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ABSTRACT

Local, State, and federal programs for the handicapped, particularly handicapped children, are the focus of 11 papers. Topics covered include a project for the development of accreditation standards for day care services for the mentally retarded, the cooperative implementation of vocational education programs for the handicapped in Maryland, influencing legislative decision-making, an in-school workshop training program for retarded students, and the National Regional Resource Center of Pennsylvania, which serves the educational needs of handicapped children. Also discussed are verbal habits of professionals which hinder parent-professional communication, a social studies curriculum package for grades 4-6 entitled People Are People which deals with human relations and minority groups, and the Rough Rider Program in Newark, New Jersey, an educational program in which high potential inner city junior high school students meet after school and Saturdays. Additional papers treat the activities of the Rehabilitation Services Administration in the area of mental retardation, administrative promotion of individualized educational programming, and The Year of the Child Program for comprehensive services for children. (KW)

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Exceptional Children Conference Papers:
Local, State, and Federal Programs

Papers Presented at the
49th Annual International CEC Convention
Miami Beach, Florida
April 18-24, 1971

Compiled by
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PREFACE

Local, State, and Federal Programs is a collection of eleven papers selected from those presented at the 49th Annual International CEC Convention, Miami Beach, Florida, April 18-24, 1971. These papers were collected and compiled by The Council for Exceptional Children, Arlington, Virginia. Other collections of papers from the Convention have been compiled and are available from the ERIC Document Reproduction Service. Other collections may be found by consulting the Institution Index of Research in Education under Council for Exceptional Children or the Subject Index under Exceptional Child Education. Titles of these other collections are:

Deaf-Blind, Language, and Behavior Problems
Diagnostic and Resource Teaching
Gifted and Developmental Potential in Women
and the Disadvantaged
Infantile Autism
Physical Handicap
Pre and Inservice Teacher Preparation
Specific Subject Programs for EMRs and TMRs
Trends and Issues in Special Education

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Accreditation Council for Facilities for the Mentally Retarded

T.K. "Ted" Taylor
Joint Commission on Accreditation of Hospitals
Chicago, Illinois

The project for the development of standards for the commonly called day care services for the mentally retarded--now referred to as nonresidential services for the purposes of this project--is meeting all of its first year objectives. The term "nonresidential" is used to include specialized and generic services, with the exception of those provided by 24-hour residential facilities. These latter services are the concern of the residential standards project of the Accreditation Council.

During this first year, the collection and distillation of appropriate materials has progressed to the point of providing the basis for the philosophical statements of purpose and goals now being written. Review of the literature will be an ongoing activity in the continuing process of evaluating and revising the program developed.

Several significant principles provide the philosophical base of the standards project:

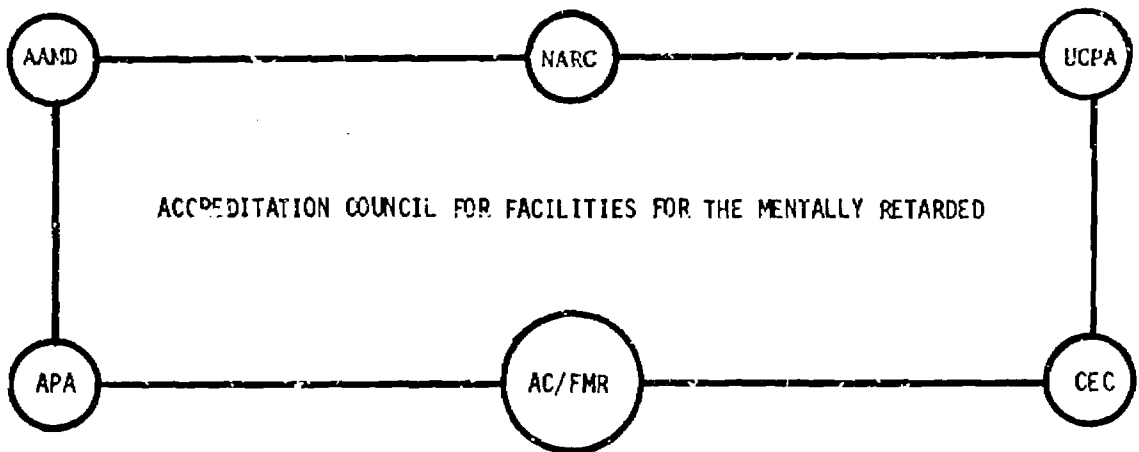
- . The mentally retarded person has the same needs as do other members of our society.
- . Most of the mentally retarded person's developmental needs can be met by services provided through generic agencies in the community to which he lives.
- . Some individuals may have need of specialized services for varying periods of time.

The goals of all service agencies should be to maximize the human qualities of its consumers and thereby increase the complexity of the individual's behavior.

In order to implement standards growing out of these principles, several things should be done in each community. First, the services of each agency should be coordinated with all other services to provide an easy flow of consumers from service to service within the delivery system. Second, the continuum of service should be reinforced by a follow-along service to ensure that persons who have needs to be met do not get lost from the system. Third, a citizen advocacy system should be developed to lower the barriers between agencies and to champion the rights and the dignity of the retarded.

Since the effectiveness of standards developed can be measured, an inventory of outcomes will be a critical component of the evaluation and accreditation process. Also a part of the process will be an evaluation of the appropriateness of community or service goals in relation to the developmental needs of consumers.

2. "



A CATEGORICAL COUNCIL OF THE JOINT COMMISSION ON ACCREDITATION OF HOSPITALS
645 North Michigan Avenue
Chicago, Illinois 60611

April

1971

VOLUNTARY ACCREDITATION: WHAT AND WHY?

Accreditation is a means of identifying for the public institutions, facilities, or agencies that meet predetermined requirements for providing a high quality of care or service. It not only protects the consumer by identifying for him high quality facilities, but it also contributes to his well-being by helping those facilities maintain high levels of service.

A voluntary accreditation program provides for the continuing and objective outside evaluation of services rendered, through a mechanism that minimizes domination or interference and provides freedom to experiment and innovate on the part of the facility, as well as freedom to refine and improve the mechanism and raise the standards of measurement on the part of the accrediting body.

The voluntary accreditation programs of the Joint Commission are based on the development of nationally accepted, professionally valid standards and of procedures for measuring compliance with those standards, by which the quality of a facility's program or services can be assessed.

Uniquely American, voluntary accreditation differs from, yet complements, government regulation--whether that regulation be licensure or certification. Since accreditation is not mandatory but is a process of self-regulation, the accrediting body does not have the dual responsibility of evaluation and enforcement. It may, if it chooses, provide evaluation only, or it may, as does the Joint Commission, provide education or consultation services. For the facility, loss or lack of accreditation brings with it professional or consumer, rather than legal, sanctions. Regulation, on the other hand, grows out of public law and the regulating agency is responsible to the public not only for determining whether the law has been adhered to, but also for initiating action when it has not been. The agency must be both evaluator and enforcer, and the loss of a license, for example, is the loss of the right to do business.

From the point of view of the facility, the why of accreditation lies not only with its importance as the identification of quality for the consumer of services. It is also important as it relates to the accountability of that facility to individuals and organizations that provide its financial support. Through the fact that the facility is accredited, its supporters will know that their funds are properly used and that the facility's goals are in keeping with the current philosophy of service. For some facilities, the seeking or achievement of accreditation may make possible, additional funds through government or private grants; for some facilities, it may also lend support to its efforts in the area of legislation.

THE PROGRAM OF THE ACCREDITATION COUNCIL FOR FACILITIES FOR THE MENTALLY RETARDED

In July 1969, the Accreditation Council for Facilities for the Mentally Retarded was organized to establish a national, voluntary program of accreditation to improve the level of services provided all mentally retarded persons. In doing this, the Council has established projects for developing standards and survey procedures for evaluating both residential services and comprehensive community services.

THE PHILOSOPHY OF THE PROGRAM

The basic philosophy of the accreditation program is that services can and must be provided to meet the developmental needs of the retarded person and to maximize his human qualities, so that he may live as normal a life as possible. While the standards being developed do not describe a prototype nor mandate a model, they do call for maximum flexibility and creativity in meeting the unique developmental needs of each individual served. Facilities seeking accreditation, therefore, must show evidence of the implementation of the stated philosophy in the services which they render. Such evidence will be as persuasive a factor in the determination of a facility's accreditation status as will compliance with any specific standard.

STANDARDS AND PROCEDURES

The development of Accreditation Council standards is involving participation by representatives of professional organizations, of government, and of the consumers themselves, as well as by practitioners in the field. Once adopted, the standards will be reviewed at regular intervals in order to keep them contemporary, clear, comprehensive, and challenging. To do this, a percentage of survey fees will be set aside for use in reviewing and upgrading standards and in encouraging their use in education and consultation activities.

The procedures to be established for measuring compliance with the standards will include a self-survey, done by the facility's own staff, to be followed by a site visit by surveyors of the Accreditation Council. Accreditation decisions will be made by the Council, but it is important to emphasize that due process will be observed.

ELIGIBILITY

Facilities will be eligible to apply for accreditation if they are licensed or recognized by the appropriate state or federal agency, have been operating under the same ownership for at least 12 months, and are primarily engaged in providing services to the mentally retarded or have an identifiable unit providing services to mentally retarded. In the case of a unit for the mentally retarded, accreditation

will be limited to that unit. To be eligible, the agency must also be willing to participate voluntarily in the process of self-evaluation and in the site survey. Such participation will include providing appropriate information as requested by the Accreditation Council.

PROGRESS REPORT ON THE ACCREDITATION PROGRAM

Proposed standards for residential facilities for the mentally retarded have been developed by 22 committees, representing all the disciplines necessarily involved in providing adequate services to the retarded and including the participation of more than 200 individuals and representatives of 45 national professional and consumer organizations concerned with retardation. These standards, which are intended to be applicable to all facilities--public and private, large and small--that provide 24-hour programming services, will be submitted in May for adoption by the Accreditation Council. The development of survey and accreditation procedures will follow the adoption of the standards.

