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ABSTRACT

The document presents five issues of the PRISE Reporter, a newsletter of the Pennsylvania Resources and Information Center for Special Education devoted to issues and happenings in the field of special education. Separate issues treat the following disabilities: mental retardation, health impairments/learning disabilities, emotional disturbances, visual handicaps, physical handicaps, and speech/hearing handicaps. In addition to one feature article, each issue presents a section on happenings and programs in Pennsylvania; a research brief; and reviews of tests, current books and citations, instructional material, and new films. Feature articles treat such aspects as the educability of the retarded, issues related to learning disabilities, the emotionally disturbed adolescent, the unique needs of severely visually handicapped pupils in regular school programs, the challenge of the physically handicapped student without speech, and barrier free educational environments for the hearing impaired. (DLS)

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Carole L. Norris

PARISSE repo

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

issues and happenings in the education of the mentally retarded
no. 11, september 1979

pennsylvania resources and information

3 West Ninth Avenue, King of Prussia, Pa. 19406. 215/265-7321

ROBERT G. SCANLON—Secretary of Education,
Department of Education, Commonwealth of Penn.

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

ELAINE E. GILVEAR—Chief, Special Education-
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UNMAILED LETTER: ON THE EDUCABILITY PARA

Burton Blatt, Ed.D.
Dean of the School of Education
Syracuse University

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

e it was because this man was so much like the rest of site of the slurred speech and his lack of interest in ik—or maybe it was because I knew what might have life had he been able to remain in a real home. Maybe it was because I knew that it was too late to restore to Ed that which the state had robbed from him. But for whatever reason, my mind wandered back to the turn of the century, to a time when the very wealthy would spare no expense to create a miracle for their handicapped baby. Although miracles hardly ever occur, once upon a time in that era a miracle that should be remembered forever was wrought by Annie Sullivan and Helen Keller. It's been said that works of art don't have extrinsic value like, for instance, a pound of coffee, but miracles of the kind pulled off by Annie Sullivan and Helen Keller have both intrinsic and extrinsic value. They are not only rare, spectacular, inspiring, and invaluable; they are the stuff which makes life worth living and understandable. Thinking about Annie Sullivan and Helen Keller that Thanksgiving Day made me want to tell you as much as I know about that wonderful relationship.

Dear Friend,

It was Thanksgiving and there was much to be thankful for. For one thing, our family was together. For another, we are "together" even when we're not sitting around the table rubbing elbows. And in this day and age, some think it's a miracle when people enjoy being together. But that's not the miracle I want to discuss with you.

Our son Steve had been working as an attendant at the state school for the mentally retarded, during a period away from college when he was supposed to get some experiences in the "real world." Steve had invited Edwin, a 32-year-old man who's now a resident of that institution, to our home for Thanksgiving dinner. I don't know anything about Ed, except that he was transferred to the school from a large ugly place near Utica, where, I understand, he had been a patient since he was a small child.

Throughout the day I couldn't help but stare at Ed when I knew he was either looking elsewhere or concentrating on something which made him oblivious to us. It wasn't that I had never seen a mentally retarded person before, but having Ed in my own home at that particular time, with one of my own children doing things right under my nose which made me as proud of him as I could ever be of anyone, started me to think about my work when one isn't supposed to think about work. Later, as we sat around a table laden with more food than was good for our bodies, but is exactly what the soul needs at least once a year, I couldn't help but think about those wild beasts in countless institutions across the world. Those naked and mute, assaulters and assaulted, head bangers and mutilators who inhabit the prisons which are variously called asylums, state schools, or developmental centers. While I surely know it's rude to stare at anyone, much less a guest, my eyes kept focusing on Ed while at the same time my inner eyes and ears dredged up scenes of unremitting horror and degradation, scenes which I knew were being enacted that very moment on that loveliest of all holidays. In the safety and warmth of our own home, I saw a man who looked like the rest of us, whose pants were on straight, whose shoes matched, who was clean and courteous and who was involved with other human beings in those unimportant affairs which only become important in their absence. While I watched Ed in fascination and felt remorse for his wasted years, my mind conjured up where he might have been that evening had he not come to our home. For the thousandth time or more, I remembered that people like Ed are not the wild beasts, but that institutions are wild and ungovernable, and that sometimes those brilliant doctors and politicians who create institutions are wild beasts.

Before Annie Sullivan came into her life, Helen Keller was also a "wild animal." Helen Keller grew up to become a brilliant and internationally famous person, of course. But before she was brilliant, she was mentally retarded; and that is a central lesson to be learned from her life. It's a most important lesson that a teacher can learn, and, consequently, is a most important lesson that a teacher can teach. Specifically, Helen Keller's life illuminates the hypotheses that:

1. People traditionally underestimate their potential for changing or, to use a more common term, their potential for learning.
2. Pessimism concerning the conditions of change become a self-fulfilling prophesy. People do not learn when they become convinced that they cannot or should not.
3. Under proper conditions, it can be demonstrated that capability is a function of practice and training. That we have not been able to accomplish such change in people may be less a defect of that belief than it is of our practices.

An easy lesson to be learned from Helen Keller's successes is that she wasn't really retarded. It is so easy that we must carefully guard against teaching it, because it's wrong. Helen Keller was retarded. Another false lesson that can easily be learned from her story is that most deaf-blind children grow up to become intelligent—much less brilliant. Quite the opposite, the real lesson that teachers must learn from this story is that Helen Keller did not have to improve in order to justify Annie Sullivan's commitment to her, that she didn't have to change to merit Annie's continued efforts on her behalf. Without such a belief in the right of each child to the fullest educational opportunities possible, a teacher may soon be infected

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with contempt for those pupils who are not good enough, or who are not learning quickly enough to meet the teacher's requirements for status as a student. Paradoxically, so it seems, Annie Sullivan couldn't have accomplished the "miracle" if she believed Helen Keller *had* to change. Indeed, had Annie spent her entire life with Helen, and had Helen never made a single intelligible response, everything we know about Annie Sullivan suggests that she would not have felt that her life was wasted. Ironically—but how else could it be—we are at least likely to produce a "miracle" if it is required. Exactly, because it can neither be required nor anticipated, exactly because it is *necessarily* unexpected, was there the need to invent the notion of something we call "miracle."

Annie Sullivan's devotion to Helen Keller instructs society about how we can express concern for the individual and his or her value as a human being, irrespective of any talents one may have, irrespective of any limitations one must endure. But another necessary belief the teacher must hold is that the human being is *indeed* capable of improvement in virtually every conceivable way. It's the right of every human being to have his or her limitations accepted by the family, by teacher, and by society. But it's also the right of every human being to have his or her limitations mitigated to the degree society finds possible, and to have his or her strengths exploited in similar fashion. To accomplish the amelioration of deficits and enhancement of strengths in all children, teachers must change their conceptions of human potential. And one's inspiration for such personal reassessment could well be the miracle wrought by Annie Sullivan and Helen Keller. The lives of those gallant women demonstrate to us that each person can contribute to the larger society, that as human beings all people are equally valuable, that every person is entitled to developmental opportunities, and that development itself is incremental. The idea that people can change but are not required to change to merit attention is what fashions and gives strength to the double-edged sword called educability.

