The Individuals with Disabilities Education Act is an act that was passed in 1975 by President Gerald R. Ford, though at the time it was referred to as The Education for All Handicapped Children act. In 1990 it became the Individuals with Disabilities Education Act (University of Massachuesetts, n.d.). It has in the meantime been reauthorized in 2004 and amended in 2015. The purpose of the Individuals with Disabilities Education Act (herein IDEA) is to provide students with disabilities a public education that is designed to suit their needs and support their growth as learners. Originally The Education for all Handicapped Children act mandated that any public school that wanted to accept federal funding had to provide equal access for children with disabilities. It further outlined that evaluating children with disabilities and creating individualized educational plans (IEP) to accommodate the needs of a student while trying to keep the experience of a non-disabled student as much as possible. The Education for all Handicapped Children outlined four main points, that of ensuring special education services were made available to those who needed them. Ensured that decisions made “about services to students with disabilities are fair and appropriate” (University of Massachuesetts, n.d.). It also established the auditing requirements for special education and the ways in which the special education programs were managed, and lastly made it possible to allocate federal funding for students with disabilities.

 In 1990 The Education for All Handicapped Children Act became IDEA which in its turn outlined six points to follow: any student found eligible for special education would have an IEP created that was suited for their specific needs, and the school must follow said IEP. Students would learn in the Least Restrictive Environment as much as possible. It created safeguards which protected the rights of both the family of and the student with disabilities. Further IDEA mandated the use of the correct evaluation process, which helped reduce the amount of misidentifications, and gave tools to properly evaluate to those who needed it. Finally it supported the collaboration of parents, teachers, school psychologists, and any other party that was relevant to the situation in order to strengthen the schools approach to supporting students with disabilities (University of Massachuesetts, n.d.).

 IDEA also authorized various grants to support special education, and any services that support or are related to the field, in order to support the field of special education and ensure that there is research money and thus research going in to field to help those in the field, both providers and receivers. (Department of Education, n.d.).

According to the CDC 1 in 36 children have autism or are on the autism spectrum. I suspect that in reality this number is higher, but I digress in that regard. Autism can manifest in a truly massive amounts of different ways. The difference between my own autism, and my friends autism is so different it took a moment for us to see it in one another. There are plenty of characteristics that can be seen in children, but evidently many are good at masking much as I was growing up. In my case a huge aspect of autism is the mirroring that I performed, and still perform to fit in with groups of people. This mirroring can make it especially hard to be recognized with autism as growing up I could effortlessly mirror my behavior to blend in with groups of people. Many people with ASD, myself included, have trouble with social situations, and really the symptoms of ASD could take up an entire essay because of the way they can manifest in children, sometimes the child may struggle with eye contact, or with communicating, or fine motor control etc the list goes on (CDC, 2023). While no cure exists for ASD, and truthfully I question how many people with ASD would want a cure, there are plenty of treatments that can help support an individual with ASD living in a world that was not built for someone with ASD. There are also plenty of harmful treatments, but obviously that is not something I think is even worth talking about in relation to treatments. In the classroom, there are many many things a teacher can do to support a child with ASD. From something as simple as laying out a schedule for the day and sticking to it as much as possible, to allowing a student with ASD to stim when needed, to not cold calling students (which at this point is not something teachers should really be doing period but again I digress), there are so many easy solutions a teacher can do to support children with autism.

