

DOCUMENT RESUME

ED 090 722

EC 061 764

TITLE Identification and Intervention of Handicaps in Early Childhood; A Selective Bibliography.  
Exceptional Child Bibliography Series No. 606.

INSTITUTION Council for Exceptional Children, Reston, Va.  
Information Center on Exceptional Children.

SPONS AGENCY Bureau of Education for the Handicapped (DHEW/OE),  
Washington, D.C.

PUB DATE Nov 73

NOTE 22p.

AVAILABLE FROM Council for Exceptional Children, 1920 Association  
Drive, Reston, Virginia 22091

EDRS PRICE MF-\$0.75 HC-\$1.50 PLUS POSTAGE

DESCRIPTORS Abstracts; Annotated Bibliographies; \*Early  
Childhood; \*Exceptional Child Education; \*Handicapped  
Children; \*Identification; \*Intervention

ABSTRACT

The annotated bibliography on identification and intervention of handicaps in early childhood contains approximately 85 abstracts and associated indexing information for documents selected from the computer file of the Council for Exceptional Children's Information Center and published from 1958 to 1973. It is explained that the abstracts were chosen according to criteria of availability of document to user, current applicability, information value, author reputation, and classical content. Preliminary information explains how to read the abstract (a sample abstract is included for identification of abstract parts), how to use the author and subject indexes, how to order documents through the Educational Resources Information Center Reproduction Service, and how to order "Exceptional Child Education Abstracts" in which the abstracts were originally published. Also provided are a list of terms searched to compile the bibliography and a list of journals from which articles were abstracted. References included treat aspects such as preschool curriculum, prevention of learning disabilities, screening programs, and intervention programs. (DB)

ED 090722

U.S. DEPARTMENT OF HEALTH,  
EDUCATION & WELFARE  
NATIONAL INSTITUTE OF  
EDUCATION

THIS DOCUMENT HAS BEEN REPRO-  
DUCED EXACTLY AS RECEIVED FROM  
THE PERSON OR ORGANIZATION ORIGIN-  
ATING IT. POINTS OF VIEW OR OPINIONS  
STATED DO NOT NECESSARILY REPRESENT  
OFFICIAL NATIONAL INSTITUTE OF  
EDUCATION POSITION OR POLICY.



# IDENTIFICATION AND INTERVENTION OF HANDICAPS IN EARLY CHILDHOOD

A Selective Bibliography

November, 1973

CEC Information Center on Exceptional Children  
An ERIC Clearinghouse  
The Council for Exceptional Children  
1920 Association Drive  
Reston, Virginia 22091

Exceptional Child Bibliography Series No. 606

The work presented or reported herein was performed pursuant to a grant from the Bureau of Education for the Handicapped, US Office of Education, Department of Health, Education, and Welfare. However, the opinions expressed herein do not necessarily reflect the position or policy of the US Office of Education and no official endorsement by the US Office of Education should be inferred.

061 764

# The CEC Information Center on Exceptional Children

With a grant from the US Office of Education, the CEC Information Center was established at The Council for Exceptional Children to serve as a comprehensive source of information on research, instructional materials, programs, administration, teacher education, methods, curriculum, etc. for the field of special education. The Center functions as the Clearinghouse on Exceptional Children in the Educational Resources Information Centers (ERIC) program and also as a member center in the Special Education IMC/RMC Network. In addition, the CEC Center's program includes a commitment to a concentrated effort towards the development of products which will interpret research results into educational methods and practices.

## How to Use This Bibliography

The *Exceptional Child Bibliography Series* was initiated by the CEC Information Center to answer the need for rapid responses to specific requests for information. The volume of information requests received by the Center is analyzed and used as a guide in preparing special topic bibliographies in the field of exceptional child education. Abstracts contained in the bibliographies are drawn from the computer file of abstracts which represents the CEC Information Center's complete holdings as of the date indicated on each bibliography.

Selective editing by Information Specialists is performed on each bibliography. From the total number of abstracts drawn from the file on a particular topic, selection is made of only those judged to best meet the following criteria: availability of the document to the user, currency, information value, author's reputation, and classical content. The number of abstracts selected to appear in a bibliography may vary from one to 100, depending on the amount of suitable information available. Updating of bibliographies as new material becomes available is accomplished when the volume of new material reaches 25 percent of presently available material on a given topic.

## How to Read the Abstract

Each abstract contains three sections—bibliographic data, descriptors, and a summary of the document. The bibliographic section provides the document's identifying number (ED and/or EC), publication date, author, title, source, and availability. The descriptors indicate the subjects with which a document deals. The summary provides a comprehensive overview of the document's contents and in some cases document availability is announced here.

## How to Use the Indexes

Some bibliographies in *Exceptional Children Bibliography Series* contain author and/or subject indexes. In these bibliographies, readers seeking work on a specific aspect of the general topic may consult the subject index to be referred to specific abstract numbers. Abstracts dealing with several topics may be identified by finding the same abstract number under two or more subjects in the subject index.

## How to Purchase Documents

Documents with an ED number and EDRS availability indicated may be purchased from the ERIC Document Reproduction Service (EDRS). For your convenience an order form is provided on the back cover of this bibliography.

Abstracts appearing in the bibliographies have also been published in *Exceptional Child Education Abstracts*, the quarterly abstract publication of the Council for Exceptional Children. Approximately 750 abstracts covering the broad range of exceptionality appear in each issue. (Subscription order form below.)

---

(Make checks payable to) **EXCEPTIONAL CHILD EDUCATION ABSTRACTS** The Council for Exceptional Children  
1920 Association Drive, Reston, Virginia 22091

Please enter my order for subscription(s) to *Exceptional Child Education Abstracts*.

\_\_\_\_\_ Institutional Subscriptions Vol. IV (4 issues) — \$50

\_\_\_\_\_ Supplementary Subscriptions (will be shipped to address below) — \$25 each

\_\_\_\_\_ Back Volumes for Institutions — \$40 each

\_\_\_\_\_ Eligible for Individual subscriptions — \$35 each

\_\_\_\_\_ Back Volumes for individual subscribers — \$35 each

\_\_\_\_\_ Eligible for individual CEC member rate — \$25 each

\_\_\_\_\_ Back Volumes for CEC members — \$25 each

Back Volumes Available:  
Volume I (5 issues)  
Volume II (4 issues)  
Volume III (4 issues)

Check enclosed  Please bill me  My P.O. No. is \_\_\_\_\_

I want information on ECEA and other CEC publications

Institution \_\_\_\_\_

Name \_\_\_\_\_

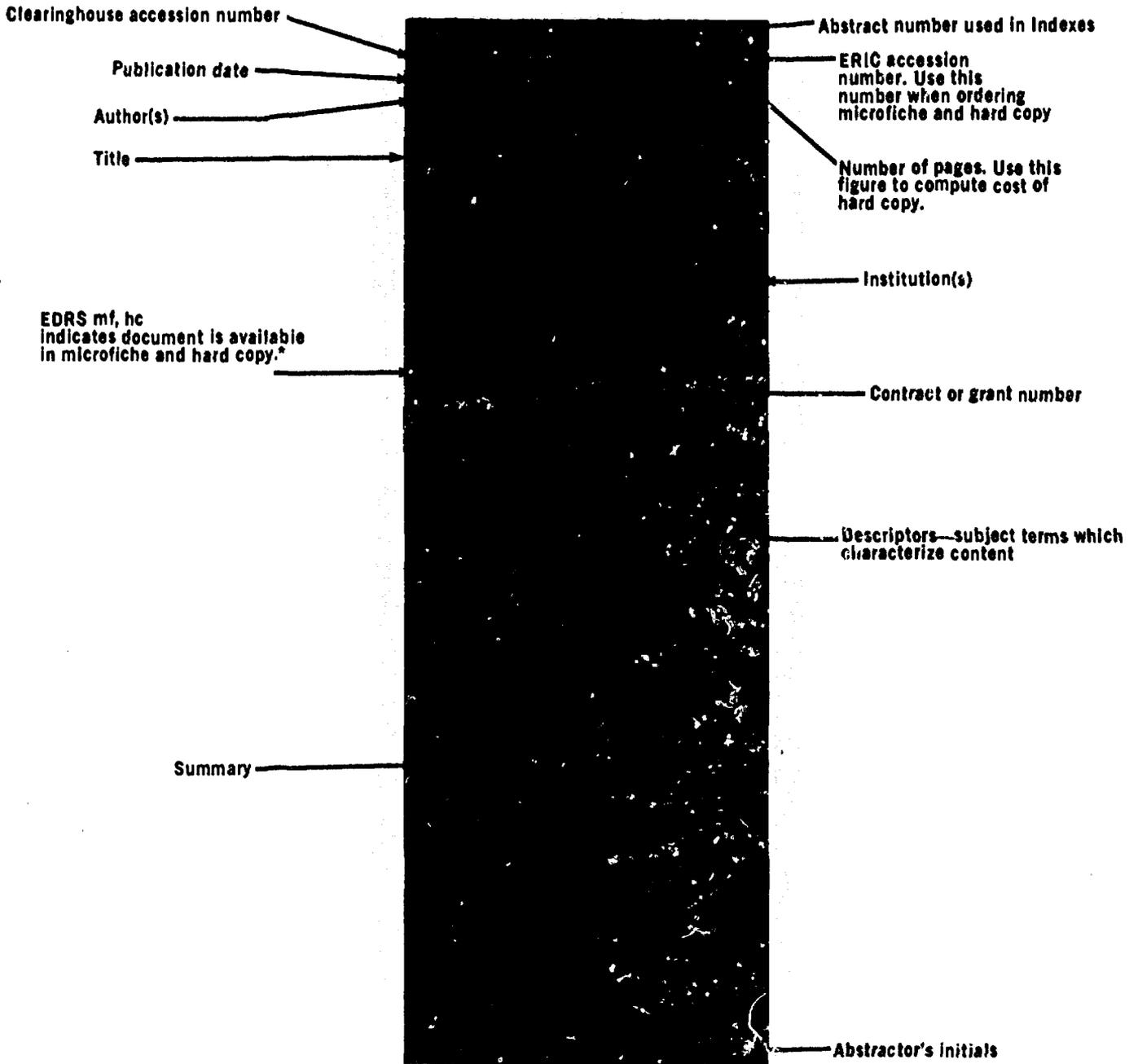
Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

# Sample Abstract Entry



\*NOTE: EDRS mf indicates microfiche reproduction only.

## INDEXING TERMS SEARCHED

Indexing terms used to retrieve information on *Identification and Intervention of Handicaps in Early Childhood* from the Center's computer file of abstracts are listed alphabetically below:

*Infancy*  
*Infant Behavior*  
*Infant Development Research*  
*Infantile Cerebral Paralysis*  
*Infants*  
*Premature Infants*

## JOURNALS USED

Abstracts of articles from the following periodicals appear in this bibliography:

*Academic Therapy*, 1539 Fourth Street, San Rafael, California 94901  
*American Annals of the Deaf*, 5034 Wisconsin Avenue, Washington, D.C. 20016  
*American Education*, U.S. Government Printing Office, Washington, D.C. 20014  
*American Journal of Mental Deficiency*, 49 Sheridan Avenue, Albany, New York 12210  
*American Journal of Occupational Therapy*, 6000 Executive Boulevard, Suite 200, Rockville, Maryland 20852  
*American Journal of Orthopsychology*, 1790 Broadway, New York, New York 10019  
*Child Development*, University of Chicago Press, 5801 Ellis Avenue, Chicago, Illinois 60637  
*Child Psychiatry and Human Development*, 2852 Broadway & Morningside Streets, New York, New York 10025  
*Child Welfare*, Child Welfare League of America, Inc., 67 Irving Place, New York, New York 10003  
*Children Today*, Superintendent of Documents, G.P.O., Washington, D.C. 20402  
*Children's House*, P.O. Box 111, Caldwell, New Jersey 07006  
*Educate*, 33 West 60th Street, New York, New York 10023  
*Education of the Visually Handicapped*, 1604 Spruce Street, Philadelphia, Pennsylvania 19103  
*Educational Horizons*, 2000 East 8th Street, Bloomington, Indiana 47401  
*Exceptional Children*, 1920 Association Drive, Reston, Virginia 22091  
*Hearing and Speech News*, 814 Thayer Avenue, Silver Spring, Maryland 20910  
*Inter-Clinic Information Bulletin*, 317 E. 34th Street, New York, New York 10016  
*Journal of the American Optometric Association*, 7000 Chippewa Street, St. Louis, Missouri 63119  
*Journal of Auditory Research*, Box N, Groton, Connecticut 06340  
*Journal of Autism and Childhood Schizophrenia*, Script Publishing Co., 1511 K Street, N.W., Washington, D.C. 20005  
*Journal of Child Psychology and Psychiatry*, Maxwell House, Fairview Park, Elmsford, New York 10523  
*Journal of Nervous and Mental Disease*, 428 E. Preston Street, Baltimore, Maryland 21202  
*Journal of Psychology*, 2 Commercial Street, Provincetown, Massachusetts 02657  
*Journal of Speech and Hearing Disorders*, 9030 Old Georgetown Road, Washington, D.C. 20014  
*Journal of Speech and Hearing Research*, 9030 Old Georgetown Road, Washington, D.C. 20014  
*Mental Retardation*, 49 Sheridan Avenue, Albany, New York 12210  
*Merrill-Palmer Quarterly*, 71 East Ferry Avenue, Detroit, Michigan 48202  
*New Outlook for the Blind*, American Foundation for the Blind, 15 W. 16th Street, New York, New York 10011  
*Pediatrics*, American Academy of Pediatrics, Evanston, Illinois 60204  
*Psychology in the Schools*, 4 Conant Square, Brandon, Vermont 05733  
*Rehabilitation Literature*, 2023 West Ogden Avenue, Chicago, Illinois 60612  
*Rehabilitation Teacher*, National Braille Press, Inc., 88 St. Stephen Street, Boston, Massachusetts 02115  
*Sight Saving Review*, 79 Madison Avenue, New York, New York 10016  
*Slow-Learning Child*, Librarian Serials Section Main Library, U. of Queensland, St. Lucia, Brisbane, AUSTRALIA 4067  
*Volta Review*, 1537 35th Street, N.W., Washington, D.C. 20007

The abstracts in this bibliography were selected from *Exceptional Child Education Abstracts*, Volumes I-V, No. 2.

# Preschool Programs for the Education of the Handicapped

## Summary Report

Increasingly in recent years, the states are altering their special education laws to, in some states, require that education be provided to preschool children -- while in others, to encourage the development of such programs. In the process of creating these programs, five legal mechanisms are used. These are summarized below and followed by a listing of the states which fall into each category. Some states use more than one mechanism.

1. Preschool education must be provided to handicapped children if it is provided to other children in the public schools - Pennsylvania, Massachusetts.
2. Preschool education program *must* be provided to all handicapped children - Illinois, Oklahoma. Preschool education must be provided if it is included in the state plan - Texas, Kentucky.
3. Preschool education programs must be provided if pre-established conditions are met:
  - a. Programs must be provided if they are critical to a child's achieving later educational success - Connecticut, Maryland.
  - b. Programs must be provided if a petition is presented to the local district on behalf of five or more handicapped children. If there are ten or more such children, a petition is not needed and programs must be provided - Louisiana, Montana. (In Montana, the petition can be presented on behalf of four children and the children can be counted from birth on.)
  - c. Programs must be provided "wherever practicable" from age 4 - Delaware.
4. Preschool programs *may* be provided strictly as a local option with no state aid to children below age 5 - Utah.
5. Preschool programs may be provided for all handicapped children beginning:
  - a. At age 3 - California, Florida, Georgia, West Virginia, Rhode Island, and Indiana.
  - b. At age 3 for specified disabilities - Colorado (physically handicapped), Nevada (physically handicapped, mentally retarded), Ohio (deaf, blind).
  - c. At age 4 - Tennessee
  - d. At age 4 for specific learning disabilities - Minnesota (deaf, blind, physically handicapped, speech defective), New Hampshire (deaf).
  - e. At age 2 - Oklahoma (hearing handicapped, visually handicapped).
  - f. At birth - Vermont, Virginia, Washington, Wisconsin, South Dakota, Nebraska, New Jersey, Idaho, Iowa, Kansas, North Carolina, Oregon, Mississippi, and Michigan.
  - g. At birth for specific disabilities - Nevada (aurally handicapped), Maine (speech handicapped).
6. The remaining 12 states have no provisions for pre-school education for handicapped children: Alabama, Arizona, Arkansas, District of Columbia, Hawaii, Missouri, New Mexico, New York, North Dakota, South Carolina, and Wyoming.

Prepared by:

State-Federal Information Clearinghouse  
for Exceptional Children

January 1974

# ABSTRACTS

## ABSTRACT 10126

EC 01 0126 ED 016 341  
Publ. Date Jan 67 25p.

Molitor, M. Graham  
**A Curriculum for the Preschool Child.**

Southern Wisconsin Colony Sch. Dept.,  
Union Grove  
Wisconsin Dept. Pub. Welfare, Madison,  
Div. Ment. Hygiene  
EDRS mf, hc

Descriptors: exceptional child education; curriculum; mentally handicapped; preschool children; educable mentally handicapped; trainable mentally handicapped; institutional schools; institutionalized (persons); preschool curriculum; preschool programs; curriculum guides; residential schools; residential programs; Southern Wisconsin Colony and Training School

Planned to provide stimulation and experiences similar to those which a mother might provide at home, the preschool program of the Southern Wisconsin Colony and Training School serves the mentally handicapped. Experiences provide opportunities for indulgence of curiosity and imagination, comfortable competition with self and others, recognition and attention as an individual, participation to foster growth in individual capacities, and social participation. Experiences are outlined in four major areas--(1) self care, (2) body usage, (3) basic knowledge, and (4) self expression. Teaching suggestions are presented for each area. The bibliography lists 10 items. (DF)

## ABSTRACT 10132

EC 01 0132 ED 013 118  
Publ. Date Mar 67 59p.  
Beery, Keith E.