What kind of teacher do you want for your own children? What kind of teacher did you wish for yourself? Annie Sullivan had such boundless faith in the human ethos that she was surely convinced that the work of the teacher is not to judge who can or cannot change, but rather to fulfill the goal that everyone can change. It was exactly that belief which gave purpose and courage to that good and faithful teacher. If you know their story, you will see that the core of Annie's strength was found in her belief that, before one could truly help another person to learn, the teacher must begin with herself. Before I ask the world to change, I must change. I am the beginning step.

After nearly a century of advances in psychology and pedagogy, we still look to the shining examples of Annie Sullivan and Helen Keller to teach us about the human spirit, the educability of intelligence, and the work of the teacher. Their lives remind us that the genuine miracle of their association was less that Annie Sullivan "cured" Helen Keller's incomprehensibility, than that together, they discovered a "cure" for society's most debilitating and unnecessary disease: hopelessness.

Your friend,

Burton Blatt

This "letter" is part of a book-length manuscript to be titled "Unmailed Letters: On Special Education, Higher Education, and Other Sides of My Education."

Staff Development Project

The Philadelphia Association for Retarded Citizens (PARC) has developed an intensive training program for professional and paraprofessional personnel which is designed to demonstrate current information and techniques that will improve educational programs for special children and adults. The program was developed as a result of a needs assessment conducted in various agencies serving the handicapped. The content of the program is adaptable to contrasting agency needs, and it includes training aids, films, slides, and handouts for staff members. The program is also available to administrators wishing to conduct their own staff training sessions. The core of the program is a three-day training session which addresses human development, child assessment, and parent involvement. Other special programs include: a core training program on February 21-23, 1980; a service delivery program on February 27-28; and a demonstration program for administrators on March 28. For further information contact: Mr. Gentile, PARC, 1211 Chestnut Street, Philadelphia, PA 19107. Telephone: 215/567-3756.

Montgomery County Adult Program

Socialization for Today's Adult Retarded (STAR) of Montgomery County has received funding for Project Start, a program of speech therapy, adaptive physical education, and special education in reading and mathematics for area retarded persons over 18 years of age. Intended as a follow-up to public school programs, the project will tailor training sessions to individual needs. To be eligible for services, interested persons must have an intake interview and then pay a \$15 membership fee. For further information contact: Mr. Edward Carilli, Project Start, Prospect Avenue and Hancock Road, North Wales, PA 19454. Telephone: 215/699-7885.

Vocational Program at Delta School

The Delta School of Newtown, Ottsville, and Philadelphia is conducting a vocational preparation program for its elementary, middle, and secondary students. Designed to provide a continuum of classroom, simulated work, and actual work experiences, the program emphasizes concrete work experience, general cognitive training, and affective preparation for employment. The elementary and middle programs include career awareness and hands-on experiences appropriate to the students' ages. The secondary program includes work and career evaluation systems, exposure to employment opportunities, and on-the-job training. For further information contact: Ms. Joyce Neuman, Delta School, 1950 Street Road, Suite 408, Cornwells Heights, PA 19020. Telephone: 215/632-5900.

Conferences

This year's Council for Exceptional Children (CEC) convention will be held in Philadelphia, PA on April 22-25, 1980. For further information contact: CEC, 1920 Association Drive, Reston, VA 22091.

The annual meeting of the American Association on Mental Deficiency (AAMD) will be held in San Francisco, CA on May 16, 1980. For further information contact: AAMD, 5101 Wisconsin Avenue, N.W., Washington, DC 20016.

Structuring Cooperative Interaction Between Handicapped and Nonhandicapped Students

The successful integration of handicapped children into the regular classroom depends in large measure upon peer accept-

ance. Previous studies have shown that handicapped children are often perceived in a negative light, and that this perception is not necessarily changed merely by bringing students together in a classroom setting. On the contrary, research has shown that just placing handicapped and nonhandicapped students together may even increase prejudice and rejection. This study theorizes that attitudes towards the handicapped can be developed positively, depending on the way in which the interaction among the students is structured. It examines three interaction techniques and their effect on peer acceptance. Thirty junior high school students, aged 13 to 16, participated in the study. Twelve were from a school for the severely handicapped, and were classified as trainable mentally retarded. None had any disabling physical handicaps. The remaining 18 students were nonhandicapped, and attended regular classes at either public or private schools. All students received group instruction on learning to bowl. The students were randomly assigned to one of three groups, with six nonhandicapped and four handicapped students in each group. All three groups received the same basic instructions. In the "cooperative" group, the students were instructed to maximize the group bowling score by helping each other and by offering each other assistance when it was needed. The "individualistic" group was instructed to maximize their individual scores by concentrating on their own personal bowling performance. The "laissez faire" group was given no instructions. Observers were used to determine the degree of positive, neutral, and negative interaction within each group. Results showed that the total number of positive interactions (encouragement, praise, etc.) in the cooperative group was significantly higher than the number of positive interactions in the individualistic and laissez faire groups. The findings support the authors' belief that a cooperative goal structure promotes more support, praise, encouragement, concern, and acceptance from nonhandicapped students toward mentally retarded peers than does either an individualistic or laissez faire goal structure. By encouraging this type of cooperative interaction, the authors feel that severely handicapped students can be successfully mainstreamed into some activities with their nonhandicapped peers in a way that will benefit all.

Johnson, R., et al. Interaction between handicapped and nonhandicapped teenagers as a function of situational goal structuring: Implications for mainstreaming. *American Educational Research Journal*, Spring 1979; 16(2), pp. 161-167.

Testing the Mentally Retarded

The Cain-Levine Social Competency Scale was developed to provide a method of measuring the social competence of trainable mentally retarded children from 5 to 13 years of age. The Scale consists of 44 items divided into four subscales: Self-Help, which is designed to estimate the child's manipulative ability or motor skills; Initiative, which is designed to measure the degree to which the child's behavior is self-directed; Social Skills, which is designed to assess the degree to which the child engages in interpersonal relationships with other children and adults; and Communication, which is designed to measure the degree to which a child makes himself understood. The scale is administered through a structured interview with either a parent or with someone who has had considerable opportunity to observe the child. Percentile norms are provided to determine a child's percentile rank relative to his age group for each subscale and for the total social competency score.

Western Psychological Services, Order Department, 12031 Wilshire Blvd., Los Angeles, California 90025. 1963, 1977. Test Kit \$7.50.

Bellamy, G. T., Horner, R. H., & Inman, D. P. *Vocational Habilitation of Severely Retarded Adults: A Direct Service Technology*. University Park Press, 233 East Redwood St., Baltimore, MD 21202. 1979. 250 pp. \$14.50. A text which presents specific procedural guidelines for direct service staff working in habilitation of severely mentally handicapped adults. Covers task design and analysis, vocational training, and production supervision. The format combines a practical handbook with in-depth academic treatment of vocational habilitation. Illustrations and a bibliography are included.

Feuerstein, R., Rand, Y., & Hoffman, M. B. *The Dynamic Assessment of Retarded Performers: The Learning Potential Assessment Device, Theory, Instruments and Techniques*. University Park Press, 233 East Redwood St., Baltimore, MD 21202. 1979. 433 pp. \$12.50. A text which discusses the Learning Potential Assessment Device (LPAD), an instrument which measures the intellectual potential of a handicapped person. The theory, instruments, and techniques of LPAD are described and a specific, do-it-now program is offered. Contains a review and critique of LPAD pilot tests, evaluations of results, and suggestions for further development.

