

# EXCEPTIONAL CHILDREN

An Introductory Survey of  
Special Education

FOURTH EDITION

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# EVERYONE BELONGS: BUILDING THE VISION WITH MAPS— THE MCGILL ACTION PLANNING SYSTEM

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A shared vision has caught the imagination of parents and educators across Canada: a vision of *all* children—including those with severe disabilities—being educated in regular classrooms alongside their brothers and sisters, friends and neighbors. The movement to integrate children with disabilities into ordinary classrooms is founded on a simple, yet profound philosophy: *Everyone belongs*. MAPS, the McGill Action Planning System, is a systems approach to problem solving that has helped many schools turn vision into reality. MAPS was designed by a team of educators who were searching for ways to help welcome children with disabilities back into regular schools and classrooms. The original MAPS team consisted of the two authors, plus Judith Snow, Evelyn Lusthaus, and John O'Brien.



Miller and friends.

## Assumptions of the MAPS Process

1. All people are valuable and can contribute to life on this globe.
2. All people have abilities, talents, and gifts.
3. All people can learn!
4. Disability is a social construct. People are not disabled: systems disable people.
5. There is a real need for support, services, and educators who will reach out and nurture the potential of every child.
6. The only label we recommend is a person's name. Labels hide the fact that we really don't know what to do. After that, we suggest adopting a problem-solving mode that cre-

atively figures out what to do for each unique individual.

7. Common sense is the most important and least common sense.

## Who Goes to a MAP?—Friends!

The size of the group that gathers for a MAP session can vary from two to two dozen. The key ingredients for participants are Intimate and Personal Contact with the individual being mapped. A grandmother or neighbor, a friend—all are on equal footing with professionals, who are welcome and needed but as individuals—not as "therapists." Parents and family

members usually have the most to offer, if asked. Their perspectives are all welcome in a MAP.

Peer participation is critical. Class/age-mates have enormous untapped energy and creative capacity. Their "straight talk" often empowers teachers with new ideas. Adults must be careful not to constrain or downgrade the participation of peers: They are critical and equal partners in the MAPS process.

There is a delicate question about whether or not the individual who is being "mapped" should be present. It is a judgment call: it works

both ways. We hedge toward full participation. People understand an enormous amount—more than we think. Also, a MAP is an “upper,” a real boost for an individual who previously has been excluded. Full participation also saves time in trying to explain it all later.

### What Happens at a MAP? How Does it Work?

“Mapping” is a collaborative problem-solving process aided by a two-person team of Facilitator and Recorder. The Facilitator, positioned at the open end of a half circle formed by the participants, presents eight key questions to the group. The Facilitator must be skilled in group process and have a problem-solving orientation. Most important, the Facilitator must be committed to building an integrated school community. The information and ideas generated during the session are marked on a large piece of chart paper by the Recorder. Public charting is vital to the MAPS process: It generates “images” that help participants visualize the relationships between and among people and actions, thus promoting the creation of additional problem-solving strategies, and it serves as a permanent record of the plans and commitments made by the group. The Recorder need not be an artist, but it is vital that the MAP be printed or written clearly, using the participants’ words. The chart should include contributions from everyone in the group.

MAPS planning typically occurs in one or two sessions, and approximately 3 hours are required to fully address these questions.