**Preschool Prediction and Prevention of Learning Disabilities.**

San Rafael City Schools, California  
Marin Co. Supt. Sch. Off., San Rafael,  
California

OEG-4-7-008742-2031, OEG-4-7-068743-1507

EDRS mf, hc

Descriptors: exceptional child research; learning disabilities; tests; identification; preschool children; children; prediction; predictive measurement; prevention; auditory tests; task performance; prognostic tests; psychological tests; screening tests; longitudinal studies; language tests; psycholinguistics; Developmental Test of Visual Motor Integration; Illinois Test of Psycholinguistic Abilities; ITPA

The initial screening phase of a 4-year longitudinal study designed to predict and prevent learning disabilities in a general school population is reported. Children (aged 3 1/2 to 5 1/2) of an entire school district were invited to the schools to be screened for evidence of potential learning disability. These children were to be rescreened annually and for academic achievement at the

conclusion of kindergarten and of first and second grade. Screening involved audiometric, visual, and psychological testing. Teachers administered the following tests to all children--Illinois Test of Psycholinguistic Abilities (ITPA), Developmental Test of Visual-Motor Integration (VMI), Kephart Perceptual-Motor Rating Scale, Peabody Picture Vocabulary Test, and Teacher's Behavioral Rating Scale. The 365 children in the experimental and control groups were assigned by matching sex, chronological age, mean ITPA language age, prekindergarten experience, and profile similarity. Results from the experimental children were forwarded to their future schools and physicians with suggestions for preventative guidance. It was found that boys did as well as girls in both the younger and older groups, which appears to be contrary to the more usual finding that girls are more ready than boys as they approach kindergarten age. Enrollment bias seems to be evidenced in the comparison between the results of older and younger children, as the younger children performed at a higher level, relative to their chronological ages, than did the older children. The test patterns revealed nearly twice as many visual-motor deficits as there were auditory-vocal deficits and almost twice as many association, encoding, and sequencing deficits as there were decoding (reception of information) deficits in both experimental and control groups. Figures and tables present statistical information. Thirty-six references are listed. (TM)

## ABSTRACT 11333

EC 01 1333 ED 020 602  
Publ. Date 19 May 67 37p.

**Early Identification and Mitigation of Learning Problems, Annual Symposium (3rd, New Brunswick, New Jersey, May 19, 1967).**

Rutgers, the State University, New Brunswick, New Jersey

EDRS mf, hc

Descriptors: exceptional child education; learning disabilities; identification; identification tests; educational theories; educational objectives; diagnostic teaching; educational testing; individual differences; immaturity; minimally brain injured; preschool children

Two speeches consider learning disabilities. In the first, a discussion of the early identification and management of neurophrenic children, Edgar A. Doll explains his concept of neurophrenia and the importance of early identification and discusses the use of the Vineland Social Maturity Scale and Pre-School and Attainment Record in clinical assessment. Guidelines for the growth and development of these children are outlined, a case study of a neurophrenic child is presented, and 20 references are listed. In a second speech on learning disorders and the preschool child, Sylvia O. Ri-

chardson discusses identifying characteristics and medical histories usually found among children with learning disabilities. Emphasis is placed upon early identification (at 5 years or younger) and appropriate educational methods recognizing individual differences. An unpublished study is reviewed in support of the theory that behavioral descriptions of immaturity are representative of objective measurable differences along various dimensions (physical, social, emotional). (RS)

## ABSTRACT 11553

EC 01 1553 ED N.A.  
Publ. Date Jan 67 10p.

Vernon, McCay

**Prematurity and Deafness: The Magnitude and Nature of the Problem Among Deaf Children.**

EDRS not available

Exceptional Children; V33 N5 P289-98  
Jan 1967

Descriptors: exceptional child research; aurally handicapped; hearing loss; premature infants; hard of hearing; deaf; multiply handicapped; etiology; intelligence; academic achievement; minimally brain injured; neurological defects; audiometric tests; emotional adjustment; Bender Gestalt Test; Diagnostic Screening Form for Detection of Neurological Impairment in Deaf Children

To investigate the relationship between prematurity and deafness, 1,468 deaf or profoundly hard of hearing children (ages 3 to 21 years) were studied. Of these, 257 children had a birth weight of 5 pounds, 8 ounces, or less, and prematurity was the only known cause in 175 of the 257 cases. As birth weight dropped, IQ diminished appreciably (below 3 pounds, 4 ounces, the mean IQ was below 80). Data based on the Stanford Achievement Test scores, school records, and teacher evaluations indicated that these children achieved at half the rate of normally hearing children and two thirds the rate of deaf children of deaf parents. One out of every five of the 175 was essentially unable to be educated. Psychological evaluations, teacher ratings, and school records revealed that one-fourth to one-third of the subjects had severe emotional problems; the Bender Gestalt Test, the screening for the detection of neurological impairment, and audiograms indicated the presence of brain damage. The lower the birth weight, the greater the incidence of multiple handicaps (over two-thirds of premature deaf children were multiply handicapped) and the more serious the handicap. (AJ)

## ABSTRACT 20310

EC 02 0310 ED N.A.  
Publ. Date Mar 68 5p.

Downs, Marion P.

**Identification and Training of the Deaf Child--Birth to One Year.**

EDRS not available

Volta Review; V70 N3 P154-8 Mar 1968

Descriptors: exceptional child education; aurally handicapped; identification; aural stimuli; language development; infancy

Although programs of early detection of infant hearing loss are still in experimental stages, certain benefits have been noted. In addition to the welfare of the individual child, there is knowledge gained from studying pre-linguistic activities of the deaf infant, and from laboratory findings of temporal bone pathology. Clinicians have noted that infants with severe hearing losses can become hearing-oriented when hearing aids are fitted and training is begun before 2 years of age. It is felt that intonation and auditory feedback are being developed during the babbling period (up to about 7 months). There is no distinction between babbling of deaf and hearing infants up to this age, but differences appear shortly thereafter. Amplification for the deaf child should begin early to counteract these deviations from normal. In both deaf and hearing children a quiescent period follows and lasts until about 1 year of age. During this period, parents should be instructed to heighten auditory and verbal stimulation for the deaf child who wears a hearing aid. Early testing programs should be utilized to prevent language handicapping. (JB)

**ABSTRACT 20722**

EC 02 0722 ED N.A.  
Publ. Date Jan 67 3p.  
Corrigan, Francis V. and Others  
**The Influence of Prematurity on School Performance.**  
EDRS not available  
American Journal of Mental Deficiency; V71 N4 P533-7 Jan 1967

Descriptors: exceptional child research; premature infants; academic achievement; mental development; academic performance

Current grade level achievements and overall academic average of 200 prematurely born (study group) and 200 full term children (control group) born in 1954 were compared. The data obtained indicated that two of every three children of the control group were in an average (grade 5) to above average grade level for their age but, less than six of every 10 children in the study group were reported to be in an average grade level. Tables also point out the disproportionality of children in special classes; 5% of the study group were in special classes, but only .5% of the control group were in similar classes. Statistically significant responses were not obtained, however, the trend of general academic superiority of the control group was illustrated. A special study group was also included to measure these same variables in children whose birth weights were 1500 grams or less. (WW)

**ABSTRACT 20821**

EC 02 0821 ED 032 687  
Publ. Date 68 329p.  
**Perspectives on Human Deprivation: Biological, Psychological, and Social.**  
National Institute of Child Health and

Human Development, Bethesda, Maryland;  
Public Health Service (DHEW), Washington, D. C.  
EDRS mf,hc

Descriptors: exceptional child research; disadvantaged youth; human development; environmental influences; research reviews (publications); personality development; cognitive development; language development; social development; social factors; behavior development; biological influences; maturation; motor development; emotional development; social structure; prenatal influences; infants; cultural disadvantage; psychological needs

The work of four task forces on human deprivation is reported. Aspects of deprivation treated include psychosocial deprivation and personality development; influences of biological, psychological, and social deprivations upon learning and performance; socialization and social structure; and biological substrates of development and behavior. For each aspect, research is reviewed and suggestions are made for future research. Also provided is a synthesis of a 2-day conference on research policy for psychosocial deprivation which concerned itself with the areas mentioned above. (JD)

**ABSTRACT 20852**

EC 02 0862 ED 028 559  
Publ. Date 66 18p.  
**Recommended Guidelines for PKU Programs.**  
Children's Bureau (DHEW), Washington, D. C.  
EDRS mf,hc

Descriptors: exceptional child services; special health problems; mentally handicapped; infancy; identification; clinical diagnosis; medical evaluation; medical treatment; screening tests; followup studies; dietetics; nutrition; medical services; psychological services; social services; family role; metabolism; Phenylketonuria; PKU

A discussion of screening tests for phenylketonuria (PKU) recommends and provides some data on two tests, lists five disadvantages of urine tests, and discusses three new tests. Also considered are the role of the central laboratory facility and seven suggestions for screening different types of infants at different times. Treatment or followup programs are mentioned with the focus on confirmatory tests and eight references to articles on procedures. Services included as beneficial to a comprehensive multidisciplinary program for longterm followup and care are pediatric, nutritional, nursing, social, psychological, and biochemical laboratory and consultation services. Other considerations discussed are the family of the PKU child, the clinical management of the patients, and the frequent monitoring of blood levels. (I.F.)

**ABSTRACT 21046**

EC 02 1046 ED N.A.  
Publ. Date Dec 69 16p.  
Hoversten, Gloria H.; Moncur, John P.  
**Stimuli and Intensity Factors in Testing Infants.**

EDRS not available  
Journal of Speech and Hearing Research; V12 N4 P687-702 Dec 1969  
Paper Presented at National Convention of the American Speech and Hearing Association (42nd, Washington, D. C., Nov. 19-22, 1966).

Descriptors: exceptional child research; aurally handicapped; evaluation techniques; infants; auditory tests; screening tests; electronic equipment; stimuli; aural stimuli; testing

To acquire auditory normative data for infants, five types of sound stimuli were administered randomly at each of four hearing levels. Subjects were 21 three-month-old and 22 eight-month-old infants; all were screened to eliminate high risk babies and were considered to be developmentally normal. The five test stimuli (white noise, pulsed; 500 Hz, pulsed; 4000Hz, pulsed; voice; and music) were presented in a sound-field through equidistant loudspeakers via tape. Behavioral changes were recorded by two observers. As predicted, percentage of response increased with increased hearing level. In order to reach the 50% point of response, hearing levels varying from 23 dB (voice stimulus) to 72 dB (4000 Hz stimulus) above normal adult threshold were necessary. Voice generally resulted in the largest percentage of responses for both age groups at each hearing level. The 3-month-old infants generally gave fewer responses than the 8-month-old infants at comparable hearing levels. (Author)

**ABSTRACT 21214**

EC 02 1214 ED N.A.  
Publ. Date Dec 69 4p.  
Read, Merrill S.  
**Malnutrition and Learning.**  
American Education; V5 N10 P11-4 Dec 1969  
EDRS not available

Descriptors: exceptional child education; nutrition; disadvantaged youth; intellectual development; national surveys; research reviews (publications); infancy; physical development; intelligence differences; environmental influences; eating habits; health; socioeconomic influences; medical research; learning characteristics; learning processes

Evidence is collected to show the relationship between nutrition and intellectual behavior, and physical growth. A report of the National Nutrition Survey begun in 1968 confirms the existence of nutritional problems among the poor in the United States. Other surveys and numerous reports of research conducted in the United States and South America delve into the major factors contributing to poor nourishment and the resulting influence on intellectual potential. The nutritional status during the first year of life is seen to highly influence learning experiences and possibly affect subsequent intellectual development. The problem of determining whether malnutrition, disease, or the social environmental factors of poverty have the greatest effect on mental development is examined. It is concluded that foremost

among the problems requiring resolution is the development of a battery of tests that can measure the behavioral and social variables involved and that are applicable to varied social groups. (WW)

#### ABSTRACT 21528

EC 02 1528 ED N.A.  
Publ. Date Nov 69 5p.  
Mednick, Miriam F.  
**Prevention of Mental Retardation: Social Work in Maternal and Infant Care Programs.**  
EDRS not available  
Child Welfare; V48 N9 P552-6 Nov 1969  
Paper Presented at the Annual Meeting of the American Association for Mental Deficiency, 1968.

Descriptors: exceptional child services; mentally handicapped; premature infants; pregnancy; social services; prevention; infancy; child care workers; health programs; socioeconomic influences; mother attitudes; medical services; disadvantaged environment; community programs; social work

Social casework techniques aimed at preventing mental retardation connected with premature birth and sociocultural deprivation are described. The dangers of prematurity and the conditions which lead to it are pointed out. Noting that identification in time is a preventive measure, four basic elements of an effective first interview are suggested as follows: self identification as a qualified professional person, evaluation of the reality factors in the patient's plans, investigation of plans for care of older children during the mother's delivery, and exploration of the emotional problems related to pregnancy. Early identification of at-risk problems and medical care during the infant's first year as well as mention of the Philadelphia At-Risk-Infant Registry and Followup Program are included. (WW)

#### ABSTRACT 21781

EC 02 1781 ED 034 907  
Publ. Date Dec 69 164p.  
**Exceptional Children Conference Papers: Early Childhood Education--An Overview.**  
Council for Exceptional Children, Reston, Virginia  
EDRS mf.hc  
Papers Presented at the Special Conference on Early Childhood Education, New Orleans, Louisiana, December 10-13, 1969.

Descriptors: exceptional child education; early childhood education; educational philosophy; early experience; perception; parent role; identification; preschool education; cognitive development; psychological characteristics; educational objectives; infants; environmental influences; Head Start

Eight conference papers on early childhood education give a philosophical overview to the instruction of young children. Contents include a presentation by Edward W. Martin on a new outlook for early education of handicapped children and a report by Mrs. Betty Dubnoff on the case for early identification and inter-

vention. Other presentations include a discussion on the rationale for early identification by Bettye M. Caldwell, the rationale and curriculum framework for an infant education system by John Meier and Leslie Segler, and a review of various studies of Head Start Programs through a historical perspective by James S. Payne, Walter J. Cengelka, and John O. Cooper. The utilization of Piaget's theory of cognitive development is treated by Mortimer Garrison, Jr. Information is given on thoughts and concerns on the basic psychological needs in infancy and early childhood by Povl. W. Toussieng, and Marshall D. Schechter presents a conceptual model for understanding and dealing with perceptual problems. (WW)

#### ABSTRACT 21784

EC 02 1784 ED 034 910  
Publ. Date Dec 69 121p.  
**Exceptional Children Conference Papers: Parent Participation in Early Childhood Education.**  
Council for Exceptional Children, Reston, Virginia  
EDRS mf.hc  
Papers Presented at the Special Conference on Early Childhood Education, New Orleans, Louisiana, Dec. 10-13, 1969.

Descriptors: exceptional child education; early childhood education; parent participation; parent counseling; behavior change; identification; parent education; family involvement; infants; preschool children; child rearing; parent role; parent attitudes; conference reports

Eight discussions of parent participation cover the following areas: dimensions of family involvement in early childhood education; the relationship of the parent, child, and professional staff; parent reactions to the identification of handicaps and their involvement in early education; parent participation in a program of behavior modification for physically handicapped children; the use of parent meetings and parent educators who visit homes to assist parents in helping children to learn; a program for training mothers to instruct their infants at home; a sociological perspective on counseling parents of handicapped children; and early diagnosis of deafness and parent counseling. (RJ)

#### ABSTRACT 21978

EC 02 1978 ED 034 909  
Publ. Date Dec 69 175p.  
**Exceptional Children Conference Papers: Curriculum, Methods, and Materials in Early Childhood Education Programs.**  
Council for Exceptional Children, Reston, Virginia  
EDRS mf.hc  
Papers Presented at the Special Conference on Early Childhood Education, New Orleans, Louisiana, Dec. 10-13, 1969.