Pitt, R., & Thomas, E. (Comps.). *A Review of Related Literature Concerning Components of Systems and Studies that Impact on Identification and Selection of EMRs and Slow Learners for Vocational Programs*. Mississippi Research and Curriculum Unit for Vocational and Technical Education, State College. Mississippi State Department of Education, Jackson. Division of Vocational and Technical Education. 1977. 94 pp. (Available from: ERIC Document Reproduction Service, P.O. Box 190, Arlington, VA 22210. ERIC No. ED 160 817. Cost: microfiche \$0.83, hardcopy \$4.07 plus postage). Intended for use by vocational and special educators, this annotated bibliography lists alternative methods for identifying and selecting educable mentally handicapped students for mainstreaming into vocational education programs. Part 1 reviews the components of 11 major work samples. Part 2 is comprised of three sections which contain annotated references covering vocational methodologies, the general nature of education, and ERIC searches—all relating directly to mentally handicapped and slow learners. Part 3 explains how to retrieve the information listed in the document.

Special Education Index to Learner Materials. National Information Center for Special Education Materials (NICSEM), University of Southern California, University Park-RAN, Los Angeles, CA 90007. 1979. 489 pp. \$60.00. This volume contains detailed information on 10,000 media and materials designed or selected for use with exceptional learners. The material is arranged to facilitate selection of instructional materials based on the instructional goals of IEPs and the educational requirements of individual learners. Contains a thesaurus section which serves as an aid in locating terms, an information section which describes the instructional materials, a directory of publishers, and a reference section describing the structure of the NICSEM system.

Stanovich, K. E., & Stanovich, P. J. *Speaking for Themselves: A Bibliography of Writings by Mentally Handicapped Individuals*. *Mental Retardation*, April 1979, 17(2), 83-86. An article which lists 11 works authored by mentally handicapped persons, and comments briefly on seven of the works. The compilers state that the purpose of the bibliography is to provide parents, professionals, and advocates with insights into the thinking and feelings of retarded persons. A central concern of the works cited is the negative reaction towards and the stereotyping of the handicapped.

Wehman, P. Curriculum Design for the Severely and Profoundly Handicapped. Human Sciences Press, 72 Fifth Ave., New York, NY 10011. 1979. 256 pp. \$12.95. A text which synthesizes the current literature on curriculum design and teaching methods for the severely and profoundly retarded. Chapters cover the rationales and methods for teaching self-help skills, recreational skills, vocational education, motor development, language, and functional academics. Includes reports on studies, tables, and bibliographies.

Normalization: A Service Delivery Perspective is an audiovisual program designed to provide professional and paraprofessional audiences with an understanding of the philosophy of normalization and its implications for changing the lives of the handicapped. The program consists of 134 color slides and a 23-minute audio cassette which address the following aspects of normalization: physical integration, social integration, age appropriateness, culture appropriateness, specialization, development and growth, and environmental quality. The program is intended to be used for the inservice training of special educators, social workers, rehabilitation counselors, and others who assist in the process of deinstitutionalization. A user's manual examines the issues touched on in the program and offers three different presentation formats for the material. Among the questions for discussion presented by the program are: To what extent should cost be a contingency in implementing normalization?; What will insure that the quality of care in the community will be better than that in institutions?; What rights do the disabled have in deciding whether they will participate in community integration?; and, What are the negative stereotypes of the handicapped in your community?

Rehabilitation Research and Training Center in Mental Retardation, 2nd Floor, Clinical Services Building, University of Oregon, Eugene, OR 97403. 1977. Cost \$85.00.

PRISE reporter

1013 West Ninth Avenue
King of Prussia, Pennsylvania 19406

To Live As Equals is an inspirational film which is intended to help break down the stigma attached to mental retardation and to demonstrate how handicapped people can live effectively in the community. Most of the dialogue in the film comes from retarded children and adults, their families and teachers, and spokespersons from advocacy groups. The film opens with a portrait of a young retarded man who has graduated from high school and is gainfully employed. He recounts his school experiences and talks about the successes and problems he has had. The film then examines attitudes toward the retarded and special education. The film focuses on the North Jersey Training School. Classroom scenes are depicted, and two teachers talk about their band, and drum and bugle corps which perform throughout the state of New Jersey. The film also features an interview with a retarded couple who live independently with their normal child in the community.

16mm/color/sound/28 minutes/1978/\$375.00

Lodon Films, 52 Undercliff Terrace South, West Orange, NJ 07052.

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Kathleen S. Ewell, Project Director
Carole L. Norris, Assistant Director

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PARISE reporter

issues and happenings in the education of
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no. 11, november 1979

pennsylvania resources and information center for special education 1013 West Ninth Avenue, King of Prussia, Pa. 19406. 215/265-7321

ROBERT G. SCANLON—Secretary of Education;
Department of Education; Commonwealth of Pennsylvania

Dr. WILLIAM OHRTMAN—Chief,
Policy, Liaison, Resource Management

LEARNING DISABILITIES IN THE 1980s: A DISCUSSION OF ISSUES

Stephen C. Larsen
Susan Boklund
University of Texas at Austin

During the past sixteen years, the field of learning disabilities has grown more rapidly and caused more change in both regular and special education than any other handicapping condition. The assessment and remedial activities developed for students labeled as learning disabled have resulted in increased interest in providing services to nonhandicapped students who evidence academic underachievement and social problems. The increased awareness of professionals and parents towards students with generalized school problems has served to call attention to the tens of thousands of youngsters who experience failure in our schools on a routine basis. State and federal legislation has increased the involvement of regular classroom teachers in the education of handicapped students, and has established a framework for individualized instruction for pupils with special needs. Unquestionably, the discipline of learning disabilities has had a great impact upon both special and regular education. Whether this influence continues to be positive and to help improve services to all students, depends upon how the area deals with a number of crucial issues that presently confront it. This article examines the most pressing of these issues in the hope that they will be resolved and thus allow the discipline of learning disabilities to move into the 1980s as a potent force in improving instructional opportunities for learning disabled students.

One of the most important issues to be faced within the field of learning disabilities in the 1980s is the determination of which pupils are to be labeled and served as learning disabled. In some instances the lack of a firm definition has caused the area of learning disabilities to become a convenient depository for large numbers of students who evidence mild forms of academic underachievement. Some school administrators and others in the upper reaches of the bureaucratic educational system have been content to label anywhere from five to ten percent of a given school population as learning disabled—often without any clear-cut evidence that the observed underachievement is indeed due to a handicapping condition. For example, the state of Texas has currently labeled in excess of six percent of their total student population as learning disabled. That is to say that over 106,000 pupils in this state have been judged to be learning disabled (i.e., handicapped). This figure represents approximately 50 percent of all diagnosed handicapped children within Texas. Other states have similar incidence figures. The most obvious question these figures elicit is whether this many students are truly learning disabled, or are they simply labeled as such to entitle them to

services for their demonstrated underachievement? There can be little question that, in current school practice, gross misconceptions have developed concerning what actually constitutes learning disabilities. Equally apparent is the observation that these misconceptions seriously detract from the provision of service to those students who exhibit *severe* problems in academic achievement and/or language usage.

