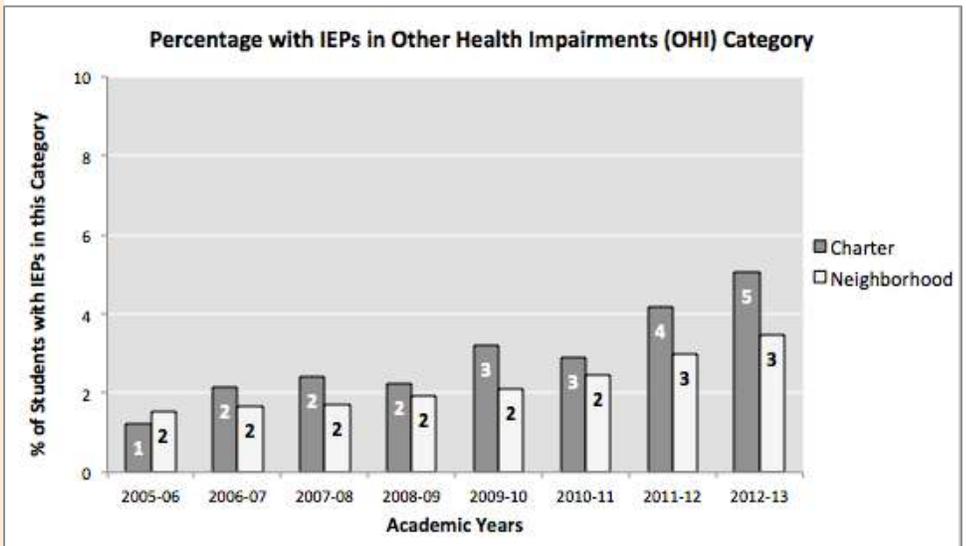


Figure 4. Percentage of CPS Students with IEPs in OHI category, in Charter and Neighborhood Schools

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Students in the OHI category have increased as a share of the total IEP enrollment over the period studied, in both charter and neighborhood schools. These students typically have a diagnosis of Attention-Deficit Hyperactivity Disorder (ADHD) or other diagnoses related to health problems (e.g., epilepsy, asthma, diabetes), and they generally require less intensive levels of support from the school. With the exception of the 2005-06 school year, charter schools enrolled between 0.5 and 2 percentage points more students with OHI than neighborhood schools. These percentage point differences were statistically significant.

2b. Charter schools enroll a smaller proportion of students with Speech and Language Impairments, and with a range of more extensive support needs

Charter schools enroll lower proportions of students with SLI than neighborhood schools (see Figure 5). This gap has remained consistent across the years, and has fluctuated around four to five percentage points' difference. We found these differences to be statistically significant in each year. Unlike students with LD or OHI, these students with SLI often require services from specialized personnel such as speech pathologists.