Descriptors: exceptional child education; early childhood education; curriculum; educational programs; early experience; visually handicapped; speech handi-

capped; speech therapy; cerebral palsy; sequential approach; preschool children; curriculum development; classroom observation techniques; student behavior; student evaluation; parent participation; cleft palate; conference reports

Thirteen papers on early childhood education are presented on the following topics: stimulation and cognitive development of infants and younger children, curriculum development for young handicapped children, a rationale for sequencing instructional activities for preschool handicapped children, observation of educational activities and children's behavior in a nursery school, materials and procedures for assessing cognitive development in preschool children, a preschool program for young cerebral palsied children, the British Infant School Program, the program of the Human Development Training Institute (San Diego), two papers on the young visually impaired dealing with age ranges from birth to 3 years, and 3 to 6 years, and a service for parents and visually handicapped preschoolers in a metropolitan area. Also included are discussions of a demonstration project of speech therapy for preschoolers with cleft palate and new techniques in speech therapy for young children. (RJ)

#### ABSTRACT 22238

EC 02 2238 ED N.A.  
Publ. Date Jan 70 12p.  
Eaves, Linda C. and Others  
**Developmental and Psychological Test Scores in Children of Low Birth Weight.**  
EDRS not available  
Pediatrics; V45 N1 Part 1 P9-20 Jan 1970

Descriptors: exceptional child research; infants; body weight; premature infants; intellectual development; sex differences; socioeconomic status; testing

To investigate neurological and ophthalmic disorders in children of low birth weight (LBW), 351 LBW and 207 control children were tested. Controls performed consistently better than LBW children on infant scales up to 18 months. In three out of five social classes (including the two lowest) the full birth weight children were significantly superior. For subjects who weighed 4 1/2 lbs. or less at birth, the effect of socioeconomic status on IQ only became definite at 2 1/2 to 4 years. No significant correlation between isolated total Griffiths scores at 6 months and Stanford-Binet scores at 4 years was found, even at the extremes of intelligence. (RJ)

#### ABSTRACT 22722

EC 02 2722 ED 039 664  
Publ. Date Jan 70 97p.  
McConnell, Freeman; Horton, Kathryn B.  
**A Home Teaching Program for Parents of Very Young Deaf Children. Final Report.**  
Vanderbilt University, Nashville, Tennessee, School Of Medicine  
Office of Education (DHEW), Washington, D. C., Bureau of Research

EDRS mf,hc  
OEG-32-52-0450-6007  
BR-6-1178

Descriptors: exceptional child research; aurally handicapped; preschool programs; parent participation; auditory training; auditory evaluation; hearing aids; parent education; deaf; language development; hearing loss; parent attitudes; infancy

A demonstration home provided a parent oriented program and audiologic management for 94 deaf preschoolers (mean age 2 years 4 months). Each child underwent a trial period with different hearing aids before permanent recommendation was made. Parents were present at these clinic sessions; they also received instruction in how to encourage auditory behavior, orient the child to sound, and talk to the child. Findings over 3 years indicated that language age growth accelerated while performance age and nonverbal mental age remained linear. Also, ability to use amplification from the wearable hearing aid improved, with an improved mean threshold response to spoken voice of more than 20 dB. The parents mobilized themselves into pressure groups resulting in legislation for education of deaf preschoolers. Community approval of the project resulted in continuance of its services after federal funding ceased. (Author/JD)

**ABSTRACT 22738**

EC 02 2738 ED 039 680  
Publ. Date Feb 70 66p.  
Luterman, David M.

**A Parent-Centered Nursery Program for Preschool Deaf Children. Final Report.**

Emerson College. Boston, Massachusetts

Office of Education (DHEW), Washington, D. C., Bureau of Research

EDRS mf,hc  
OEG-1-6-062069-1591  
BR-6-2069

Descriptors: exceptional child research; aurally handicapped; preschool programs; parent participation; parent education; academic achievement; infancy; nursery schools; parent attitudes; language development

A nursery program for 48 deaf children aged from 1 1/2 to 3 years required active participation of the parents. Parents selected the program, tutored their and other children, observed behavior in the nursery which included hearing children, and participated in discussion of family problems. In follow up, about three-fourths of the children and of their parents were rated above average by classroom teachers of the deaf. However, these results may have been due to the passive admission procedures. Parents who were not middle class seeking or who had severe personal problems did not appear to benefit. Those who were became active lobbyists for deaf children in the state. (Author/JD)

**ABSTRACT 22998**

EC 02 2998 ED N.A.  
Publ. Date Jul 70 3p.  
Erickson, Marilyn T. and Others

**Relationships among Scores on Infant Tests for Children with Developmental Problems.**

EDRS not available  
American Journal of Mental Deficiency; V75 N1 P102-4 Jul 1970

Descriptors: exceptional child research; individual development; learning difficulties; infants; testing; educational diagnosis

Thirty preschool children referred for diagnosis of developmental problems were administered the Bayley Scale of Mental Development, the Cattell Infant Intelligence Scale, and the Vineland Social Maturity Scale. Results indicated that the scores on the two infant tests were so similar and highly correlated that they might be considered interchangeable in diagnostic settings. Clinically, the Bayley presented advantages of a greater variety of items and separate mental and motor scales, while the Cattell took less time to administer and could be combined with the Stanford-Binet. Although significantly correlated with the two infant tests, the Vineland consistently yielded higher scores. (Author)

**ABSTRACT 23120**

EC 02 3120 ED N.A.  
Publ. Date 70 6p.  
Robb, Richard M.

**Observations on a Child's Eyes.**

EDRS not available  
Sight Saving Review; V40 N2 P67-72  
Sum 1970

Descriptors: eyes; vision; child development; ophthalmology; infancy; visual acuity; heterotropia; medical evaluation; vision tests; identification

Observations on aspects of normal and abnormal development of children's eyes are presented as a brief guide. The early appearance and development of the eye is discussed, including ophthalmologic aspects of the newborn examination. Common childhood eye problems are described, including inflammations, ocular misalignment (strabismus), and amblyopia. Early testing for visual acuity is recommended (between three and four years of age). (KW)

**ABSTRACT 23164**

EC 02 3164 ED 039 385  
Publ. Date Apr 70 123p.

**Early Childhood. Papers Presented at the Annual International Convention of the Council for Exceptional Children (48th, Chicago, Illinois, April 19-25, 1970).**

Council for Exceptional Children, Reston, Virginia

EDRS mf,hc

Descriptors: exceptional child education; handicapped children; early childhood; educational diagnosis; educational television; instructional materials; identification; multiply handicapped; remedial instruction; parent education; preschool programs; reading skills; elementary grades; conference reports

The report includes papers presented on early childhood at the 1970 convention of the Council for Exceptional Children.

Discussions are concerned with the effectiveness of teaching selected reading skills to children 2 to 4 years by television by Barbara J. Dunn, educational materials as an aid in evaluation of preschool multihandicapped children by Ronnie Gordon, and the use of instructional materials with multihandicapped preschool children by Carol Halliday. Additional papers present a progress report of a project in early identification and remediation of learning problems in elementary school children attempting to increase classroom success by James Barnard, and a panel of research findings with programs for preschool children and parents by Merle B. Karnes. (JM)

**ABSTRACT 23169**

EC 02 3169 ED N.A.  
Publ. Date 70 11p.

**McNeil, Thomas F. and Others  
Pregnancy and Birth Complications in the Births of Seriously, Moderately, and Mildly Behaviorally Disturbed Children.**

Vanderbilt University School of Medicine, Nashville, Tennessee  
George Peabody College, Nashville  
Vanderbilt University, Nashville, Psychiatry Department

EDRS not available  
Journal of Nervous and Mental Disease; V151 N1 P24-34 Jul 1970

Descriptors: exceptional child research; emotionally disturbed; behavior problems; prenatal influences; premature infants; infancy; birth complications

To determine whether behaviorally disturbed children have a greater frequency of pregnancy and birth complications (PBCs) in their births than do normal children, the records of 61 children being treated for psychologically-related behavioral disturbances and 305 control children born in the same hospitals were examined. Subjects were matched for sex, race, social class, and maternal age at birth. More members of the disturbed group had a history of PBCs, and there were a greater number of PBCs per subject. Especially prevalent in their histories were problems concerning birth, prematurity, and weak or delayed respiration. Frequency of PBCs was slightly higher for the seriously disturbed children than for the moderately or mildly disturbed children. (KW)

**ABSTRACT 23268**

EC 02 3268 ED N.A.  
Publ. Date 70 123p.

**Reger, Roger, Ed.  
Preschool Programming of Children with Disabilities.**

EDRS not available  
Charles C Thomas, 301-327 East Lawrence Avenue, Springfield, Illinois 62703 (\$7.50).

Descriptors: exceptional child education; handicapped children; preschool education; program planning; summer programs; identification; preschool evaluation; language development; perceptual motor coordination; instructional materials; visually handicapped; aurally handicapped; parents

Intended for those interested in educational programing for preschool children, particularly special education for handicapped children, the book contains chapters from several contributors. An introduction is written by Roger Reger. Lois Moulin and Sandra Perley describe a preschool summer program. Timothy Rochford discusses identification of preschool children with learning problems. The topic of evaluating children is considered by Marian Koppmann. Language development of the preschool child is treated by Wendy Schroeder. Dan Teach discusses perceptual motor development in the young child in three chapters. Materials for the preschooler are considered by Suzanne Roberts, and Nancy Detrick discusses a teacher's reference to preschool materials. Jeanette Burke discusses visually handicapped children, and Beth Chapman Ringquist treats the child with hearing difficulties. Mary Lang and Joan Cobb present a parent's view of preschool programs. (MS)

**ABSTRACT 23270**

EC 02 3270 ED N.A.  
 Publ. Date Nov 66 5p.  
 Matheny, Adam P., Jr.  
**Improving Diagnostic Forecasts Made on a Developmental Scale.**  
 Johns Hopkins Medical School, Baltimore, Maryland. Department of Pediatrics  
 National Institute of Mental Health (DHEW), Bethesda, Maryland  
 EDRS not available  
 American Journal of Mental Deficiency; V71 N3 P371-5 Nov 1966

Descriptors: exceptional child research; mentally handicapped; intelligence tests; intelligence quotient; predictive measurement; predictive validity; preschool children; testing; clinical diagnosis; Cattell Scale; Stanford Binet Intelligence Test

A maximum achievement score (MAS) representing an IQ equivalent of the highest mental age level of success on the Cattell Scale was derived for three groups of mentally handicapped children: 12 children under one year of age, 15 children one to two years of age, and 24 children two to three years of age. The MAS and the developmental IQ were correlated with a Stanford-Binet IQ derived two to three years later. Both the MAS and IQ correlated plus .73 or higher with the later IQ (significant at less than the .01 level of confidence). The MAS did not improve upon the IQ for predicting the three groups' IQ. The use of the MAS did reduce the number of individuals who would be misclassified as normal or retarded by using an IQ score alone. Support for the use of an altitude type measure is advanced for improving the diagnostic classification of individual children. (Author)

**ABSTRACT 30270**

EC 03 0270 ED N.A.  
 Publ. Date Sep 70 4p.  
 Hoffman, D. T.  
**The Research on Early Childhood Learning.**  
 EDRS not available  
 Child Development; V53 N4 P30-3 Sep 1970

Descriptors: behavioral science research; early childhood education; early experience; preschool education; infant behavior; individual development; sensory deprivation

Specific research studies on early childhood education are noted with special emphasis made on the beneficial effects of sensory stimulation on an infant's normal behavioral development. The importance of the early environment on the child and the desired role of the child's physician are also discussed. (RD)

**ABSTRACT 30328**

EC 03 0328 ED N.A.  
 Publ. Date 68 125p.  
 Denhoff, Eric  
**Cerebral Palsy--The Preschool Years: Diagnosis, Treatment and Planning.**  
 EDRS not available  
 Charles C Thomas, Publisher, 301-327 East Lawrence Avenue, Springfield, Illinois 62703 (\$7.50).

Descriptors: cerebral palsy; preschool children; physically handicapped; neurological defects; minimally brain injured; mentally handicapped; medical evaluation; medical treatment; clinical diagnosis; physical therapy; drug therapy; motor development

Various syndromes of cerebral dysfunction are described including cerebral palsy, convulsive disorders, hyperkinetic impulse disorders, perceptual disorders, communication disorders, neurosensory disorders, mental retardation, and minimal brain dysfunction. Signs of high risk pregnancy and diagnosis in the delivery room, by the pediatrician, and in the laboratory are examined. The treatment of cerebral palsy is explored in the areas of orthopedic surgery, physical therapy, home development programs, drug therapy, and guides in planning a course of treatment with the parents. Appendixes provide additional data on classification, symptomatology, neurological examinations, congenital stigmata, and programs of developmental fine and gross motor skills for the preschool child. (RD)

**ABSTRACT 30347**

EC 03 0347 ED N.A.  
 Publ. Date 69 12p.  
 Redell, Rayford C.; Calvert, Donald R.  
**Factors In Screening Hearing of the Newborn.**  
 San Francisco Hearing and Speech Center, California  
 EDRS not available  
 Journal of Auditory Research; V9 N3 P278-89 1969

Descriptors: exceptional child research; aurally handicapped; hearing loss; screening tests; infancy; nursing

A pilot study was conducted on 3200 neonates to determine the efficacy of screening hearing of the newborn. Also evaluated through studies on 2180 additional neonates were the nurses' training to conduct the screening, and various commercial screening equipment. Studied were characteristics of the child's response to different types of

stimuli, sound pressure level, and behavioral condition of the baby when tested. It was learned that a nurse can be trained within two weeks, that a broad-band noise stimulus is more efficient than high-frequency warbled tones in evoking a response, and that screening was effective in identifying hearing loss in newborns in other than a high-risk category, as shown by followup studies. (KW)

**ABSTRACT 31069**

EC 03 1069 ED N.A.  
 Publ. Date 70 10p.  
 Broussard, Elsie R.; Hartner, Miriam Sergay Sturgeon  
**Maternal Perception of the Neonate as Related to Development.**  
 EDRS not available  
 Child Psychiatry and Human Development; VI N1 P16-25 Fall 1970

Descriptors: exceptional child research; emotionally disturbed; infancy; child development; mothers; parent attitudes; parent child relationship

One hundred and twenty, full-term, normal, first-born infants were categorized at one month of age into a high-risk or low-risk group for possible development of emotional and developmental deviations. The predictions were based on measurements of the mother's perception of her infant as compared to the average. At age 4 1/2 the children were evaluated by two child psychiatrists who had no knowledge of the children's predictive risk rating. A statistically significant association was found to be evident between prediction and outcome. The methodology and the implications of the findings were discussed. (Author)

**ABSTRACT 31441**

EC 03 1441 ED N.A.  
 Publ. Date Dec 70 10p.  
 Kang, Ellen Song and Others  
**Results of Treatment and Termination of the Diet in Phenylketonuria (PKU).**  
 EDRS not available  
 Pediatrics; V46 N6 P881-90 Dec 1970

Descriptors: exceptional child research; mentally handicapped; disease control; medical treatment; followup studies, dietetics; age differences; medical research; intelligence quotient; intellectual development; intelligence differences; infancy; phenylketonuria; phenylalanine diet (low); pediatrics

To obtain information on the value of low phenylalanine diet in treatment of phenylketonuria (PKU), the clinical course of 82 PKU patients were examined with special attention to level of intellectual functioning. It was found that the mean IQ of 27 PKU patients (mean age 3 years 10 months) treated before 3 weeks of age was comparable to that of their unaffected siblings. The mean IQ of 12 patients (mean age 5 years 6 months) treated between 3 and 6 weeks of age fell significantly below the mean IQ of unaffected siblings. Seventeen patients treated after 8 weeks of age did not differ in mean IQ from 11 untreated patients, although more than half of the late-treated group made significant gains

in IQ under treatment. Dietary therapy was discontinued in 26 cases. In 11 patients followed for 6 years and in 15 followed for 2 to 3 1/2 years, no deterioration was observed. Thirteen atypical PKUs showed normal intellectual development. An unexplained male predominance was found in this group. (Author/KW)

#### ABSTRACT 31543

EC 03 1543 ED N.A.  
Publ. Date 58 285p.  
Haeussermann, Else  
**Developmental Potential of Preschool Children.**  
EDRS not available  
Grune and Stratton, Inc., 757 Third Avenue, New York, New York 10017 (\$12.00).

Descriptors: exceptional child research; neurologically handicapped; learning disabilities; testing; test construction; intelligence tests; preschool tests

Designed for those psychologists, teachers and therapists who are concerned with the problem of evaluating the young handicapped child, the book offers what is felt to be a common sense approach to the educational evaluation of children between 2 and 6 years of age (or functioning on that level) who have handicaps in expression and other difficulties. The method presented is the result of experimental exploration rather than of statistical compilation. It consists of a structured interview, with suggestions concerning modification of items methodically, when the clinical evaluation calls for an exploration of deviations or deficits in functioning. The method proceeds from higher levels of adaptive organization to lower ones (abstract relations to concrete events). The text also embodies years of clinical experience gained in work with neurologically handicapped children. The problems of motivating such children, of managing hyperactivity, of controlling distractibility, and of compiling an accurate developmental history are incorporated into the evaluation procedure. (CD)

#### ABSTRACT 31576

EC 03 1576 ED N.A.  
Publ. Date 69 160p.  
Blatt, Burton; Garfunkel, Frank  
**The Educability of Intelligence: Preschool Intervention with Disadvantaged Children.**  
Boston University, Massachusetts, Headstart Evaluation and Research Center  
Office of Education (DHEW), Washington, D. C., Cooperative Research Program  
EDRS not available

Council for Exceptional Children, 1920 Association Dr. Reston, VA 22091 (\$5.75).

Descriptors: exceptional child research; mentally handicapped; disadvantaged youth; intervention; early childhood education; learning laboratories; preschool education; longitudinal studies; research methodology; literature reviews; prevention

The text presents a detailed account of a research project designed to investigate some of the ways in which intervention into the preschool lives of disadvantaged children might reduce the likelihood of mental retardation. The hypothesis was tested with a variety of measurements over a 3 year period and involved 74 children placed in a learning laboratory setting. It was concluded that the study did not demonstrate major differences on objective criteria between the experimental and nonexperimental groups. The inability of the program to produce measurable differences between the two groups led the researchers to suggest that it is not enough to provide preschool disadvantaged children with an enriched educational opportunity, and that the children were influenced more by home setting. The methodological problems encountered were enumerated and implications for further research cited. (CD)

#### ABSTRACT 31745

EC 03 1745 ED N.A.  
Publ. Date 71 122p.  
Hodges, Walter L., and Others  
**Diagnostic Teaching for Preschool Children.**  
State College of Arkansas, Conway  
Office of Education (DHEW), Washington, D. C.  
EDRS not available  
OEG-32-24-0210-1011  
Council for Exceptional Children, 1920 Association Dr. Reston, VA 22091 (\$4.95 HC, \$3.95 PB).