The phenomenon of over-referral and placement of non-handicapped pupils into the category of learning disabilities revolves around the misconception that learning disabilities is a "mild" disorder. Contrary to this belief, Silverman and Zigmond (1977) have argued that the label of learning disabilities is not merely an adjective or a simple description of a condition. Rather, when attached to a child or adolescent, they say, it should denote a pupil who has "not learned and cannot be taught by traditional methods; a student whose educational needs cannot be met by mainstream educators; a student who has failed to achieve up to expectations." (Silverman and Zigmond, 1977, p. 1). In other words, learning disabilities should be a category reserved for students who suffer from a bona fide and markedly handicapping condition. To do otherwise is, to possibly set teacher expectations unreasonably low for the labeled but nonhandicapped underachiever (Foster, et al., 1977; Jacobs, 1978); make impossible, the collection of meaningful research data because of the problems of adequate categorical definitions (Larsen, 1978; Larsen and Deshler, 1978); and detract from the delivery of service to the pervasive needs of the pupil who is seriously learning disabled (Deshler, 1978; Poplin and Larsen, 1978).

In the 1980s educators must be continually cautious of the tendency to expand the category of learning disabilities beyond useful limits. In all probability, labeling more than 1% to 3 percent of a given school population as learning disabled results in the inclusion of many nonhandicapped pupils who could be better served by other professionals in the school such as remedial reading and language stimulation teachers. If growth of learning disabilities is not kept within reasonable boundaries, the 1980s will witness a general deterioration of the concept of this handicapping condition and limiting of service to a population that has already been ignored too long.

A second broad issue confronting the field of learning disabilities centers upon the role and responsibilities of the learning disabilities specialist. The quality of service extended to any student depends upon the competence, confidence, and flexibility of the educator who is responsible for providing the service. If educators are not competent or are somehow impeded in their efforts to properly instruct or advocate on behalf of their pupils, a lack of learning will undoubtedly result.

During the past ten years, several events have occurred that have prevented many learning disabilities specialists from performing in a manner that they are capable of. If services to the learning disabled are to increase in both quality and quantity during the 1980s, learning disabilities specialists must constantly agitate for their own rights as professional educators.

If the learning disabilities specialist is to be adequately represented as an educational practitioner, an effective organizational structure must be found and utilized. In essence, exceptional students and the individuals who teach them are currently without a network of representation at the local, state or national levels. There are no agreed-upon codes of ethics or competency statements available for teachers of the handicapped. Fads and untested methods and materials are continually being foisted upon the field without any strong organizational voice being raised on the side of the students and teachers who will be hindered by their sale and false promises of "cures." In other words, education of the learning disabled seems to be lacking a strong organizational voice which can set directions and create unity.

During the 1980s learning disabilities specialists and other auxiliary personnel must band together for their mutual benefit and for the welfare of the pupils they serve. In the writer's opinion, it is unlikely that this can be effectively accomplished in any existing structure. Rather, specialists must create for themselves an independent organization that is committed to professional matters. The establishment of competency statements, university program certification, high level professional publications, and a meaningful code of ethics are all crucial to the future of the field. If such an organization is not forthcoming in the next decade—or current organizations are not extensively overhauled—it is virtually certain that learning disabilities specialists will continue in their secondary roles and will not be able to agitate for their rights and the rights of those they serve.

A final issue that is particularly germane to the future of disabilities is the elimination of fads and untested methods that are purported to be of value in the classroom. The relative newness of the discipline of learning disabilities probably accounts for some of the questionable programs associated with this categorical area. Regardless of the reason, even a cursory perusal of popular and professional materials reveals mention of such supposedly therapeutic practices for underachievement and/or language disorders as dietary control, process training, balance beams, and cross-pattern crawling. These procedures and techniques are not without their ardent supporters, but they seem to lack a sound scientific basis (Sieben, 1977). It is interesting to note that, while still quite popular with some in the field, these methods may be losing the wide-spread acceptance they once enjoyed. The 1980s should usher in a new era in the use of only those procedures (i.e., assessment and remedial strategies) that have acceptable reliabilities and validities to promote their utility. In any event, the wary parent and professional would be well advised to carefully question tests and materials which promise quick and easy cures while lacking research to demonstrate their reliability, validity, or efficacy.

In summary the 1980s should be one of the most interesting and, hopefully, progressive periods in the education of the learning disabled. The achievement of this, however, will require the concerted effort of all professionals who are concerned with this handicapping condition. Carefully consolidating the basic population served should do much to focus needed attention upon those students who truly suffer from

learning disabilities. The creation of an organization of learning disabilities specialists to monitor the field and to continually upgrade educational practices is essential to future growth and development. Constant vigilance over commercially produced tests, materials, and procedures will serve to weed out those that are potentially harmful and to increase the youngsters' chances of achieving on a level that is commensurate with their ability.

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Pathway School Career Program

The Pathway School of Montgomery County has begun a career exploration program to give students the opportunity to learn the duties and responsibilities of various jobs while still in school. Students between the ages of 14 and 18 are placed in local businesses on a voluntary basis for periods of up to three months. The students work there during school hours, and their job placements are considered part of their educational program. Students observe the operations of the businesses, and their work is overseen by a job supervisor who reports on their performance to the school. The supervisors' reports are used to help students evaluate their strengths and weaknesses, and interests. For further information contact: Ms. Knox Cleek, Pathway School, Egypt Road, Audubon, PA 19407. Telephone: 215/277-0660.

Conferences

The Association for Children with Learning Disabilities (ACLD) will hold its annual convention February 26 to March 1, 1980 in Milwaukee, WI. For further information contact: ACLD, 4156 Library Road, Pittsburgh, PA 15234.

The convention of the International Reading Association will be held in St. Louis, MO on May 5 to 9. For further information contact: Ms. Joanna Miller, 208 S. Ogden, Buffalo, NY 14206.

The Spring 1980 conference of the Pennsylvania Division for Children with Learning Disabilities will be held on April 12 in State College, PA. For further information contact: Dr. Theresa Laurie, 727 L.R.D.C., 3939 O'Hara Street, Pittsburgh, PA 15260.

A Comparison of Cognitive Style Between LD and Normal-Achieving Children

Research has suggested that one characteristic frequently shared by many learning disabled children is an impulsive cognitive style. This is defined as the tendency, in a problem-solving situation, to "Select and report solution hypotheses quickly and with minimal consideration for their probable accuracy." Impulsive cognitive style is in direct contrast with reflective cognitive style, in which more time is taken to decide about the validity of possible solutions. The purpose of this study was to determine whether any differences in cognitive style could be demonstrated between learning disabled and normal-achieving children with respect to the reflection-impulsivity dimension. Two hundred elementary school children were involved in the study. Half of these children were diagnosed as learning disabled and were receiving special educational assistance in resource rooms. The remaining 100 children were attending regular classes and showed no deficits in their school performance. Each child was tested individually using Kagan's Matching Familiar Figures Test. This test was designed to determine how a child is classified along the reflection-impulsivity dimension. Results showed that although the LD group made significantly more errors than their normal-achieving counterparts, there was no significant difference between the two groups with respect to their impulsive or reflective cognitive styles. Further data analysis suggested that LD children are not more impulsive, but rather use poor strategic behavior in processing information. The authors concluded that cognitive modes other than impulsive and reflective styles also need to be considered in testing children for learning problems. Specifically, they urged that greater attention be focused on the way in which task information is processed, rather than the speed with which a task solution is reached.

Nagle, R. J. & Thwaite, B. C. Are learning disabled children more impulsive? A comparison of learning disabled and normal-achieving children on Kagan's Matching Familiar Figures Test. *Psychology in the Schools*, July 1979, 16(3), 351-355.