1. *What’s a MAP?* The Facilitator begins the MAPS process by asking

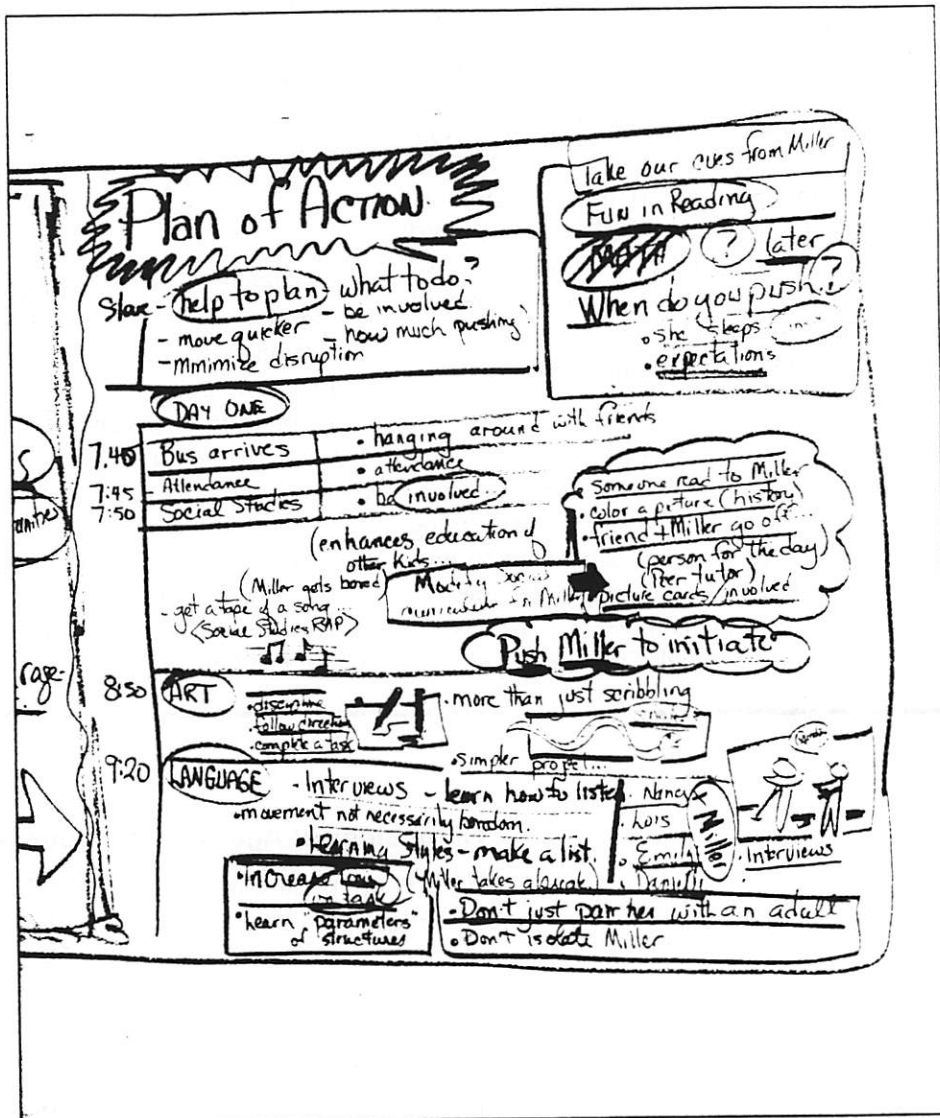
participants, “What is a map?” A recent group gave these answers:

- ♦ Something that gives direction
- ♦ A thing that helps you get somewhere
- ♦ Routes to different places
- ♦ A way to find a new way
- ♦ Stops you from getting lost

2. *What is the individual’s history?* The participants most intimate with the child being mapped, usually

parents and family members, are asked to give a short, 10–15 minute history focusing on key milestones and events in the individual’s life.

3. *What is your dream for the individual?* This question is intended to get people, especially parents, to imagine their vision for the child’s future. Many parents of children with handicaps have lost their ability to dream about what they really want for their child rather than what they think they can get. The vision of the future



A portion of the MAPS plan of action for Miller.

should not be limited by money or current realities. This question helps the group focus on the direction in which the individual is now heading and encourages concrete action plans for realizing the vision.

4. *What is your nightmare?* This question is the hardest to ask, but very important to get on the table. We must understand the nightmare in order to prevent it. No parent has ever said, "I'm worried that my child won't attend university, won't get an A on the next test, or won't learn to spell." Instead, the nightmare question brings out what is in the heart of virtually every parent of a child with a severe handicap: "We're afraid our child will end up in an institution, work in a sheltered workshop, and have no one to care for her when we die." The MAPS planning must reflect an understanding of the nightmare; preventing the nightmare is one measure of its success.

5. *Who is the individual?* With this question, the MAPS process shifts into a no-holds-barred brainstorming mode. Participants are asked to give words or phrases that describe the person being mapped. The rule is: no jargon, no labels; just describe how

you see the person. The image of a unique and distinct personality should emerge. Here are examples from a recent MAP for Miller, a 14-year-old who, to some, is "severely handicapped and mentally retarded."

- ◆ She has a brother
- ◆ She gets around in a wheelchair
- ◆ She's lots of fun
- ◆ She's active like crazy
- ◆ She's radical/bad (really means good)
- ◆ She's temperamental
- ◆ She likes to touch
- ◆ She wants to be involved
- ◆ She looks at you
- ◆ She can talk some

6. *What are the individual's strengths, abilities, gifts, and talents?* All too often we focus on the things a child with a disability can't do. It's vital to build upon strengths and abilities. This can be a difficult question for parents, who have been struggling with negatives for so long. This question is also intended to produce a brainstormed list from the entire group. Here's part of the list generated for Miller.