Descriptors: exceptional child research; disadvantaged youth; slow learners; intervention; preschool education; diagnostic teaching; kindergarten children; compensatory education

Designed to gather evidence on the effectiveness of an intensive year of specific curriculum intervention on a severely disadvantaged population, the study involved 10 groups of approximately 14 psychosocially disadvantaged 5-year-olds each, for whom Stanford-Binet IQ scores were 50-85. Over 3 years, three groups were exposed to a diagnostic experimental kindergarten curriculum, three groups to a nonexperimental kindergarten, and four remained at home with no formal program. The experimental program included an intensive, structured, cognitively oriented curriculum designed to remedy observed cognitive and affective deficits of individual children. Personal-social adjustment, language development, and motor development aspects of the program are detailed, including sample lessons. Results showed the experimental program more effective than the regular kindergarten in ameliorating effects of severe psychosocial deprivation among the subjects, with at-home residence least effective in improving intelligence level, language, personal-social adjustment, and motor skills. A 1 and 2-year followup of adjustment to regular school more often supported than rejected the hypothesis that experimentals would perform better than the regular group, which would do better than

the at-home groups, in all areas except motor skills. (KW)

#### ABSTRACT 31790

EC 03 1790 ED N.A.  
Publ. Date Feb 71 16p.  
Goldstein, Robert; Tait, Charles  
**Critique of Neonatal Hearing Evaluation.**  
EDRS not available  
Journal of Speech and Hearing Disorders; V36 N1 P3-18 Feb 1971

Descriptors: exceptional child services; aurally handicapped; screening tests; hearing loss; infancy; audiometric tests; identification

A commonly employed procedure for routine neonatal hearing screening is analyzed in terms of its rationale, method, and effectiveness. The procedure does not seem to accomplish its objectives adequately and actually creates some problems of its own. A particular weakness of the procedure is shown to be failure to screen many of the infants who were the main impetus for mass neonatal screening programs--children with deteriorating hearing, and those with mild-to-moderate hearing impairments present at birth. An alternative approach is offered which stresses more careful and objective evaluation of a limited number of children selected on the basis of a high-risk register. An economical and easily learned procedure is suggested to accomplish the evaluation. Stress is also placed on follow-up evaluations in well-baby clinics, in pediatricians' offices, and through mobile hearing testing units. (Author)

#### ABSTRACT 31879

EC 03 1879 ED N.A.  
Publ. Date Mar 71 7p.  
Husted, J., and Others  
**The Psychological Evaluation of Profoundly Retarded Children with the Use of Concrete Reinforcers.**  
EDRS not available  
Journal of Psychology; V77 N2 P173-9 Mar 1971

Descriptors: exceptional child research; mentally handicapped; custodial mentally handicapped; intelligence tests; infant behavior; reinforcers; Cattell Infant Intelligence Scale

To investigate the hypothesis that the lack of predictive validity in infant intelligence tests is due in part to the tasks not being sufficient to sustain the child's interest or motivation in the test, 40 custodial mentally handicapped were tested with one of two types of the Cattell Infant Intelligence Scale. Twenty two of the children received candy as a concrete reinforcer in place of the regular test material. It was noted that the children who received the modified Cattell scored significantly higher in both mental age and IQ. It was the opinion of the investigators that the influence of the candy was to increase motivation, consistency of response, and to give the tester a clearer picture of the cognitive structure of the child being evaluated. (CD)

**ABSTRACT 32135**

EC 03 2135 ED N.A.  
 Publ. Date Apr 71 3p.  
 Parsons, Michael  
**The New Zealand Approach to Screening Babies for Deafness.**  
 EDRS not available  
 Volta Review; V73 N4 P233-5 Apr 1971

Descriptors: exceptional child services; aurally handicapped; screening tests; early childhood; preschool children; home visits; referral; identification; New Zealand

The New Zealand approach to the testing and screening of infants for detecting deafness is described. The Plunket Society, a community service organization, provides health promotion and supervision for preschool children on a local level. Services begin with home visits until the child is old enough (3 months) to be brought in for clinic services. The Plunket nurses are trained to administer screening distraction tests of hearing and make referrals to the family doctor. An advisor is notified, when necessary, to administer a diagnostic test of hearing, fit an appropriate hearing aid if needed, and begin the parent guidance program. The author stresses the fact that the service is free to all parents of deaf children. (CD)

**ABSTRACT 32199**

EC 03 2199 ED N.A.  
 Publ. Date 68 156p.  
 Painter, Genevieve  
**Infant Education. Dimensions In Early Learning Series.**  
 EDRS not available  
 Dimensions Publishing Company, Box 4221, San Raphael, California 94903.

Descriptors: exceptional child research; disadvantaged youth; intervention; early childhood education; infancy; cognitive development; language development; culturally disadvantaged; teaching methods

The study of early environmental intervention reported was the first phase of a longitudinal study, and involved 8-month to 2-year-old culturally disadvantaged children. Ten such children in the experimental group were given a structured educational program in the home which emphasized language and cognitive development. Tutors conducted the program for 1 hour daily, 5 days per week, for 1 year. Ten matched control children were not given the structured program but were allowed to progress normally in their own environments. Year-end testing showed the experimental group significantly higher in overall IQ and in areas of language and conceptual growth. A review of research studies which influenced the rationale for the educational activities is presented to provide a general background of factors related to early cultural deprivation. The actual teaching techniques used in the program are given in detail in the three major areas of language training, conceptual training, and sensory-motor training. (KW)

**ABSTRACT 32233**

EC 03 2233 ED 049 595  
 Publ. Date Jan 71 170p.

Sonstegard, Manford A.; Tseng, Meng-Shu  
**Development of Criteria for the Identification of Preschool Children with Learning Problems. Final Report.**  
 West Virginia University, Morgantown Northern Iowa University, Cedar Falls; Office of Education (DHEW), Washington, D. C., Bureau of Research  
 EDRS mf,hc  
 OEO-3-9-580024-0049(010)  
 BR-9-C-024

Descriptors: exceptional child research; learning difficulties; longitudinal studies; academic achievement; identification; preschool evaluation; emotional problems; attention span; attitudes; self concept; social adjustment; age differences; parent attitudes

To identify variables which inhibit social and academic adjustment, 42 kindergarten students were studied longitudinally by means of parent interviews, observation, tests, and anecdotal records. The IQ score for the group remained normal to slightly above over the 8-year period, but individual scores tended to vary more with increased age. Underachieving students in reading were compared to their achieving classmates; in grade 3 there was a significant difference between the two groups on the level of discouragement. By sixth grade the underachievers exhibited a less desirable social adjustment and participated less in class discussions. Short attention span and sensitivity about weight and speech were recurring characteristics of underachievers. The feeling of having a place among his peers and being assured of it, and a feeling of personal worth and appreciation were the only variables that continued to correlate consistently with the child's overall academic accomplishment throughout the first nine years of school. Additional results, conclusions, and suggestions are reported. (RJ)

**ABSTRACT 32342**

EC 03 2342 ED N.A.  
 Publ. Date Apr 71 6p.  
 Smith, Stanley A.; Solanto, Joseph R.  
**An Approach to Preschool Evaluations.**

EDRS not available  
 Psychology in the Schools; V8 N2 P142-7 Apr 1971

Descriptors: exceptional child research; learning disabilities; preschool evaluation; early childhood; identification; workshops; teacher role; grouping (instructional purposes); readiness (mental)

An evaluation program was devised in a New York School in order to learn as much as possible about the children about to enter school so that the curricula could be set up to meet their individual needs. The evaluation consisted of a parent questionnaire, a formal evaluation of the child, and a discussion of the results and feedback to the parent. It was noted that the parents seemed more receptive to preschool testing of their children than to later school evaluations. A closer parent teacher relationship was noted as a result of the clinical recommendations. A workshop for the teachers

was set up to supplement the preliminary testing. The format was that each teacher would work with one child and concentrate in one area of deficiency only. The kindergarten curriculum was departmentalized as a result of the workshop so that children with the same area of deficiency could go to the class in which the teacher would work in that one particular area. Followup observations indicated success for children and teachers in producing educational change. (CD)

**ABSTRACT 32481**

EC 03 2481 ED N.A.  
 Publ. Date 70 211p.  
 Francis-Williams, Jessie  
**Children with Specific Learning Difficulties.**  
 EDRS not available  
 Pergamon Press, Inc., Maxwell House, Fairview Park, Elmsford, New York 10523.

Descriptors: exceptional child research; learning disabilities; identification; preschool children; preschool evaluation; educational diagnosis

The possibilities of early identification of children of normal intelligence with specific learning disorders believed to arise from neurodevelopmental dysfunction are discussed. Following a summary of normal mental development and early childhood learning, research into means of identification of learning difficulties is reported. Examined are various tests and rating scales which were determined to be useful discriminators. Reported are the differences in performance on the test battery selected of 44 preschool children noted at birth as having minor neurological dysfunction and 63 controls who were normal in development. Symptoms indicative of dysfunction in a child 3-5 years old are enumerated. Also discussed are methods of helping preschool children and identification of learning disabilities in school children. Teaching experiments with children having specific learning disabilities are surveyed. Appended is an historical survey of research on various aspects of learning disabilities. (KW)

**ABSTRACT 32525**

EC 03 2525 ED N.A.  
 Publ. Date 69 135p.  
 Zimmerman, Irla Lee and Others  
**Preschool Language Manual, Picture Book and Scale.**  
 EDRS not available  
 Charles E. Merrill Publishing Company, 1300 Alum Creek Drive, Columbus, Ohio 43216.

Descriptors: evaluation; child development; early childhood; measurement techniques; preschool evaluation; language tests; language learning levels; auditory perception; verbal learning

The document is a language evaluation instrument composed of a preschool language manual, sample scale, and preschool picture book. The language scale has been designed for child development specialists and is for children of all ages who are assumed to be functioning at a preschool or primary language level. The

Preschool Language Scale consists of a series of auditory and verbal language tasks each of which has been given an age placement on the basis of empirical evidence of the average age of attainment by preschool children. The author states that the scale uses the dichotomy between auditory comprehension and verbal ability as the basis for construction and is to be used to detect language strengths and deficiencies. (CD)

**ABSTRACT 32885**

EC 03 2685 ED 052 550  
Publ. Date 71 516p.

**Special Education Early Childhood Project in Fort Worth Independent School District, Title VI, ESEA, Final Report.**

Fort Worth Independent School District, Texas

Bureau of Elementary and Secondary Education (DHEW/OE), Washington, D. C.

EDRS mf, hc

Descriptors: exceptional child research; disadvantaged youth; learning difficulties; early childhood education; intervention; preschool children; diagnostic teaching; regular class placement; demonstration projects; Texas; Elementary and Secondary Education Act Title VI

Described is the special education component of an early childhood education project for culturally disadvantaged preschool children. The component's purpose was to determine if children deviating from their peers could be educated as an integral part of the regular class. Children with an IQ under 80 were provided individual prescriptions in the regular classroom by a teacher assistant. Language development prescriptions were provided outside the classrooms for children with gross motor problems, learning disabilities, or immature speech. Instructional strategies and content in the areas of social and emotional development, motor development, language development, and parent education are detailed. Evaluation showed that the special education students had posttest mean scores only slightly below those of the other children and above those of day care and kindergarten comparison groups. Greatest gains were made by 3-year-olds. Most of the children entering with IQ's under 80 were able to enter regular first grade classes. It was concluded that individual and language development prescriptions were successful and that early childhood programs can accommodate children deviating from their peer norm in the same classroom. (See ED 046 174, EC 031 258 for project's interim report.) (KW)

**ABSTRACT 32894**

EC 03 2894 ED N.A.  
Publ. Date Aug 71 9p.

**Fiedler, Miriam F. and Others  
A Speech Screening Procedure with Three-Year-Old Children.**

EDRS not available  
Pediatrics; V48 N2 P268-76 Aug 1971

Descriptors: exceptional child research; retarded speech development; screening tests; language tests; language handi-

capped; early childhood; infancy; language development; learning disabilities; perinatal influences

A screening examination for use by non-professional interviewers in the home situation for evaluation of speech and language development of 3-year-old children was developed. The perinatal histories and developmental data for the first year of life were examined for 46 children who failed this screening examination and for 92 control subjects, matched for age, sex, and time of examination, who passed the screening examinations. Significant differences were found between the groups in incidence of complications of pregnancy and labor, prematurity and in various aspects of development during the first year of life. Follow-up psychological examinations at 4 years of age and psychological and neurological examinations at 7 years of age found marked differences between the groups still present, with the speech failure group presenting a significantly higher incidence of a variety of psychological and neurological deviations from the normal. (Author)

**ABSTRACT 33054**

EC 03 3054 ED N.A.  
Publ. Date Aug 71 20p.

**Esche, Jeanne; Griffin, Carol  
A Handbook for Parents of Deaf-Blind Children.**

EDRS not available  
Rehabilitation Teacher; V3 N8 P3-22 Aug 1971

Descriptors: exceptional child education; multiply handicapped; deaf blind; infancy; preschool children; child rearing; child development; guidelines; parent education

The practical, nontechnical handbook for parents of deaf-blind children focuses on helping the child develop and prepare for school. Parents are encouraged to pay much attention to the child, not to compare their child's progress with that of other deaf-blind children, not to punish the child for mannerisms, to help the child discover his surroundings, to help the child sit up and walk, to establish a definite 24-hour routine, to acquaint the child with water, to introduce solid foods early, to familiarize the child with his clothes, to confine all toilet training to the bathroom, to discipline the deaf-blind child the same as normal children in the family, to expose the child to as much vibration and sound as possible, to introduce many new toys to the child, to keep visual and hearing aids on the child, to keep the aids clean and in repair, and to let the entire family help the child. (CB)

**ABSTRACT 40252**

EC 04 0252 ED N.A.  
Publ. Date 71 17p.

**Bluth, Linda and Others  
Emotional Disturbance: Preschool Intervention and Prevention.**

Illinois University, Urbana, Department of Special Education  
Office of Education (DHEW), Washington, D. C.;  
Office of Economic Opportunity, Washington, D. C.

EDRS not available  
ERIC Clearinghouse on Early Childhood Education, University of Illinois, College of Education, 805 West Pennsylvania Avenue, Urbana, Illinois 61801.

Descriptors: exceptional child services; emotionally disturbed; preschool children; intervention; prevention; bibliographies

Presented is a bibliography of 74 books and articles, and 17 films on preschool intervention and prevention of emotional disturbance. The listing includes material published between 1960 and 1970. Age range of subject material is limited to children from birth through kindergarten. Each entry is accompanied by content descriptors and a notation to indicate appropriateness for teachers, social workers, psychologists, administrators, and/or parents. Also included is a list of modern talking picture service libraries in the United States. (CB)

**ABSTRACT 40338**

EC 04 0338 ED N.A.  
Publ. Date Oct 71 1p.

**Fischer, Margaret  
Miniature Report: Mandatory Legislation for the Screening of Newborns for PKU in the United States.**

EDRS not available  
Mental Retardation; V9 N5 P25 Oct 1971

Descriptors: exceptional child services; mentally handicapped; screening tests; infancy; state legislation; nutrition; therapy; phenylketonuria

Discussed is phenylketonuria (PKU); its successful detection by screening techniques and mandatory state legislation requiring screening of newborns. The syndrome of severe mental retardation, physical and neurological difficulties, and emotional disturbances is said to be eliminated if dietary treatment is initiated in early stages of development. A table lists the 43 states with legislation and the seven states without legislation, plus the date the screening legislation became effective. (CB)

**ABSTRACT 40350**

EC 04 0350 ED N.A.  
Publ. Date Aug 71 7p.

**Newcomb, Mary Ann  
Seal Bluff Development Center.  
EDRS not available  
Children's House; V5 N1 P13-9 Aug 1971**

Descriptors: exceptional child education; multiply handicapped; mentally handicapped; infancy; preschool children; educational programs; prevention; volunteers; curriculum; California

Described is the Seal Bluff Development Center of California for very young multiply handicapped infants and children. Most children are mentally handicapped, in addition to other handicaps. Early prevention and instructional programming are said to preclude secondary characteristics once associated with mental retardation and brain damage. Home visits by volunteers implement instruction immediately and educate parents in methods of helping the child. It is stated. The volun-

teers are described as eliciting developmental milestones from the children. The curriculum is explained to include development of motor abilities, stimulation of senses, teaching of body parts and self concept, discrimination and perception auditorially and visually, and recognition of size and shape of concrete objects. (CB)

#### ABSTRACT 40461

EC 04 0461 ED N.A.  
Publ. Date 71 7p.  
Spitz, R. A.  
**The Adaptive Viewpoint: Its Role in Autism and Child Psychiatry.**  
EDRS not available  
Journal of Autism and Childhood Schizophrenia; V1 N3 P239-45 Jul-Sep 1971

Descriptors: exceptional child services; autism; psychiatry; infancy; adaptation level theory; emotionally disturbed; personal adjustment; child psychology; behavior patterns

Discussed is the proposition that as a nosological entity, behavioral symptoms in the first year of life are not psychiatric diseases in the strict sense of the word but disorders of adaptation that require diagnostic, prognostic, and therapeutic approaches categorically different from that used in psychiatric practice. Etiological and psychological factors thought to underlie deviations of adaptation are then noted briefly. (CB)

#### ABSTRACT 40491

EC 04 0491 ED N.A.  
Publ. Date 71 39p.  
Cusworth, D. C., Ed.  
**Biochemical Screening in Relation to Mental Retardation. Proceedings of a Symposium (Middlesex Hospital Medical School, England, May 16, 1969).**  
EDRS not available  
Pergamon Press, Inc., Maxwell House, Fairview Park, Elmsford, New York 10523 (\$2.45).