Screening for Learning Problems

The *Giggle McBean Screening Package* is a comprehensive program for conducting large scale screening of preschool children for hearing, speech, language, and visual motor problems. Prepared as a part of a Bureau of Education for the Handicapped Outreach project, the package contains complete information on how to prepare for, carry out, and follow up on a preschool screening program. The "Giggle McBean" of the title refers to a character in a coloring book which is introduced to the children two weeks before the actual screening takes place. An audio cassette which accompanies the coloring book tells the story of Giggle McBean playing the games involved in a screening, which proves to be his giggliest day ever. The package includes: an outline of the testing experiences which led to the development of the program; an orientation to the screening process; a screener's guide describing the protocols for testing; sample forms which can be used during testing, parent conferences, and follow up; sample letters to parents; and a teacher's guide with suggested activities to prepare the children for testing. All testing is done on a pass-fail basis, and the screener's guide offers procedures for handling problems which might develop during testing.

Intersect, 1101 17th Avenue South, Nashville, TN 37212.
1978. Sample set \$10.00.

Alley, G., & Deshler, D. *Teaching the Learning Disabled Adolescent: Strategies and Methods*. Love Publishing Company, 6635 E. Villanova Pl. Denver, CO 80222. 1979. 362 p. \$13.95. This book is designed to teach students how to learn by the use of a learning strategy model. The goal of this technique is to teach learning disabled adolescents strategies that will facilitate the acquisition, organization, storage, and retrieval of information that will allow them to cope with the demands of the secondary curriculum and the demands of social interaction. Specific learning strategy methods for learning disabled adolescents are included for reading, writing, mathematics, thinking, social interaction, listening, and speaking skills.

Budd, Ellen C. *L.D. Resource Guide for Teachers and Parents*. Pequest Publishing, Educational Division, Box 494, Southport, CT 06490. 1978. 79 p. \$10.95. This is an annotated guide to materials which is arranged by subject. It is designed to aid in searching for instructional materials and to help in setting up learning programs. Intended for use primarily by administrators, special educators, and regular classroom teachers who work with secondary students. Individual chapters contain listings of: taped materials; writing programs; reading programs; spelling and vocabulary material, grammar and writing materials; composition; mathematics; history and geography; science; reference aids; student periodicals; consumer survival; and teacher resources.

De Quiros, J. B. & Schragar, O. L. *Neuropsychological Fundamentals in Learning Disabilities*. Academic Therapy Publications, P.O. Box 899, San Rafael, CA 94901. 1978. 274 p. \$16.50. Noting the difficulty that various specialists who work with learning disabled children sometimes have in communicating with each other, the authors—who both are medical doctors—have prepared this book to help teachers, doctors, and others work together in remediating learning disabilities. By providing neuropsychological information on learning disabilities, it aims to examine: how teachers can be helped by doctors, what kind of studies can help doctors, what teachers can expect from doctors who are treating learning disabled children, how teachers can improve remedial techniques and therapies, and what kinds of clinical diagnoses teachers can expect. Topics covered include: terminology, the basis for learning, laterality, motor activity, posture, movement, visual and auditory development, and their effect on learning, primary and secondary learning disabilities, neurological and neuropsychological examinations, and the basis for therapy.

Education U.S.A. *Education Laws 1978: A Guide to New Directions in Federal Aid*. National School Public Relations Association, 1801 N. Moore St., Arlington, VA 22209. 1978. 120 p. \$11.95. This Education U.S.A. Special Report analyzes the newest legislation and explains its meaning in terms of programs and people. It includes topics such as: Title I, bilingual education, impact aid, community schools, Title IX, the new Basic Skills Act; special projects, educational improvement, state leadership, and emergency school aid. Rather than simply listing or defining federal funding programs and sources, the book provides a behind the scenes look at how legislation came into being and in what direction it will move. The book argues that Congress, not HEW or the president, controls educational policy, and examines the interests and philosophies of key congressional committee members. Each chapter analyzes specific laws and interprets them for the educational community.

Kinsbourne, M. & Caplan, P. J. *Children's Learning and Attention Problems*. Little, Brown & Company, Medical Division, 200 West St., Waltham, MA 02154. 1979. 311 p. \$15.00. A guidebook designed to give a working knowledge of the techniques used in assessing and managing children who, compared with their peers, fall short in attention skills, cognitive readiness, or a combination of both. The book considers children of at least average intelligence and motivation who are achieving below expectation, and finds the problem to be an unsuccessful interaction between the school system and the child. The specifics of how to test, question, interpret, diagnose, and prescribe for children with problems in the classroom are emphasized. The book begins with an introduction to learning problems and intervention, and then provides an overview of their incidence according to sex, age, race, and socioeconomic status. The core of the book is divided into two categories: cognitive power disorders and cognitive style disorders. The topics discussed are: diagnostic procedures, prediction and prognosis, remediation techniques, interpretive interviews, differential diagnosis, and management of impulsive and distractible behavior.

Kozloff, M. A. *A Program for Families of Children with Learning and Behavior Problems*. Wiley-Interscience, 605 Third Ave., New York, NY 10016. 1979. 466 p. \$21.50. This book is intended for social workers, psychologists, teachers, doctors, and the parents of children with learning and behavior problems. It provides detailed descriptions of intervention procedures and a variety of instruments for conducting comprehensive programs with families. The book focuses on: first contact with families, conducting initial interviews, strengthening readiness to change, formalizing a working relationship, assessing the strengths and weaknesses of the family system, establishing short and long term goals, planning a program, conducting programs for individual families or groups, and conducting ongoing evaluations of the program. Includes hand-out materials and copies of brochures and contracts.

MAINSTREAMING: Classroom Management Techniques is a four-part filmstrip program designed to be used for inservice education. The objectives of the program are: to introduce teachers to effective management techniques for mainstream classrooms, to underscore the importance of accepting attitudes, to provide practical solutions to management problems, and to encourage teachers to feel capable of handling main-

stream classrooms. The first part of the program serves as an introduction to mainstreaming and its classroom management ramifications. The second part focuses on the mainstreaming of learning disabled and mildly retarded students. The third part deals with classroom management of students with behavior problems. The fourth part discusses problems with mainstreaming physically handicapped students. The filmstrips may be used individually or as a package. A discussion guide included with the program suggests various inservice formats and activities.

Guidance Associates, Box 300, White Plains, NY 10602.
\$84.50.

To Laugh, to Play, to Learn is a two-film program which explores the methods used to detect, diagnose, and help children with learning disabilities. The first film, "An Introduction to Learning Disabilities," depicts examples of the symptoms of this handicap and explains the tests used to diagnose it. The film discusses the self-fulfilling prophecies of many learning disabled children, the frequency of the handicap, the nature of the symptoms, and the handicap's effect on information processing and body awareness. The second film, "There Is a Way," concentrates on remedial techniques and model programs. This film discusses mainstreaming, sequences of treatment, individualized programs, and the importance of working toward strengths and boosting self-confidence. Both films intersperse classroom scenes with interviews with specialists from various disciplines.

16mm/color/sound/51 minutes/1977/\$700.00

Aims Instructional Media, 626 Justin Avenue, Glendale, CA 91201

PRISE is a federally funded project. The local education agency sponsoring PRISE is the Montgomery County Intermediate Unit No. 23, Dr. Dennis Harken, Executive Director.

The work presented or reported herein was performed pursuant to a grant from the PDE acting as the State Educational Agency for the USOE, DHEW. However, the opinions expressed herein do not necessarily reflect the position or policy of the PDE or the USOE, and no official endorsement by either should be inferred.