The development of standards for facilities providing less-than-24-hour care (standards for community services) began in August, 1970, and the general outline for organizing the standards into a useable format has been tentatively accepted. Between now and the latter part of May, when the Technical Advisory Committee (TAC) to the Community Standards Project meets for the second time, the actual writing of the standards will be in progress. The purpose of the May meeting of the TAC will be to review the proposed material and to develop new concepts as appropriate. The tentative time schedule is for the first draft of the Community Standards to be written by late 1971, then reviewed and field-tested for adoption in 1972. It is expected that the project will be finished no later than March 1973, when accreditation of comprehensive community services for the retarded will become a reality.

QUESTIONS AND ANSWERS

We will gladly attempt to answer both general and specific questions about the Accreditation Council's program, either by distribution of bulletins such as this one, or by letter. Your comments about the accreditation process are also solicited. Please write to:

Kenneth G. Crosby, Ed.D.
Program Director, AC/FMR
Standards for Residential Facilities

T. K. "Ted" Taylor
Deputy Program Director, AC/FMR
Standards for Community Services

If you wish to be on our mailing list to receive or be notified of materials as they become available, please clip and mail the coupon below.

Accreditation Council for Facilities for the Mentally Retarded
645 North Michigan Avenue
Chicago, Illinois 60611

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JOINT COMMISSION ON ACCREDITATION OF HOSPITALS
ACCREDITATION COUNCIL FOR FACILITIES FOR THE MENTALLY RETARDED

Fact Sheet

Purpose: To establish a national, voluntary program of accreditation which will improve the level of services provided all mentally retarded persons.

Organized: July, 1969

Program Office Opened: January, 1970

Member Organizations: American Association on Mental Deficiency (AAMD)
American Psychiatric Association (APA)
Council for Exceptional Children (CEC)
National Association for Retarded Children (NARC)
United Cerebral Palsy Associations (UCPA)

The Council is composed of two persons appointed by each Member Organization.

Historical Background:

- 1964 - AAMD published "Standards for State Residential Institutions for the Mentally Retarded," presenting minimal standards thought to be generally attainable within five to ten years and to be useable as a basis for future evaluation and accreditation.
- 1966 - AAMD's "Institutional Evaluation Project" applied the standards to 134 state institutions.
- 1966 - National Planning Committee on Accreditation of Residential Centers for the Retarded organized by AAMD, APA, CEC, NARC, UCPA, and the American Medical Association (a Member Organization of the Joint Commission).
- 1969 - Member Organizations of the National Planning Committee agreed with the Joint Commission to establish the Accreditation Council.

Standards for Residential Facilities:

- Developed by twenty-two committees, representing all disciplines necessarily involved in providing adequate services to the retarded, including some 200 individuals and official representatives of 42 national professional organizations concerned with retardation.
- Intended to be applicable to all facilities--private and public, large and small--which provide 24-hour programming services.
- Designed to be relevant to both institutional and non-institutional models for the delivery of residential services.
- Focused upon the delivery to each resident of those services which will enable him to attain maximum physical, intellectual, emotional, and social development.
- Incorporating the spirit of the Declaration of General and Special Rights of the Mentally Retarded and the Policy Statements on Residential Services of NARC and the President's Committee on Mental Retardation.
- Expected to be adopted and published in 1971, and to be followed by the development of survey and accreditation procedures.
- To be continuously reviewed and revised to maintain currency with the best thinking in the field.

Standards for Comprehensive Community Services:

- Being developed in cooperation with AAMD and a Technical Advisory Committee representing programs, organizations, and disciplines serving the retarded.
- Will include the concept of community accreditation, with measures of program effectiveness and follow-through as priority items.
- Emphasizing the necessity of a comprehensive network of interrelated services which meet all the needs of all retarded persons at all points in the life span, utilizing generic services whenever possible, specialized services where necessary.
- To include programmatic standards which require the delivery system to focus on the plan to maximize the human qualities of each individual.
- Intended to be applicable to all specialized services, generic agencies with identifiable programs, and planning and coordinating agencies.
- Expected to be adopted and published in 1972, with the development of survey and accreditation procedures to follow.
- To be continuously reviewed and revised to maintain currency with the best thinking in the field.

Sources of Support:

- Federal grants for the development of standards for residential and non-residential services.
- Contributions from each Member Organization.
- Contributions from the Joint Commission.
- Survey fees when the accreditation programs become operational in 1972-73.

For Further Information:

Address the Program Director
Accreditation Council for Facilities for the Mentally Retarded
Joint Commission on Accreditation of Hospitals
645 North Michigan Avenue
Chicago, Illinois 60611 Telephone 312/642-6061

March, 1971

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Cooperative Implementation of Vocational Education
Programs for Handicapped Persons in Maryland

Charlotte Conaway
Maryland State Department of Education,
Baltimore

AN IDEA GROWS IN MARYLAND

In 1968 an inter-divisional task force was appointed to bring together representatives from each division, in the Maryland State Department of Education, concerned with programs for handicapped or disadvantaged persons. The purpose of the task force was to consider the implementation of Vocational Education programs for handicapped and disadvantaged persons.

This task force, composed of representatives from the Division of Instruction, Special Education Office, the Divisions of Compensatory, Urban, and Supplementary Programs, Vocational Rehabilitation, and Vocational Education met often and worked diligently--first to better understand present programs in Special Education, Vocational Education, Vocational Rehabilitation and Compensatory Education and then to determine how these all mesh together to help handicapped persons become employable.

About this time the Vocational Education Amendments became law providing financial resources specifically for Vocational Education for handicapped.

Guidelines were developed by the task force and distributed to each local educational agency and each state agency providing educational programs for handicapped persons. The guidelines stressed a coordinated approach to program development at the local level. The task force members worked with their counter parts in the local educational agencies and encouraged coordinated planning toward employment training for handicapped. The task

force subsequently served as the Review Committee and have reviewed all program proposals for handicapped or disadvantaged.

VOCATIONAL EXPLORATION

EMPLOYMENT TRAINING

Because an idea grew in Maryland a school for emotionally disturbed and multi-handicapped has additional vocational education facilities and ^{is} are providing students opportunities to explore various employment area and obtain specific job skills.

The Maryland School for the Blind has improved it's Vocational facilities in order to provide students greater opportunities for exploring careers. Some specific job training is also provided--piano tuning is one example.

Children in a school for trainable mentally retarded are learning skills that will assist them in obtaining employment in the competitive work world, or in a workshop setting.

Students in Special Education schools in Baltimore have a greater variety of employment training experiences available to them. These educational experiences in school are followed by a cooperative work experience program.

Handicapped students are participating in on-going vocational education programs and are receiving special assistance through a modified curriculum or through individualized instructional programs.

An idea continued to grow and the Maryland Workshop for the Blind is providing a more extensive training program. Mr. Simmons, Vocational Rehabilitation Supervisor at the Workshop explains the training program.

"Many clients who complete vocational evaluation at the Maryland Workshop for the Blind select sewing as a future vocation. Sewing training is divided into two levels. Level one consists of the client learning to sew on scrap material being cross trained on all machines using new material while making personal items and then learning effective production techniques

in a limited production setting. Level two consists of actual production sewing. Here the client is placed in a real production setting and is paid \$1.20 per hour. He progresses at his own pace until he is earning \$1.75 per hour at this time he can be considered a full fledged employee of the workshop or he may seek competitive employment elsewhere in private industry."

COOPERATIVE VOCATIONAL EDUCATION

Through Special Education and Vocational Rehabilitation many handicapped students have had work-study experiences, through Vocational Education additional students were provided Cooperative Work Experience--others have received additional employment training prior to the work-study program.

Students in a school for trainable mentally retarded are gaining employment opportunities in the public sector. Mrs. Remsberg, Principal and Mr. Fansa, Job Coordinator will discuss what the students are gaining from these experiences.

Mr. Pansa, "We have found that in order to better prepare our mentally retarded to maintain themselves in competitive employment we need to provide them with an on-the-job training program. The goal of this program is to facilitate a more successful transition from school to eventual employment. In a classroom program teaching units on health, safety, social development, adjustment, grooming, family living, community living, and occupational information are taught."

Mrs. Remsberg, "The pupil that I am going to talk to you about is a 15 year old mongoloid boy. The neighbors on the street saw him as incapable of performing any kind of task and really would call the school and suggest that we push for his institutionalisation. After Bernard participated in the work experience program as a custodian the concept of his neighbors

changed completely. His neighbors are asking him to rake their lawn and to perform many other tasks throughout the neighborhood."

VOCATIONAL EVALUATION

An idea grew--and through the initiative of Special Educators through out the state the concept of Vocational Evaluation for secondary school students developed. Five evaluation units were developed--some in mobile facilities serving multi-county areas.

What are you attempting to accomplish through Vocational Evaluation in Baltimore County, Mr. Dixon?

"Our goal is to help the student identify that family of occupations that is best suited for him. Best suited in the sense that he has the interest, ability, and aptitude to function in a particular field of endeavor.

The process of evaluation centers about the TOWER system. The components of evaluation are psychometrics, work samples and the critical observation of behavior. The emphasis of evaluation is on performance."

Mr. Mappin, Vocational Evaluator explains the program in Allegany County.

"The purpose of our vocational evaluation unit is to assess a students physical, mental, and emotional abilities, limitations, and tolerances in order to assist him and the home school in choosing the vocational training program that will be of most benefit for future employment. The evaluation consists of three parts: psychological testing, work sample testing, and occupational awareness."

Vocational Evaluation is a concept that will continue to develop in Maryland and is a program that requires the coordinated efforts of Special Education, Vocational Rehabilitation, and Vocational Education to help students and clients make career choices which will lead to success.

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We are fortunate to have Dr. Jean Hebel, Department Chairman Special Education at the University of Maryland serving on the State Advisory Council on Vocational Education. Dr. Hebel challenges us to increase employment training for handicapped persons.

"As a member of the Maryland State Advisory Council on Vocational Education, I am pleased to comment on the progress made in our state in cooperative programming in Vocational Education for Handicapped and Disadvantaged students.

