Presented is information on adapted physical education and recreation for the multiply handicapped. An introductory section contains varying definitions of the term 'multiply handicapped' and explains that more programming information and literature exist in the areas of the deaf-blind and the cerebral palsied than for other handicapping conditions. The major portion of the document is devoted to a list of 139 references on general information about multihandicapping conditions, educational and training programs, and physical education and recreation programs. References are listed alphabetically by author or source and usually contain titles, publication date, and, in some cases, abstracts, pagination, and ordering information. Other sections include descriptions of 12 representative programs for the multihandicapped, a list of 27 resource contacts (with addresses), a directory of centers for the deaf-blind, and an annotated list of 30 films and audiovisual aids.
PHYSICAL EDUCATION AND RECREATION FOR INDIVIDUALS WITH MULTIPLE HANDICAPPING CONDITIONS

September 1974

INFORMATION AND RESEARCH UTILIZATION CENTER IN PHYSICAL EDUCATION AND RECREATION FOR THE HANDICAPPED

Sponsored by
American Alliance for Health, Physical Education, and Recreation
1201 Sixteenth Street, N.W.
Washington, D.C. 20036

A Project of
ACKNOWLEDGEMENTS

This guide was prepared by Dolores Geddes, Research/Program Associate in the AAHPER Information and Research Utilization Center in Physical Education and Recreation for the Handicapped. Thanks and appreciation are also extended to the many individuals and representatives of various groups who directly and indirectly contributed to the success of this guide. Those who benefit the most from the efforts of all concerned will be impaired, disabled, and handicapped persons who have greater opportunities and enriched experiences through expanded physical education, recreation, and related programs because of these efforts.

The project presented or reported herein was performed pursuant to a Grant from the U.S. Office of Education, Department of Health, Education, and Welfare. However, the opinions expressed herein do not necessarily reflect the position or policy of the U.S. Office of Education, and no official endorsement by the U.S. Office of Education should be inferred.

Project No. OEG-0-72-5454-233563

American Alliance for Health, Physical Education, and Recreation
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INTRODUCTION

During recent years, an increase in the number of multiple handicapped children has been noticed with a resulting increase in the number of programs developed or expanded for individuals with multiple conditions. Because of this type of programming, numerous requests have been received by the Information and Research Utilization Center in Physical Education and Recreation for the Handicapped (IRUC) for information on physical education and recreation programs, methods, and activities for multiple handicapped individuals. Accordingly, an effort has been made to develop a publication for program information, references, audiovisual aids and resources related to this topic. Information has been gathered and analyzed from related literature, bibliographies, project reports, books, guides, manuals, and data retrieval system print-outs. In addition, an extensive mailing for information was made in September 1973, to related personnel, organizations, schools and agencies at local, state, and national levels.

Unfortunately, overall response to this search to see what's going on in physical education and recreation for multiple handicapped persons has been minimal in quantity and appropriateness. As indicated by the content and brevity of the list of references contained in this publication, little printed matter has been available on this specific subject; however, articles and publications with general and educational/training information about multiple handicapped populations are becoming more available. Representative references were selected for general and educational/training information and are presented in the first section of the list of references while the second section contains the listings found for physical education and recreation. The second section does not include all references found for the area of physical education and recreation since some were rejected as not being appropriate or adequate. Also, the second section includes several references for persons with single conditions such as orthopedic problems since some of this information is applicable to multiple conditions. In addition the second section contains references on educational/training programs if physical education or recreation activities are included to a substantial extent.

Analysis of information obtained revealed the following:

- There are different definitions of the term multiple handicapped. However, the underlying concept apparent in all definitions is that two or more handicapped conditions occur in one individual that are severe enough to warrant special programing or assignment of a label for each condition. For example, a child with severe visual and auditory problems is usually labeled deaf-blind. On the other hand, if this child's visual problems is severe and the auditory problem mild, he probably would be labeled blind.

- Problems presented by multiple conditions are very complex due to interaction of conditions. Personnel cannot just use traditional methods or program approaches for a single handicap such as for visual impairments or mental retardation or acoustic impairments. In other words, it is a situation whereby the whole is greater than the sum of the parts.
Apparently, there is a semantic problem concerning terms denoting multiple conditions that usually depend upon the writer's interest or affiliation with a particular professional group or organization. The terms cerebral palsied, severely handicapped, severely disabled, and multiply handicapped are sometimes used synonymously. For instance, some publications concerning cerebral palsied individuals are written using the term multiple handicapped rather than cerebral palsied. In addition, other spellings of the term such as multihandicapped and multiply handicapped are often used and add to the confusion.

It is evident that each of the multiple handicapping conditions is quite unique and it is difficult to generalize from one condition to another. For example, the conditions deaf-blind, blind-retarded and cerebral palsied are quite different in nature and require quite different program approaches and methods. It is for this reason that more emphasis needs to be placed upon these specific terms rather than the term multiple handicapped.

There are certain multiple conditions that are more prevalent and written about more than others. Two of these conditions are deaf-blind and cerebral palsied.

Federal funding of projects and programs has increased activity and resultant literature in certain categories of multiple handicaps. Two examples of fundings by the Bureau of Education for the Handicapped (U.S. Office of Education, H.E.W.) are Regional Deaf Blind Centers and the National Institute on Program Development and Training in Recreation for Deaf-Blind Children, Youth and Adults (see pages 34-35) for contacts. In addition, some programs for mentally retarded and cerebral palsied individuals are partially supported by Developmental Disability funds (Social Rehabilitation Services Administration, H.E.W.).

The rubella epidemic around 1964 resulted in increased multiple handicapping conditions in children born at that time. Visual and auditory (deaf-blind) handicaps were especially prevalent. Therefore, future programming should take these children into consideration as they grow older and are in need of physical education and recreation activities.

One of the most prevalent techniques used and written about for working with multiple handicapped children is that of behavior modification. For example, behavior modification for the deaf-blind was the primary topic of a 1972 workshop held by the Michigan School for the Blind sponsored by the Bureau of Education for the Handicapped and the Michigan State Department of Education (see page 16).

There are several journals that are excellent sources for information on this subject; examples of these are The New Outlook for the Blind, American Annals of the Deaf, Education of the Visually Handicapped, and Exceptional Children.

The limited articles published in the area of physical education and recreation for multiple handicapped persons are specific in nature and only a few provide a comprehensive program approach for the total subject. For instance, more articles are available on a certain aspect of the total program such as swimming or camping for the deaf-blind than are available for the total physical education or recreation program.
There are several resource contacts that offer substantial information such as bibliographies and publications on the subject. Several of these contacts are Council for Exceptional Children Information Center, Early Childhood Education ERIC Clearing House, United Cerebral Palsy Associations, Inc., and Perkins School for the Blind (see listings on pages 31-33).

There are limited available audiovisual aids; pertinent media are listed on pages 36-42.

There are many on-going programs for multiple handicapped participants that have had little or no literature published regarding their efforts. For this reason, this publication provides examples of such programs. Information was obtained from sources such as limited distribution guides, project reports, mail correspondence, unpublished materials in addition to feature stories in newsletters.

At the current time, there is not a large body of knowledge in the subject area of physical education and recreation for multiple handicapped persons.

Because of inadequate information and because of numerous requests for this type of knowledge due to increased programming, there is an urgent need for additional program information for practitioners in physical education and recreation programs for multiple handicapped participants. In addition, inservice and preservice training should be provided for these personnel to aid them in programming.
PART ONE
EXAMPLES OF PROGRAMS

PORTERVILLE STATE HOSPITAL
Porterville, California 93257

Porterville State Hospital, California, conducted a project on "Total Care of the Multi-Handicapped Child" from 1969 to May 1972. The Final Report of that project, funded by H.E. Division of Mental Retardation - Hospital Improvement Project is available from Ruth E. Smith, Ph.D., Porterville State Hospital, P.O. Box 2000, Porterville, California 93257. The project was a comprehensive treatment program for severely and profoundly retarded, multi-handicapped individuals with the following program objectives:

A. Motor

1. Prevent or reduce contractures, orthopedic deformities and skin breakdown.
3. Increase voluntary movement of arms and legs with the particular goal of developing reaching, grasping, and ambulation.