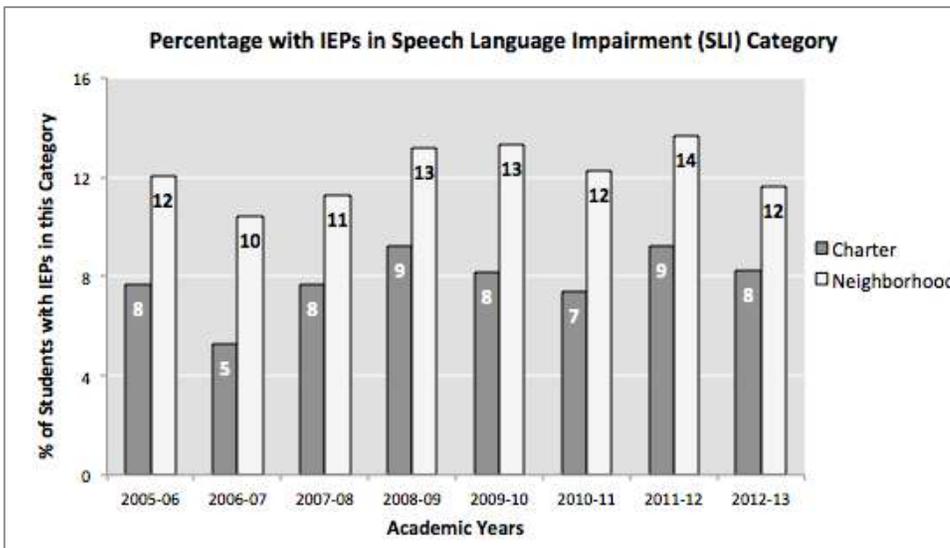


Figure 5. Percentage of CPS Students with IEPs in a SLI category, in Charter and Neighborhood Schools

Charter schools also enroll disproportionately lower percentages of students with more extensive support needs, such as Intellectual Disabilities, Autism, Sensory Impairments,¹⁰ and other severe disabilities¹¹. Figure 6 shows each of these categories separately, and in the aggregate. These students usually require more specialized personnel and instructional approaches, lower teacher-student ratios, more access to assistive technologies, and individualized services. All of these required services and accommodations tend to be more expensive than those for students in other disability categories.

These data show a persistent gap in proportional services provided to students in each of these disability categories in charter and neighborhood schools, with neighborhood schools serving significantly higher rates of students with extensive support needs than charter schools. This is true

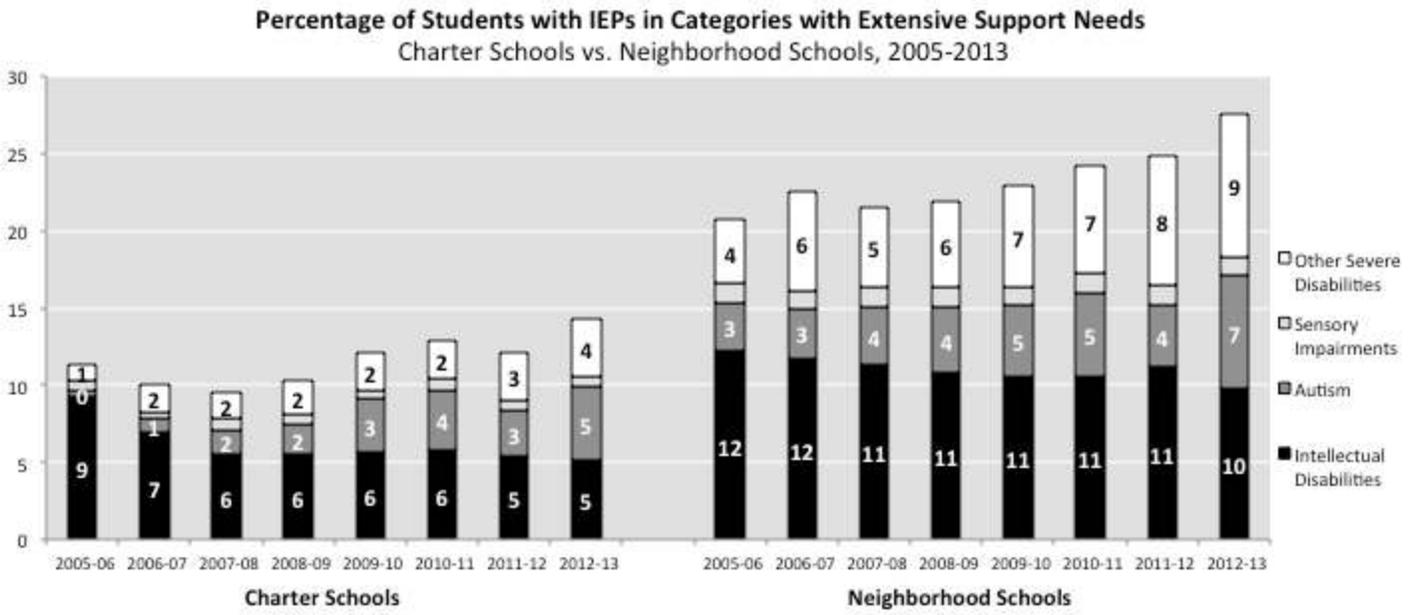


Figure 6. Percentage of CPS Students with IEPs with extensive support needs, in Charter and Neighborhood Schools