A particular focus on the committee and staff and especially the sub-committee on the handicapped and disadvantaged has been the extension of experience to the exceptional individual. An interesting additional aspect of the cooperative planning is the movement toward an increased interface between programs from different levels of the professional community. For example, during summer session 1971 a cooperative pilot program for Vocational Education teachers of handicapped and disadvantaged youth is being planned for the city of Baltimore, Maryland.

In order to implement the requests, the Department of Industrial Vocational Education, Human Development Education, and Special Education of the University of Maryland have developed the program and content for this endeavor."

The idea of Cooperative Implementation of Vocational Education programs for handicapped persons will continue to grow in Maryland.

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INFLUENCING LEGISLATIVE DECISION-MAKING:
or, How to Find Out Who Really Decides

Josephine G. Haugland
University of Washington

Conventions are stimulating - and exhausting. My usual reaction is that I'm going home and slay a few dragons - as soon as I have gotten a little sleepy.

But the problem is that these days there are so many dragons that need slaying in special education -- not to mention the world in general. So many that people are getting weary and worn out. Enthusiasm and optimism are becoming rare characteristics.

So before I tell you about another special education dragon -- the one called "legislative involvement", let me pass on to you some advice that has helped me avoid those "every battle is a losing one" blues.

First -- and most of you have done at least part of this -- investigate a special education in a general way for a while until you feel you have an overall understanding. Read, listen, and then discuss widely.

Second, examine your feelings and decide which aspect of the special education scene worries and upsets you the most. You need to pick an area that genuinely angers you, because at times it is the adrenalin produced by anger that makes the difference between giving up and continuing to fight until you see results.

Third, find out what groups or individuals are working in your chosen area. (National, state, and local CEC can help you with this.) You may be satisfied helping the groups already active with all the often tedious jobs required in the battle for appropriate education for the exceptional child.

Fourth, you may want to take on more responsibility. Locate an aspect of your chosen problem area that seems to be neglected. Become a specialist in that one aspect. Learn all you can about your pet problem and let all other special education groups and individuals know you will be available as a resource person. (CEC can help you do this, too.) You'll save the rest of us a lot of time and energy. And in the long run you will find a great deal of personal satisfaction in seeing results from your work.

Fifth -- and this is probably the most critical point. Choose your speciality carefully. Devote your full attention to it. Then stop worrying about all the problems you can't work on personally. Trust that some fellow concerned human being will handle those areas you don't have time for. It takes a lot of work to become a valuable resource person in any area. People who have been around a while know that - and are suspicious of those who dabble in every little brush fire. Let's each of us find his thing and do it well. That way we will make a difference.

Let me tell you, now, how I found my dragon. I was a member of a small seminar under Dr. James Affleck in the Summer Quarter of 1968. We wanted to do something besides just talk some more. After a couple of sessions of considering how to effect real improvement in special education in our state, we were struck by our complete helplessness. There seemed to be no way to actually accomplish anything!

So we decided to talk to the people that were accomplishing things - or at least were supposed to have the power to do so. We then found we needed to locate the power structure -- the decision makers.

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Our first expedition was to the state special education department in Olympia, -- our state capitol. We listened to the director explain in great detail the advisory and consultive nature of the department. Finally I couldn't stand it. I inquired, "But what if there is a school district that has 5000 kids and absolutely no special education services?" "Well," came the reply, "we wouldn't want to upset anyone by intruding where we are not wanted. We must wait until they ask for help."

"Well," I thought, "if this office has no power to see that what ought to be done is done, too many kids aren't getting the education they have a right to." And that is why I am not still teaching special ed kids. I could no longer justify working for only a roomful of them a year.

The seminar continued. We interviewed separately two legislators. One was on the education committee and one had been a school principal. We also sent out questionnaires to 65 state senators and representatives. The level of knowledge about special education was very close to nil -- although most responded that they would like to know more.

We talked to a man from vocational rehabilitation -- and found that there were many different programs going, each with several funding sources and a hodge-podge of often conflicting sets of rules for each program.

We talked to two local special education directors -- and found them to have much different philosophies, programs, etc.

We sent out questionnaires to 50 parents to find out their attitudes toward special education programs. Their suggestions about how things could be improved was wide-ranging and lengthy.

A survey of approximately 100 interviews with educators disclosed that those in the regular school program tend to believe that youngsters not meeting with at least average success in the regular school program properly belong in special education programs. Imagine funding that percentage of children in special education?

At the end of the quarter, we published a report under the auspices of the Washington Federation of Chapters of CEC, of which Dr. Affleck was Legislative Chairman. It described some of our findings as I have mentioned, and it also presented a survey of federal legislation pertaining to the handicapped, a few statistics indicating the state of special education in Washington state, a brief profile of teacher training programs in the state, and a review of state legislation in Illinois, California, and Connecticut. We also presented recommendations for further study and action and for specific legislation.

This initial report caused quite a stir. It was roundly condemned in some quarters - and used as a text at another college in the state. And our state CEC Federation was delighted to have a report that had some heft to it!

Several things had become obvious to us during this time - although we didn't put them in the report. First of all, we just didn't know where to look for information. We have since found publication like "Education Code - Washington State Common Schools" published by the Washington State School Directors' Association and "Education in Washington" published by the Joint Committee on Education of the Washington State Legislature. At the federal level are such things as "Education Legislation" and "Guide to OE-Administered Programs" - in fact the US Government Printing House is a real goldmine - once you know what to ask for!

And we didn't know what to look for - another side of the same problem. Take committees, for instance. We kept tripping over more of them. County mental

health-mental retardation boards. A governor's committee on mental retardation. Advisory committees for Title III and Title IV. The Joint Committee on Education, which I mentioned before. The State special education directors' association. A committee for special certification of special education teachers that had produced a proposed draft for each year of its eleven years of existence. In fact, we are still finding committees - public and private, large and small. The only thing that kept us from really getting discouraged - although in many ways it makes the situation even worse - is that most of the time the committees didn't know about each other either!

It had also become obvious that there was no system of accountability in the state. That's another thing we didn't say in our report! Decisions were being made at the local level, individually and independently. One county claimed to have a total of only six retarded kids, a fact which nationwide statistics and the law of averages makes absolutely impossible. In some places a 76 IQ score made a child ineligible for special education, while a 75 made him ineligible for regular programs. One man was responsible for the expenditure of \$5 million a year - with ^{little} provision for programmatic review.

The next quarter we continued on - digging away - trying to find a bottom to the quicksand and locate a solid base from which to begin building up. And we never did find it. We found, instead, that we could never know all the facts and that as soon as we knew one, it changed.

So we developed very large webbed feet and learned to cope. Those who joined us in succeeding quarters expected to be provided with knowledge and given clear directions on what to do and how to do it. They were badly shaken by the vague descriptions of what probably needed to be done - and the even more vague suggestions on how it might be possible to do it. But they, too, learned to stay loose and operate on thin ice.

The second phase lasted through two quarters. We tracked down the relevant sections of the state constitution and the laws, codes, rules, and regulations - every written thing we could get our hands on. We learned something about state funding, too - the possible approaches to the support of special education, the state "formula", the subjective and objective bases for awarding funds. We compared this information from our state with similar information we had collected from other states.

And we began to study federal legislation more closely. For the federal level is where state and local special education is put in context and given real meaning. It's where the Governmental Relations Unit exists - with its quantities of useful information made readily available by their very capable staff. And when people like Fred Weintraub, Al Abern, and Elaine Trudeau call you - for a change - and ask for information, letters to D.C., or other assistance, it's really satisfying to be able to come through for them.

Fred has made a good point, too, about the effects of federal involvement on special education in the individual states. Money is spent on special education instead of something else - since there is only so much money even for matching funds. This makes special education more politically important. Administrative positions are moved further up the line. State schools and hospitals add educational directors. And the increases for special education go on as federal programs to deal with previously unserved children are taken over by the states, and state plans of action - such as those required under Title VI of PL 89-10 - are actually implemented.

To go along with all this governmental and financial information, we assembled hoards of statistics - called social indicators in political science. Quantitative rather than qualitative information, but accessible and objective. A suggested list of indicators is in the booklet we have prepared. It includes things such as percentage of school population in special education, average teacher's salary as compared to regular education, pupil-teacher ratio in state institutions, etc.

This type of information is most useful if obtained for each school district, as well as for the state as a whole.

We began to make some judgments about what was most needed to effect an improvement in special education in Washington State. What we needed were the laws to get these things done. Our state laws were permissive - they allowed things. What we needed were mandatory laws that required things. The "may" should be replaced with "shalls".

Our second report is short and makes much more specific legislative recommendations. Now our search for the power structure was because we felt we knew specifically what it ought to be doing.

Further analysis of the laws and programs of other states was disturbing, however. There was no correlation! States with lots of "good" mandatory laws often had poor programs and states with few and permissive laws often had excellent programs. And many of the laws were things we did not want, yet someone must have felt that they would improve special education. The more we thought about it, the more we decided that actual legislation was not the only way - and probably for most things wasn't even the best way. Good leadership seemed to be what made the difference. It seemed able to get good things done under nearly any circumstances, and poor - or nonexistent - leadership could ruin even the best intentions of the most mandatory laws.

By now our group was in the process of becoming a political force. Now we were getting calls from people who needed information about special education in Washington State. And these people included people who advise decision-makers - and even decision-makers themselves! It wasn't that we knew everything, but we had put together a fair number of the pieces. And we were willing to share.

Think, for a minute, about sharing information. We had come to our conclusions on the basis of that information. Sharing it ought to lead others to come to our conclusions - or at least head them in that direction. Isn't that

Our third report, published in June of 1970, was entitled "Projections, 1970-1980". It summarizes our governmental involvement at the federal level to that time, and it summarizes the latest state legislative happenings. It provides much more detailed information about our state department of special education, including an organizational chart and records of narrative interviews with four of the chief executives on the role of the department in the state, their role within the department, and changes which they foresee in the department within the next ten years.

As a result of our work, the five heads of special education at the state colleges and universities met several times to plan a unified program to attempt to eliminate overlap and omission in the training of special education teachers in the next decade. This plan is also included in our third report.