B. Cognitive/Social

1. Increase response to and attention to environment.
2. Improve discrimination of different sensory stimuli.
3. Increase awareness of and responsiveness to other people.

C. Nutritional

1. Improve nutritional status and thereby general health.
2. Develop or normalize oral reflexes and oral sensitivity.
3. Develop or improve chewing techniques.

Also available are:

Audiovisual materials: 34-minute video tape (1/2" Sony format), 16mm kinescope, 35mm slides.
F-18 Ideas and Equipment guide.
Objective Games materials.

The rationale and the objectives stressed by the above games material are listed as follows:
Why Play Games?

We are all trying to help our residents to be self-sufficient. We are trying to teach them adaptive skills, for example: toilet training, use of spoon, table manners, etc. When we try to accomplish an objective in these areas we find that we must first teach a number of sub-skills. A resident cannot be "toilet trained" if he can't button and unbutton; a resident can't use a spoon if he can't hold it; and a resident can't acquire table manners if he can't, or won't sit in a chair. We find that we must teach these "sub-skills" if we are to accomplish our objective. At this point we find the games helpful. There are games on the list, indexed by the service objective which may make the learning of these new skills fun.

One game may be used to develop many sub-skills and there are games which not only teach self skills but also help our residents use their bodies for these adaptive skills. When the games are played by the resident group, several benefit at the same time and there is added socialization.

If these games are played over and over again and varied with other games, we will find that our residents are becoming better able to button, to hold objects or sit in chairs. We then go on to the next step. The group leader of the resident groups is in the best position to know what should be focused on next. He knows what his resident can do with his body, his speech, his ability to understand, and his level of development. He also knows what the other residents in his group can do with their bodies and can devise games which will make the learning of the next step fun.

If you don't believe that your resident group can play a particular game because they can't tolerate competition, then modify the game. Change the rules to eliminate the competition and let them play for the sheer enjoyment of the activity.

1. Body Alignment and Joint Mobility Development Service Objectives
   a. To develop body alignment abilities
   b. To develop motor strength (as in spasticity and contractures)
   c. To develop body flexibility
   d. To enhance range of motion
   e. To develop gross coordination abilities

2. Sensory Responsivity Improvement Service Objectives
   a. To improve visual perception skills
   b. To improve auditory (hearing) perception skills
   c. To improve sensory perception skills of other special senses
   d. To develop environmental awareness skills
1. Basic Body Movement Development Service Objectives

a. To develop lying position movement skills
b. To develop four-point position movement skills
c. To develop sitting position movement skills
d. To develop kneeling position movement skills
e. To develop standing position movement skills
f. To develop self-transfer movement skills

2. Physical Functioning Development Service (With or Without Orthosis) Objectives

a. To improve body awareness skills
b. To improve gross motor coordination abilities
c. To improve fine motor coordination abilities
d. To improve sensori-motor performance abilities
e. To improve neuromuscular control
f. To improve locomotor and/or ambulation skills

3. Socio-Psychological Development Service Objectives

a. To improve psychomotor performance status
b. To improve cognitive performance status
c. To improve affective performance status
d. To improve emotional development status
e. To improve language development status
f. To improve social development status
g. To improve character development status

4. Personal Self-Care Development Service Objectives

a. To develop self-feeding skills
b. To develop self-toileting skills
c. To develop self-washing skills
d. To develop self-bathing skills
e. To develop self-dressing skills
f. To develop self-hygiene skills
g. To develop self-grooming skills
h. To develop independent trans-location skills
i. To develop mechanical aide and/or special devices and skills

5. Pre Formal Education Service Objectives

a. To increase attention span
b. To develop seeing and listening skills
c. To enhance language development
d. To enhance social interaction skills
e. To develop basic concepts of the physical world
8. Formal Education Service Objectives
   a. To develop speaking skills
   b. To develop reading skills
   c. To develop writing skills
d. To develop mathematics skills
e. To develop concepts of time, place, and order
   f. To develop thinking and reasoning skills
g. To develop geography and social science skills
   h. To develop scientific knowledge use skills
   i. To develop physical fitness skills
   j. To develop moral and spiritual values
   k. To develop pre-vocational skills
   l. To develop health and welfare skills
   m. To develop special deaf-blind learning skills

9. Life Enrichment Training Service Objectives
   a. To develop individual and dual game skills
   b. To develop group games and recreational activity skills
c. To develop team-sport skills
   d. To develop dramatic arts and role-playing skills
e. To develop musical, vocal, and rhythmic skills
   f. To develop arts and crafts performance skills
g. To develop outdoor life skills
   h. To develop leisure-time utilization skills
   i. To develop spectator sports utilization skills
   j. To develop special deaf-blind coping skills

10. Vocational Training Service Objectives
    a. To develop basic work training attitudes and habits
    b. To develop task performance skills
c. To develop sheltered-employment work skills
d. To develop community-placement work skills
e. To develop trade-and industrial career skills

11. Independent Functioning Development Service Objectives
    a. To develop personal property care skills
    b. To develop room care skills
c. To develop housekeeping skills
d. To develop home technical skills
e. To develop property maintenance
f. To develop pet care skills
g. To develop social role skills
h. To develop citizenship role skills
i. To develop economic role skills
j. To develop worker role skills
k. To develop public services utilization skills
l. To develop life enrichment opportunities utilization skills
m. To develop personal and social safety skills
n. To develop general safety skills
o. To develop general survival skills

RECREATION CENTER FOR THE HANDICAPPED, INC.
207 Skyline Blvd.
San Francisco, California 94132

The Recreation Center for the Handicapped, Inc. is a non-profit corporation dedicated to bringing happiness and companionship to severely mentally retarded and physically handicapped children, teens, and adults. This community program provides day care recreation, camping, an early infant stimulation program, homebound recreation, teen program, adult education program, and a variety of other services.

PROGRAM FOR THE DEAF MENTAL PATIENTS
St. ELIZABETHS HOSPITAL
Washington, D.C. 20032

A group psychotherapy program for mentally ill, deaf patients was begun in 1963. Additional special activities such as dance therapy, creative drama, psychodrama, drawing, painting, sculpturing and other recreational activities were added at a later date. The goals of this program are to allay anxiety, to alleviate feelings of inferiority, to improve interpersonal relations, to clarify individual identity, and to expand each patient's sphere of social interaction.
CENTER FOR MULTIPLE-HANDICAPPED CHILDREN
105 East 106th Street,
New York, New York 10029

This center, funded by Title III, E.S.E.A., is the first New York City public school facility to provide total and coordinated services for children with multiple handicaps. The center serves as a model for other communities, a demonstration school, a training center in inter-disciplinary competencies, a source for innovative methods and techniques and a focal point for "satellite services" in other boroughs of New York City.

HAZLEHURST SCHOOL FOR MULTI-HANDICAPPED CHILDREN
Chapman Convalescent Home
Hazlehurst, Georgia 31539

This school is funded by the State of Georgia under the State Aid Program and administered by the Coffee County School System, Douglas, Georgia. Students are admitted according to medical, educational and financial ability in addition to having two or more handicaps and being confined to a wheelchair. Daily classes are offered in regular school subject matter and health education. Appropriate modifications are made according to individual abilities.