Descriptors: mentally handicapped; screening tests; biochemistry; metabolism; infants; biological influences; identification; program effectiveness; phenylketonuria

Presented are two papers from a symposium examining mass infant screening programs for the detection of inborn errors of metabolism which are responsible for varying degrees of mental retardation as at least one part of the clinical picture. F.P. Hudson, in discussing screening for phenylketonuria, covers screening techniques using urine, screening techniques using blood, the organization of a screening program, and confirmation of diagnosis. Screening for other biochemical abnormalities is reviewed by J. Stern. Examined are general mass screening principles, inborn errors of metabolism associated with mental retardation, methods for detecting these metabolic errors, data on the effectiveness of mass screening programs, and future trends. The text of a group discussion of the papers concludes the booklet. (KW)

#### ABSTRACT 40609

EC 04 0609 ED N.A.  
Publ. Date Dec 71 7p.  
Bullard, Bonnie M.; Barraga, Natalie  
**Subtests of Evaluative Instruments Applicable for Use with Preschool Visually Handicapped Children.**  
EDRS not available  
Education of the Visually Handicapped; V3 N4 P116-22 Dec 1971

Descriptors: exceptional child education; visually handicapped; preschool evaluation; testing; cognitive measurement; psychomotor skills

Listed separately are subtests of evaluative instruments which can be used with preschool blind children and those which are applicable for use with preschool children with impaired but useful vision. Tests are listed according to the ability evaluated: immediate recall, association, logical thinking, discrimination, spatial relations, psychomotor skills, deductive reasoning, inductive reasoning, generalization, imitation, attention span, and language development. (KW)

#### ABSTRACT 40720

EC 04 0720 ED N.A.  
Publ. Date Jan 72 10p.  
Gordon, Ronnie and Others  
**Performance of Neurologically Impaired Preschool Children with Educational Materials.**  
EDRS not available  
Exceptional Children; V38 N5 P428-37 Jan 1972

Descriptors: exceptional child research; neurologically handicapped; preschool children; manipulative materials; perceptual motor coordination; minimally brain injured; disadvantaged youth; achievement; preschool evaluation

The study compared 124 middle class, 85 brain injured, and 75 disadvantaged children ages 3-5 1/2 years in competence and style in working with educational materials with visual-perceptual components. Montessori Cylinders (placement according to size) and the Form Sorting Box (placement according to form) were materials used. In individual testing, the child's behavior as he used the equipment was scored by a method permitting step-by-step analysis of behavior. Thus not only achievement but style or process of the child's performance was evaluated. It was found that each of the groups improved with age. Middle class children were more competent than disadvantaged children who were more competent than brain injured children. Although disadvantaged children at age 3 were similar to brain injured in terms of competence, with increasing age they moved continuously closer to the performance of middle class children. This was not true for the brain injured, who seemed to plateau in their performance. Examined are findings on competence on each individual form, ability to self correct, approach to the task, and dependency on the teacher. (KW)

#### ABSTRACT 40761

EC 04 0761 ED 057 527  
Publ. Date Dec 71 174p.

Northcott, Winifred H., Ed.  
**Curriculum Guide: Hearing-Impaired Children--Birth to Three Years--and Their Parents.**  
Minnesota State Department of Education, St. Paul;  
Minneapolis Public Schools, Minnesota  
Bureau of Education for the Handicapped (DHEW/OE), Washington, D. C.

EDRS mf, hc

Descriptors: exceptional child education; aurally handicapped; infancy; early childhood education; curriculum guides; parent role; parent education; preschool children; behavioral objectives; language instruction; program descriptions

The guide describes the components of a comprehensive infant program for hearing impaired children 0-3 years of age and their parents. Primary focus is upon a home-centered, parent-guided, natural language approach to learning, based upon the child's daily activities. An interdisciplinary professional staff guides the parents in the individually prescriptive oral and aural program. A parent-teaching program developed and supported through sustained parent guidance and education is central to the educational design. Outlined are guidelines for the development of the infant program and for parent guidance and education, integration of the child into a regular nursery school, principles of language development, parent-child interaction patterns, and evaluation methods. Stipulated for each of eight age levels during the first 3 years of life are an overall goal; program objectives for child and parents; desired developmental patterns in neurological, cognitive, social, and language areas; suggested daily home activities; sample phrases to use with the child; and a sample experiential activity. Also described are objectives and principles of the individual teaching program, experience charts, and auditory training. (KW)

#### ABSTRACT 40850

EC 04 0856 ED N.A.  
Publ. Date Jul 71 12p.  
Korner, Anneliese F.  
**Individual Differences at Birth: Implications for Early Experience and Later Development.**  
EDRS not available  
American Journal of Orthopsychiatry; V41 N4 P608-19 Jul 1971

Descriptors: research projects; individual differences; infancy; mothers; infant behavior; parent child relationship; behavior patterns; child development

Observations from several neonatal studies revealed statistically significant behavioral pattern differences among healthy full-term newborns. It was proposed that among these differences certain ones would affect the nature of early experience, particularly the mother-infant relationship. Others might favor the development of certain cognitive styles, defenses and characterological differences. (Author)

**ABSTRACT 40876**

EC 04 0876

ED N.A.

Publ. Date Jan 72

6p.

Birns, Beverly; Golden, Mark  
**Prediction of Intellectual Performance at 3 Years From Infant Tests and Personality Measures.**

EDRS not available

Merrill-Palmer Quarterly; V18 N1 P53-8  
 Jan 1972

Descriptors: exceptional child research; disadvantaged youth; lower class; minority groups; Negro youth; cognitive development; personality development; infancy; preschool children; predictive measurement

The study focused on the relationships between cognitive and personality measures obtained in infancy and later intellectual measures taken at 3 years of age. The subjects included 192 black children of 12, 18, and 24 months of age from different socioeconomic groups, ranging from lower class to middle class. Infancy test battery consisted of the Cattell Infant Intelligence Scale, the Piaget Object Scale, and seven personality rating scales. At 3 years of age, the children were administered the Stanford Binet Intelligence Test. The most significant finding was thought to be the direct relationship found between the amount of pleasure manifested by 18- and 24-month-old infants on the Cattell and Piaget Object Scales and their later intellectual performance on the Stanford Binet Intelligence Scale. (CB)

**ABSTRACT 41159**

EC 04 1159

ED N.A.

Publ. Date Feb 72

3p.

Holden, Raymond H.

**Prediction of Mental Retardation in Infancy.**

EDRS not available

Mental Retardation; V10 N1 P28-30 Feb 1972

Descriptors: exceptional child research; mentally handicapped; infancy; predictive measurement; prediction

The problem of accurate prediction of mental development in normal infants has often been controversial. Out of a population of 2,875 infants in the Child Development Study at Brown University, 230 subjects were followed to age 4 and 115 to age 7. Each child was 1 month or more below average on the Bayley Scales of Mental or Motor Development at age 8 months. At both ages 4 and 7 years, mean IQ scores were significantly lower than a control group of 150 children. (Author)

**ABSTRACT 41320**

EC 04 1320

ED 059 553

Publ. Date 71

77p.

Park, Gloria Gayle

**A Plan for Itinerant Educational Consultant Services for Preschool Visually Handicapped Children.**

Allegheny County Schools, Pittsburgh, Pennsylvania

Bureau of Elementary and Secondary Education (DHEW/OE), Washington, D. C.

EDRS mf,hc

Descriptors: exceptional child research; visually handicapped; sensory training; early childhood education; itinerant teachers; preschool children; prevention; interpersonal competence; educational programs

A demonstration project was conducted involving itinerant educational consultant services for preschool visually handicapped children with the objective of preventing social and sensory deprivation and of developing personal independence. Channels were established for referral of applicable visually handicapped preschool children to the program. Selected preschools for children other than visually handicapped children agreed to admit visually handicapped children and received supportive services to handle the visually handicapped child. Where needed, an itinerant teacher visited the homes of preschool visually handicapped children. For each of the 28 children involved in the study, the birthdate, diagnosis, vision, referral, and services rendered were reported. The Social Maturity Scale for Blind Preschool Children (Maxfield and Buchholz, 1957) was the standardized evaluation tool used in many cases. Although success was thought to be intuitively apparent in various cases, the complexity of the children's problems precluded definitive measurements of progress in all cases. Appended were four reports by an instructional aide, two mobility students, and a nursery school teacher of their experiences in working with the preschool visually handicapped children. (CB)

**ABSTRACT 42001**

EC 04 2001

ED N.A.

Publ. Date 72

5p.

Adkins, Patricia G.; Walker, Carl

**A Call for Early Learning Centers.**

EDRS not available

Academic Therapy; V7 N4 P447-51 Sum 1972

Descriptors: exceptional child education; learning disabilities; early childhood education; educational needs; preschool children; prevention; intervention

Stated is the need of learning disabled children to start school at an earlier age in a special setting to acquire the skills necessary to compete successfully in the public schools. Cited are figures on the growth in human intelligence which takes place in the early years of life. Needs are seen to include a focus on early identification of learning disabilities in preschool children and emphasis on their language development and other communication skills. The preventive aspect of early childhood education is stressed--prevention or reduction in severity of future educational, emotional, social, and vocational handicaps. (KW)

**ABSTRACT 42059**

EC 04 2059

ED N.A.

Publ. Date 72

5p.

Tyler, Nancy B.

**A Stereognostic Test for Screening Tactile Sensation.**

EDRS not available

American Journal of Occupational Therapy; V26 N5 P256-60 Jul/Aug 1972

Descriptors: research projects; preschool children; diagnostic tests; tactual perception; test reliability

A practical stereognostic test is presented for children 2 to 4 years of age. The administration and scoring of this test are simple operations and can be learned quickly by a new examiner. The test can be administered in less than 10 minutes. This paper presents the results of one examiner's testing of 98 subjects in the age range of 1 year 8 months to 4 years 7 months. The analysis on test items indicates that there is no range of difficulty of test items except for one item and that as the child's age increases, his ability to respond correctly to the test items also increases. The retest analysis indicates that there is a high reliability for the 3-year-old and over population. Recommendations for future studies are made. (Author)

**ABSTRACT 42115**

EC 04 2115

ED N.A.

Publ. Date 72

136p.

Mager, Robert F.

**Goal Analysis.**

EDRS not available

Fearon Publishers, 6 Davis Drive, Belmont, California 94002 (\$2.95).

Descriptors: goal orientation; behavioral objectives; performance criteria; achievement; evaluation criteria

Detailed is the procedure of goal analysis, intended to help one describe the meaning of the goals he hopes to achieve; whether the goals deal with attitudes, appreciations, or understanding; and how to recognize progress and success in achieving the goals. A step by step procedure is outlined for defining broad goals in terms of the performances (behaviors) representing the meaning of the goal. If these specific outcomes (overt or directly assessable activities) are achieved, then the goal can be claimed to have been achieved. The procedure of goal analysis is said to help a teacher decide, for example, if instruction will help achieve the desired state and, if it will, what kind of instruction to organize. Illustrative examples of how to perform a goal analysis are taken from education, industry, and other fields. (KW)

**ABSTRACT 42272**

EC 04 2272

ED N.A.

Publ. Date Jul 72

14p.

Yarrow, Leon J. and Others

**Dimensions of Early Stimulation and Their Differential Effects on Infant Development.**

EDRS not available

Merrill-Palmer Quarterly; V18 N3 P205-18 Jul 1972

Descriptors: environmental influences; cognitive development; infancy; physical environment; environmental research; child development; sensory experience; social experience; research projects; curiosity

The study investigated whether infant-mate stimulation and social stimulation

are related to different cognitive-motivational facets of the infant's development. Data were obtained on 41 black infants, ages 5-6 months, and their primary caretaker (mother or other) through 6 hours of time-sampling observations in the home. Approximately 60 categories of events were monitored: infant behaviors (vocalizations, play, other activities), caretaker behaviors describing aspects of social stimulation, and measures of the inanimate environment. Social stimulation was classified according to sensory modality, intensity or rate of stimulus change, whether it was contingent on infant behaviors, and type of infant behavior the caretaker was trying to evoke. Inanimate environment was analyzed in terms of variety, responsiveness, and complexity. Dependent variables were obtained from infant testing with the Bayley Scales of Infant Development and a structured situational test measuring exploratory behavior (curiosity) and preference for novel stimuli. A table indicates the interrelationships among the social and inanimate variables. Dimensions of the social environment were largely independent of dimensions of the inanimate environment, suggesting that global characterizations of environments as depriving or stimulating are over-simplified. Other tables detail relations between social environment factors and infant functioning, and between inanimate environment factors and infant functioning.

**ABSTRACT 42399**

EC 04 2399 ED N.A.  
 Publ. Date Jun 72 7p.  
 Ritchie, Betty Caraway; Merklein, Richard A.

An Evaluation of the Efficiency of the Verbal Auditory Screening for Children (VASC).

EDRS not available  
 Journal of Speech and Hearing Research: V15 N2 P280-6 Jun 1972

Descriptors: exceptional child research; aurally handicapped; preschool children; auditory tests; test validity; identification; screening tests; Verbal Auditory Screening for Children

The efficiency of the Verbal Auditory Screening for Children (VASC) compared to a pure-tone threshold test as a technique to identify hearing impairment among preschool children was investigated with 162 subjects. The VASC-1 test correctly identified 84.6% of the total subjects. Of the 41 subjects failed by the pure-tone threshold test, 48.8% were missed by the VASC-1. An analysis of the average hearing threshold loss for 500-2000 Hertz of the ears misclassified by the VASC-1 revealed 83.3% ranged from 0 to 13 decibels. The VASC-1 and the verbal portion of the VASC-2 appear to be fairly equivalent forms. (Author)

**ABSTRACT 42611**

EC 04 2611 ED N.A.  
 Publ. Date 71 346p.  
 Lagos, Jorge C.  
 Differential Diagnosis in Pediatric Neurology.

EDRS not available

Little, Brown and Company, 34 Beacon Street, Boston, Massachusetts 02106 (\$13.50).

Descriptors: exceptional child services; special health problems; diseases; seizures; mental retardation; medical evaluation; neurology; classification; infancy; early childhood; childhood; pediatrics

The book presents a practical approach to differential diagnosis in pediatric neurology which consists in describing the most common neurological presenting complaints or clinical situations encountered by pediatricians and providing a simple classification and description of the main diagnostic possibilities that are thought to be relevant in each situation. The following 19 clinical manifestations are considered along with numerous related diseases: acute onset of flaccid weakness, chronic muscle weakness, spastic weakness, ataxia, abnormal movement and posture, cranial nerve disorders, proptosis, meningeal irritation, neurological deficit of sudden onset with impairment and loss of consciousness, increased intracranial pressure, macrocephaly and microcephaly, headache, abdominal pain of central nervous system origin, skin abnormalities and the central nervous system (neurocutaneous syndromes), nonprogressive and progressive psychomotor retardation, neurological syndromes associated with chromosomal abnormalities, and seizures in neonates, infants, and children. Five appendixes discuss neonatal reflexes and developmental milestones, drugs most commonly used in pediatric neurology, treatment of some medical emergencies, evaluation of a child in a coma of unknown etiology, and blood, urine and cerebrospinal fluid values. (GW)

**ABSTRACT 42629**

EC 04 2629 ED 064 852  
 Publ. Date 72 1 66p.

Project Child. Final Report. Educational Improvement Center, Pitman, New Jersey  
 Margate City Board of Education, New Jersey;

New Jersey State Department of Education, Trenton  
 EDRS mf,hc

Descriptors: exceptional child research; learning disabilities; preschool children; identification; parent role; surveys; questionnaires; demonstration projects

Project Child was explained to be funded under the Elementary and Secondary Education Act Title III and was described to be a regional model demonstration program for the identification of preschool handicapped children especially with learning disabilities. Primary goals of the project were reported to be stimulation of parents and public to realize potential of preschool screening, development of better screening devices, and identification of exceptional children in preschool population to facilitate helping them before entering school. Project Child was then explained to be drafted as a three-phase, 3-year project: the

phases involved collection of data from parents about exceptional children in eight counties of southern New Jersey, establishment of demonstration program, and development of regional master plan. Analysis of data showed an overall prevalence rate of 15.1% of children with potential learning problems. Charts provided handicapping data for each of the eight counties. Then reviewed were follow-up projects, such as interviews with school superintendents, discussions with parents, evaluation questionnaire, and Regional Co-op Project. It was concluded that the project served to make the public more aware of its handicapped populations and of the necessity of the educational system to serve all its children. (CB)

**ABSTRACT 42769**

EC 04 2769 ED N.A.  
 Publ. Date 70 32p.

Reistroffer, Mary; Kuhn, Roy  
 The Hyperactive Child Without Mental Retardation.

EDRS not available  
 University of Wisconsin Press, Box 1379, Madison, Wisconsin 53701

Descriptors: exceptional child education; learning disabilities; hyperactivity; infants; early childhood; childhood; child rearing; parent role; parent school relationship; identification; therapy

Information gleaned from research literature, reports of parents, teachers and social workers, and the writers' own professional experience is presented to aid in the identification of hyperactivity without mental retardation as a syndrome and to specify appropriate care and management techniques for hyperactive children. The hyperactive syndrome is defined as a disturbance of the central nervous system which causes polar reactions to external and internal stimuli. Because hyperactivity is seen to have an age related progression, the discussion considers infant, toddler, preschooler and school-age stages. Various characteristics of the hyperactive infant are discussed such as resistance to tactile stimulation, crib traveling, marked startle reaction, head banging and body rocking. The quickness of the young child's movements, his reaction to barometric and color changes, his need for carefully regulated play, reactions to food, accident proneness, blunted response to pain, toilet training problems, imagined dangers, friendliness toward adults, slow speech, word reversal, destructiveness, affinity for repetitive motion, and poor memory and attention are considered. The authors advise frankness and extensive interaction between parents and teachers, and emphasize the need for controlling and programming the activities of a hyperactive youngster. Briefly discussed are medications for hyperactivity. (GW)

**ABSTRACT 42886**

EC 04 2886 ED N.A.  
 Publ. Date 72 73p.