Since that time we have been instrumental in getting a group of parents of trainable mentally retarded children who called themselves "Education for All" together with the Executive Secretary of the Joint Committee on Education - the advisory committee of the Washington State legislature - to draft a bill for mandatory special education which would satisfy both groups. Tim Roorda will be telling you the details about that.

Dick Lin will tell you about our active participation in the statewide efforts to draft special certification for special education teachers.

We have been doing things to improve special education in Washington State. Things that matter to kids, parents, teachers, administrators - in fact, that matter to everyone, really, since they serve to assure that each will get what he needs for an appropriate education.

And I have benefitted personally, too. My doctoral program has been far more than absorption and regurgitation. I, who said only three years ago that I could never become involved with politics - and certainly not with funding,

have found that nearly anything can be interesting if you really get to know it and have good reasons to need it. I've learned to cope with vague situations in which I'm expected to produce - an undescribed product by undescribed means. That skill has many transfer possibilities!

And, most important of all, I have met many active, interesting, and stimulating people from all over the country. This is of critical important because few things are worth doing if you don't enjoy the people you are doing them with.

MONEY BEATS M&M's -- AN IN-SCHOOL WORKSHOP TRAINING PROGRAM
AS A TRAINING TECHNIQUE

Vivian Taylor
Cloverdale Training Program
Bartlett, Illinois

To most of you, this is the "Age of Aquarius" -- however, it might also be called the "Age of Vocational Training for the Retarded." In recent years, accumulated evidence has shown that a far higher proportion of mentally retarded persons are able to become productive and work in gainful occupations than was previously suspected. Whether the final result is complete economic independence or working in a sheltered workshop, the fact remains that through adequate pre-employment training, personal counseling, and post-employment counseling, the future can be full of promise for the mentally retarded.

Many studies have shown the economic benefits in training the retarded. The current trend is to emphasize the human dignity of the retarded person, both as a human being and as a economically contributing member of society. I submit that these two goals, economic usefulness and human dignity, are not end results to be achieved through a training program -- but, rather, should be incorporated in the training program as very effective "techniques."

Many university students are currently demanding that the curriculum should be "relevant," and take pride in the fact that they have been 'first' in standing up to the establishment. Not so - the retarded are way ahead of them. They haven't made speeches or marches; they have simply refused to answer or perhaps walked out of the room.

Another word for relevant is meaningful ... which means 'something that matters to me' ... which could be interpreted as 'that which makes me feel successful or good'... or, in educational terminology, positive reinforcement. This, then, is the key element in using vocational training as a teaching technique.

The Cloverdale Training Center

1. Class - other activities
2. Physical facility
3. Workshop atmosphere
4. Types of jobs

Labor Department Limitations

1. Age
2. Wages - commensurate and piece rate
3. Records

Time - Studies

1. Breaking down a task
2. Comparison to the norm
3. Re-evaluation

Successes and Failures

23

THE NATIONAL REGIONAL RESOURCE CENTER OF PENNSYLVANIA

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THE NATIONAL REGIONAL RESOURCE CENTER OF PENNSYLVANIA
AN OVERVIEW AND PROSPECTS

The National Regional Resource Center of Pennsylvania (NRRC/P) is a project of the Bureau of Special Education, Department of Education, funded by the U.S. Office of Education. It has been designed to serve the educational needs of handicapped children and youth.

The NRRC/P will focus on the production of specific educational prescriptions for handicapped children in Pennsylvania. It will adopt a systems approach to help teachers with diagnostic prescriptive interactions and to determine the cost and effectiveness of the resources they deploy. The need to apply scientific methodology to every portion of the educational spectrum has led educational psychologists, e.g. Gagne, to concern themselves with delineating the conditions and processes of learning. Some, e.g. Mager and Trow, have taken the position that the operational definition of teaching objectives is necessary for the systematic management of learning. E.D. Smith has been concerned with the application of PERI to education. Finn and Briggs have attempted to apply the principles of systems management to the use of educational media. McIntyre and Nelson have directed efforts in the empirical testing of teaching materials. Corrigan, Kaufmann and Banathy have developed models for teaching, curriculum development, and the selection of teaching materials.

A Particular value of the systems approach is its ability to provide specific decision-making criteria with respect to the outcomes of educational processes, providing objective and quantifiable bases for deciding what a child has learned, how well he has learned, and alternative directions for further student development.

Specifically, the NRRC/P systems approach will provide a "Decision Tree" diagnostic program for planning educational experiences, and in validating educational prescriptions for handicapped children.

The NRRC/P rationale is:

- (1) to gather base-line evaluation data on all its children;
- (2) to determine the relationship between such measures and academic learning;
- (3) to determine where learning will be significantly influenced by special perceptual and cognitive programming;
- (4) to carry out longitudinal behavioral studies so as to effectively chronicle the basic behaviors related to school performance; and
- (5) to provide systematic evaluations of educational treatment programs.

The NRRC/P also hopes to solve the chronic problem of providing effective instructional materials to special education. It intends to locate and coordinate existing instructional materials for use with handicapped children in Pennsylvania; to engage in their evaluation, to provide individual consultation and in-service training in their use, and to create new instructional materials which will meet specific objectives.

In its current structure the NRRC/P is designed to serve the eastern and central section of Pennsylvania; the same areas served by the Eastern and Central special educational instructional material

resources centers. The Eastern section has been divided into two units; an urban unit serving the city of Philadelphia, and a suburban unit serving Montgomery, Delaware, and Bucks counties. The Central Pennsylvania section has also been divided into two units; a rural unit composed of several counties in regional Appalachia and a middle urban unit which includes suburban Harrisburg. Each of the four units will have their staff diagnostic prescriptive coordinators, psychoeducational diagnosticians, itinerant prescriptive teachers, resource room teachers, self-contained classroom teachers, assessment teachers, and their aides.

The project efforts will be focused upon the learning disabled brain injured child. All children served by the project will be screened before their involvement to determine their eligibility for services, and also evaluated according to appropriate diagnostic descriptors. The latter will assist the NRRC/P staff in replicating elsewhere successful techniques for intervention developed by the project in any of its units. Comprehensive psychoeducational evaluations of all project children will be carried out.

NRRC/P psychoeducational diagnosticians will identify appropriate criterion tasks and diagnostic tests to describe the handicapped children so that desired educational materials and methods can be selected for them. The diagnosticians will work with itinerant prescriptive teachers to develop criterion tasks that measure the project's expanding educational objectives. The itinerant prescriptive teachers will provide continuous information to the actual teachers of the handicapped children in special and regular classes and resource rooms served by the NRRC/P; this relative to materials and methods. They will observe and evaluate the children's progress and teacher-child interactions during the implementation of prescriptions. They will continuously monitor the child's

achievements.

Resource rooms will provide alternative learning environments (to those of special classes) for implementing prescriptions. Four assessment classes are also planned, one for each of the units. These will provide a variety of additional professional resources for those cases in which no suitable diagnostic-prescriptive determinations could be made through the project's usual diagnostic-remedial approaches.

All project units will record the children's progress and teacher's interventions in a format which enables data to be computerized. However, each unit will be free to develop individuality so long as they meet the general objectives of the overall project, and all will contribute to the central data bank.

Areas of Operation:

(1) Suburbia is a major center of activity for the NRRC/P. Its diversity provides many opportunities to generate and test optimal learning environments and strategies. (Montgomery County, Delaware County, and Bucks County)

(2) A middle urban area of service is also identified for the project. Here many of the problems of big cities still exist in miniature, and provide an opportunity for urban improvisation. (Harrisburg, Lancaster, Dauphin, and Cumberland Counties)

(3) The urban activities will be centered in Philadelphia. It is representative of most large eastern cities in the problems and opportunities it presents. Its centralized operations can conceivably promote efficiency of special education operations.

(4) Rural Operations:

In the past, most special education state standards tended to

reflect one type of procedural arrangement for its entire population. The urban crisis had emphasized that inner city populations may be different in their educational needs. Little attention has been paid, however, to rural special education problems. The NRRC/P believes that there are certain assumptions which underlie a differentiated urban-rural special education program. These are:

- (1) cultural social differences generating different life styles;
- (2) variations in language learning rules;
- (3) variations in perceptual learning skills;
- (4) variations in the opportunity for special education participation, and
- (5) a sparsity of population creating difficulties in travel, program development, organization, funding, and the acquiring of qualified personnel.

One of the goals of the NRRC/P is to examine the similarities and differences in rural and urban special education programs, and to provide creative alternatives to one of the major dilemmas of special education. (Centre County, Clearfield County, Mifflin County, and Clinton County)

Measurement:

In accomplishing the objectives of this project, it will be necessary to devise innovative measurement approaches which specifically evaluate the strengths and weaknesses of each child. Special education has had a long history but a short record of systematic validated effort; much in the way of assumption and theories but still little in the way of concrete facts; many exhortations and recommendations but a poverty of orderly directed educational efforts.

In large part the above reflects the general state of the art in educational research. It further seems to be a manifestation of special education's many-headed orientation: towards medicine, psychological rehabilitation, etc. An orientation which has directed its efforts and energies into multi-modal helping activities -- many without specific educational goals and outcomes. And, of course, its peculiar caretaking role has not been conducive towards educational achievement as has been shown by repeated and unfavorable comparisons of special with regular classes.

Happily, the past several years and the immediate present have shown increased efforts toward the improvement of instruction for the handicapped. The regional resource centers and the recent funding efforts directed towards learning disabled children are manifestations of such commitments on the national scale.