BEFORE THE ABC's
BOCES #1, Monroe County, 515 Ridge Road
Pittsford, New York 14450

A pre-kindergarten public school program for multi-handicapped children aged three to five years; children are identified for eligibility through early evaluation and diagnosis and are provided activities in flexible time schedules that are adapted to individual needs. Activities include block-building, dress-up, dramatizing, easel painting, social games, milk and cookies, in addition to learning experiences with ideas, materials, concepts and communication.

DAY CAMP FOR PRE-SCHOOL AND THE MULTIPLY HANDICAPPED CHILD
JULIA S. MOLLOY EDUCATION CENTER
Morton Grove, Illinois 60053

In 1973, a summer recreation-education day camp for the pre-school (three to five year old) child and the multiply handicapped youngster was developed as a supplement to an existing day camp situation for moderately retarded persons. Financing for this public school program came from the
Maine-Niles Special Recreation District and the Niles Township Special Education District. A minimal fee was charged to the family. Program content consisted of leisure activities, outdoor education, aquatics, motor development, music and drama, and special events. Supplementary therapeutic activities were provided by the language therapist, physical therapist, and occupational therapist.

EARLY EDUCATION OF THE MULTI-HANDICAPPED CHILD PROGRAM
UNITED CEREBRAL PALSY OF NEW YORK CITY
339 E. 44th Street
New York, New York 10017

This program integrates therapy and early education for three to six year old children, most of them having a diagnosis of cerebral palsy in all degrees of severity. The children are grouped according to intelligence and age and are provided the services of a psychiatrist, psychologist, social worker, physical therapist, occupational therapist and speech therapist. Physical activities offered include: positioning of children, stimulating movement, improving self-care skills and enhancing perceptual skills.

"WEE WHEELERS"
BRAINERD STATE SCHOOL AND HOSPITAL
Building #6
Brainerd, Minnesota 56401

A new name, "Wee Wheelers," has been given to young multiple handicapped, wheelchair-bound residents because they are involved in so many therapeutic programs in addition to personal and health care activities. Involvement in the various program areas gives the resident an opportunity to learn to share, to work and play with others; to progress in self-help skills, self-discipline, and self-direction. Also, many of the residents are visited daily by their "foster grandparents." The grandparents, retired citizens from the community, offer much love and stimulation to their foster grandchildren.

JOHN TRACY CLINIC
CORRESPONDENCE LEARNING PROGRAM FOR
PARENTS OF PRESCHOOL AND DEAF-BLIND CHILDREN
806 West Adams Boulevard
Los Angeles, California 90007

John Tracy Clinic, an educational center for preschool deaf children and their parents, was founded in 1942 by Mrs. Spencer Tracy. Its goal has been to find, encourage, guide and train parents of young deaf children,
first to reach and help the children, and second to help the parents themselves through on-site services and its worldwide correspondence course. Since 1973, the Clinic has offered similar services to young deaf-blind children and their parents through a small demonstration nursery school and a John Tracy Clinic Correspondence Learning Program for Parents of Preschool Deaf-Blind Children. The program's basic lessons deal with specific areas of interest to parents: the deaf-blind child's characteristics and behavior, vision, hearing, discipline, setting limits, toys and play equipment, language-building experiences, creative activities and materials, socializing through auditory training, your child and the community, building independence, review, and goals: a look ahead.

WASHINGTON STATE COOPERATIVE PROGRAM FOR THE HANDICAPPED
WASHINGTON STATE CEREBRAL PALSY CENTER
1704 N.E. 150th Street
Seattle, Washington 98155

A summer program provided short term evaluation and training of children with multiple and severe handicaps. Also, the program developed and evaluated techniques of dealing with such children. Operational procedures included: evaluation, placement, training of selected target behaviors, developing independence, counseling parents, training staff, and developing additional program content. See page 15 for references on an article about this program.

DAY CARE CENTER FOR SEVERELY RETARDED BLIND CHILDREN
MONTEFIORIE HOSPITAL AND MEDICAL CENTER
111 East 210 Street
Bronx, New York 10467

The Day Care Center was established for the purpose of: 1) providing therapeutic services for visually impaired, severely retarded children; 2) conducting research on development of training methods and assessment of their effectiveness; and 3) demonstrating to professional community the nature of these therapeutic services, training methods, and assessment techniques.

Primary effort is directed toward the training of: self-care skills, e.g., self-feeding, toilet training and dressing; verbal communication skills, e.g., receptive and expressive language; elimination of destructive behaviors, e.g., self-destructive and aggressive behavior; and sensory discriminations, e.g., form discrimination, judgments of relative size and texture. Selection of appropriate training goals for a particular child is made in consultation with the child's parents. Ongoing diagnostic services within the Day Care Center are provided in order to: 1) further elaborate diagnostic issues not resolved by the Psychiatric Clinic diagnostic assessment given each child prior to admission to the Center and 2) delineate deficits, special sensitivities and reward hierarchies that would influence behavioral modification and training modes. Parent counseling services are also provided.
PART TWO
LIST OF REFERENCES
GENERAL INFORMATION AND EDUCATIONAL/TRAINING PROGRAMS


Compilation of 2,100 listings of hotels, motels, restaurants, and sight-seeing attractions in 49 states (none in Alaska), Canada, Mexico, Puerto Rico, with information vital to helping handicapped people to get more enjoyment of all aspects of life. Addresses or necessary directions, information on accessibility and availability of facilities, and general ratings of services included.


Annotated bibliography of literature on deaf-blind that lists selected books; articles from American Annals of the Deaf; New Beacon, New Outlook for the Blind; Volta Review; and miscellaneous periodicals, proceedings of conferences and associations.

*The references with ED numbers can be obtained through EDUCATIONAL DOCUMENT REPRODUCTION SERVICE (EDRS), P.O. Box 190, Arlington, Virginia 22210*


Selected bibliography on multiply handicapped. Information explains how to read the abstract; how to use the author and subject indexes; how to purchase documents through the Educational Resources Information Center Document Reproduction Service; an order blank for Exceptional Child Education Abstracts; a list of indexing terms searched to compile the bibliography; and a list of journals from which articles are abstracted for the bibliography. Publication dates of documents range from 1947 to 1971.


Report of the Proceedings of the Convention of the Council for Exceptional Children in 1970 includes a paper on "benefits of research to the classroom teacher of the multihandicapped, research trends for the physical and health handicapped."


A review of the services provided by regional centers for deaf-blind children and the national center for deaf-blind youths and adults. A directory of names and addresses for these contacts and the geographic area served by each is listed.


17. *Educational Resources Information Center, Document Service, Arlington, Virginia (P.O. Box 190, 22210).

   An Analysis of Evaluation Procedures, Disability Types, and Recommended Treatments for 100 Deaf-Blind Children (W. Scott Curtis and Edward T. Donlon) ED 044 895.

   An Introduction to Development of Curriculum for Educable Mentally Retarded Visually Handicapped Adolescents ED 026 785.

   Deaf Blind Children: Evaluating Their Multiple Handicaps (W. Scott Curtis, et. al) ED 044 895.

   Problems and Programs in the Education of Multiply Disabled Deaf Children (Desmond J. Power and Stephen P. Quigley) ED 053 512.

   Proceedings of a Special Study Institute: Conference for Teacher of Deaf-Blind Children (Philip Hatlen) ED 051 615.


   In a cerebral palsy-blind experimental school unit for day and residential care, a staff of 13 served 30 children in six years with 12 to 17 children each year. All but six children progressed. The children were taught how to play and use their leisure time to establish interaction with the world; personality was also developed by use of any creative ability. Case studies are provided of one child and of four older girls.


   A mother discusses her deaf/blind child: 1) a parent's perspective, 2) the first weeks of life, 3) developmental stages to sitting up and 4) stages from sitting along to standing along.