Griswold, Patricia A.

**A Program Outline for Parents and Their Children, Ages 3 Months to 3 Years Having Cerebral Palsy.**

EDRS not available

United Cerebral Palsy of Central Indiana, 615 North Alabama Street, Indianapolis, Indiana 46204 (\$3.00).

**Descriptors:** exceptional child education; physically handicapped; cerebral palsy; infancy; early childhood education; parent education; educational programs; program descriptions; child development; physical activities; guidelines

The program outline for parents and their children, aged 3 months to 3 years, having cerebral palsy is designed to provide activities on which parents and children can work together to develop the children's emotional, mental, and social habits as early as possible. The program outline is said to be based on a successful demonstration program. Preliminary information outlines responsibilities of the head therapist who works with the group of parents and children meeting twice weekly, responsibilities of volunteers, parents, and students, educational objectives such as teaching parents some basic child development and child rearing concepts and guiding parents in recognizing their child's abilities and disabilities, a typical program schedule, notes from the therapists to parents and other therapists, and needed equipment. Each activity is covered by objectives, motivating activities, equipment needed, and an illustrative diagram. The 30 activities explained include rub-a-dub dub, flashlight game, a ball game, water play, talk about pictures, my word box, rattle cans, blowing bubbles, coin in the can, clothes pins and rope, mirror play, my shape bottle, pop beads, music maker, rocking, bean bag play, beach ball bounce, cardboard box train, a barrel of fun, scribble with a crayon, rolling race, sand play, slide play, hand cream, block play, peg set, pudding time, cracker and milk period, milk period, and pulling objects out of a box. Practical advice is also provided on lifting and carrying the child, sleeping and bathing aids. (CB)

**ABSTRACT 42898**

EC 04 2898 ED 065 978  
Publ. Date 68 232p.

Gold, Edwin M., Ed.

**Proceedings of the National Conference for the Prevention of Mental Retardation through Improved Maternity Care.**

New York Medical College, New York Children's Bureau (DHEW), Washington, D. C.

EDRS mf, hc

Reprint From the Proceedings of the National Conference, March 27-29, 1968, Washington, D. C.

**Descriptors:** exceptional child services; mentally handicapped; premature infants; prenatal influences; socioeconomic influences; conference reports; pregnancy; mothers medical treatment

The conference proceedings on the prevention of mental retardation through improved maternity care consist of six

major papers which are followed by panel discussions with two to five participants. Epidemiology of prematurity, topic of the first papers, is discussed in terms of cigaret smoking, asymptomatic bacteriuria, maternal heart volume, employment during pregnancy, maternal height and weight, birth interval, prenatal care, outcome of previous pregnancies, and definition of prematurity. The second paper focuses on prevention of obstetric antecedents, with mention of responsible parenthood, study of previous reproductive events and congenital anomalies, relationship of social status to perinatal mortality and prematurity, maternal nutrition, psychosomatic factors associated with pregnancy, maternal height and weight, maternal infections, and maternal diseases. The third paper on prevention of premature labor considers prophylaxis, early recognition of high risk patient, and inhibition of premature labor. The relative lack of medical help in encouraging the pregnant woman to enjoy both pregnancy and motherhood is the subject of the fourth paper on the low birth weight infant. The conference concludes with two short papers on specific needs to improve maternity care and a review of resources, respectively. (CB)

**ABSTRACT 42941**

EC 04 2941

ED N.A.

Publ. Date 71

416p.

Sluckin, W., Ed.

**Early Learning and Early Experience.**

EDRS not available

Penguin Books, Inc., 72 Fifth Avenue, New York, New York 10011 (\$3.45).

**Descriptors:** research reviews (publications); developmental psychology; infancy; early childhood; learning processes; conditioned response; animal behavior; operant conditioning; environmental influences; habit formation; behavior change; parent influence; socialization

Twenty-eight empirical studies in early learning and early experiencing were reported in terms of early conditioning, imprinting, learning and development, restriction and enrichment of early experience, development of special traits, parental deprivation in infancy, and early socialization in animals and man. Four reports on early conditioning examined conditioned head turning in human newborns, conditioned orienting reactions to persons and things in 2 to 5 month old infants, classical conditioning in newborn rats, and conditioning in the neonatal puppy. Four articles on imprinting treated imprinting and perceptual learning in domestic chicks, changes in chicks' responses to novel moving objects over the sensitive period for imprinting, the reversal of a preference established during the critical period, and behavioral control by an imprinted stimulus. Learning and development were analyzed in four papers on the relation of early to later learning, developmental changes in learning capacity, early development including habituation and associational learning, and the optimal learning environment for the young child. Four papers on restric-

tion and enrichment of early experience analyzed the effects of restricting early experience on the problem solving capacity of dogs, the effects of early experience on the response to pain, the effects of early shock and handling on later avoidance learning, and a theory of infant stimulation specifying critical periods, stimulus input, and emotional reactivity. Investigations of the development of special traits considered the effects of infantile experience on adult behavior in rats, the effects of early enforced weaning on the sucking behavior of puppies, the effect of bottle and cup feeding on the nonnutritive sucking of the infant Rhesus monkey, and some persistent effects of different rearing conditions on preadult social behavior in monkeys. Three articles on parental deprivation in infancy treated maternal separation in the Rhesus monkey, the effects of 6 day maternal deprivation on Rhesus monkey infants, and an empirical and conceptual reevaluation of maternal deprivation. Aspects of early socialization in animals and man examined were the flocking of domestic chicks, the development of inter species social attachments, critical periods in the development of social behavior in puppies, the development of social attachments in infancy, and the onset of fear of strangers and the incongruity hypothesis. (GW)

**ABSTRACT 42943**

EC 04 2943

ED N.A.

Publ. Date 72

250p.

Hunter, Marvin H. and Others

**The Retarded Child from Birth to Five: A Multidisciplinary Program for the Child and Family.**

EDRS not available

John Day Company, Inc., 257 Park Avenue South, New York, New York 10010 (\$10.95).

**Descriptors:** exceptional child education; mentally handicapped; trainable mentally handicapped; infancy; early childhood; program descriptions; interdisciplinary approach; identification; diagnostic tests; medical treatment; home instruction; educational programs; communication skills; family role; psychotherapy; case studies

Placing its major emphasis on interdisciplinary services for the trainable mentally retarded, the book about retarded children aged 0 to 5 years discusses early identification and treatment, the diagnostic process, treatment programs and family treatment. Incidence, prevention, periods of identification, family perspective, initial reactions and a multidisciplinary center are considered briefly. A multidisciplinary diagnostic evaluation is described as the means of gaining a total picture of the child and his family and of forming an individualized program of stimulation and training for the child. The initial inquiry, components of the diagnostic process (social worker, medical evaluation, laboratory procedures, nurse's visit to the home, psychological, educational, and speech and language evaluation), the diagnostic staff conference, and the informing interview are

treated. Noting the need of retarded children for perceptual and motor stimuli of more than average intensity and frequency, the authors describe the following treatment programs for the child: medical treatment program including drug therapies, special dietary regimens, surgical, ophthalmological, dental, and corrective procedures, genetic counseling, and the physician in the team; home training program focusing on such activities as feeding, exercise, sitting, standing, crawling, and verbal reinforcement; school program; and communication program involving language especially therapy and a communications curriculum. Emphasizing the especially crucial importance of the family in the development of retarded children, the authors recommend maximal family involvement in both child treatment programs and treatment programs specifically for the family including parental psychodynamics, individual psychotherapy, and group psychotherapy. A case study recounts the progress of a young mongoloid girl and her family through the various services and programs that can be provided by a large, multidisciplinary center for retarded children.

**ABSTRACT 50020**

EC 05 0020 ED N.A.  
 Publ. Date Aug 72 5p.  
 Downs, Marion P.; Hemenway, W. Garth

**Newborn Screening Revisited.**  
 EDRS not available  
 Hearing and Speech News: V40 N4 P4-5, 26-9 Jul-Aug 1972

Descriptors: exceptional child services; aurally handicapped; infancy; screening tests; questionnaires; identification; prediction; program descriptions

Described is a newborn infant screening program designed to detect infants with a hearing impairment utilizing both a register of high risk infants and a questionnaire to be used at well-baby clinics. It is asserted that 70 to 90% of children who eventually suffer hearing loss would be included in a register of high risk newborn infants. Five factors said to have high predictive value of hearing impairment at birth are: rubella during pregnancy, family history of childhood deafness, blood incompatibility, low birthweight, and malformation of ears, nose, or throat. The authors recommend that all newborn infants showing one or more of the predictive factors of hearing impairment be given in-depth audiological evaluations by certified audiologists. It is recommended that, since 10 to 40% of the deaf population may well develop deafness after birth, a questionnaire designed to distinguish between the normal and the hearing impaired child be added to the usual developmental and communications scales and be used at 2 month intervals during the child's first year. (DB)

**ABSTRACT 50185**

EC 05 0185 ED 069 086  
 Publ. Date Apr 72 47p.  
**Reaching the Preschool Handicapped Child.**

New York State Education Dept., Albany, Div. for Handicapped Children  
 EDRS mf.hc  
 Institute Proceedings Highlights, April 20-22, 1972, Utica, New York

Descriptors: exceptional child education; handicapped children; preschool children; early childhood education; conference reports; diagnostic teaching; instructional materials; identification; teacher role

The proceedings of a special study institute on the preschool handicapped child include staff and participant lists, opening and closing remarks, and six papers. Topics discussed in the papers include teacher clues for identifying learning disabled students, directions for teacher identification of speech and hearing handicaps, the concept of classification and its integration into a preschool curriculum, prescriptive physical education, prescriptive (diagnostic) teaching and educational materials. Sources and prices are given in a list of professional books, children's library books, instructional materials and aids, films and filmstrips, and tapes and records appropriate for use with preschool handicapped children. (KW)

**ABSTRACT 50419**

EC 05 0419 ED N.A.  
 Publ. Date Nov 72 4p.  
 Gerber, Sanford E.

**Biomedical Technology and the Detection of Birth Defects.**

EDRS not available  
 Rehabilitation Literature: V33 N11 P322-25 Nov 1972

Descriptors: exceptional child education; aurally handicapped; infancy; identification; measurement techniques; technology; anomalies

Described are three techniques for the detection and identification of congenital deafness in newborns: measurement of respiratory activity, measurement of brain wave activity, and measurement of cardiovascular activity. The author notes that respiratory responses are easily detected and measured, and that they can be used as a gross test of hearing. The author prefers measurement of cardiac responses to measurement of brain wave activity due to problems with the analysis of electroencephalograms. (GW)

**ABSTRACT 50446**

EC 05 0446 ED N.A.  
 Publ. Date 70 152p.  
 Pushaw, David and Others

**Teach Your Child to Talk: Workshop Manual.**  
 EDRS not available  
 CEBCO/Standard Publishing Company, 104 Fifth Avenue, New York, New York 10011 (\$3.00).

Descriptors: preschool children; workshops; guidelines; language development; parent education; speech skills; language handicaps; prevention

Intended for use by leaders of parent education workshops on early language development in infants and preschool children, the manual, one part of a par-

ent education kit, gives information on starting a workshop and outlines the content of three suggested workshop sessions. The authors believe that intervention in the preschool period is more effective in preventing speech handicaps than speech therapy after a child has a speech disorder. Operation of a speech center is described as including the small group workshops, and offering speech evaluation services. Given are instructions on publicity, applications, a film, physical facilities, typical questions, and concluding activities. Given are four different presentations, a publicity presentation, and workshop presentations on language development in the first, second, and third years of life respectively. Each workshop description includes equipment and material, content of slides and script of the tape recording also included in kit, and suggested questions for discussion. A publicity flyer, radio and television announcements, an application form, a letter to parents, and a workshop evaluation form are included at the end of the manual. An address from which further information about the kit can be obtained is given. See EC 050 284 for the parent manual also included in the kit. (DB)

**ABSTRACT 60549**

EC 05 0549 ED N.A.  
 Publ. Date Mar 73 26p.

Kohn, Martin; Rosman, Bernice L.

**A Two-Factor Model of Emotional Disturbance in the Young Child: Validity and Screening Efficiency.**

EDRS not available  
 Journal of Child Psychology and Psychiatry: V14 N1 P31-36 Mar 1973

Descriptors: exceptional child education; emotionally disturbed; preschool children; rating scales; identification; behavior rating scales; test validity; screening tests; student evaluation; aggression; withdrawal tendencies (psychology) models

The study tested the validity and screening efficiency of a proposed two factor model of emotional disturbance in preschool children. Two rating instruments, the Social Competence Scale and the Problem Checklist, were employed to measure the following two dimensions of social-emotional functioning: Factor I, interest-participation versus apathy-withdrawal; and Factor II, cooperation-compliance versus anger-defiance. After evaluation of 1,425 children (aged 3 to 7 years) in day care centers, day treatment facilities, and a mental hospital, the factor dimensions were found to be efficient in differentiating disturbed children from a normal population. The group of disturbed children was found to have significantly more males and significantly fewer children from intact homes than the normative sample. Data indicated that girls who were disturbed showed predominantly Factor I pathology, but that only girls who showed Factor II pathology were likely to be referred for treatment. Disturbed groups of boys had Factor I and II scores that were high and roughly equal. Major conclusions were

that groups of children constituted on the basis of teachers' ratings can be discriminated by means of the Social Competence Scale and the Problem Checklist, and that the rating scales discriminate children considered well functioning from children considered poorly functioning or in need of treatment and from children assigned to various treatment groups. (GW)

#### ABSTRACT 50561

EC 05 0561 ED N.A.  
Publ. Date Jul 72 7p.  
Denhoff, Eric  
**Precursive Factors to Early and Identified Learning Disabilities.**  
EDRS not available  
Slow Learning Child; V19 N2 P79-85 Jul 1972

Descriptors: exceptional child services; learning disabilities; physicians; medical evaluation; identification; physical examinations; etiology; preschool evaluation

Outlined are prenatal and perinatal factors contributing to later learning disabilities and the role of the pediatrician in early identification and remediation of such problems. Five categories of factors contributing to make an infant at-risk for later learning disability are identified: low birth weight, dysmaturity, respiratory distress syndrome, high bilirubin level, and hemolytic syndrome. The importance of preschool evaluation when potential learning disability is suspected is stressed, but teacher/physician disparity in assessment is noted (the teacher assessing functions and the physician dealing in pathology). The physician is urged to better prepare himself to evaluate functions and skills related to academic performance. Recommended for a preliminary screening evaluation are body measurements and assessment of gross motor skills, fine patterned movements, sensory functions, sensory integration, and complex integration. (KW)

#### ABSTRACT 50685

EC 05 0685 ED N.A.  
Publ. Date Nov 71 11p.  
Frankenburg, William K. and Others  
**Reliability and Stability of the Denver Developmental Screening Test.**  
EDRS not available  
Child Development; V42 N5 P1315-25 Nov 1971

Descriptors: exceptional child research; handicapped children; screening tests; test reliability; infancy; preschool children; child development; Denver Developmental Screening Test

The investigation evaluated tester-observer agreement and test-retest stability of the Denver Developmental Screening Test (DDST) with 76 and 186 infants and preschool children, respectively. Correlation coefficients for mental ages obtained at a 1-week interval were determined for 13 age groups between 1;5 and 4;9 months. Coefficients ranged between .66 and .93 with no age trend displayed. Tester-observer agreement for individual items was greater than test-retest stability. Test-retest stability was as high or higher than similar reliability

for other tests at comparable ages. The group of items with high test-retest stability contained more items that were passable by parental report than did the group of low test-retest stability items. It was concluded that the high tester-observer reliability and test-retest stability and validity of the DDST, and the ease of administration and interpretation of the test make it a useful tool for screening for developmental deviations in preschool children. (Author/KW)

#### ABSTRACT 50985

EC 05 0965 ED 072 575  
Publ. Date Jan 72 122p.  
Starkovich, Paul

**Two-Year Study of Northwest Regional Center's Summer Sessions for Preschool, Rubella, Deaf-Blind Children.**  
Northwest Regional Center for Deaf-Blind Children, Vancouver, Washington  
Bureau of Education for the Handicapped (DHEW/OE), Washington, D. C.

EDRS mf, hc

Descriptors: exceptional child services; multiply handicapped; deaf blind; preschool evaluation; evaluation; program descriptions; summer programs; preschool children; rubella

The report describes the Summer Sessions for Preschool, Rubella, Deaf-Blind Children conducted in 1970 and 1971 by the Northwest Regional Center for Deaf-Blind Children in Vancouver, Washington. The summer programs were primarily designed to evaluate preschool deaf-blind children in a learning and living situation. The report is intended not only to describe the short-term evaluative programs, but also to show how a coordinated program may be organized, administered, and evaluated. Described are program objectives and the learning station concept upon which the program was based. The calendar of events for the 1971 program is included. Detailed are the methods of description and evaluation utilized as well as the process of forming recommendations for the children. Outlined are the objectives and procedures of the five learning stations (specialized areas of training and evaluation), which focused on communication skills, experience training, self help skills, physical development, and social skills. Briefly described are the residential station and medical diagnostic and evaluative services. Recommendations deal with program extensions and improved descriptive and assessment techniques. (KW)

#### ABSTRACT 50980

EC 05 0980 ED N.A.  
Publ. Date 72 297p.  
Satz, Paul, Ed.; Ross, John J., Ed.  
**The Disabled Learner: Early Detection and Intervention.**  
EDRS not available  
International Scholarly Book Services, Inc., P. O. Box 4347, Portland, Oregon 97208 (\$18.65).