Charter schools enroll a smaller proportion of students with Speech and Language Impairments, and with a range of more extensive support needs

within each category, and in the aggregate amounts. Overall, the difference between the proportion of students with extensive support needs served in charter and neighborhood schools grew from 9% in 2005-06 to over 13% in 2012-13. In the 2012-13 academic year (the last year for which these data are available), students with these extensive support needs had risen to more than a quarter of all students with IEPs serviced in neighborhood public schools, but they were only one eighth of those enrolled in charter schools – less than half the rate in neighborhood schools (see Figure 6). These differences were found to be statistically significant.

2c. Neighborhood and charter schools enroll similar proportions of students with ED.

We found similar proportions of students with ED enrolled in charter and neighborhood schools (see Figure 7). The enrollment of students in the Emotional Disability (ED) category shows little difference between neighborhood and charter schools over the period examined, and has decreased as a share of all IEPs in the period studied.

Discussion

Students with IEPs are no longer under-represented in charter schools to the extent that they were five years ago, particularly at the high school level. However, the trends we have examined show that this increase in the proportion of students with IEPs in charter schools has been uneven, disproportionately representing students with a LD or OHI diagnosis. Students with extensive support needs, on the other hand, are found in neighborhood schools at twice the rate they are in charters. These trends have lasted for at least the past eight years, either remaining constant or increasing. This suggests that these disparities are not temporary fluctuations, but rather endemic in the ways the two models of schools (charter and neighborhood) have developed in Chicago.

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In light of the ongoing expansion of charter schools in CPS, corresponding with the closing of neighborhood public schools, these trends have troubling implications, both for students with disabilities requiring more extensive supports, and for neighborhood public schools. The tendency of charters to serve fewer students with extensive support needs combined with the closing of neighborhood schools, suggest that these students may have fewer choices than their less-disabled peers to be included in schools with their typically developing peers. This disproportionately affects Black and Latino students with these disabilities as they tend to live in the neighborhoods most affected by the closing of neighborhood and opening of charter schools.

For neighborhood public schools, the trends indicate a troubling possibility that the more expensive services needed by students in the higher-need categories will impinge on their budgets much more so than for charter schools, at the same time that neighborhood school budgets are being reduced by the district. Furthermore, a recent analysis of CPS 2014 budget conducted by ACCESS Living¹² indicates that CPS provides less regular education funding for students with severe disabilities, particularly those who spend less than 40% in the general education classroom, as many students with severe disabilities do.¹³ Thus, the tendency of charter schools to disproportionately serve more students with LD and OHI, while neighborhood schools serve greater percentages of students with more extensive support needs, may result in still larger budget reductions for neighborhood schools.

Furthermore, developing capacity to serve *all* students takes years of enrolling and serving students receiving special education, particularly those that demand more expertise and resources. In other words, practice promotes mastery. Schools that serve and include *all* students have greater opportunities to develop teacher capacity, school policies, resources, and leadership for this challenging work. Charter schools that enroll far fewer students with extensive support needs do not learn how to create successful schools for students with this wider range of educational needs.

There are several potential explanations for these findings that should be tested in further studies. First, charter schools may be failing to market their services to the parents of students with SLI and extensive support needs. This would be surprising, considering charters' extensive efforts to recruit students; it may be that these marketing efforts have a bias toward students with less expensive and intensive instructional needs. Second, parents of students with intensive support needs may not perceive charter schools as a viable option for their children. This might be due to charters' specific school missions or to more severe discipline policies.