Blindness is another disability that will almost inevitably find its way in to my classroom in the future. According to one source I found, roughly 2.83% of the population has some form of visual disability, because while less people may be completely blind, there are so many people who have some form of visual impairment (Blindness Statistics, 2019). Again while some people are partially blind, meaning they “have very limited vision” (MedlinePlus Medical Encyclopedia, 2022), whereas complete blindness means “you cannot see anything and do not see light” (MedlinePlus Medical Encyclopedia, 2022). According to a Cleveland Clinic, blindness can be treated in some instances, but in a lot of instances treatment only exists to improve visual functioning and improve quality of life. In terms of treatment, their exists medication that can help treat blindness that is caused by infections. There are also various surgeries that can help treat cataracts or repair any damaged retinal surgery. Some vitamins reportedly can also help treatment, lastly there are transplants that can help rectify issues that arise from scarred corneas (Cleveland Clinic, 2022). We talked briefly about creating a helpful classroom to someone who may be blind or visually impaired, but going over that again, it is helpful to keep clutter off of the ground, have wide gaps between desks (something which truthfully may be hard given the size of some rooms teachers are expected to teach in), and then also ensuring that any visual parts of a lecture, or discussions, or just anything visual related in the classroom has descriptive text, or recording/reading to go along with it. If you, as a teaching make any motions in the class it should be followed with an audio description of what you are referring to or doing, etc. (Cleveland Clinic, 2022).

Deafness, or hearing loss in general is a relatively common disability, according to the World Health Organization, about 20% of the general population has some form of deafness or loss of hearing (World Health Organization, n.d.). Further according to the same source, those with hearing loss may struggle to, or are unable to hear as well as someone who has normal hearing. Specifically, they outline that as hearing thresholds of 20 decibels or better in both ears. Hearing loss can range from very mild to profound, which truthfully I am unsure if profound is different from being completely deaf, but obviously the scale goes to completely deaf as well. In addition to this, loss of hearing can affect either both, or just one ear(s) (ibid.). According to the mayo clinic, there are a multitude of treatments for deafness, ranging from removing earwax (I don’t know, if maybe we are talking about the same forms of deafness or not though), to cochlear implants. Implants, along with hearing aids, may be the most common treatments for people with hearing loss. While hearing aids can help with a lot of instances wherein the damage is done to the inner ear, when hearing aids don’t work, cochlear implants can also help “spur the hearing nerve” (Mayo Clinic, 2023). Lastly there is surgery which can help for ear infections that cause fluids in the ear. In terms of classroom experiences, having your lectures typed up in advance can help greatly, while at the same using some sort of closed caption generator can also make the classroom very accommodating.

According to the NIH, Attention-Deficit/Hyperactivity Disorder (ADHD) is “one of the most common childhood disorders” (NIH, n.d.). It can also persist through adolescence into adulthood. Furthermore, symptoms include, but are likely not limited to the classic difficulty staying focused or paying attention. Difficulty controlling behavior is also a very common symptom, is as is hyperactivity. ADHD has no definitive cure, but there are treatments to help live with it. One of the most common treatments of ADHD is through medication, which can help treat symptoms, especially those like inattention, and hyperactivity (Ibid.). In terms of helping in the classroom there are a wealth of resources online. In my opinion the most important way is working with students to ensure that the strategies a teacher is implementing is actually working, and not harming the child. Keeping the room organized is one very common way to help students, but another lays more with behavior. The behavioral classroom management approach is, according to the CDC a tested way to support students by rewarding their positive behaviors/actions, and discouraging their negative behaviors/actions (CDC, 2022). Of course it should go without saying, but following either their IEP, or their 504 is also a surefire way to support the student. Other accommodations like flexible seating (whether that’s wiggle chairs, standing desks, or seat cushions, etc.). Keeping students away from high traffic area, or potentially increasing how much space is between desks could help, though it would have to be uniform in my opinion (i.e. everyone’s desks are further apart). Keeping a clear guide of what is being taught in a day, when assignments are due, and what assessments are coming up in the future is also incredibly helpful. Having straightforward instructions that students either repeat back, or show some other form of acknowledgement can help ensure they are on the same track. Making lectures more engaging, and overall ensuring that students have a reason to be engaged can also help (Morin, 2019).

