This note is in response to the CRPE reply to my critique of their recently released study in special education classification rates in New York State charter schools. First and foremost, I reiterate that my main concern in my critique is that the report has been used to suggest that under enrollment of children with disabilities in charter schools may not be the national problem some think it is. But the authors point only to data from charter schools in a single state—New York—and primarily in a single city—New York City—finding largely that these charter schools do under enroll children with disabilities. Further, as I point out, these findings are hardly new. I also point out in my review that the authors do not consider that there may be differences in the severity classification of children with disabilities in charter and district schools. I provide evidence from New Jersey and Philadelphia.

The authors seem most concerned that (a) I made assumptions about their motive in conducting and presenting the report, and (b) that I claim that they deliberately avoided addressing the issue of classification severity.

First, regarding motive. In my review, I assert that it seems that their purpose was to challenge emerging state policy proposals to regulate charter school enrollments by assigning enrollment targets. Perhaps I should have avoided the word “seems.” It simply “is” the report’s goal to challenge these policies, and I make this determination because of the report’s repeated reference to enrollment target policies and repeated statements
that their findings question the usefulness of such policies. That IS a central theme of their report. Yet, as I point out, the data they present do not support the policy implications they wish to derive.

Second, I do not assert that the authors intentionally avoided the issue of classification type, though I do assert that the authors stacked the deck in there comparisons of charter and district school classification rates by excluding special district schools for children with disabilities while including special charter schools but including selective district schools.

Further, I was disturbed by the repeated unfounded attempts to suggest that charter elementary schools may have lower rates of classification either due to better intervention practices in charters than district schools or simply misclassification (over identification) in district schools. The selected data by disability type I provide in my review indicate that charters are most likely to be serving only children with mild specific learning disabilities and/or speech impairment and have the greatest shortages of children in more severe classifications.

The most important takeaways from my critique are (a) that the national policy implications derived by the authors in their report are simply not supported by the single state (largely single city) analyses they present, and (b) that their report fails to deliver on providing sufficiently greater nuance than previous analyses of data on largely the same set of schools.