   Basic text developed as an introduction to the field of education of exceptional children. Describes specific exceptionalities, typical public school programing, and educational methods. Sections contain overview of special education that deals with significant variations in programing, legal provisions, and training of EMR and TMR; nine major exceptionalties, utilization of community resources; problems and trends in education of exceptional children.

*References were obtained from ERIC printouts and did not include original source. Copies can be obtained in microfiche (MF) or hardcopy (HC). Contact ERIC for procedures to follow in ordering using the document numbers given.*


A discussion is given of the Washington State Cooperative Program for the Handicapped which provided a summer program for short-term evaluation and training of children with multiple and severe handicaps. The program was also used to develop and evaluate techniques for dealing with such children. Objectives were diagnostic evaluation and placement; intensive training for children; counseling for parents; training staff; and program development.


Series of reports on deaf blind rehabilitation comprises seven volumes. Information is provided for professional workers, for communication, on a report of medical studies on deaf blind persons, and on a psychological study of the deaf blind. Discussions also concern studies in the vocational adjustment of deaf blind adults, recreational services and a survey of selected social characteristics of deaf blind adults in New York state in 1957.


An individual screening instrument for children and adults with multiple handicaps of visual and auditory impairment. Areas evaluated by the test are vision, hearing, gross motor skills, fine motor skills, self help skills, communication and socialization.


Proceedings of an environmental program workshop on deaf blind individuals at which principles, techniques and examples of behavior modification were discussed and demonstrated.


The report describes a demonstration program in early education for multiply handicapped preschool children carried on by United Cerebral Palsy of New York City (UCP) in cooperation with Bureau of Education for the Handicapped. Reviewed are objectives of project, home and family involvement, staff team, physical development program, nutrition, a special device for toilet training, facility's floor plan, general learning guidelines, demonstration aspects of the project, and learning that takes place on the school bus.


Papers from Workshop on Diagnosis and Evaluation of deaf-blind children focus upon roles of various professionals who may be involved with deaf-blind children at the diagnostic stage.


A list of references concerning multiply handicapped children obtained from Research in Education (RIE), Current Index to Journals in Education (CIJE), and Exceptional Child Education Abstracts; in addition to other references. ERIC accession numbers are listed for some references in addition to descriptors given for all references.


Report of 1970 Staff Development Conference of the President's Committee on Mental Retardation. Topics included information on etiology, condition and effects of mental retardation. Discussion of developmental evaluation of pre-school aged children. Presentation on rubella and resulting handicapping conditions such as multiple handicapped is given.


Reported is a home-based intervention program serving 75 pre-school multiply handicapped children aged 0-6 years living in rural areas.


Report describes 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. Summer programs were primarily designed to evaluate preschool deaf-blind children in learning and living situations. Described are program objectives and learning station concept upon which program was based. Detailed are methods of description and evaluation utilized as well as the process of forming recommendations for children.


This monograph serves as a resource in training professionals and para-professionals for service to the severely, profoundly, and multiply handicapped retarded. Presented are 23 original readings divided into two major sections: 1) mildly and moderately retarded with sensory handicaps, and 2) multihandicapped profoundly retarded.


60. Thomas, E. J. Services and Training Methods in a Day Care Center for Severely Retarded Blind Children. Bronx, N.Y.: Montefiore Hospital and Medical Center (111 East 210th St., 10467), (mimeographed papers), 1969.

Services and training methods are described following a discussion of goals for a day care program for severely retarded blind children. Methods include: response sequencing tasks, response differentiation and stimulus discrimination.


Conference proceedings include programs to aid non-employable multiple handicapped (cerebral palsied) teenagers and adults. Sections include summaries of workshop findings on physical care, education, recreation, and social/emotional factors; position papers on medical needs, status of handicapped in society, communications/perceptual disorders and emotional/psychological factors; and other appendices.


A teacher at Georgia Center for the Multihandicapped in Atlanta, discusses her experiences with multihandicapped children and shares language development activities which she used to help her students work toward establishing an improved self-identity.


This book provides information on children with multiple handicaps. Chapters presented by contributing authors are organized in five parts: medical and educational considerations, incidence and prevalence studies, special education placement, evaluation and a theoretical framework for the child.

   A description of rules, regulations, equipment and modifications for table tennis is presented. A brief discussion on special considerations for cerebral palsied participants is included.


   Games, sports, and physical fitness exercises for the physically handicapped are described. Focus is on the recreational programs, procedures, and athletic equipment for individuals with amputations, auditory impairments, cardiovascular diseases, cerebral palsy, chronic obstructive lung disease, diabetes mellitus, epilepsy, hemophilia, hernia, kidney disorders, leg-calf perthes, arthritis, scoliosis, slipped femoral capital epiphysis, spina bifida, spinal cord injuries, undernutrition, and visual impairments.


   A resource for the special educator, recreation specialist, physical educator, volunteer, paraprofessional or parent. Includes information on nature of visual impairments, practical suggestions for active participation in modified programs and successful, easy-to-administer instructional methods. A variety of sources are suggested for further reference.


   Guidelines for a program of instruction with individual teaching for retarded blind children are provided. Areas covered are living skills, handwork, learning through music, reading readiness, recognition of the Braille alphabet, mathematics, science, social studies, self expression and creativity, recreation, and suggested poetry and songs.


   Includes hundreds of activity ideas centered around the use of homemade equipment such as broomsticks, hoops, beanbags, streamers, flash cards, rug squares, ropes, tires and 15 other items. Each section includes construction methods, activities, photographs and illustrations.


   Provides illustrations and construction, needed materials, useful activities and teaching suggestions of inexpensive equipment for physical education and recreation.


   Three program suggestions to enhance enjoyment and promote learning in the blind educable mentally handicapped child are made. Adaptions of games (Hide and Seek) to promote later adult adjustment, music's role in the socialization of the blind retardate, and ideas gathered from the blind themselves are discussed.


   Selected training activities for mentally retarded blind persons are described including fishing, games involving sense of smell, and emotional experiences of simulation to evoke sensations of awe and grandeur.

A discussion of the value of the kinesthetic sense in giving to deaf-blind persons an understanding and appreciation of rhythm. Helen Keller and Helen Uty Martin, the deaf-blind pianist, are given as examples.


Therapeutic activities are provided for moderately and severely cerebral palsey children in the physical education program at Metheny School in Peapack, New Jersey. Objectives were related to needs for a "psychological lift," good sportsmanship, knowledge of rules, and values of sports and recreation, opportunity to demonstrate physical prowess, self expression, realization that moderately involved may assist more severely involved students, opportunity to select preferred activities, and physical conditioning. Activities described are football, volleyball, bean bag games, relay races, bowling, direction games, wrestling and hockey. A supplementary description of physical therapy suggestions for gross motor activities is provided: angels in the snow, clapping games, Simon Says, passing games, circular turns, action games, chain turning, scooterboard routes, ball games, kinesthetic-auditory memory games, auditory location games and strengthening games.


Games for physically handicapped children are described according to the following qualities: novelty and complexity, utilization of easily obtained equipment, intellectual involvement, total participation, and resemblance in appearance and intent to games played by normal children. Modifications of games are described and listed in order of difficulty. Games are divided into five major categories: basic lead-up activities, games requiring moderate effort, vigorous games, learning games with academic or intellectual content, and circuital or terminal types of games.

A swimming program for multiply handicapped blind children is detailed. The stated objective is to encourage freedom of movement and develop needed muscle control. Each child was assisted individually, and allowed to develop and proceed at his own rate. Descriptions of water orientation and adjustment, and problems dealing with physical limitations are cited.


Activities for an educational/training program for severely retarded deaf students is presented. Contents include descriptions of activities for development of skills and concepts in communication, numerals, colors, words, art and texture. Some physical and recreational activities are described.