Kathleen S. Ewell, Project Director
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PRISE reporter

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PARISE reporter

issues and happenings in the
education of the emotionally disturbed
no. 11, november 1979

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ROBERT G. SCANLON—Secretary of Education,
Department of Education, Commonwealth of Pennsylvania

Dr. WILLIAM OHRTMAN—Chief,
Policy, Liaison, Resource Management

THE EMOTIONALLY DISTURBED ADOLESCENT

*Richard L. McDowell, Ed. D.
Professor of Special Education
University of New Mexico*

There is a new priority evolving in special education at the present time. This priority is the development of public education programs to serve adolescents who have been identified as emotionally or behaviorally disordered. Secondary school programs for handicapped youth are not new, but for many years programs for emotionally disturbed adolescents have been far less than comprehensive. Two major factors have helped delay the design and implementation of adequate programs to serve these students: the lack of a strong advocacy-group and the practices of some educators.

Categorical areas such as mental retardation and learning disabilities have been able to achieve a great deal in recent years, due to the work of powerful parent organizations such as the Association for Retarded Citizens and the Association for Children with Learning Disabilities. The Society for Autistic Children has made some advances for emotionally disturbed students, but in most cases these programs have relied on private rather than public resources. Emotional disturbance has not been a popular cause to fight for. Parents of disturbed students have been hesitant to approach legislative and governing agencies to request better services for their children. Such reluctance is not difficult to understand when you consider the stigma and shame that has been associated with this handicap. For years professionals told parents it was their fault a child was disturbed. While it is certainly true that a difficult home environment may contribute to the development of emotional problems, the practice of blaming parents has compromised their credibility and inhibited their effectiveness in acquiring services for their children.

If parents have not been strong advocates for the emotionally disturbed, neither have educators. Educators have often devised and implemented procedures that would allow for the removal of children, and particularly adolescents, from school programs because of their behavior. Until the passage of Public Law 94-142, schools routinely excluded many emotionally disturbed students from established programs. It was easier and more economical to send the students home and exclude them from school than it was to develop appropriate programs to serve their needs. Besides, who was there to challenge the decision? After all, the students were emotionally disturbed and didn't they really belong in an institution or somewhere? The Education for All Handicapped Children Act has eliminated these blanket exclusions, but problems remain. Since in the past public education did not provide much support for the emotionally disturbed adolescent, there appears to be a considerable lag in the planning and implementation of the programs required by the new law. In many communities across the country serious efforts are nonexistent.

There are those communities which have attempted to meet the needs of individual students, but their efforts have been hampered by the lack of a strong foundation to build on. The lack of adequate planning is evidenced by the limited number of creative program designs in the field. A majority of existing programs tends to imitate the design of elementary classes in special education. The most commonly used is that of a self-contained classroom with a single teacher where the students remain for the larger part of the school day. As they demonstrate self-control and competency in a traditional academic area, they may be allowed to attend a regular class for that area. This is similar to the resource room design where the students spend a portion of the day in the resource room and the remainder of the school day in the regular program.

At the secondary level the normal and expected routine is for students to change classes and teachers each period. Any design which does not take this factor into account is in effect pointing out to emotionally disturbed students that they are different. Adolescents resist being different from their peers, even disturbed adolescents. Group recognition and acceptance is valued greatly. A situation which interferes with achieving these goals has a high probability of being met with resistance. In order to overcome this shortcoming, program design should provide movement which at least approximates that of the regular program.

When designing educational programs for emotionally disturbed adolescents, the primary goal should be to prepare the students to function in adult society to the best of their ability. This goal differs from much of what special education attempts to do. For adolescents, the time of remediation has passed. The time remaining in their high school careers should be devoted to the acquisition of functional skills. The special program should help them learn how to function as adults. Increased attention should be placed on life situations and the adjustment processes. Many of these skills, which will have to be taught to emotionally disturbed adolescents through direct instruction, are those that other students pick up through incidental learning. Program activities should include work in motor, language, self-help, academic or cognitive, social, and career/vocational skills. A deficit in any of these areas will affect the adolescents' ability to function successfully in society.

The traditional educational curriculum is based on the concept that every student should be prepared to enter some form of higher education, should they so desire. In keeping with this, most states have uniform standards for high school graduation which are directed toward the collegebound student. That is, students must earn a minimum number of credits in specified academic areas in order to graduate. Such programs penalize those handicapped students who, for one reason or another, are unable to earn the necessary number of credits in the standard manner. Recognizing this, several states are in-

investigating alternatives that will provide for other ways to complete a secondary program. The state of Arizona, for example, has revised its graduation requirements so that students in special education can earn the necessary graduation credits through both special and regular education classes. This allows for some academic classes, such as general math, to be taught in a functional way. Math credit might be earned through a vocational course where concepts are taught in association with a vocational skill.

Emotionally disturbed adolescents are generally identified by the inability to establish appropriate satisfying relationships with others, and by the demonstration of behavior which either falls to meet or exceeds the expectations of those around them. Effective educational programs should provide students with the opportunity to resolve these problems. Any program designed for these students should incorporate academic, social, and vocational components. Educators must constantly be alert to the tendency to track students through only one of these components (i.e., vocational). Although each of the mentioned curriculum components is still in need of considerable development and revision for emotionally disturbed students, the social curriculum demands immediate attention. If emotionally disturbed adolescents are to establish relationships and exhibit expected behavior, the special educator has the task of teaching the necessary skills. If students can acquire adequate social skills and self-control, they have a better chance of maintaining a job and functioning within society. Specific skills include learning to monitor one's own behavior and evaluating that behavior in light of the rules, expectations, and standards of conduct and performance for a given situation. Students need to be able to identify discrepancies between their actual behavior and what is expected of them. Awareness of such discrepancies allows for self-correction based on training and experience.

There are a number of specific behaviors that adolescents may need to function successfully in society. These include the ability to:

1. Establish eye contact if required by the situation.
2. Demonstrate respect for others and their property.
3. Be attentive to authority figures in appropriate ways.
4. Exhibit good manners.
5. Use appropriate language.
6. Discriminate between behaviors as to time and place.
7. Achieve a reasonable balance between dependence and independence.
8. Learn to accept directions and to take orders.
9. Learn to accept and follow the work schedule established by an employer.
10. See a task through to its completion.

Emotionally disturbed adolescents are about to receive the attention due them. It is hoped that new efforts to provide programs will be creative and not bound by old models. Much can be done to assist adolescents, but educators must develop realistic programs which provide for individual needs as adolescents grow towards adulthood. The priority given to the development of programs for emotionally disturbed adolescents is an important one. Let's not waste this priority.

PRISE INFORMATION DISSEMINATION SYSTEM

In order to provide easier access to PRISE information services, a new information dissemination system was implemented in December, 1978. Under this new plan, the Special Education Director of each Intermediate Unit designated a PRISE Liaison to take requests for information and to forward all eligible requests to PRISE for processing. The 1979-80 PRISE Liaisons are listed below. If you wish to request information, please contact the Liaison from your Intermediate Unit.

Special education private schools, state schools and hospitals, and other special education facilities should continue to contact PRISE directly.