While the NRRC/P will explore the contributions of any and all plausible approaches which may enhance the academic achievement of handicapped children, one of its divisions (Southeastern Suburban Pennsylvania) will emphasize a basically instructional approach to their academic problems. It will emphasize domain mastery and criterion referenced measurement. It will utilize a variant of the Comprehensive Achievement Monitoring (CAM) system, an approach which has shown its value in general education. Specifically, CAM employs short tests (monitors) which are given at short and regular intervals during the semester or school year. Each monitor assesses retention of previously taught curriculum, the acquisition of the most recently completed unit and samples, as well as pre-learning of curriculum units which have not been formally presented to the pupil as yet. The course of learning of all units being taught is comprehensively charted so as to understand

instructional and learning processes and to provide guidelines for their improvement. Because the children being served by the NRRC/P are handicapped and present greater variability of problems in instruction than do groups of presumptively normal children, the CAM system has to be individualized for them; hence the Individualized Achievement Monitoring (IAM) System NRRC/P is developing. In addition to its being based upon individual children rather than groups as is the CAM system, IAM prescribes specific sequences of remedial intervention for children who are not proceeding as anticipated in their acquisition of anticipated curriculum in reading, arithmetic, or whatever. In the utilization of the IAM system, all instructional activities, standard and remedial, will be recorded, as to the date, time, length of interval, specific materials, and techniques used. This latter information will then be available for a later actuarial ordering to determine the effectiveness or lack of effectiveness of whatever and whoever was utilized in the training of the project's children.

The Role of the State's Instructional Materials Centers

In the Project:

Pennsylvania has three instructional material centers serving its special education programs. These are regionally oriented with one (Regional Resources Center for Eastern Pennsylvania) serving the eastern area of the Commonwealth, another (Central Pennsylvania Special Education Resource Center) serving the central area, and the third (Western Pennsylvania Regional Resource Center) serving the state's western regions.

The NRRC/P will be working with the first two of these well

established and successful centers which are federally funded efforts of the Pennsylvania Bureau of Special Education. These centers over the three years of their operation have successfully provided special education teachers with instructional materials and instructed them in their use. The Regional Resources Center for Eastern Pennsylvania is particularly well known for its efforts in bringing research information to bear upon special education programs, and for its widely read newsletters which are concerned with categorical types of handicapping conditions. These specialized centers become vehicles for the transformation of NRRC/P's psychoeducational prescriptions into concrete classroom practices and widely extend the NRRC/P's opportunities for reaching the special education practitioners, influencing them, and, most important, helping them effect constructive educational programs.

Conclusions:

The NRRC/P represents a major national effort in the validation of educational programming and prescriptions for the handicapped children served by the Commonwealth of Pennsylvania's Bureau of Special Education. Building upon and partaking in the rich operations of its previously established instructional materials centers for special education, the NRRC/P is becoming a vehicle for direct delivery of educational services, methods, and materials to those teaching the handicapped. Comprehensive efforts at matching diagnostic data to educational effort, at monitoring every aspect of pupil progress (and failure), of bringing instructional information to all special educational teachers in Pennsylvania, in considering the special demands of rural, suburban, middle urban, and urban special education: This is the NRRC/P!

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Parent-Community Relations and Communications -- Services to Help Child and Parents

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In recent years many individuals in our society experienced concern about the pollution of our natural resources. My concern has been focused upon the visual and auditory pollution that is being generated, especially verbal pollution. The purpose of this brief paper will be to familiarize the panel members with a Taxonomy of Verbal Producers and to warn them not to identify with any of these categories during their presentations and verbal interactions. My concern in doing this is that verbal pollution has proved to be inimical to parent-professional communications, resulting in serious consequences between all parties involved. Thus, the individuals on this panel, members of the audience, and the co-chairmen might well use this taxonomy as the basis for effective and realistic accountability for the verbal interaction that is about to take place.

A TAXONOMY OF VERBAL POLLUTION PRODUCERS

1. THE OSTENTATIOUS PEACOCK: This is the professional who likes to use obscene technical terms to impress peers and parents with his scholarship. This condition is generally characteristic of newly graduated professionals who are insecure in using common language. Technical terms are used to impress rather than express ideas in the communication process. Generally, after a period of time and re-adjustment, humility and common sense prevails, and the condition corrects itself. Harm is rendered to parents in that they become frustrated because communications lack clarity and meaning.

2. **THE VERBAL PARANOID:** This is the professional who speaks and thinks in absolutes, and suffers from delusions that he or she has been annointed the KEEPER OF THE TRUTH. Once a diagnosis is made or a decision rendered, parents and other professionals dare not disagree. To differ would be sacrilegious and dangerous. This is generally a one way transmission model of communications, and authentication of the message sent is not required.
3. **THE VERBAL BILLABONG:** This is the professional who lacks any effective communications skills or abilities. The major characteristic is that the parents do all the talking without any meaningful feedback. This results in parents becoming frustrated and turning to another professional for help. This individual suffers from verbal vacuity, i.e. total lack of ideas and meaningful verbal expression.
4. **THE VERBAL PARAGON:** This is the professional who suffers from verbal veracity and because of moral disposition toward truth, accuracy, and precision, may involve and counsel parents on matters before they are ready for such revelations. This individual means well, but because of veracity, may hurt parents with verbal confrontations.
5. **THE VERBAL PERPETUAL MOTION:** This is the professional who suffers from what is frequently called "Verbal Diarrhea" and is constantly chattering. This is a compulsive condition in need of much research because the rate and volume of verbal pollution is greater than for any other category. The condition is dangerous to hearing and sanity after long periods of exposure to such an individual. Parents are made to listen and not afforded the opportunity to express their needs and problems.

6. THE VERBAL NOISE MAKER: This is the professional who cannot communicate meaningfully because of inadequate language usage. One has heard the expression, "Words are the tools of wise men and playthings of fools." This individual represents the latter. He differs from one with Verbal Perpetual Motion in that no meaning is involved in the communication process. In contrast, the VPM might be meaningful at times.

7. THE VERBAL SEE-SAWER: This is the professional who is characterized by the usage of an excessive number of "Yes, BUT, No" approaches in discussing ideas and issues. The result of such communication is that neither the parents or the professional can make a decision. This might well be diagnosed as a verbal schizoid condition. Parents will generally resort to another professional after a critical stage of frustration is reached.

8. THE VERBAL POSITIVIST: This is the professional who views all life situations in a positive manner and would deny any negative aspects to life, i.e. subtraction would be eliminated from arithmetic because it bears some negative signs, so would automobile batteries because they contain negative charges.

9. THE VERBAL NEGATIVIST: This is the professional who views all life situations in a negative manner. He or she is the opposite of the verbal positivist. In this case, addition would be eliminated from the arithmetic curriculum because it involves positive signs. The chief characteristic is the traditional gloom and doom philosophy of life.

10. THE VERBAL SENILE: This is the professional who makes excessive usage of the expression "YOU KNOW" in lieu of the traditional and normal manner of expressing ideas. The problem for the parent is they don't know what is meant by "YOU KNOW." As a rule, constant reinforcement of "I DON'T KNOW PLEASE

EXPLAIN" can correct the situation.

In conclusion and summary, your charge is to conduct a series of verbal presentations and interactions based upon a pollution free communication process. Should any of you become guilty and start to represent one of the above 10 types just cited, my major task as verbal range officer will be to confront you with a counter-pollution weapon system that has been developed but not used as yet.

People Are People Program

Nancy J. Arnold
University of Connecticut

Welcome, eager educators who are so motivated as to give up the Florida sunshine! Did you ever think you could be so motivated? I want to put on a commercial for you. I want to sell you on asking for a free sample. If after hearing what I say you are interested in my product and write me at the address on the 1-page abstracts which will be here for you at the end of the session, I'll send you a free copy.

Now to bring on the soft lights and slide show.

(Show Slide 1: Cover of the People Are People Series) I have developed and am field-testing a Social Studies curriculum package for grades 4, 5, and 6 entitled People Are People which deals with human relations and with majority-minority group interactions generally without mentioning any groups. This slide shows the cover which is used for both the Teacher's Manual and the Student Note book. This four-unit program taking about six weeks of teaching time is currently being taught in twelve inner-city fifth grade classrooms in New Haven, Connecticut, with twelve inner-city fifth grade classrooms serving as a control group. Pre- and post- measures will find the answer to this question: Is the People Are People program effective in producing growth in human relations within the classroom and growth in attitudes toward majority and minority group members of all types. Correlations will be run between post-test scores and achievement-scores on record to see if the students having the highest achievement scores show the greatest growth.

(Show Slide 2. "Triangle Faces") A synopsis of the overall behavioral objective of

of the People Are People program is capsuled in this sketch from the beginning of the Student Notebook which tells the student that after he has done the activities in his People Are People Notebook, he will be able to name some ways people can look like this instead of like this

What basic idea does each unit cover? As an aside, let me say that the Table of Contents in the Teacher's Manual lists in detail the behavioral objectives for each unit and the activities by which to reach those behavioral objectives. But let's answer the question: What basic idea does each unit cover? as we look at the picture for each unit from the student's People Are People Notebook.

(Slide 3: Unit 1: Main Ideas: People Speaking and Acting) Unit 1 is called Main Ideas: People Speaking and Acting. This unit gets the child's feet wet, so to speak, by letting him realize how a person can get to know another person by speaking and by acting and how our nonverbal actions can tell how we feel toward another person.

(Slide 4: Unit 2: More About People and How They Are Alike and Different). Unit 2 is called "More About People and How They Are Alike and Different." Here the main aim of the activities is for the children to realize that people are more alike than they are different. For example, on the slide you see two clowns who look different, but who each are clowns.

Two sound-filmstrips are shown. One deals with a Spanish-American boy who is playing with the wind and all of the many games he plays with the wind - swinging on a gate, flying a kite, for example. The other sound-filmstrip tells of a black boy and all the ways he thinks of to play in the snow - making snow angels and snowballs, for example.

After each, the children talk about the things they themselves have done to play with the wind or in the snow. Maybe they did some of the same things the children in the filmstrip did -- and they begin to realize that children everywhere are children and are alike in many ways.

A record album of friendliness songs towards all people in general comes in here, too, with each child having the words to sing with to the catchy rhythms which have won praise from Oscar Hammerstein II.

(Show Slide 5: Unit 3: People Feeling and Acting Toward Each Other)

All these activities build up to Unit 3: "People Feeling and Acting Toward Each Other" which is the climax. Here by activities such as role-playing open-ended situations the children are exposed to the idea that they have a choice between acting for a person or acting against a person, between speaking for a person and speaking against a person. For example, the teacher sets up a situation: Suppose a new boy or girl moved into your neighborhood. He or she wants to join a neighborhood club you are a member of. You get to decide with the other club-members as to whether this person is allowed to join the club. Can you think of a way the club-member could speak for that person, could speak against that person, could act for that person, could act against that person?