Compilation of resourceful, creative ways which can be used to transform inexpensive and overlooked spaces into places and things for learning. Pictures illustrate uses of ideas in a variety of indoor and outdoor spaces. A few detailed drawings of area layouts show space relationships.


Reported were results of survey made to obtain comprehensive picture of physical education programs in eight boarding and four day schools for physically handicapped and multiple handicapped in Great Britain. Physical activities included swimming, canoeing, movement education, dance, games, athletics, archery, horseback riding, fishing and camping.


This book deals with cerebral palsied infants and young children up to five years of age and is primarily aimed toward parents or others who "handle and train" these youngsters. The book includes sections on activities of daily living, movement skills, self help competencies and play activities.


This book provides practical information for modification of physical activities for individuals with handicapping conditions such as: subaverage intellectual functioning at mild-to-moderate and severe/profound degrees learning problems, visual problems, hearing problems, orthopedic problems, and emotional problems. Program activities are suggested based upon individual social-emotional, mental and physical functional levels of each participant which is a noncategorical approach to physical education and recreation for individuals with various handicapping conditions. Information given on examples of behaviors which might be developed in program participants who have handicapping conditions, developmental sequences, activity, modifications, suggestions, behaviors to be developed in adapted physical education/recreation or inservice training programs, references for evaluative criteria, equipment and supplies, resources, and audiovisual aids.


Activities suggested in this manual were successfully tested with 38 children and their parents in a group program directed by a therapist with some auxiliary and professional student helpers. A program of stimulation and exercise was demonstrated to parents who became aware of their child's abilities and disabilities and basic principles of growth and development as well as motor concepts. Included for each activity are objectives, motivating activity, equipment, and timely suggestions for maximum sensory, motor, and physical stimulation and satisfaction by the child.

31. A Program Outline for Parents and Their Children, Ages Three Months to Three Years Having Cerebral Palsy. Indianapolis: United Cerebral Palsy of Central Indiana (615 North Alabama St., 46204), n.d.

Information is presented on an early childhood education program for cerebral palsied youngsters. Emphasis is placed on physical activities that are illustrated and explained in detail.


A description of a wrestling program for older boys enrolled in a special school in Milwaukee is presented. Participants had varying handicapping conditions: Cerebral palsy, muscular dystrophy, hearing problems, visual difficulties, mental retardation, and learning disabilities.

A few profoundly or severely retarded residents of institutions know how to use playground equipment. Pacific State Hospital began a program aimed at encouraging the residents to use playground equipment and teaching them to play effectively. Merry-go-rounds, swings, climbers, tunnels, and slides were used to provide the patients with a variety of activities and to foster development of a range of skills.


Six booklets—Getting Started, Finger Painting and Print Making, Drawing and Painting, Clay and Other Dimensional Media, Stitchery, and Woodworking and Odds and Ends—were written for parents, teachers and volunteers, for nurses, and for vocational workers. Specific areas include: finger painting, pulling a print, butterfly prints, gadget printing, vegetable prints, stencil rubbings, printing for prepared surface, silk screen printing, colored chalk drawings, melted crayon drawings, wire sculpture, seed pictures, tongue depressor projects, and holiday decorations.


In addition to federal or state support funds, local communities have other resources for obtaining complete or supplementary financial assistance for facilities, equipment, supplies, manpower and programs in physical education, recreation, camping, outdoor education, sports and athletics for individuals with handicapping conditions. Community resources are available to give such financial aid; however, the person responsible for obtaining these monies must discover these resources and decide which approach to use in soliciting funds. This publication is designed to help in fund-raising by describing effective methods and successful ventures and by describing funded programs.

Homemade and inexpensive equipment, supplies, and adapted devices are described for use in physical education, recreation, camping, playgrounds, and related programs for individuals with handicapping conditions. Apparatus is described for use with program participants who were in large groups, had different interests, exhibited diverse abilities or who were in programs with limited budgets. Sections on detailed progression of balance activities (for performance on equipment), resistance activities and equipment which may be made.


A list of periodicals and newsletters which contain information on physical education and recreation for individuals with handicapping conditions. The chart presents 89 names of publications followed by types of handicapping condition dealt with and names of data retrieval systems which index the publication.


Describes how a spastic cerebral palsied person can be a functional horseback rider when a western saddle is used which enables him to sit independently and use muscles of his lower extremities. Mounting, dismounting, and seating skills are illustrated by photographs in which the rider uses a western saddle.


Described is a therapeutic play group led by a trained teacher of mentally handicapped children with aid of a number of adult volunteers. Program is designed to stimulate preschool children with developmental disabilities resulting from cerebral palsy, spina bifida, blindness, mental retardation, or other conditions. Group activities and physical therapy procedures are detailed, along with methods of parent involvement.


This article discusses the early childhood education program of United Cerebral Palsy of Manhattan. The program integrates therapy and early education for three to six year old children with severe cerebral palsy.


Contains pictorial sketches and photographs of play areas and individual pieces of equipment along with suggestions on what can be done, why it is essential, and how to achieve wholesome, creative play areas for children.


Described is first annual swim meet for 25 severely physically handicapped children at Angel View Crippled Children's Foundation, Desert Hot Springs, California. The meet is an outgrowth of children's swim therapy sessions, in which motor development and increased muscular strength are stated objectives.


Intended for swimming instructors working with severely impaired children, paper presents techniques and progressions used with three multiply handicapped children who were originally afraid of the water. After spending three months getting used to the water, children learn to put their faces in the water, breath control exercises, back float, forms of swim patterning, sculling, and front crawl.


Copy of presentation delivered by Giovanna Nigro at the International Conference on Models of Service for the Multi-Handicapped Adult, October 1973. The discussion centers upon many aspects of services for the multi-handicapped, including physical and recreational activity programing.


A comprehensive review of planned and organized recreation for individuals with cerebral palsy. Recreational activities are described.


Comprehensive information on how the private agency or community can begin a recreation program for the physically, severely and multiply handicapped. Qualifications and duties of leaders in the program, public relations, program planning, transportation, facilities and equipment are all thoroughly treated. Individual chapters deal with program activities, including music, dance, arts and crafts, games and sports. Particular emphasis is given to adaptations of activities.


Presents foundational rhythmics and movement skills which are correlated to the education program of participants. Excellent detailed progression of activities which are well illustrated and easily understood.


Fundamental rhythms with the retarded, which utilizes music, words, pictures, and movements to achieve total child development. Exercises are given for the severely retarded, intermediate, and more advanced.


A well illustrated book giving descriptions, sources and information on aids for 1) transfer, travel and mobility, 2) personal care, 3) communications and learning, and 4) recreation.


Information is presented on U.C.P. bowling tournaments. Regulations and rules for conducting these events are described.

62. Snow, Clifford C. **A Sequential Approach to the Mobility Training of Educable and Trainable Blind Mentally Retarded at the Arkansas Children's Colony.** Conway, Ark.: Arkansas Children's Colony, n.d.


   Book offers suggestions for parental care, advice on behavior, and discusses needs of both parent and child. Some areas included are: relationship and search for medical care, hospitalization and therapy, suggestions for recreation and play activities, sexual and social development problems from childhood through adulthood.


   Described is an overhead "running cable" constructed for use by blind retarded youngsters during running activities. The cable is used for exercise, ambulation and release of excess energy.


   Recreation activities in nursing homes, hospitals, institutions, extended care facilities for mentally retarded, mentally ill, aged, and physically handicapped persons.


   Recreational program particularly suited to deaf, cerebral palsied, orthopedically disabled, and severely mentally retarded persons is described.