Descriptors: exceptional child education; learning disabilities; disadvantaged

youth; preschool children; early childhood; conference reports; etiology; educational diagnosis; teaching methods; interdisciplinary approach; intervention; remedial instruction

Directed to a multidisciplinary audience, proceedings from the 1971 conference on disabled learners contain 13 articles about precursors, etiology, detection, and management of learning problems in children, as well as critical evaluations of new methods of intervention. Four articles on preschool development treat the modifiability of human potential, early brain damage and later development, early language development in the normal child, and followup data on predictive antecedents of specific learning disability. Nine discussions on problems of early school development consider topics such as the following: learning disabilities found in elementary schools, a theory of developmental dyslexia, natural history and electrophysiological characteristics of familial language dysfunction, childhood aphasia, remediation/prevention methods and materials, a sequential learning approach for culturally deprived children, effective teaching for young, disadvantaged children, precision teaching, and applied behavioral analysis and learning disorders. (GW)

#### ABSTRACT 51051

EC 05 1051 ED N.A.  
Publ. Date Feb 73 5p.  
Woodruff, M. E.  
**The Visually 'At Risk' Child.**  
EDRS not available  
Journal of the American Optometric Association; V44 N2 P130-4 Feb 1973

Descriptors: exceptional child services; visually handicapped; infants; early childhood; prevention; intervention; screening tests; incidence

The concept of the visually at risk child is said to offer a productive approach to the early detection of visual defects by providing a means of discriminating children most likely to need the services of available professional personnel. Conditions which would place children visually at risk are categorized: heredity; prenatal disease; social and environmental influences on the mother; perinatal conditions, stresses and traumas; postnatal disease or traumatic states; and evident ocular or behavioral abnormality. Practitioners are urged to identify visually at risk children by means of these categories and to refer such individuals for vision examinations. (GW)

#### ABSTRACT 51135

EC 05 1135 ED N.A.  
Publ. Date Apr 71 6p.  
Eisenberg, Rita B.  
**Pediatric Audiology: Shadow or Substance?**  
EDRS not available  
Journal of Auditory Research; VII N2 P148-53 Apr 1971

Descriptors: exceptional child services; aurally handicapped; infants; early childhood; childhood; research needs; audiology; perceptual development; diagnostic tests; auditory tests; screening tests

The author cites a lack of research on stages of normal hearing development and a corresponding lack of insight into the nature of childhood abnormalities, particularly communication disorders, as evidence of a neglect of pediatric audiology. Current auditory screening procedures are criticized for involving only gross observation of an infant's responses to sound which does not allow the examiner to say anything about the integrity of the eighth nerve, much less the processes of hearing. Progress in pediatric audiology is said to require normative information about normal development as a prerequisite to the design of clinical measures that refer quantitatively to specific coding operations and to the development of specific therapeutic procedures. (GW)

#### ABSTRACT 51137

EC 05 1137 ED N.A.  
Publ. Date 72 26p.  
Bell, William E.; McCormick, William F.

#### Increased Intracranial Pressure in Children.

EDRS not available  
W. B. Saunders Company, 218 West Washington Square, Philadelphia, Pennsylvania 19105 (\$16.00).

Descriptors: exceptional child services; physically handicapped; neurologically handicapped; neurology; anomalies; infancy; early childhood; medical evaluation; medical treatment; textbooks

Intended for physicians, the book presents information about diseases which can produce intracranial hypertension in infancy and childhood and describes diagnostic procedures and plans of therapeutic management. Part I of the book considers increased intracranial pressure in childhood by examining headaches in childhood, lumbar puncture with increased intracranial pressure, roentgenographic signs of increased intracranial pressure, and transtentorial and cerebellar herniations. Part II discusses causes of increased intracranial pressure in childhood and examines cerebral edema, hydrocephalus, benign intracranial hypertension (pseudotumor cerebri), lead encephalopathy, head trauma, and brain abscess. Intracranial tumors in childhood are considered in Part III which discusses clinical signs and diagnostic assessment; posterior fossa tumors; tumors in the region of the pineal gland; parapituitary, pituitary, and hypothalamic tumors; cerebral hemisphere tumors; congenital tumors; and miscellaneous tumors. (DB)

#### ABSTRACT 51349

EC 05 1349 ED N.A.  
Publ. Date 72 2p.  
Severson, Roger A.

#### Early Detection of Children with Potential Learning Disabilities: A Seven-Year Effort.

EDRS not available  
Proceedings, 80th Annual Convention, American Psychological Association; V7 N2 P561-2 1972

Descriptors: exceptional child research; learning disabilities; early childhood;

prediction; diagnostic tests; evaluation; test reliability; test validity

Reported were results of a project which assessed the diagnostic value of instruments used for the early detection of children with potential learning disabilities. Seventeen samples of 4-, 5-, and 6-year-old children were employed, with the smallest sample including 60 children and the largest sample involving 400 children. Instruments such as the following were evaluated: the five subtests of the Wechsler Intelligence Scale for Children, the Wechsler Preschool and Primary Scale of Intelligence, the group and Individual form of the Bender Gestalt Test and the Frostig Developmental Test of Visual Perception. The predictive ability of the Bender Gestalt Test, the Frostig Developmental Test, the Wepman Test of Auditory Discrimination, and the Illinois Test of Psycholinguistic Abilities were found to be the most disappointing. It was reported that two subtests, (information and vocabulary), of the Wechsler Intelligence Scale for Children accomplished almost as much predictively as the full IQ test. Recent project efforts were reported to have focused on diagnosing the teaching environment rather than investigating the student's current status. (GW)

#### ABSTRACT 51363

EC 05 1363 ED N.A.  
Publ. Date Jan-Feb 6p.  
Lin-Fu, Jane S.

#### Preventing Lead Poisoning in Children.

EDRS not available  
Children Today; V2 N1 P2-6, 36 Jan-Feb 1973

Descriptors: exceptional child education; special health problems; infancy; early childhood; prevention; urban environment; identification; public health; Lead Poisoning

Discussed is the prevention of lead poisoning in young children 1- to 6-years of age. Lead poisoning is said to be most prevalent among children living in urban slum housing, and is reported to lead to mental retardation, cerebral palsy, convulsive disorders, blindness, learning defects, behavior disorders, kidney diseases, and other handicaps. Stressed is the importance of identifying children early in the stage of undue lead absorption. It is reported that up to 40% of preschool children living in high risk areas have been found to have blood levels of 40  $\mu\text{g}/100\text{ ml}$  or more. Noted is that childhood lead poisoning is not confined to inner city areas. Other sources of lead exposure are said to include street dust, soil, improperly glazed earthenware, evaporated milk, the paint coating on pencils, toothpaste tubes, and the ink used by some printers. Among the recommendations given are the expansion of screening and treatment programs, the continuous search for sources of lead exposure, and the continuation of public education on the problem of childhood lead poisoning (DB)

#### ABSTRACT 51408

EC 05 1408 ED N.A.  
Publ. Date Mar 73 8p.  
Dontanville, Virginia K.; Cunningham, George C.

#### Effect of Feeding on Screening for PKU in Infants.

Pediatrics; V51 N3 P531-8 Mar 1973

Descriptors: exceptional child research; special health problems; infancy; eating habits; screening tests; test reliability; Phenylketonuria

No relationship between the phenylalanine content of the feedings prior to the phenylketonuria (PKU) screening test and a positive test result could be demonstrated in a study of hospital records of 68 phenylketonuric, 14 atypical, and 26 hyperphenylalaninemic infants. Infants' mean age at testing was 62.8 hours. The median intake before testing was 383 milligrams (mg) of phenylalanine with a range of 0 in five cases to over 3,000 mg for two late tested infants. One quarter of the infants with positive tests had ingested less than 200 mg of phenylalanine, while only one of the 11 with negative tests had less than 200 g. The missed cases were represented at each intake interval, and intakes ranged from 174 to 1,326 mg phenylalanine. Screening test results ranged from 1 to 40 mg/100 milliliter (ml) with wide variation at all intervals of phenylalanine intake. There was a gradual increase in mean levels from 7.1 mg/100 ml in the group with least intake to 13.0 for those having the most. This increase was attributable mainly to the PKUs whose mean levels were higher than those of the atypicals and hypers at all intake intervals, and went much higher with increased intake. Serial tests on 20 infants who had repeat testing in the first few days of life when feeding was documented demonstrated the rapid rise in serum levels in PKUs as feeding continued in contrast to the atypicals and hypers who showed only slight increases during this period. The authors concluded there is no evidence that missed cases are significantly related to feeding protein or early testing in routine PKU screening of the newborn infant. (Author)

#### ABSTRACT 51458

EC 05 1456 ED N.A.  
Publ. Date Mar 73 8p.  
Carolan, Robert H.

#### Sensory Stimulation and the Blind Infant.

New Outlook for the Blind; V67 N3 P119-26 Mar 73

Descriptors: exceptional child education; visually handicapped; blind; infancy; stimulus behavior; sensory training; multisensory learning; child development

Exposure to a rich environment of sensory stimulation is said to be necessary for the physical, psychological, social, and intellectual development of blind infants. Undesirable behaviors that may result from sensory deprivation are identified. Provision of the appropriate sensory environment is thought to require parents (especially mothers) who have warm, affectionate, and positive attitudes

toward the child; establishment of a curriculum of sensory input; and professional assistance for parents attempting to meet the developmental needs of the blind infants and preschool children. Roles of teachers and pediatricians are discussed briefly. (GW)

**ABSTRACT 52488**

EC 05 2488

Publ. Date Spr 73

Abbott, Robert E.

**Perceptions of Early Childhood:  
Where Have We Been and Where are  
We Going?**

ED N.A.

7p.

EDRS not available  
Journal of the Association for the Study  
of Perception; V8 N1 P26-32 Spr 1973

Descriptors: exceptional child education;  
handicapped children; early childhood  
education; educational trends; identifica-  
tion; intervention; prevention

The analysis of trends in early childhood education stresses the importance of mental development during the early childhood period, examines the distribution of intelligence, recommends early

identification and intervention with handicapped children, emphasizes the importance of parent involvement, considers the effects of differing among professionals, and reports on a new Illinois law which requires that special educational services be provided for all handicapped children between the ages of 3 and 21 years. Early identification and appropriate intervention is thought to prevent later problems in the areas of social, physical, emotional, or mental development. (DB)

## AUTHOR INDEX

Adkins, Patricia G 42001.  
 Barraga, Natalie 40609.  
 Beery, Keith E 10132.  
 Bell, William E 51137.  
 Birns, Beverly 40876.  
 Blatt, Burton 31576.  
 Bluth, Linda and Others 40252.  
 Broussard, Elsie R 31069.  
 Bullard, Bonnie M 40609.  
 Calvert, Donald R 30347.  
 Carolan, Robert H 51456.  
 Corrigan, Francis V and Others 20722.  
 Crandall, Barbara F and Others 51970.  
 Cunningham, George C 51408.  
 Cusworth, D C, Ed 40491.  
 Denhoff, Eric 30328, 50561.  
 Dontanville, Virginia K 51408.  
 Eaves, Linda C and Others 22238.  
 Elsenberg, Rita B 51135.  
 Erickson, Marilyn T and Others 22998.  
 Esche, Jeanne 33054.  
 Fiedler, Miriam F and Others 32894.  
 Fischer, Margaret 40338.  
 Francis-Williams, Jessie 32481.  
 Frankenburg, William K and Others 50685.  
 Garfunkel, Frank 31576.  
 Gerber, Sanford E 50419.  
 Gold, Edwin M, Ed 42898.  
 Golden, Mark 40876.

Moncur, John P 21046.  
 Goldstein, Robert 31790.  
 Gordon, Ronnie and Others 40720.  
 Griffin, Carol 33054.  
 Griswold, Patricia A 42886.  
 Haeussermann, Else 31543.  
 Hartner, Miriam Sergay Sturgeon 31069.  
 Hemenway, W Garth 50020.  
 Hodges, Walter L and Others 31745.  
 Hoffman, D T 30270.  
 Holden, Raymond H 41159.  
 Horton, Kathryn B 22722.  
 Hoversten, Gloria H 21046.  
 Hunter, Marvin H and Others 42943.  
 Husted, J and Others 31879.  
 Kang, Ellen Song and Others 31441.  
 Kohn, Martin 50549.  
 Korner, Anneliese F 40856.  
 Kuhn, Roy 42769.  
 Lagos, Jorge C 42611.  
 Lin-Fu, Jane S 51363.  
 Luteran, David M 22738.  
 Mager, Robert F 42115.  
 Marion P 20310, 50020.  
 Matheny, Adam P, Jr 23270.  
 McConnell, Freeman 22722.  
 McCormick, William F 51137.  
 Mcneil, Thomas F and Others 23169.  
 Mednick, Miriam F 21528.  
 Merklein, Richard A 42399.  
 Molitor, M Graham 10126.

Newcomb, Mary Ann 40350.  
 Northcott, Winifred H, Ed 40761.  
 Painter, Genevieve 32199.  
 Park, Gloria Gayle 41320.  
 Parsons, Michael 32135.  
 Pushaw, David and Others 50446.  
 Read, Merrill S 21214.  
 Redell, Rayford C 30347.  
 Reger, Roger, Ed 23268.  
 Reistroffer, Mary 42769.  
 Ritchie, Betty Caraway 42399.  
 Robb, Richard M 23120.  
 Rosman, Bernice L 50549.  
 Ross, John J, Ed 50980.  
 Satz, Paul, Ed 50980.  
 Severson, Roger A 51349.  
 Sluckin, W, Ed 42941.  
 Smith, Stanley A 32342.  
 Solanto, Joseph R 32342.  
 Sonstegard, Manford A 32233.  
 Spitz, Rene A 40461.  
 Starkovich, Paul 50965.  
 Tait, Charles 31790.  
 Tseng, Meng-Shu 32233.  
 Tyler, Nancy B 42059.  
 Vernon, McCay 11553.  
 Walker, Carl 42001.  
 Woodruff, M E 51051.  
 Yarrow, Leon J and Others 42272.  
 Zimmerman, Irla Lee and Others 32525.

## SUBJECT INDEX

Academic Achievement 11553, 20722, 22738, 32233.  
 Academic Performance 20722.  
 Achievement 40720, 42115.  
 Adaptation Level Theory 40461.  
 Age Differences 31441, 32233.  
 Aggression 50549.  
 Animal Behavior 42941.  
 Anomalies 50419, 51137.  
 Attention Span 32233.  
 Attitudes 32233.  
 Audiology 51135.  
 Audiometric Tests 11553, 31790.  
 Auditory Evaluation 22722.  
 Auditory Perception 32525.  
 Auditory Tests 10132, 21046, 42399, 51135.  
 Auditory Training 22722.  
 Aural Stimuli 20310, 21046.  
 Aurally Handicapped 11553, 20310, 21046, 22722, 22738, 23268, 30347, 31790, 32135, 40761, 42399, 50020, 50419, 51135.  
 Autism 40461.  
 Behavior Change 21784, 42941.  
 Behavior Development 20821.  
 Behavior Patterns 40461, 40856.  
 Behavior Problems 23169.  
 Behavior Rating Scales 50549.  
 Behavioral Objectives 40761, 42115.  
 Behavioral Science Research 30270.  
 Bender Gestalt Test 11553.  
 Bibliographies 40252.  
 Biochemistry 40491.

Biological Influences 20821, 40491.  
 Blind 51456.  
 Body Weight 22238.  
 California 40350.  
 Case Studies 42943.  
 Cattel Infant Intelligence Scale 23270, 31879.  
 Cerebral Palsy 21978, 30328, 42886.  
 Child Care Workers 21528.  
 Child Development 23120, 31069, 32525, 33054, 40856, 42272, 42886, 50685, 51456.  
 Child Psychology 40461.  
 Child Rearing 21784, 33054, 42769.  
 Childhood 10132, 23164, 32135, 32342, 32525, 32894, 42611, 42769, 42941, 943, 50980, 51051, 51135, 51137, 51349, 51363.  
 Classification 42611.  
 Classroom Observation Techniques 21978.  
 Cleft Palate 21978.  
 Clinical Diagnosis 20862, 23270, 30328, 51970.  
 Cognitive Development 20821, 21781, 32199, 40876, 42272.  
 Cognitive Measurement 40609.  
 Communication Skills 42943.  
 Community Programs 21528.  
 Compensatory Education 31745.  
 Conditioned Response 42941.  
 Conference Reports 21784, 21978, 23164, 42898, 50185, 50980.  
 Culturally Disadvantaged 20821, 32199.

Curiosity 42272.  
 Curriculum 10126, 21978, 40350.  
 Curriculum Development 21978.  
 Curriculum Guides 10126, 40761.  
 Custodial Mentally Handicapped 31879.  
 Deaf 11553, 22722.  
 Deaf Blind 33054, 50965.  
 Demonstration Projects 32685, 42629.  
 Denver Developmental Screening Test 50685.  
 Developmental Psychology 42941.  
 Developmental Test of Visual Motor Integration 10132.  
 Diagnostic Screening Form for Detection of Neurological Impairment in Deaf 11553.  
 Diagnostic Teaching 11333, 31745, 32685, 50185.  
 Diagnostic Tests 42059, 42943, 51135, 51349.  
 Dietetics 20862, 31441.  
 Disadvantaged Environment 21528.  
 Disadvantaged Youth 20821, 21214, 31576, 31745, 32199, 32685, 40720, 40876, 50980.  
 Disease Control 31441.  
 Diseases 42611.  
 Drug Therapy 30328.  
 Early Childhood Education 21781, 21784, 21978, 30270, 31576, 32199, 32685, 761, 41320, 42001, 42886, 50185.  
 Eating Habits 21214, 51408.  
 Educable Mentally Handicapped 10126.