The children then realize that they have a choice on deciding how they will interact with other persons.

By the way, principals and teachers I have spoken with in the inner-city have commented that they see benefits here for discipline in improving relationships among

2/4

fellow classmates -- which all teachers will agree is very desirable to making our lives more livable. Part of the pre- and post-measures in my field-testing is to see whether this improvement in inter-relationships does result. Before the children knew anything of the fact that they were going to participate in this new program, they were given two pre-tests. The first was a modified Social Distance Scale by Bogardus which is the most valid and reliable attitude measure in use since 1929 and which has also shown reliability in the .90s with both black and white fourth and fifth grades. The Social Distance Scale asks the child to check the five groups of people, the Japanese, Blacks, Whites, Chinese, and Spanish-Americans, whether he would, for example, play with them or invite them to a party. So this measures attitudes to groups of people in general. The second pre-test measure is a Sociometric Measure in which each child rates each of his classmates as to how he would pick him in a given situation. Then comes the teaching of the People Are People package and we see if there was any growth in the attitudes toward groups of people in general and also growth in interactions between the classmates.

(Show Slide 6: Unit 4: Things for You to do to Think about People Thinking and Feeling) Unit 4 is called "Things for You to do to Think about People Thinking and Feeling." This unit is a tying together of all the concepts in the previous units. The children discuss in small groups a short story read by the teacher dealing with getting-along-together themes. Another activity has them write a creative story about an imaginary animal who is different in some way, using art to depict this imaginary animal. Another activity has the children put on a play which tells of a different kind of animal and how the other

animals reject him at first, only to become his friends in the end.

(Show Slide 7: Guilford's Cube) All of the activities in the People Are People program are based on the Structure of the Intellect learning approach of J. P. Guilford. This slide is taken from Guilford's own book, The Nature of Human Intelligence.

In the left hand corner you see in block letters the word OPERATION. Activities in the People Are People program tap all of the five operations of Evaluation, Convergent Production, Divergent Production, Memory, and Cognition. In the middle of the slide is written sideways in block letters the word PRODUCT. Activities are written into the People Are People program to exercise the production of units, classes, relations, systems, transformations, and implications. At the bottom of the slide, you see in block letters the word CONTENT. The two content areas of the Semantic (dealing with words) and the Behavioral (Dealing with behavior) are the basis of the People Are People program. It is within these two content areas that the operations and products are combined. So that we combine Semantic Content with the operation of cognition in the production of units through implications. Then we combine Semantic Content with the next operation of memory in the production of units through implications and so on through all of the operations down to evaluation. And the same is done for the Behavioral Content area being combined with all of the Operations and Products. This sounds complicated, but really isn't. The aim is to tap very many different intellectual abilities so that the child will grow in many different intellectual abilities.

(Slide 8: Teacher's Manual, Student's Notebook, Theoretical Rationale) This is all explained in more detail in the forty-nine page Theoretical Rationale which each teacher receives. So that the basic materials of the People Are People program are the Teacher's

Manual, the Student's Notebook, and the Theoretical Rationale. The Teacher's Manual is detailed and not lecture-based. Rather the teacher acts as a guide or director of learning for the seventy activities based on Guilford's Structure of the Intellect. Each concept in the Teacher's Manual is identified by a letter, and for each lettered concept in the Teacher's Manual there is a corresponding lettered reinforcement activity in the Student's People Are People Notebook.

(Slide 9: Behavioral objectives, 70 activities, etc.)

The Theoretical Rationale lists the overall behavioral objectives in terms of the categories of Bloom and Krathwohl. Seventy activities are listed according to the intellectual abilities they are designed for in Guilford's Structure of the Intellect. Explanation is given of how a humanist curriculum theory is incorporated, and how the affective, as well as the cognitive domain, is exercised. Bruner, Piaget, and Freud are quoted to show that children ages 8-12 can handle topics of human relations in majority-minority group interactions. Explanation is given of how three learning characteristics of the inner-city children are incorporated into the program: 1) motoric approach to learning, 2) non-dependence on adults as sources of information, and 3) collective group loyalty versus individual activity.

(Show Slide 8: Jerome C. Brown's Classroom Cartoons, etc.)

I would like to mention that the cartoons you saw were taken from Jerome C. Brown's Classroom Cartoons for All Occasions. Palo Alto, California: Fearon Publishers, 1966.

So this gives you an overall picture of the People Are People program.

After the data comes in, I plan to approach a commercial publisher. (The research data on the field-testing of this curriculum package can be obtained through the Dissertation Inter-Library Loan in September.)

The commercial is over. If you are interested in receiving a complimentary copy of the People Are People Program for Grades 4, 5, and 6, please write me at address on the 1-page abstracts which will be here for you at the end of the session, giving me your school address.

So I hope this gives you some worthwhile information in return for your sojourn from the sun.

THE ROUGH RIDER PROGRAM

Anthony J. Colletta
University of Connecticut

Is there an educational experience which causes children to come early and stay later than they should? Currently in its ninth year of existence, the Rough Rider Program is such an educational experience. The program involves 40 seventh and eighth grade boys and girls from Newark, New Jersey, who meet after school and Saturday mornings.

Open to any interested student living in the Model Cities Area, the RRP's philosophy is: "Accept their needs; accent their strengths." Children are treated in a respectful and sensitive way by teachers, college students, and parents, all serving as volunteers, who expect and receive much effort in return. Hence, the program derives its name: "rough" because of the high standards expected. The combination of accepting needs with higher teacher expectation and variety of stimulating experiences, has provided meaningful growth for many high potential inner-city adolescents. In seeking experiences the second part of the name was chosen: the children "ride" to many schools, colleges, hospitals, and theatres.

Teachers and leaders are concerned with providing nourishment to each child's concept of self. The self that in many cases has been fragmented by a hostile city life. Individual growth is supported in every activity according to the child's talents and learning styles. Talents and interests are stimulated and developed from politics to wrestline and from cheerleading to writing about one's self, family, friends, and neighborhood.

The talents and interests of the children have led to the development of a one hour show consisting of: monologues, role-playing, interpretive dance and song. Also the boys and girls all have an opportunity to speak into the microphone, saying their names, grades, and favorite interests. The show prompted one boy to remark: "Man, I was really digging myself." During the past three years the show has performed fifteen times before over 6,000 people in schools and hospitals.

Instruction takes place on a one-to-one basis or in small groups. The focus is first, however, on developing relationships: between child and child, and between child and teacher. Instruction is based on experiences the children have had. Materials are purchased which are of high interest level and can be used individually or by a group. Classes are given in many areas: art, role-playing, music, gymnastics, wrestling, cheerleading, sex education, careers, and charm. Reading and writing are integrated into each activity and are never taught as classes in themselves. Further, opportunities are provided to build, invent, and explore through the use of various tools and equipment.

The children sell candy to raise money used to buy uniforms, rent buses, or pay for any activities voted on by the majority. In the past, the children have donated to community services, organized "Get out the vote" campaigns, and have become involved in the community. There is no "hard" evaluation data on the Rough Rider Program, since changes are based on results of dialogue among parents, students, and teachers. However, when asked how Model Cities money could be spent effectively, one parent remarked, "Make another Rough Rider Program."

RSA - Federal Concern for the Retarded
William M. Kelsey
Department of Health, Education, & Welfare, Chicago

The Rehabilitation Services Administration is responsible for a broad range of programs designed both for the provision of diagnostic, treatment, and rehabilitation services for the mentally retarded, and for the support of special facilities and activities to expand and improve national resources for serving the mentally retarded. These programs include the State-Federal vocational rehabilitation program, as well as special project grants for the expansion and innovation of vocational rehabilitation services; the improvement of state residential institutions and sheltered workshops for the mentally retarded; the planning and construction of rehabilitation facilities and sheltered workshops, the construction and staffing of specialized community facilities, and the construction of university affiliated facilities for the mentally retarded; and training for professional, supportive and technical personnel already engaged or preparing to engage in occupations in the care and rehabilitation of the mentally retarded.

These diverse activities are unified by the common goal and objective of assisting mentally retarded individuals to achieve and maintain the maximum personal, social, and economic competence of which they are capable. Underlying these activities is the continuing concern for expanding the opportunities and resources available to the more severely mentally retarded.

Recent years have seen dramatic advances in the provision of vocational rehabilitation services to the mentally retarded. The retarded now comprise nearly 13% of the rehabilitated from all categories of disability by the State-Federal program of vocational rehabilitation. In 1963, about 22,000 retardates were rehabilitated; this figure rose to nearly 30,000 in 1969; and about 57,000 in 1970.

There are many programs utilizing federal funds for the retarded. The following ones will give an overall view of their purpose:

I. Specialized staff working with the mentally retarded have been particularly effective in the development of cooperative school programs designed to assist the retarded young person to make a satisfying transition from school to work. These cooperative school programs are found in many communities throughout the country and have greatly strengthened both special education and vocational rehabilitation efforts with the mentally retarded. The cooperative program structure varies from State to State, and the variety of approaches is extraordinary. In some States, program administration is Statewide and in others there are individual agreements with individual school districts. Some programs function only to serve the mentally retarded and others include youth with all kinds of disabilities. In some States, only vocational rehabilitation and special education are administratively involved, while in others, representation includes vocational education.

The number of retarded young people enrolled in cooperative vocational rehabilitation work-study programs is increasing steadily as new programs are developed. These cooperative programs have proven themselves effective in reducing the school dropout rate of retarded youngsters and have provided a technique for continuous service to youngsters during the school years when they are best able to benefit from them.

II. The program of Project Grants for Rehabilitation of the Mentally Retarded is administered by the Division of Mental Retardation, Rehabilitation Services Administration, of the Social and Rehabilitation Service.