   This book presents information for providing recreational activities for the homebound cerebral palsied person. The discussion includes suggestions for various activities and special considerations due to different handicapping conditions.
Information on planned pre-school experiences for cerebral palsied and multihandicapped children. Topics presented include social, emotional, mental and physical development and appropriate activities.


Describes a course outline for an education program for parents of cerebral palsied children. Recreational activities are also included.


This guide gives leadership, hints, etiology of handicaps and physical activity, descriptions for the blind, deaf, orthopedically incapacitated and cerebral palsied child.


Information is given on equipment and materials to be used with infants and toddlers who are confined to cribs during hospitalization away from the home environment. The materials for tactile, visual auditory and kinesthetic stimulation are designed for children who function at normal and below normal intellectual levels. The crib play materials are suitable for profoundly retarded individuals.

PART THREE
RESOURCE CONTACTS

The following resource contacts provide a variety of services and materials such as publications, bibliographies, audiovisual aids, newsletters, periodicals, and references. Specific information concerning these types of services may be obtained by writing selected resource contacts. Additional information is indicated in some listings if special services are available. In addition, a directory of centers and offices for deaf-blind persons is given at the end of this section.

1. AMERICAN ASSOCIATION FOR MENTAL DEFICIENCY
   5201 Connecticut Avenue, N.W.
   Washington, D.C. 20015.

2. AMERICAN FOUNDATION FOR THE BLIND
   15 West 16th Street
   New York, New York 10011

3. AMERICAN NATIONAL RED CROSS
   17th and D'Streets, N.W.
   Washington, D.C. 20006

4. THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC.
   6000 Executive Boulevard, Suite 200
   Rockville, Maryland 20852

5. AMERICAN PHYSICAL THERAPY ASSOCIATION
   1156 Fifteenth Street, N.W.
   Washington, D.C. 20005

6. AMERICAN PRINTING HOUSE FOR THE BLIND
   1839 Frankfort Avenue
   Louisville, Kentucky 40206

   (Textbooks, tests, dictionaries, references, aids, and other materials for persons with visual problems are available. An Instructional Materials Reference Center for the Visually Handicapped is provided.)

7. ASSOCIATION FOR CHILDHOOD EDUCATION INTERNATIONAL
   3615 Wisconsin Avenue, N.W.
   Washington, D.C. 20016

8. BOY SCOUTS OF AMERICA
   Scouting for the Handicapped Division
   New Brunswick, New Jersey 08902
Books for the blind, information for students and related references are available.

15. NATIONAL ASSOCIATION FOR RETARDED CITIZENS
2709 Avenue E, East
Arlington, Texas 76010

16. NATIONAL CENTER ON EDUCATIONAL MEDIA AND MATERIALS FOR HANDICAPPED
220 West 12th Avenue
Columbus, Ohio 43210

17. NATIONAL EASTER SEAL SOCIETY FOR CRIPPLED CHILDREN - ADULTS
2023 West Ogden Avenue
Chicago, Illinois 60612

18. NATIONAL INSTITUTE ON PROGRAM DEVELOPMENT AND TRAINING IN RECREATION FOR DEAF-BLIND CHILDREN, YOUTH AND ADULTS
University of Iowa
Iowa City, Iowa 52242

Dr. John A. Nesbitt, Project Director
Mr. Gordon Howard, Project Coordinator

This institute is designed to: 1) investigate and prepare a profile on the lifestyle of the deaf-blind in various settings and age groups; 2) assess the current "state of the art" regarding the utilization of recreation and leisure activities for the deaf-blind; 3) identify the foremost twelve or more recreation program models for deaf-blind;
4) analyze the existing research on recreation for deaf-blind; 5) develop a bibliography on recreation for deaf-blind and literature related to recreation for the deaf-blind; 6) report case studies and results of surveys relating to "state of the art," legislation and civil rights; 7) conduct an institute at the University of Iowa and disseminate the report of the proceedings.

19. NATIONAL REHABILITATION ASSOCIATION
1522 K Street, N.W.
Washington, D.C. 20005

20. NATIONAL THERAPEUTIC RECREATION SOCIETY
1601 N. Kent Street
Arlington, Virginia 22209

21. NORTH AMERICAN COMMITTEE ON SERVICES FOR DEAF-BLIND CHILDREN AND YOUTH
American Foundation for the Blind
15 West 16th Street
New York, New York 10011

An Organization that is open to all those who are actively engaged in work for the deaf-blind, including parents of deaf-blind children. Membership dues are required.

22. PERKINS SCHOOL FOR THE BLIND
175 North Beacon Street
Watertown, Massachusetts 02172

23. THE PRESIDENT'S COMMITTEE ON EMPLOYMENT OF THE HANDICAPPED
Recreation and Leisure Committee
Washington, D.C. 20210

24. REHABILITATION SERVICE ADMINISTRATION
Division of Developmental Disabilities
Department of Health, Education and Welfare
Washington, D.C. 20201

25. SOCIAL REHABILITATION SERVICES
Division of Mental Retardation
Department of Health, Education and Welfare
330 C Street, S.W. South HEW Bldg.
Washington, D.C. 20201

26. SPECIAL EDUCATION INFORMATION CENTER (SEIC)
P.O. Box 1492
Washington, D.C. 20013

SEIC is an information center which helps parents locate services for their handicapped child. "Closer Look" acts as the publicity services of SEIC and may be contacted for information.

27. UNITED CEREBRAL PALSY ASSOCIATION
66 East 34th Street
New York, New York 10016
Centers and Services for Deaf Blind Children:

Dr. Robert Dantona, Coordinator
Centers and Services for Deaf-Blind Children
Bureau of Education for the Handicapped
U.S. Office of Education
Department of Health, Education, and Welfare
7th and D Streets, S.W.
Washington, D.C. 20202
(202) 245-7134

Mr. John Crosby, Coordinator
Regional Center for Services to
Deaf-Blind Children
c/o Alabama Institute for Deaf and Blind
Box 698
Talladega, Alabama 35160
(205) 362-8460

Dr. William Bleu, Coordinator
Regional Center for Services to
Deaf-Blind Children
c/o State Department of Education
1500 5th Street, Room 204
Sacramento, California 95814
(916) 445-8071

Dr. John Ogden, Coordinator
Regional Center for Services to
Deaf-Blind Children
c/o Colorado Department of Education
430 State Office Building
Denver, Colorado 80203
(303) 892-2131

Mr. John Sinclair, Coordinator
New England Center for Services to
Deaf-Blind Children
c/o Perkins School for the Blind
175 North Beacon Street
Watertown, Massachusetts 02172
(617) 924-3434

South (East)
Alabama Kentucky
Florida Mississippi
Georgia Tennessee

Far West and Pacific
Arizona Nevada
California Guam
Hawaii U.S. Territories

Mountain Plains
Colorado South Dakota
Kansas New Mexico
Nebraska Utah
North Dakota Wyoming

New England
Connecticut New Hampshire
Maine Rhode Island
Massachusetts Vermont
Mr. George Monk, Coordinator
Regional Center for Services to Deaf-Blind Children
5th Floor, Davenport Building
Ottawa and Capitol Streets
Lansing, Michigan 48915
(517) 373-0108

Mr. Khogendra Das, Coordinator
Regional Center for Services to Deaf-Blind Children
c/o New York Institute for the Education of the Blind
999 Pelham Parkway
Bronx, New York 10469
(212) 547-1234

Mr. Hank Baud, Coordinator
Regional Center for Services to Deaf-Blind Children
c/o North Carolina-Department of Public Instruction
400 Oberlin Road
Raleigh, North Carolina 27605
(919) 829-3921

Mr. Jack English, Coordinator
Regional Center for Services to Deaf-Blind Children
c/o Callier Hearing and Speech Center
1966 Inwood Road
Dallas, Texas 75235
(214) 638-8003

Mr. Jack Sweetser, Coordinator
Regional Center for Services to Deaf-Blind Children
3411 South Alaska Street
Seattle, Washington
(206) 464-6694

National Center for Deaf-Blind Youths and Adults:

Dr. Peter J. Salmon, Director
National Center for Deaf-Blind Adults
105 Fifth Avenue
New Hyde Park, New York 11040
(516) 746-4440

Midwest
- Illinois
- Ohio
- Indiana
- Wisconsin
- Michigan
- Minnesota

Mid-Atlantic (North) and Caribbean
- Delaware
- Pennsylvania
- New Jersey
- Puerto Rico
- New York
- Virgin Islands

Mid-Atlantic (South)
- District of Columbia
- Maryland
- Virginia
- North Carolina
- West Virginia
- South Carolina

South (West)
- Arkansas
- Oklahoma
- Louisiana
- Texas
- Missouri
- Iowa

Northwest
- Alaska
- Oregon
- Idaho
- Washington
- Montana
1. **And So They Move.** 19 min., 16mm, sound, black/white film. Audio Visual Center, Michigan State University, East Lansing, Michigan 48824.