- ◆ She can make us laugh
- ◆ She moves her arms, can throw a ball
- ◆ She likes to listen to music
- ◆ She's persistent, tries real hard
- ◆ She can count and remember numbers
- ◆ She enjoys stories and movies

7. *What are the individual's needs?* This too is a brainstorm. Don't let people stop each other, but don't get bogged down either. Keep it short and record people's words and perceptions. Parents, teachers, and peers often have different perceptions about needs. For Miller, it was decided that what she needed most of all was:

- ◆ A communication system that lets her express her wants and feelings
- ◆ More independence with dressing and other self-care skills
- ◆ To be with her own age group
- ◆ Places to go and things to do after school
- ◆ Teenage clothes

8. *What is the plan of ACTION?* This is the final, and most important question of all. The MAPS planning group imagines what the individual's

### Chronological Age-Appropriateness

Wherever possible, students with severe handicaps should participate in activities that are appropriate for nonhandicapped students of their own chronological age. Severely handicapped adolescents should not use the same materials as young nonhandicapped children—in fact, having handicapped teenagers sit on the floor playing clap-your-hands games or cutting and pasting large snowmen highlights their differences and discourages integration. It is more appropriate to teach recreational skills, such as bowling and tape-recorder operation, or to engage the students in holiday projects, such as printing greeting cards. Teachers of adolescent students with severe handicaps should

ideal day at school would look like and what must be done to make it a reality. Step by step, the MAPS group goes through an entire day, envisioning the various environments and activities the individual will experience and what kinds of resources, supports, and adaptations can be created to make the day successful. For example, a peer volunteers to meet the taxi that brings Miller to school each morning and walk with her to the classroom; during language arts period a classmate will help Miller practice with her communication board; and the principle of partial participation will be used on the playground when Miller bats in the softball game and a teammate runs the bases for her.

In addition to describing what a MAP is, we believe it's important to emphasize what MAPS is *not*:

1. *A MAP is not a trick, a gimmick, or a quick-fix solution to complex human problems.* MAPS is not a one-shot session that will provide the magic bullet to blast a vulnerable person into the everyday life and fabric of school and community. MAPS is a problem-solving process: the plans for action are not set in stone,

but must be reviewed and changed as often as needed.

2. *A MAP is not a replacement for an Individualized Education Plan (IEP).* A MAP session may help provide useful information for an IEP, but it is not a substitute for the IEP process and must not be treated as such. A MAPS participant must be personally and/or professionally involved in the individual's life, not simply someone who has tested or given intermittent therapy to the individual.

3. *A MAP is not controlled by experts in order to design a neat program package.* The outcome of a MAP must meet three criteria: (1) the plan must be a personalized plan of action, a one-of-a-kind MAP tailor-made for the person; (2) the person is at the heart of every aspect of the MAP; and (3) the plan brings the person closer and closer into the daily life of the school and community.

4. *A MAP is not a tool to make any segregated setting better.* MAPS was designed to liberate people from segregated settings; it is only for people and organizations trying to figure out together how to get a person fully included in life.

5. *A MAP is not an academic exercise.* It is a genuine, personal approach to problem solving with and on behalf of real individuals who are vulnerable. A MAP produces outcomes that have real implications for how the person will live his or her life.

6. *MAPS is not just talk.* MAPS is talk and action. A MAP gives clear directions and action steps for inclusion.

The metaphor for MAPS is a kaleidoscope, a mysterious and beautiful instrument that changes constantly. We see the kaleidoscope as the outcome of each MAP. It is a medley of people working together to make something unique and better happen. It is more than anyone can do alone.

For additional information and training materials on MAPS, write the Centre for Integrated Education and Community, 24 Thome Crescent, Toronto, Ontario, Canada, M6H 2S5. Two recent journal articles describing the MAPS approach are Forest and Lusthaus (1990) and Vandercook, York, and Forest (1989). ♦

avoid decorating classroom walls with child-oriented characters such as Big Bird or Mickey Mouse and should not refer to their students as boys, girls, or kids when young men, young women, or students is clearly more age-appropriate.

It is important to build an IEP for a student with severe disabilities around functional and age-appropriate skills, not only because these are the most needed and desirable skills for the student to learn. Because nonschool settings demand such skills and nondisabled peers exhibit them, functional and age-appropriate behaviors are more likely to be reinforced in the natural environment and, as a result, be maintained in the student's repertoire (Horner, Dunlap, & Koegel, 1988; Stokes & Baer, 1977).