According to the University of Michigan dyslexia affects about 20% of people. Dyslexia can, much like the aforementioned disabilities can be both mild and severe and can manifest in a few many different ways (University of Michigan, n.d.). Some of those include (but are certainly not limited to) reading below, or in some cases well below, the expected level for the students age, issues with audio, processing, and comprehension. Students with dyslexia may also struggle to find the correct word, or the answer to a question, sequences can also be an area of struggle for students with dyslexia. Struggle with spelling, or struggling to sound out the pronunciation of new words is also very common for students with dyslexia. As students get older, their symptoms may develop to include problems with reading, especially aloud, problems with spelling, and overall slower reading and writing skills. Students with dyslexia may have troubles doing math problems that involve words or may struggle with learning a new language. They may also struggle with pronunciation and summarizing stories as well (Mayo Clinic, 2022). Dyslexia, again much like the previous disabilities has no known cure, but there are plenty of treatments to help students, especially when it is identified early. According to the article I am reading, a lot of treatment goes hand-in-hand with ways that can help in the classroom, but for early treatment, extra help in kindergarten or first grade can help improve their reading skills. Parents can read aloud, and along with their child, and can also set the example for reading, while also encourage reading time. Phonics and phonemes is also a great way to help students with dyslexia early on. As a teacher, it is important to foster a classroom environment that is supportive and collaborative, in addition ensuring students have choices for how they learn can help make the student feel comfortable. As is using things like concept checking questions, and tools to help the student focus in on their readings (Blue, 2021).

Last, but certainly not least, Epilepsy is a brain condition that can cause seizures. Those seizures are of course recurring, and while for some the cause can be discerned, for others, many others, the cause is not known. According to the Mayo clinic epilepsy is common with estimates saying about 1.2% of the population has some form of active Epilepsy also affects all genders and races. Further in terms of what it looks like, much like all disabilities I mentioned before Epilepsy can be rather severe or rather mild, or somewhere in between. Symptoms vary in terms of whether or not someone loses awareness, or if they experience convulsions (Mayo Clinic, n.d.-b). There is treatment for epilepsy, or more so the seizures. The WHO estimates “up to 70% of people living with epilepsy could become seizure free with appropriate use of antiseizures medicines”(WHO, 2023). Those who take medicine will likely be able to stop taking medicine in the future, the Mayo Clinic estimates that at least half of people with epilepsy who take medicine will be become seizure-free (Mayo Clinic, n.d.-b). Further epilepsy can be cured by surgery, this can, thankfully, sometimes make up for where medication fails. One of the most important thing a teacher can do in terms of helping a student with epilepsy (not preventative in this instance) is to be flexible and understanding for students with epilepsy. Whether it’s giving extra time when the student needs it if, for instance, they are struggling with sleep because of seizures, or make sure they are okay in the classroom, and are keeping up, as they may struggle to concentrate especially while on medication, but also because of the effects of seizures. Lastly, and in my opinion going without saying but ensuring that your content doesn’t include any of your students’ triggers (Mayo Clinic, n.d.-a)

I decided to choose my first resource of the fireside chats and with it I am matching autism. I think a really easy and simple way to make this more accessible to autistic people, as an autistic person myself is to just offer it different formats. If it is a homework assignment include a video link to a reading, and a transcript for reading. If it is an in-class assignment, or video, ensure the videos caption is turned on, and also give students a paper copy so they can follow along at their own pace. This way students have many options in the way they can tackle the assignment.

For the assignment on reading *A Young People’s History* I would take the reading and offer it in ways that may help my student understand it. I probably wouldn’t assign it to be read over one day, and would instead give them a few days to give them time to work through it. There are technologies that I could connect them with to help make this process easier, or present the text in ways that help them understand the text.

For my last resource I am pairing with emotional impairment. To be conscious of my students possible emotional impairments, I may modify the lesson, to ask students to just find any example of how the New Deal or how New Deal policies influenced the world. They could find an example in the real world, or even on the internet. The website I used in one of my resources has a map of New Deal work sites, so they could find the nearest one and imagine how it may help people.

Lastly for my resource on the website I matched ADHD. While I think the website is great in that it allows the student to choose which points or topics most interest them, and in which way they want. I could also find alternatives online, as there may be other sources online that may have more accessibility than the site I found. Students with ADHD may struggle to pay stay focused on the resource, so ensuring they have options that contain different content (so that they are continuing to learn new content.

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