Mrs. Lynn McDowell
Intermediate Unit 1
412/938-3241

Mr. Bruce Bishoff
Pittsburgh-Mt. Oliver IU 2
Allegheny IU 3
412/443-7821

Ms. Virginia Lind
Midwestern IU 4
412/458-6700

Ms. Linda Cook
Northwest Tri-County IU 5
814/734-5610

Mr. DeWayne Greenlee
Clarion Manor IU 6
814/782-3011

Dr. Harrie E. Caldwell
Westmoreland IU 7
412/836-0351

Ms. Linda Martynuska
Appalachia IU 8
814/472-9821

Mr. Robert Porkolab
Seneca Highlands IU 9
814/887-5512

Ms. Veronica Pasko
Central IU 10
814/342-0884

Ms. Kathy Stimely
Tuscarora IU 11
814/542-2501

Mr. Warren J. Risk
Lincoln IU 12
717/624-4616

Mrs. Joyce Shopp
Lancaster-Lebanon IU 13
717/569-7331

Dr. Rona Simek
Berks County IU 14
215/779-1551

Dr. Annette L. Rich
Ms. Nancy Holland
Capital Area IU 15
717/564-1873

Ms. Vicki Mihalik
Central Susquehanna IU 16
717/524-4431

Mr. Joseph A. Klein
BLAST IU 17
717/323-8561

Ms. Loretta Farris
Ms. Barbara Law
Luzerne IU 18
717/287-9681

Mr. John Lawler
NE Educational IU 19
717/344-9233

Ms. Yvonne K. Figlioli
Colonial Northampton IU 20
215/759-7600

Ms. Barbara Balas
Carbon-Lehigh IU 21
215/799-4111

Mrs. Toba S. Knobel
Bucks County IU 22
215/348-2940

Ms. Sharon Wayland
Chester County IU 24
215/383-5800

Ms. Judy Quenzel
Delaware County IU 25
215/565-4880

Ms. Georgia Zeleznick
Stevens Administration Building
215/627-8414

Ms. Linda Brown
Special Education Teacher
Activities Center
215/438-9056

In addition, Liaisons will be designated for each of the eight districts within Philadelphia School District IU 26

Mr. Robert Italia
Beaver Valley IU 27
412/774-7800

Ms. Lisa C. Reese
Arlin IU 28
412/354-3111

Mr. Drew Toborowski
Schuylkill County IU 29
717/628-5687

CORRECTION

Please note the following corrections of PARC staff development workshop dates as reported in the *Happenings* column of the MR PRISE Reporter, no. 11, September 1979: A core training program on February 20-22, 1980 and a service delivery program on February 28-29, 1980.

Intervention Room Program

The Abington High School North Campus has instituted an intervention room program as an alternative to out-of-school suspensions for ninth and tenth graders. Initiated during the 1978-79 school year, the program has led to a 20 percent reduction in suspensions in a period when suspensions had been increasing. The program is designed to help disruptive students accept responsibility for their behavior while allowing them to continue their educational program. Students sent to the intervention room work with staff members to develop a plan for modifying their behavior according to Glasser's reality therapy. Students also receive regular instruction in the intervention room until they are prepared to return to the classroom. For further information contact: Daniel Turner, Abington High School North Campus, Abington, PA 19001. Telephone: 215/884-4700, Ext. 204.

National Society for Autistic Children

The National Society for Autistic Children (NSAC) is an organization of parents, professionals, and others interested in working for programs of legislation, education, and research for the benefit of children with severe behavior disorders. With a network of state and local chapters across the country, NSAC informs the public of problems and symptoms associated with autism, promotes public understanding of the condition, and aids physicians in making early and accurate diagnoses. NSAC also maintains a national information and referral service which offers bibliographies, listings, pamphlets, and newsletters to parents and professionals. This year NSAC will hold its annual conference at the Twin Bridges Marriott Hotel in Washington, DC from June 28 to July 6, 1980. The theme for the conference will be New Directions for the 80's. For further information contact: NSAC, Suite 1017, 1234 Massachusetts Avenue, N.W., Washington, DC 20005. Telephone: 202/783-0125.

Preventive Program for Behavior Problems

The focus of current school maladaptation research has been shifting from rehabilitation to the study of preventive techniques. The research study evaluates the effectiveness of one school-based model of preventive intervention. The sample for the study consisted of 240 children enrolled in Title I preschool programs. The children were screened for potential behavior problems with: the Caldwell Preschool Inventory; the ALM, which is designed to detect school adaptation problems; and the Classroom Adjustment Rating Scale. In addition, a developmental history of each child was obtained. Results of the initial screening showed 64 children to be at high risk, by exhibiting behavior that was either extremely shy and withdrawn or hostile and aggressive. In addition, all of the high-risk children had learning difficulties. These 64 children were randomly assigned to either a prescriptive intervention program (experimental group) or a placebo program (control group). Trained aides worked with the children approximately four times a week with each session lasting 15-20 minutes. The experimental group received individualized treatment based on their observed problems. Activities were designed to help remediate their specific cognitive learning deficits as well as their hostile and aggressive or shy and withdrawn behavior. Children in the control group received instruction in traditional preschool activities, such as reading stories. After eight months all of the children were retested on scales used in the initial screening. Results showed that children in the experimental program attained significantly greater classroom adjustments and academic achievement than the children in the control group. The benefits of the experimental program were equally in evidence in both withdrawn and aggressive children. The

results further revealed that the gains made by the children in the experimental group were not restricted to their particular problem type, but were also evident in other areas of learning and behavioral adjustment. A follow-up study is being planned to assess the program's long-term effects.

Rickel, A. U., Smith, R. L., & Sharp, K. C. Description and evaluation of a preventive mental health program for preschoolers. *Journal of Abnormal Child Psychology*, March 1979, 7(1), 101-112.

Behavior Problem Checklist

The *Louisville Behavior Checklist* is an inventory of social and emotional behavior which is designed to serve as an intake screening instrument. The inventory consists of 164 true-false items which are completed by parents and the results are interpreted by professionals. The inventory format is intended to help parents recall details regarding their children's behavior, and to provide mental health professionals with an overview of a child's deviant behavior. Two forms of the test are available: the first is appropriate for children ages 4 to 6, the second is for children ages 7 to 13. A third form for ages 14 to 18 is currently being developed. The checklist consists of an administration manual, questionnaires, answer sheets, and scoring template. The test has been standardized, and reliability and validity information is provided.

Western Psychological Services, 12031 Wilshire Blvd., Los Angeles, CA 90025. 1977. Testing Set \$39.50.

Goldstein, S. *Troubled Children/Troubled Parents: The Way Out*. Atheneum, 1122 E. 42nd St., New York, NY 10017, 1979. 224 p. \$8.95. A text which explains to parents the natural periods of stress in children's lives. The book describes how troubled children might temporarily manifest their problems, and tells parents how to differentiate between temporary problems and those which are deep-seated and require professional help. The book also indicates the kinds of help available from professionals and explains how to determine whether it is effective. Includes case examples, key techniques for parental intervention, and an informal glossary of psychological terms.

Hirshoren, A. & Heller, G. G. *Programs for Adolescents with Behavior Disorders: The State of the Art*. *The Journal of Special Education*, Fall 1979, 13(3), 275-281. This article discusses the trends and problems in the development of public school services for adolescents with behavior disorders since the enactment of P.L. 94-142. It provides information obtained from a survey of all 50 states, the District of Columbia, Puerto Rico and American Samoa. The results show consistency in defining emotional disturbance, the use of due process procedures, team approaches in determining eligibility and placement, and a trend toward comprehensive services for adolescents.

Jellison, J. A. *The Music Therapist in the Educational Setting: Developing and Implementing Curriculum for the Handicapped*. *Journal of Music Therapy*, Fall 1979, 16(3), 128-137. This article outlines 21 steps for a music therapist to follow while developing and implementing curricula for handicapped children whose placement is totally or primarily segregated. It stresses the importance of the music therapist assuming the responsibility for working with parents and special educators in providing a curriculum that is consistent with a child's individualized educational program.