- Educational Diagnosis 22998, 23164, 32481, 50980.  
 Educational Needs 42001.  
 Educational Objectives 11333, 21781.  
 Educational Philosophy 21781.  
 Educational Programs 21978, 40350, 41320, 42886, 42943.  
 Educational Television 23164.  
 Educational Testing 11333.  
 Educational Theories 11333.  
 Electronic Equipment 21046.  
 Elementary and Secondary Education Act Title VI 32685.  
 Elementary Grades 23164.  
 Emotional Adjustment 11553.  
 Emotional Development 20821.  
 Emotional Problems 32233.  
 Emotionally Disturbed 23169, 31069, 40252, 40461, 50549.  
 Environmental Influences 20821, 21214, 21781, 42272, 42941.  
 Environmental Research 42272.  
 Etiology 11553, 50561, 50980.  
 Evaluation 32525, 50965, 51349.  
 Evaluation Criteria 42115.  
 Evaluation Techniques 21046.  
 Exceptional Child Education 10126, 11333, 20310, 21214, 21781, 21978, 23164, 23268, 33054, 40350, 40609, 40761, 42001, 42769, 42886, 42943, 50185, 50419, 50549, 50980, 51363, 51456.  
 Exceptional Child Research 10132, 11553, 20722, 20821, 21046, 22238, 22722, 22738, 22998, 23169, 23270, 30347, 31069, 31441, 31543, 31576, 31745, 31879, 32199, 32233, 32342, 32481, 32685, 32894, 40720, 40876, 41159, 41320, 42399, 42629, 50685, 51349, 51408, 51970.  
 Exceptional Child Services 20862, 21528, 31790, 32135, 40252, 40338, 40461, 42611, 42898, 50020, 50561, 50965, 51051, 51135, 51137.  
 Experience 21781, 21978, 30270.  
 Eyes 23120.  
 Family Involvement 21784.  
 Family Role 20862, 42943.  
 Followup Studies 20862, 31441.  
 Genetics 51970.  
 Goal Orientation 42115.  
 Grouping Instructional Purposes 32342.  
 Guidelines 33054, 42886, 50446.  
 Habit Formation 42941.  
 Handicapped Children 23164, 23268, 50185, 50685.  
 Hard of Hearing 11553.  
 Head Start 21781.  
 Health 21214.  
 Health Programs 21528.  
 Hearing Aids 22722.  
 Hearing Loss 11553, 22722, 30347, 31790.  
 Heterotropia 23120.  
 Home Instruction 42943.  
 Home Visits 32135.  
 Human Development 20821.  
 Hyperactivity 42769.  
 ITPA 10132.  
 Identification 10132, 11333, 20310, 20862, 21781, 21784, 23120, 23164, 23268, 31790, 32135, 32233, 32342, 32481, 40491, 42399, 42629, 42769, 42943, 50020, 50185, 50419, 50549, 50561, 51363.  
 Identification Tests 11333.  
 Illinois Test of Psycholinguistic Abilities 10132.  
 Immaturity 11333.  
 Incidence 51051.  
 Individual Development 22998, 30270.  
 Individual Differences 11333, 40856.  
 Infancy 20310, 20862, 21214, 21528, 22722, 22738, 23120, 23169, 30347, 31069, 31441, 31790, 32199, 32894, 33054, 40338, 40350, 40461, 40761, 40856, 40876, 41159, 42272, 42611, 42886, 42941, 42943, 50020, 50419, 50685, 51137, 51363, 51408, 51456.  
 Infant Behavior 30270, 31879, 40856.  
 Infants 20821, 21046, 21781, 21784, 22238, 22998, 40491, 42769, 51051, 51135.  
 Institutional Schools 10126.  
 Institutionalized (Persons) 10126.  
 Instructional Materials 23164, 23268, 50185.  
 Intellectual Development 21214, 22238, 31441.  
 Intelligence 11553.  
 Intelligence Differences 21214, 31441.  
 Intelligence Quotient 23270, 31441.  
 Intelligence Tests 23270, 31543, 31879.  
 Interdisciplinary Approach 42943, 50980.  
 Interpersonal Competence 41320.  
 Intervention 31576, 31745, 32199, 32685, 40252, 42001, 50980, 51051.  
 Itinerant Teachers 41320.  
 Kindergarten Children 31745.  
 Language Development 20310, 20821, 22722, 22738, 23268, 32199, 32894, 50446.  
 Language Handicapped 32894.  
 Language Handicaps 50446.  
 Language Instruction 40761.  
 Language Learning Levels 32525.  
 Language Tests 10132, 32525, 32894.  
 Lead Poisoning 51363.  
 Learning Characteristics 21214.  
 Learning Difficulties 22998, 32233, 32685.  
 Learning Disabilities 10132, 11333, 31543, 32342, 32481, 32894, 42001, 42629, 42769, 50561, 50980, 51349.  
 Learning Laboratories 31576.  
 Learning Processes 21214, 42941.  
 Literature Reviews 31576.  
 Longitudinal Studies 10132, 31576, 32233.  
 Lower Class 40876.  
 Males 51970.  
 Manipulative Materials 40720.  
 Maturation 20821.  
 Measurement Techniques 32525, 50419.  
 Medical Case Histories 51970.  
 Medical Evaluation 20862, 23120, 30328, 42611, 50561, 51137.  
 Medical Research 21214, 31441, 51970.  
 Medical Services 20862, 21528.  
 Medical Treatment 20862, 30328, 31441, 42943, 51137.  
 Mental Development 20722.  
 Mental Retardation 42611.  
 Mentally Handicapped 10126, 20862, 21528, 23270, 30328, 31441, 31576, 31879, 40338, 40350, 40491, 41159, 42898, 42943, 51970.  
 Metabolism 20862, 40491.  
 Minimally Brain Injured 11333, 11553, 30328, 40720.  
 Minority Groups 40876.  
 Models 50549.  
 Mother Attitudes 21528.  
 Mothers 31069, 40856.  
 Mothers Medical Treatment 42898.  
 Motor Development 20821, 30328.  
 Multiply Handicapped 11553, 23164, 33054, 40350, 50965.  
 Multisensory Learning 51456.  
 National Surveys 21214.  
 Negro Youth 40876.  
 Neurological Defects 11553, 30328.  
 Neurologically Handicapped 31543, 40720, 51137.  
 Neurology 42611, 51137.  
 New Zealand 32135.  
 Nursery Schools 22738.  
 Nursing 30347.  
 Nutrition 20862, 21214, 40338.  
 Operant Conditioning 42941.  
 Ophthalmology 23120.  
 PKU 20862.  
 Parent Attitudes 21784, 22722, 22738, 31069, 32233.  
 Parent Child Relationship 31069, 40856.  
 Parent Counseling 21784.  
 Parent Education 21784, 22722, 22738, 23164, 33054, 40761, 42886, 50446.  
 Parent Influence 42941.  
 Parent Participation 21784, 21978, 22722, 22738.  
 Parent Role 21781, 21784, 40761, 42629, 42769.  
 Parent School Relationship 42769.  
 Parents 23268.  
 Pediatrics 31441, 42611.  
 Perception 21781.  
 Perceptual Development 51135.  
 Perceptual Motor Coordination 23268, 40720.  
 Performance Criteria 42115.  
 Perinatal Influences 23169, 32894.  
 Personal Adjustment 40461.  
 Personality Development 20821, 40876.  
 Phenylalanine Diet Low 31441.  
 Phenylketonuria 20862, 31441, 40338, 40491, 51408.  
 Physical Activities 42886.  
 Physical Development 21214.  
 Physical Environment 42272.  
 Physical Examinations 50561.  
 Physical Therapy 30328.  
 Physically Handicapped 30328, 42886, 51137.  
 Physicians 50561.  
 Prediction 10132, 41159, 50020, 51349.  
 Predictive Measurement 10132, 23270, 40876, 41159.  
 Predictive Validity 23270.  
 Pregnancy 21528, 42898.  
 Premature Infants 11553, 20722, 21528, 22238, 23169, 42898.  
 Prenatal Influences 20821, 23169, 42898.  
 Preschool Children 10126, 10132, 11333, 21784, 21978, 23270, 30328, 32135, 32481, 32685, 33054, 40252, 40350, 40720, 40761, 40876, 41320, 42001, 42059, 42399, 42629, 50185, 50446, 50549, 50685, 50965, 50980.  
 Preschool Curriculum 10126.  
 Preschool Education 21781, 23268, 30270, 31576, 31745.  
 Preschool Evaluation 23268, 32233, 32342, 32481, 32525, 40609, 40720, 50561, 50965.  
 Preschool Programs 10126, 22722, 22738, 23164.  
 Preschool Tests 31543.  
 Prevention 10132, 21528, 31576, 40252, 40350, 41320, 42001, 50446, 51051, 51363.  
 Prognostic Tests 10132.

Program Descriptions 40761, 42886,  
42943, 50020, 50965.  
Program Effectiveness 40491.  
Program Planning 23268.  
Psychiatry 40461.  
Psycholinguistics 10132.  
Psychological Characteristics 21781.  
Psychological Needs 20821.  
Psychological Services 20862.  
Psychological Tests 10132.  
Psychomotor Skills 40609.  
Psychotherapy 42943.  
Public Health 51363.  
Questionnaires 42629, 50020.  
Rating Scales 50549.  
Readiness Mental 32342.  
Reading Skills 23164.  
Referral 32135.  
Regular Class Placement 32685.  
Reinforcers 31879.  
Remedial Instruction 23164, 50980.  
Research Methodology 31576.  
Research Needs 51135.  
Research Projects 40856, 42059, 42272.  
Research Reviews Publications 20821,  
21214, 42941.  
Residential Programs 10126.  
Residential Schools 10126.  
Retarded Speech Development 32894.  
Rubella 50965.  
Screening Tests 10132, 20862, 21046,  
30347, 31790, 32135, 32894, 40338,  
40491, 42399, 50020, 50549, 50685,  
51051, 51135, 51408.

Seizures 42611.  
Self Concept 32233.  
Sensory Deprivation 30270.  
Sensory Experience 42272.  
Sensory Training 41320, 51456.  
Sequential Approach 21978.  
Sex Differences 22238.  
Slow Learners 31745.  
Social Adjustment 32233.  
Social Development 20821.  
Social Experience 42272.  
Social Factors 20821.  
Social Services 20862, 21528.  
Social Structure 20821.  
Social Work 21528.  
Socialization 42941.  
Socioeconomic Influences 21214, 21528,  
42898.  
Socioeconomic Status 22238.  
Southern Wisconsin Colony and Training  
School 10126.  
Special Health Problems 20862, 42611,  
51363, 51408.  
Speech Handicapped 21978.  
Speech Skills 50446.  
Speech Therapy 21978.  
Stanford Binet Intelligence Test 23270.  
State Legislation 40338.  
Stimuli 21046.  
Stimulus Behavior 51456.  
Student Behavior 21978.  
Student Evaluation 21978, 50549.

Summer Programs 23268, 50965.  
Surveys 42629.  
Tactual Perception 42059.  
Task Performance 10132.  
Teacher Role 32342, 50185.  
Teaching Methods 32199, 50980.  
Technology 50419.  
Test Construction 31543.  
Test Reliability 42059, 50685, 51349,  
51408.  
Test Validity 42399, 50549, 51349.  
Testing 21046, 22238, 22998, 23270,  
31543, 40609.  
Tests 10132.  
Texas 32685.  
Textbooks 51137.  
Therapy 40338, 42769.  
Trainable Mentally Handicapped 10126,  
42943, 51970.  
Urban Environment 51363.  
Verbal Auditory Screening for Children  
42399.  
Verbal Learning 32525.  
Vision 23120.  
Vision Tests 23120.  
Visual Acuity 23120.  
Visually Handicapped 21978, 23268,  
40609, 41320, 51051, 51456.  
Volunteers 40350.  
Withdrawal Tendencies Psychology  
50549.  
Workshops 32342, 50446.

# ERIC DOCUMENT REPRODUCTION SERVICE LEASCO INFORMATION PRODUCTS, INC.

P.O. Drawer O, Bethesda, Md. 20014

For EDRS Use

CUSTOMER NO. \_\_\_\_\_  
ORDER NO. \_\_\_\_\_  
TYPE \_\_\_\_\_ CAT. \_\_\_\_\_  
INVOICES \_\_\_\_\_  
ON FILE \_\_\_\_\_

## ON-DEMAND ORDER BLANK

BILL TO: \_\_\_\_\_

SHIP TO: \_\_\_\_\_

PURCHASE ORDER NO. \_\_\_\_\_ (Zip) \_\_\_\_\_

(Zip) \_\_\_\_\_

### ERIC REPORTS TO BE ORDERED

Item	ERIC Report (6 Digit ED No.)	Number of Copies		Unit Price	Total Price
		M/F	PC		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

<input type="checkbox"/> PREPAID _____	SUB-TOTAL	
<input type="checkbox"/> TAX EXEMPTION NO. _____	SALES TAX	
<input type="checkbox"/> DEPOSIT ACCT. NUMBER _____	POSTAGE	
<input type="checkbox"/> CHECK NUMBER _____	TOTAL	

### IMPORTANT INSTRUCTIONS

- Order ERIC Reports only by 6 digit ED No. shown in Research in Education (RIE) or other Indices
- Indicate if you want microfiche film (M/F) or paper copies (PC)
- Enter unit prices from the Price List below. All other prices are out of date
- Enclose check or money order payable to EDRS for orders totalling less than \$10.00

### PRICE LIST

MICROFICHE (M/F)	PAPER COPIES (PC)	
Each ERIC Report - \$0.65	Number of Pages	Price
Microfiche Film (M/F) is a 4" x 6" sheet of microfilm on which up to 70 pages of text are reproduced.	per ERIC Report:	
	1 - 100	\$3.29
	101 - 200	6.58
	201 - 300	9.87
	Each additional 100 pages or portion thereof -	\$3.29

#### NOTE:

1. Fourth Class Book Rate or Library Rate postage is included in above prices.
2. The difference between Book Rate or Library Rate and first class or foreign postage (outside the continental United States) rate will be billed at cost.
3. Paper copies (PC), shown as hard copy (HC) in past RIE issues, will be stapled with heavy paper covers.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TITLE OR DEPT. \_\_\_\_\_

MAKE ALL DRAFTS PAYABLE TO EDRS

Orders are filled only from ED accession numbers. Titles are not checked. Please be sure you have supplied the correct numbers.

ERIC DOCUMENT REPRODUCTION SERVICE is operated by Leasco Information Products, Inc. for the U.S. Office of Education.

\*SUBJECT TO ALL TERMS AND CONDITIONS ON REVERSE SIDE OF THIS FORM.



## TERMS AND CONDITIONS

### 1. PRICE LIST

The prices set forth herein may be changed without notice; however, any price change will be subject to the approval of the U.S. Office of Education Contracting Officer.

### 2. PAYMENT

The prices set forth herein do not include any sales, use, excise, or similar taxes which may apply to the sale of microfiche or hard copy to the Customer. The cost of such taxes, if any, shall be borne by the Customer.

Payment shall be made net thirty (30) days from date of invoice. Payment shall be without expense to LIPCO.

### 3. REPRODUCTION

Materials supplied hereunder may only be reproduced for not-for-profit educational institutions and organizations; provided however, that express permission to reproduce a copyrighted document provided hereunder must be obtained in writing from the copyright holder noted on the title page of such copyrighted document.

### 4. CONTINGENCIES

LIPCO shall not be liable to Customer or any other person for any failure or delay in the performance of any obligation if such failure or delay (a) is due to events beyond the control of LIPCO including, but not limited to, fire, storm, flood, earthquake, explosion, accident, acts of the public enemy, strikes, lockouts, labor disputes, labor shortage, work stoppages, transportation embargoes or delays, failure or shortage of materials, supplies or machinery, acts of God, or acts or regulations or priorities of the federal, state, or local governments; (b) is due to failures of performance of subcontractors beyond LIPCO's control and without negligence on the part of LIPCO; or (c) is due to erroneous or incomplete information furnished by Customer.

### 5. LIABILITY

LIPCO's liability, if any, arising hereunder shall not exceed restitution of charges.

In no event shall LIPCO be liable for special, consequential, or liquidated damages arising from the provision of services hereunder.

### 6. WARRANTY

LIPCO MAKES NO WARRANTY, EXPRESS OR IMPLIED, AS TO ANY MATTER WHATSOEVER, INCLUDING ANY WARRANTY OF MERCHANTABILITY OR FITNESS FOR ANY PARTICULAR PURPOSE.

### 7. QUALITY

LIPCO will replace products returned because of reproduction defects or incompleteness. The quality of the input document is not the responsibility of LIPCO. Best available copy will be supplied.

### 8. CHANGES

No waiver, alteration, or modification of any of the provisions hereof shall be binding unless in writing and signed by an officer of LIPCO.

### 9. DEFAULT AND WAIVER

a. If Customer fails with respect to this or any other agreement with LIPCO to pay any invoice when due or to accept any shipment as ordered, LIPCO may without prejudice to other remedies defer any further shipments until the default is corrected, or cancel this Purchase Order.

b. No course of conduct nor any delay of LIPCO in exercising any right hereunder shall waive any rights of LIPCO or modify this Agreement.

### 10. GOVERNING LAW

This Agreement shall be construed to be between merchants. Any question concerning its validity, construction, or performance shall be governed by the laws of the State of New York.