The purpose of project grants administered by the Division of Mental Retardation under the provisions of Section 4(a)(1) of the Vocational Rehabilitation Act, as amended by the Vocational Rehabilitation Amendments of 1963, is to pay part of the cost of organized, identifiable activities which are undertaken to contribute to the rehabilitation of mentally retarded individuals generally not eligible for vocational rehabilitation services. Grants provide for expansion or establishment of programs serving the mentally retarded, application of new techniques for rendering services, coordination of resources and information, and for increasing the number and types of specialized personnel working with the retarded.

The activities undertaken should stimulate the development, and encourage the utilization of community facilities and services for the mentally retarded such as:

- (a) Establishment of special services for the diagnosis, treatment, training, or care of the mentally retarded;
- (b) Demonstration projects in the rehabilitation of the mentally retarded; or
- (c) Training, including inservice training and education of personnel in all fields of disciplines which contribute to the rehabilitation of the mentally retarded, through the provision of training, teaching, or traineeship grants.

III. Since September 1968, the special mental retardation review, abstracting and information activity has been operated as part of the Division of Mental Retardation/RSA, Social and Rehabilitation Service. In previous years, this service was a part of the National Clearinghouse for Mental Health Information.

Because knowledge about mental retardation comes from many scientific disciplines and professions, this service will improve both research and practice and thus have a decided effect on the prevention and treatment of mental retardation.

To maintain this service, the Social and Rehabilitation Service under contract with the American Association on Mental Deficiency, collects current literature on mental retardation, writes informative abstracts, indexes the literature in depth and compiles annotated bibliographies on special topics.

IV. The purpose of the Student Work Experience and Training program is to provide a motivating work experience in the field of mental retardation to young people at a time when their career plans are developing; and to attract such persons into mental retardation careers.

Projects may be conducted during the summer months or may extend throughout the year whenever students are available for a specific block of time, and are not matriculated in schools.

Broadly, the programs may involve experience in all phases of direct services to the mentally retarded, obviously depending upon the nature of the agency or institution as well as upon the student. Adequate supervision and educationally stimulating work assignments are vital to achieving the primary goal-recruitment of high caliber students into the field of mental retardation.

V. The Developmental Disabilities Act (P.L. 91-517) was enacted into law October 30, 1970, and the staff of the Rehabilitation Services Administration is presently preparing the materials and documents for its implementation. This legislation authorizes grants to States for planning, administration, services, and construction of facilities for the developmentally disabled. Developmental disabilities include mental retardation, cerebral palsy, epilepsy, and other neurological conditions closely related to mental retardation originating before age 18.

The developmental disabilities legislation provides for the appointment of a State planning advisory council by the Governor, and the designation of one or more State agencies to administer the programs to be supported by Federal funds.

Should time permit, other programs could be mentioned that serve the retarded. The Federal government is constantly searching for new ways to serve the retarded and will continue to do so as long as there are groups like yours who have a sincere, dedicated desire to help their fellow man.

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Traveling in Successful Circles, or
How to Individualize an Instructional Program

Gale L. Glenn
Butte County Superintendent of Schools Office
Oroville, California

As an administrator, I am concerned with providing the best educational programs for my students but I am also concerned with developing a sound basis for administrative decision-making. I find that the two goals are mutually compatible, even complementary, for when a sound basis for educational decisions and policies has been established, it is also the cornerstone for outstanding programs. Current problems such as:

1. Ancillary personnel -- Are they necessary? What should be their relationship to other staff members?
2. New methods and techniques of teaching (example, oral vs. manual training in deaf education) - Which of these is applicable to our programs?
3. Teacher aides - Are they too expensive? What should be their function?
4. Integration into regular classes - Who should be integrated? When? To what extent?

can be met within a flexible framework. And a workable, flexible framework must reflect the needs of the individual child, not the goals of a specific program. Few solutions remain permanent; they will change as the student population and its needs change. The only practical method of tailoring education to fit the child, then, is to treat each one as a separate challenge.

It has been said that the education profession is guilty of engaging in the "self-fulfillment prophecy" - that is, in oversimplified terms, that we have forced the child into a niche and, consequently, have not been at all surprised when he performed according to our expectations. Outstanding programs cannot and do not function on that basis. Individualized programming is the answer.

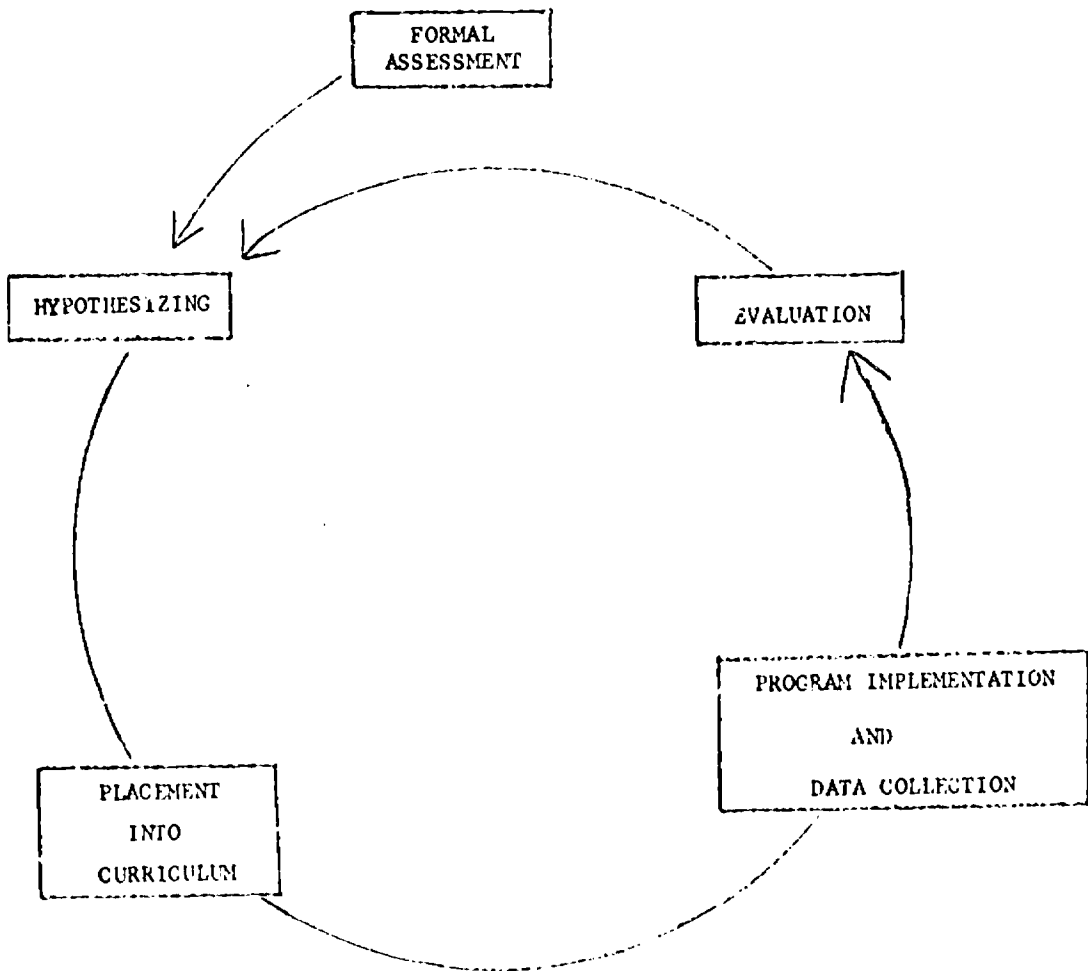
Most educators agree with the concept of reduced class size to facilitate individualized programming; however, too many feel that because their children are grouped according to their common handicap, they also share common learning characteristics. The too-frequent assumption that reduced class size and homogeneous grouping will automatically assure success is dangerously erroneous. Again, individualized programming is the answer.

The role of the teacher in individualizing instruction is, of course, of primary importance; however, the administrator's role must also be considered. First of all, he determines, to a great extent, the educational philosophy of the total school program. The decisions that he makes before a child even enters a classroom often determines the degree to which that program can be individualized; for example, consider the use of the school psychologist. If he is viewed only as a tester-recorder, thus limiting his time to administering the basic tests required for legal certification, much of the important supplementary information that he could supply to the educational process is lost. He is simply a means to an end -- he gets the child into a special education class.

Second, the administrator establishes the system on which the educational program will be based. I am going to describe the system that we have initiated in Butte County to illustrate my point. One must remember, however, that in the breaking down of any dynamic process into its components, much of the interaction between those parts that occurs in practice is lost on paper.

When we think of individualizing a program in Butte County, we think in terms of a circular or cyclical process. Now, individualizing the program is not always the same as individualizing instruction; but individual needs may be met in a group if those needs have been accurately identified and recorded and are commensurate with group activities. Together the five steps

that we have devised to promote individualized programming form a cycle -- the



"cycle for success" -- described briefly as follows.

Formal Assessment

The first step in the cycle is a formal assessment of the child. It includes an appraisal of the child's physical, emotional, cultural, psychological and educational background based on all available and pertinent information. For example, although the reliability of the subtest scores on the WISC is rather low, we often use such information because we feel that it is necessary for an accurate assessment. To ignore any information can be more damaging than to use information that is in error, as long as the possibility of error is recognized. A team approach is used which capitalizes upon the skills of a variety of disciplines.

Hypotheses

Out of the formal assessment is developed a set of hypotheses relating to the learning and emotional characteristics of the child. Let me stress that we are generating hypotheses which are only tentative -- they will be tested and retested against the performance of the child. This tentative hypothesizing is a concerted effort to move away from the labeling of handicapped children and to maintain flexibility. No decision is considered permanent; therefore, it is entirely possible for a child to initially be placed in a special education program and at a later date be moved into another, or even into a third.

Placement into the Curriculum

The hypotheses lead to the placement of the child into the curriculum of a specific special education program. We employ a systems approach to our curriculum structure which, initially, proved to be threatening to our teachers. They had difficulty in conceptualizing their place in the total special

education program until they were provided with behavioral statements based upon the normal developmental stages of children*. When they began to accept these statements as guidelines, their task was more circumscribed and they were able to begin to produce a sequentially developed curriculum stated in behavioral terms. There were many gaps, of course, but it was felt that a systematic analysis of these behaviors was an appropriate beginning. When a gap did occur, teachers made note of it so that it could be dealt with at a later time.