Third, it is possible that Chicago charter schools may engage in implicit and/or explicit exclusionary practices. Welner & Howe¹⁴ described three different exclusionary practices sometimes employed by charter schools towards students with disabilities. Students may get accepted into a charter school via lottery; however, once school officials find out the presence of a severe disability, they may be barred from admission. Additionally, students who enroll in charter schools may be returned to their home public schools if

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Charter schools may be “creaming” from the population of students with IEPs, those students who require the fewest and less intensive kinds of educational supports, who are less expensive to educate, and more likely to perform well in standardized assessments

there is no program available at the charter that meets their needs. Finally, charter schools may “counsel out” students with special education needs by informing parents that their child’s needs would be better supported in traditional public schools.¹⁵ For instance, Estes¹⁶ indicated that Texas charter school administrators describe the school instructional model to parents and explain that no self-contained classrooms for children with disabilities are available. Although these administrators were in favor of a “zero reject” practice with respect to students with special education needs, they acknowledged that they were not prepared to address the needs of students with more significant disabilities. In some cases, although the ultimate decision may belong to parents, the end result might be that parents voluntarily withdraw their child with a disability when a charter school does not have adequate resources to accommodate their disabilities.¹⁷ *In any of these cases, charter schools may be “creaming” from the population of students with IEPs, those students who require the fewest and less intensive kinds of educational supports, who are less expensive to educate, and more likely to perform well in standardized assessments.*

If it is the case that discipline policies, school missions, recruitment procedures, or counseling practices systematically serve to exclude students with SLI and students with more severe disabilities from charter schools, this would be an acute violation of the spirit, if not the letter, of the IDEA and the ADA. Such outcomes, when considered in conjunction with the mass closings of public neighborhood schools, suggest a troubling trend in the district of systematically removing school options from people with disabilities.

Recommendations for Policy

Based on these findings and the issues raised in the discussion, we suggest the following recommendations:

1. We recommend that CPS conduct an independent and thorough investigation to examine the nature of the documented disparity in enrollments of students with IEPs. The above stated potential explanations for these trends should each be tested empirically. This examination should be a combination of quantitative analysis and qualitative studies that involve interviews with different stakeholders (e.g., teachers, administrators, parents, and students), direct observation of school practices, and the examination of charter contracts.
2. We recommend that CPS establish a more rigorous application process for opening charter schools and reauthorizing existing ones that should entail three provisions:
 - a. CPS should require charter operators to specify their capacity to serve all students. Currently, as part of their charter application process, the state of Illinois requires charters to complete ISBE Form 34-50B, also known as the Charter Schools Special Education Services and Implementation Rubric. The rubric “sets forth the services

that a charter school is required by state and federal law to offer students who may be or are eligible for special education services,” and “prompts applicants to (1) describe the special education services that will be provided, (2) propose the procedures and practices that will be used as the services are implemented, and (3) identify the personnel responsible for the success of the implementation of services.” Our findings compel us to question the degree to which these rubrics (or the degree to which they are enforced) are fulfilling the district’s requirement to provide a free and appropriate public education for students with disabilities.

- b. CPS should not reauthorize charter schools that serve disproportionately lower numbers of students with more extensive support needs, and should not authorize new campuses for charter organizations whose existing campuses fail to serve these students. The accumulation of these types of authorizations will result in the continuation of lower proportions of students with disabilities in charters schools, and the increasing demand on the neighborhood schools that do continue to serve these students.
- c. We recommend the formation of an oversight committee, independent from CPS, composed of parents of students with disabilities and members with special education expertise to evaluate charter applications and provide recommendations to CPS school board members.

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⁹ National Center for Educational Statistics Fast Facts. Retrieved from <http://nces.ed.gov/fastfacts/display.asp?id=64>

¹⁰ Students with sensory impairment include students with Visual and Hearing Impairments, students who are Deaf or Deaf and Blind.

¹¹ Other severe disabilities include students with Physical Impairments, Multiple Disabilities, Traumatic Brain Injury, and Developmentally Delays.

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