Although this film deals with the application of movement to the physically handicapped, the rationale, activities, methods, and procedures are appropriate for mentally retarded of all functional levels. As each individual moves in his own way, he develops greater awareness of himself, struggles to succeed, and develops a feeling of adequacy. Children are encouraged to extend themselves in purposeful and enjoyable movement. They become better able to relate to one another, create their own play environment, enjoy trying, and thrill to the adventure of exploration. Much of the program is built around improvised equipment — boxes, blocks, hoops, ropes, and benches — innovative indoor-obstacle courses, and creative use of conventional playground/equipment.

2. **Cast No Shadow.** 27 min., 16mm, sound, color film. Professional Arts, Inc., Box 8486, University City, California.

This unique and dramatic film vividly depicts a wide range of recreation activities for severely and profoundly mentally retarded, physically handicapped, multihandicapped, and emotionally disturbed children, teens, and adults at the Recreation Center for the Handicapped (San Francisco, Calif.). Emphasis is on values of recreation and its effects upon lives of handicapped persons as an integral part of their total learning experiences and social development. Equally, it is about handicapped individuals, ages 2 to 85, as people. Enthusiasm, satisfaction, enjoyment are shown on their faces as they participate in a variety of activities from snow skiing at Squaw Valley's Olympic Village to wheelchair surfing in the Pacific Ocean.

3. **Chance to Live.** 18 min., 16mm, sound, color film. South Carolina Association for Retarded Children, 1517 Hampton Street, P.O. Box 1564, Columbia, South Carolina.

This film describes the problems facing parents of mentally retarded children and the need for community services, day care centers, developmental centers, sheltered workshops and group homes. The Orange Grove program in Chattanooga, Tennessee is depicted with the focus on programming in South Carolina. In day care settings, activities that stress socialization, skill development, and parent activities, are described. It is noted that persons are not institutionalized unless community services are not available. In the developmental center setting, the gap between day care and school or workshop is bridged. Much emphasis is given to skill development, habits and use of leisure hours in addition to deinstitutionalization. A sheltered workshop for the blind/mentally retarded is dealt with for meeting individual needs. In halfway houses (community homes), persons learn to live independently, socially, and economically. Supervision is given by house parents who provide a meaningful home to assist the people find a place in the world. Notation is made of services available in South Carolina and the need for emphasis on community services.
4. **Children of the Silent Night.** 27 min., 16mm, sound, color film. Perkins School for the Blind, 175 N. Beacon St., Watertown, Mass. 02172.

This is a documentary film about educating deaf-blind children at Perkins School. One child is focused upon to show how she learns "to hear" through her fingers, how she is first introduced to mysteries of language and how she learns to say her first words. Shown also is the work being conducted in research and teacher training at Perkins School.

5. **Halfway There.** 15 min., 16mm, sound, color film. The National Foundation-March of Dimes, 800 Second Avenue, New York, New York 10017.

Rehabilitation care at the Birth Defects Center in Charlottesville, Virginia is depicted. Patients of different ages and with various disabilities receive physical, recreation, emotional and intellectual training needed for them to lead meaningful lives outside the Center.


The catalog lists and describes 293 films concerning handicapped children which are available from the Instructional Materials Centers and Regional Media Centers Network; art for exceptional children, autism, behavior management, gifted, disadvantaged, early childhood and preschool, emotionally disturbed, hearing/deaf and hard of hearing, learning disabilities, mentally handicapped, multiply handicapped, physically handicapped, psychology, reading, sight/visually handicapped, special education, speech/speech impaired, teacher training, tests, and vocational education.

7. **The Legacy of Anne Sullivan.** 29 min., 16mm, sound, color film. Film Library, Campbell Films, Academy Avenue, Saxtons River, Vermont 05154.

This film deals with the problems of deaf-blind persons from infancy through adulthood. It shows the contributions made by Anne Sullivan, Helen Keller's teacher. The education program at Perkins School and the rehabilitation program at the Industrial Home for the Blind is illustrated.

8. **Little Marty.** 5 min., 16mm, sound, color film. The National Foundation-March of Dimes, 800 Second Avenue, New York, New York 10017.

Marty, eight year old poster boy of the National Foundation, was born with no arms, one leg shorter than the other, and other birth defects. With artificial arms and a built-up shoe, he feeds himself, paints, types, swims, plays softball, soccer, cards, and his great determination and courage are truly inspirational. In general, he is treated as normal as possible by his parents, brothers, and friends.
9. **Maybe Tomorrow.** 28 min., 16mm, sound, color film. Adventures in Movement, 945 Danbury Road, Dayton, Ohio 45420.

   Punctuated by blind, deaf, mentally retarded, cerebral palsied, and orthopedically impaired children actively participating in movement activities, role and contributions of AIM are vividly shown. AIM began in 1958 in Dayton, Ohio, to provide movement experiences for all children with various handicapping conditions. Today housewives, social workers, and others with interest in and commitment to helping these youngsters volunteer their talents, services, and their total selves. Throughout the film AIM instructors show many innovative, original, and effective ways of reaching and teaching youngsters with these various conditions. Emphasis is on use of basic movements, importance of success, achievement, and fun, teaching and reinforcing a variety of concepts through movement, and use of approaches that are basically the same as those used in teaching normal children. The AIM program is viewed through the eyes, heart, and active participation of a young physical education teacher who enrolls in the training program so she too can contribute. Shown are scenes from the annual summer seminar where AIM personnel meet to exchange ideas and share their experiences to improve, enrich, and expand opportunities for all youngsters. Gene Kelly narrates the film but the mission and the impact of the program and movement are expressed at the end of the film by a young girl on crutches who confidently says, "I can walk all by myself."


   This is a series of ten half-hour television programs dramatizing new avenues available to persons training or teaching mentally retarded children. While the purview of the series includes all aspects of mental retardation, academic education and physical education are the two principal subjects.

   No. 4. **Multiple Handicaps** (one of a ten part series)

   This program deals with the problems of multiple handicapping conditions in which one of the afflictions is retardation. This program focuses on the Recreation Center for the Handicapped, San Francisco, and show the effective and dynamic approach this agency has devised in working with multiple handicapped persons of all ages.

11. **No Barrier.** 14 min., 16mm, sound, color film. The President's Committee on Employment of the Handicapped, Washington, D.C. 20210.

   A moving example of a person overcoming the problems encountered in being deaf-mute is presented. Harry Huff is shown living life to the fullest at home, at work and in community activities.

A brief review of normal growth and development with special reference to a little boy with cerebral palsy at eight months of age. Part of the film is devoted to demonstrating various types of improvised equipment useful in the care of older individuals with cerebral palsy.