Two factors are carefully considered when placing a child into this curriculum -- his appropriate entry level and his temporal productivity. Simply stated, this means that prior to the time of actual instruction, it is determined at what level the child is functioning on the tasks that will confront him and also how long he is able to attenuate to those tasks. Such information is crucial, at a later date, to determining the appropriateness of his placement.

Program Implementation and Data Collection

Once the proper entry level has been established, we are in a position to begin the instructional program. One of the advantages to the systems approach is that the behavioral statements lend themselves to behavior

*Gunzburg Progress Assessment Chart -- Primary Level, Level 1, Level 2;
National Assn. for Mental Health, 39 Queen Anne St., London W1, England

Young Educable Mentally Retarded Performance Profile, 1967 and
Trainable Mentally Retarded Performance Profile, 1968;
Reporting Service for Children, 563 Westview Ave., Ridgefield, New Jersey

Pupil Development Progress Scale, Dr. William Oliver, Special Education Dept.,
Monterey County Office of Education, P. O. Box 851, Salinas, California

The Instructional Objectives Exchange, P. O. Box 24095, Los Angeles, Calif.:
Mathematics, Reading, English, Attitude Towards School, Self Image,
Health Education, Physical Education, Social Studies, Science

modification techniques. Inherent in the process is the need for systematic observation of the child and for recording his level of performance.

Evaluation

At this point, we have assessed the child; we have hypothesized about his learning characteristics; we have determined the entry level of the child into a specific program; we have implemented the program and have observed and recorded what has transpired.

Our next step is to evaluate the child's performance in terms of our original hypotheses about him. The time interval between program intervention and evaluation will vary depending upon the difficulty of the educational tasks and the learning capacity of the child. The evaluation is based upon the amount of growth that has taken place since program implementation and, for this reason, observation and recording are the heart of our program. As a result of the evaluation, one of the following conclusions will be drawn:

1. The initial hypotheses and program were entirely correct, or
2. The original hypotheses and program were entirely wrong, or
3. The original hypotheses and program were partially correct.

It is rare for all of our hypotheses to be correct but, when this does occur, we continue the program as it was originally written. On the other hand, if we were entirely wrong, we generate a new set of hypotheses and a new program; but we now have an important new set of data to consider along with the information previously used. Observation of the child's performance provides vital information in rehypothessing and reprogramming. More often than not, our initial hypotheses and program were partially correct. In this case, modifications are introduced. These modifications may take the

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form of a change in the method or kind of reinforcement, or in "slicing the curriculum into thinner steps", or in changing the materials and methods used, or in changing our hypotheses about the learning characteristics of the child. Our experience has taught us that when a child is not making the progress expected, the most common reasons for failure are that either the task was not appropriately sequenced, or that an inappropriate reinforcer was used.

With the completion of the fifth step, evaluation, the cycle is complete, but the real work is only begun. The cycle -- that is, assessment, hypothesizing, placement, implementation and evaluation -- will be repeated many times during the child's school career, resulting in a constantly more refined program designed specifically for him.

Conclusion

Every system has a standard of comparison. Our monetary system is based upon the gold standard; a religious standard is the Golden Rule. What standards are used in the public education system? Here are a few of them: (1) The mean, median and mode of the group for years have guided teachers in determining whether or not a given child is functioning as he should. (2) The I.Q. is a reference point, often the only one, for deciding how a child should be educated and whether or not he is functioning adequately. (3) Staff availability and characteristics contribute to the type of educational setting in which a child is placed. (4) Financing is obviously one of the major determinants of what will take place in the public school.

All of these standards are important to the educational system, but they all have an inadequacy in common: they do not take into consideration the child as an individual. What are his strengths? What are his weaknesses? What can he learn? What does he need? We educators can no longer be satisfied with fitting children into the proper pre-set niches. If we are committed to serving children, then we must examine the individual child to determine the adequacy of our efforts. Only by means of a never-static, always-changing system of assessment through evaluation, or what I choose to call the "cycle for success", can every child receive the education to which he is entitled.

THE YEAR OF THE CHILD

Bellenden R. Hutcheson
Massachusetts Department of Mental Health, Boston

I am here tonight to support your dedicated efforts with children and to lay before you "The Year of the Child" Program which has as its goal serving the children in every community.

As teachers, many of you don't have to be told that the care of millions of children in the U. S. who need public help is in chaos. The program for comprehensive services for children proposed through "The Year of the Child" outlines new methods to meet this child care crisis.

Thirty-seven million children in the U. S. today receive fragmented, unbalanced, uncomplete and discontinuous services despite this nation's rich resources in professional skills and medical technology. Prevention programs for the mentally handicapped are lacking despite the fact that 80% of retardation could be prevented with our present knowledge. Routine immunizations are not being given and pre-natal care for many a mother is entirely lacking.

Over the past two decades the US has skidded from being ranked fifth safest in the world in risk of infant mortality to a rank of 18th, just above that of Hong Kong. This shows the organization of services governing the child care system is hopelessly outmoded. We must not be complacent about the infant mortality rate. The circumstances that produce infant mortality are those which cause many infants to have a close call with death. The complications of having these close calls result in many instances of

physical and mental handicaps. These children later become your responsibility as teachers.

We must change our child health care system. Society cannot afford to be party to the situation as it now is.

In understanding and dealing with the child care crisis, it is essential to identify those forces that sustain and are responsible for the present deplorable state of affairs. Several primary factors seem relevant.

There is presently no mechanism to unite public and private, professional and lay interests in the service of children. Many of you know what is needed for children, but you have no mechanism or way to express yourselves effectively in your own community. Under such circumstances you can feel segregated against your will and frustrated. The mechanism is lacking for expressing your concerns to other child-oriented professional and lay groups. Haven't you noticed the need for a means for real citizen participation in decision making about the affairs of children in your own community? I've even heard of teachers who have to get clearance from the principal before speaking with parents.

In the highly competitive and self-reliant American society of today, a handicapped child is all too frequently treated as a non-human irritant, rather than as a challenge to the advancement of human welfare. This kind of cultural attitude tends to relegate the handicapped child to limbo and the teacher with him. There must be teachers here tonight still trying to get their special class out of the school basement. If teachers and pupils are discriminated against, what are the consequences of racial discrimination on child care? Disastrously for society, animosity and prejudice

is expressed by malignant neglect of certain ethnic groups. For this reason child casualties in minority groups are high, but targeted corrective intervention is low.

Our American experience and the taming of the west has led us to excessive pluralism. In other words, the self-reliance which was the hallmark of American initiative may now be tending to isolate us from each other. This leads the individual to feel that he personally is doing all he can to counter social injustice to children. The professional disciplines obtain responsibility for a certain kind of child, but then without awareness, unconsciously isolate themselves and see the destiny of the child as resting in their hands alone.

Many teachers experience this as a sense of isolation. Where are other professionals whose opinion he or she might truly value? Where is the consultation? Where is the needed back up? Who supervises the indicated therapeutic medication? Where is the social work help with the parents? The fierce individualism which served this country so well in the past now seems to be working against integrated services for children. Today when the integrated effort of educators, clinicians, and other professionals is so sorely needed, the various professional disciplines must freely abdicate a portion of their sovereignty or self-reliance for the sake of establishing with others cohesive community networks of children's services. We must give interprofessional dialogue an opportunity and "The Year of the Child" concept creates such an opportunity.

The child is molded by parents, peers, and teachers, the teachers having a unique and special relationship with the child. They, thus, have the potential of being a powerful cohesive force in interpreting the needs of the child to the community.

We must indict that aspect of the puritan ethic which is punitive rather than corrective, where poverty is concerned and which prolongs its pernicious presence among us. These then are the forces and conditions that can maintain brutalizing conditions during the growth of the child. Corrective measures involve getting into the community with like-minded people and taking action for children.

A caution about political reality. Have you yet learned how to influence policy? How to implement social change? In a free society, anyone and everyone has a right to take a try at influencing governmental policy.

What organizational structures must be created for the benefit of children? Change is being advocated so widely in the child care field that we must clearly define those principles which have lasting importance as well as permanence in the development, planning, and delivery of children's programs.

Defining and delimiting the geographic areas in which children's services will be delivered is essential. This establishes the administrative and functional unit for the coordination of all children's services within its geographic boundaries. Massachusetts has 39 such human service areas, and the United States today has approximately 1800 such units.

State government must be reorganized and the conjoining of public departments having responsibility for children must be achieved. Massachusetts has accomplished this task and the human services concept offers a golden opportunity to better the lot of children. This same step is now being contemplated at the federal level.

Assuring active citizen participation in decision making at the local level by establishing citizen boards with adjunctive children's consortia is of prime concern. In

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Massachusetts, the area boards and consortia are where the action is. It is the local citizens groups -- the area boards and children's consortia that will really bring about a new delivery system for children's services. Professional groups, educators, clinicians, professionals, and concerned parent's groups must join together in each community and speak with a single voice about the local need and the requirements of children.

Established accountability with clear authority and responsibility for actually developing and implementing children's services is necessary. The amounts of money going to each geographic service area will then be recognized and you will discover, unfortunately, that it is presently being maldistributed.

Resources are just not being allocated by any objective criteria or community need. A corrective administrative mechanism needs to be located right in the community, where the problems exist.

With the public sector organized to meet the needs of children, the private sector is tied in with it through non-profit human services corporations.

We are now really ready for the promised revenue sharing and our children can benefit directly.

These are the methods of "The Year of the Child." They open a new way for citizens to be involved at the community level in implementing children's programs. It can enable you to get things done for children in your own community. I urge you to join the mainstream of the struggle so that you are not pitted alone against a united bureaucracy.

From concern about the environment we must now move on toward a more intimate humanistic concern for the welfare of our children. The unmet needs of

children result in painful consequences not only for the child, but for his community. Your efforts can bring about public awareness and positive action.

As children are the world's most valuable resource... so they need your voices raised in unity to bring attention to their very special needs.