14. Physical Education for Blind Children. 20 min., 16mm, sound, color film. Charles Buell, 4244 Heather Road, Long Beach, California 90808.

Visually handicapped school children of all ages are shown participating in a wide variety of physical education activities. The film presents approaches to modify activities so visually handicapped children can participate with their sighted classmates. In other sequences, visually handicapped children take part in activities with no modifications at all. The importance of physical activity for visually handicapped children is stressed, along with contributions of active participation in physical education to social development, leisure-time pursuits, and physical fitness. Need for safety is highlighted, as is the fact that statistics do not show a high accident or injury rate among visually handicapped children who take part in vigorous physical education programs.


Founded in 1952, the Recreation Center for the Handicapped provides year-round programs for severely handicapped participants of all ages. The program stresses achievement of happiness and contentment as each individual, regardless of his condition, learns to do for himself and to stand on his own two feet. The film shows participants active in checkers, music activities (tambourine and bongos), clay work, outdoor activities, table games, wrestling, swimming, fishing and casting, woodworking, playground activities, snow and winter activities, and dancing. Some of the many ways in which the participants help each other are vividly shown.


Description of the role and function of members of the rehabilitation team who work with Susie, an orthopedically involved youngster: physical therapist, special education teacher, recreation therapist, social worker, physician, occupational therapist, speech pathologist, and psychologist.
17. **A Song for Michael: A Demonstration of How Music Therapy is Used to Develop Language in a Multiply Handicapped Boy of Fourteen.** 22 min., 16mm, sound, black/white film. Music Therapy Center, 840 Eighth Avenue, New York, New York 10019.

This film presents a condensation of one actual music therapy session. It demonstrates how music is used at the Music Therapy Center as a functional tool to promote emotional and social growth as an adjunct to psychotherapy. Even in the space of one session, Michael displays the bewildering variety of symptoms and responses on which his conflicting diagnoses of autism, schizophrenia, brain damage, and mental retardation were based. The viewer sees how the therapist deals with the many levels of behavior in terms of the goals of establishing and strengthening associative thinking and eliciting communication. More than a dozen songs and games are used in this film and out of their phrases, rhythms, and meaning are devised materials for facilitating interplay, establishing identity, and achieving autonomy. Despite some production flaws -- the photographer's too frequent use of the zoom lens results in some distracting out-of-focus frames -- the film is well worth seeing, especially by therapists, special education teachers, and others who work with mentally disturbed children. The film is intended for professional audiences rather than for the general public.

18. **Somebody Waiting.** 25 min., 16mm, sound, color film. Extension Media Center, University of California, Berkeley, California 94720.

This is a story about children who live in Corcoran Cottage, Sonoma, California State Hospital. They have severe cerebral dysfunction and are among the most physically, emotionally and mentally handicapped children in society. They are totally dependent on the hospital staff for every physical, nutritional and personal need. The film demonstrates that further handicapping can be avoided by appropriate environmental stimulation and therapeutic handling. It vividly shows the children's response to loving care, new physical therapies, and new experiences. The staff begins to learn, first from visiting professionals such as physical therapists and later from their own experience, how to make life more pleasant, interesting, and rewarding for the children -- and themselves.

19. **Special Children, Special Needs.** 22 min., 16mm, sound, color film. Campus Film Distributors Corporation, 20 East 46th Street, New York, New York 10017.

A comprehensive developmental approach to educating young multiple handicapped children is presented for three learning environments: an infant school, a preschool learning laboratory and an outdoor therapeutic playground.

20. **Splash.** 21 min., 16mm, sound, color film. Documentary Films, 3217 Trout Gulch Road, Aptos, California 95003.

Exciting, stimulating, and fun ways to use water environments -- pans, sprinklers, wading pools, and swimming pools -- and aquatic activities to introduce and reinforce a variety of concepts are presented to subtrainable-severely mentally retarded and multiple handicapped children in practical, functional, and meaningful ways. Emphasis on developing self-help,
skills, such as undressing and dressing, paying attention and responding to directions through simple instructions and signals, improving kines- thetic awareness and balance with aquatic games and water exploration, stimulating language development by talking about things, promoting breath control by bubbling and blowing, sharpening visual and auditory discrimination by retrieving objects from underwater and with different games, and encouraging memory and attention through most all games and activities.

21. Testing Multiply Handicapped Children. 30 min., 16mm, sound, black/white film. United Cerebral Palsy Association, Professional Services Program Department, 66 East 34th Street, New York, New York, 10016.

Educational evaluation of three multiply handicapped young children is shown. This is also available as three separate films for fuller presentation of evaluating: 1) Keven, age 4 athetoid cerebral palsied (30 minutes); 2) Millicent, age 4 1/2, hyperactive, distractable, mentally retarded (30 minutes); 3) Jimmie, age 6 severe visual and auditory impairment (30 minutes).


Physically handicapped children, many of whom were not accepted by New York Public Schools, are shown participating in a variety of physical activities. Children in wheelchairs are seen taking part in touch football, soccer, swimming, cage ball, miniature golf, bowling relays, and fencing. Philosophy of the program dictates integrating occupational therapy and physical therapy through physical education and recreation. Activities are selected on the basis of their contribution to the growth and development of each participant, not on the basis of whether they are specifically for physically handicapped or mentally retarded persons. A variety of adaptations and modifications in physical education is shown, along with ways in which other areas of the curriculum are approached -- driver education, science, and home economics.

23. Valley of Miracles. 24 min., 16mm, sound, color film. Virginia Easter Seal Society, P.O. Box 5496, Roanoke, Virginia 24012.

A wide variety of activities is depicted for social-emotional and physically and mentally handicapped children at Camp Easter Seal, Roanoke.


The film is aimed toward the general public; however, educators will find helpful information on working with the visually impaired.
25. **We Can Grow.** 13 min., 16mm, sound, color film. ACI Films Inc., Distribution Center, P.O. Box 1898, 12 Jules Lane, New Brunswick, New Jersey.

   This is a film about impaired and disabled children and how they -- the crippled, deaf, and blind -- get started in school. These children are seen learning things all children learn and playing games all children play, but in ways adapted to their specific conditions.

26. **When May Comes, We’ll Move to the First Floor.** 20 min., 16mm, sound, black/white film. United Cerebral Palsy Association, 66 East 34th Street, New York, New York 10016.

   This film is based around the inner thoughts of a 31 year old cerebral palsied woman who lives with her 73 year old mother. She is concerned about herself, her mother, other people, personal aspirations, her fears, and how being cerebral palsied affects her life.

27. **Who Handicaps the Handicapped.** 14 min., 16mm, sound, black/white film. Frances Brush, University of Portland, Portland, Oregon 97203.

   Children with various handicapping conditions, including cerebral palsy, muscular dystrophy, and hip disorders are shown in a variety of basic movement activities. The film focuses on individual students as each is helped to develop his full movement potential.


   A circus held at Perkins School for the Blind is shown that demonstrates how this particular activity contributes to the social-emotional and communicative development of the deaf-blind students participating.

29. **World of Deaf-Blind Children: How They Communicate.** 30 min., 16mm, sound, color film. Campbell Films, Academy Avenue, Saxtons River, Vermont 05154.

   The Perkins School program for developing communication skills in deaf blind students is illustrated. Some methods and equipment shown are oral training, manual alphabet, hearing aids, large print, magnifying objects, feeling of lips, and use of Braille.

30. **The World Outside.** 30 min., 16mm, sound, black/white film. S-L Film Productions, P.O. Box 41108, Los Angeles, California 90041.

   The film demonstrates therapeutic procedures utilized at the Marianne Frostig School of Educational Therapy in a program for autistic/severely emotionally disturbed children. The therapy sessions shown focus on two children who are both autistic and blind.