Jones, R. *Spaceships, Rollerskates, and Kids Called Crazy*. *Media & Methods*, February 1979, 15(16), 14-17 & 50-57. An article which discusses an experimental summer school pro-

gram which employed inner-city street kids to act as therapeutic models for five severely disturbed and hospitalized peers. The goal of the program was to prepare the hospitalized adolescents for resocialization into the real world. The article describes the summer's activities, the personality of each participant, and describes how the students' attitudes towards one another changed as the summer progressed.

Michel, J., & Blitstein, S. **Use of Videotape Feedback with Severely Disturbed Adolescents.** *Child Welfare*, April 1979, 18(4), 245-251. This article presents the results obtained from a year of group therapy which used videotape feedback with seriously disturbed adolescents. It offers evidence that such feedback facilitates correction of distorted body images, low self-esteem, lack of capacity for self-observation, and poor peer relationships. The authors suggest that the use of videotape served as another therapist in helping the students to understand themselves.

Paluszny, M. J. **Autism: A Practical Guide for Parents and Professionals.** Syracuse University Press, 1011 E. Water St., Syracuse, NY 13210. 1979. 194 p. \$9.95. A text which explains the progress that has been made in understanding and treating autistic children and their families. The book presents the problems which may be encountered in theoretical classification, diagnosis, etiology, and therapy. It also examines the different aspects involved in educating autistic children, describes psychoeducational and environmental methodologies, discusses philosophies and practices of model parent therapy and training approaches, and addresses the issues involved in planning for the future. Includes a bibliography and index.

Living and Learning with the Handicapped Child is a series of 25 in-service programs designed to help educators to: identify students with special needs; select appropriate strategies; work with parents; and coordinate educational, professional, and community resources. The component of the program which deals with emotional disturbance contains a media presentation, staff manual with training guide, script, fact and discussion sheet, glossary, workshop guides, and bibliography. The program discusses maladaptive behavior and how it is defined by behavioral messages. It presents information on the various forms of treatment used to deal with each child's individual problems. The program also presents a positive approach for change within the regular classroom, to help fulfill

each child's goals. The objectives of the program are: to define what is meant by emotional disturbance; to foster an attitude, on the part of adults, that will encourage them to modify children's maladaptive behavior rather than view them as permanently "sick"; to describe the variety of strategies utilized in working with emotionally disturbed children; and to present a model reinforcement program designed to modify a disturbing behavior.

Cambridge Book Company, 888 7th Ave., New York, NY 10019. 1978. Emotional disturbance component: \$125.00. Complete program: \$4,500.00.

Teenage Suicide is a film for parents, counselors, and teachers, which examines the second leading cause of death among persons under 25 in this country. It seeks to dispel the myths surrounding suicide—such as people who talk about it don't do it—and to alert those who deal with troubled adolescents to the warning signs of an impending suicide attempt. The film explores the causes for suicide from the point of view of both mental health professionals and youngsters who have tried unsuccessfully to take their own lives. Staff members from suicide prevention centers talk about the calls they have received, and teenagers tell of being in such despair that they ingested dozens of tranquilizers. Above all this is a film about adolescents in pain with no one to listen to them, and about how—over 5,000 times each year—these feelings of hurt and isolation lead to death.

16mm/color/sound/16 minutes/1978/\$250.00

MTI Teleprograms, 4825-N. Scott St., Schiller Park, IL 60176.

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ROBERT G. SCANLON—Secretary of Education,
Department of Education, Commonwealth of Pennsylvania

Dr. WILLIAM OHRTMAN—Chief,
Policy, Liaison, Resource Management

THE UNIQUE NEEDS OF SEVERELY VISUALLY HANDICAPPED PUPILS IN REGULAR SCHOOL PROGRAMS

*Geraldine T. Scholl
Professor of Education
The University of Michigan*

The current emphasis on mainstreaming and noncategorical service delivery systems for handicapped pupils has advantages for some and disadvantages for others. It is advantageous for emotionally impaired, educable mentally impaired, or learning disabled students, for whom a differential diagnosis is sometimes difficult. Teaching techniques for these students are not vastly different from those commonly used in the regular classroom, and their educational needs are not too deviant from those of nonhandicapped students. Labels for these pupils tend to carry negative implications; their differences are noted primarily in school related tasks and are lost outside of school.

Conversely, the emphasis on mainstreaming and a noncategorical approach is disadvantageous for the low incidence categories: the hearing impaired, physically handicapped, visually impaired, and the more severely involved. These pupils have unique and identifiable educational needs that cannot usually be met within the regular classroom without supportive services and special education.

Public Law 94-142 guarantees that "handicapped children have available to them a free appropriate public education which includes special education and related services to meet their unique needs." The law defines special education as "specially designed instruction . . . to meet the unique needs of a handicapped child," and related services as those "required to assist a handicapped child to benefit from special education. . . ." Clearly, if the intent of the law is to be implemented, we must identify the unique needs so that they can be met through special education and related services. In keeping with this mandate, this author and C. A. Wehl recently completed a study in which a group of teachers of visually handicapped pupils identified 18 unique educational needs of pupils with severe visual impairments. These needs were found to fall into three areas: use of materials/devices, skills, and subject areas.

Use of Materials/Devices. Educational materials used in the typical school program are largely visual in appeal. Pupils who have no vision, or whose vision is so defective they cannot see such materials distinctly, are thus at a disadvantage. They must be provided with nonvisual substitutes, and with instruction in how to use such methods as braille, the Optacon, and auditory and mathematical aids.

Pupils who cannot learn through the visual mode require instruction in the reading and writing of braille. Instruction

should include the use of such various braille codes as literary, mathematical, scientific and, where appropriate, music. For writing, the braille writer and the slate and stylus, the two commonly used braille writing aids, must be mastered.

The Optacon is a reading device that provides direct access to print through the sense of touch. It should be viewed as complementary to braille reading, and not a substitute. The Optacon gives the severely visually impaired pupil immediate access to the printed word.

To compensate for the slow speed of reading braille, or print with the Optacon, pupils must become proficient in the use of auditory aids or recorded forms for reading, including tapes, cassettes, and talking books. To use them effectively, pupils must develop good listening skills. At the secondary level, pupils should also learn to use the cassette recorder for note taking—especially if they plan to attend college.

The abacus and calculators with spoken output or displays that can be read with the Optacon are invaluable aids for mathematics. Their use should be especially encouraged for drill work. By using them efficiently, visually handicapped pupils can compete on a more equal basis with their sighted peers.

Skills. Many activities and behaviors that are learned by sighted children through imitation must be deliberately taught to visually handicapped children through their other senses. The effective use of touch and hearing is not automatically acquired. For pupils to make adequate educational use of all their senses, sensory awareness training is required. In addition, children can be helped to use whatever vision they have more effectively through visual efficiency training. The full use of all sensory avenues aids concept development, the base upon which visually handicapped children must build their reality. Their programs should include training in spatial relations, categorization, and identification.

As pupils progress in school, specialized techniques for map reading and use of reference materials must be taught. These skills are especially necessary for pupils who are planning a postsecondary academic career.

One major disadvantage the severely visually impaired have is the lack of opportunities to observe the appearance and behavior of others—especially in social situations. Thus, an important part of the curriculum is the development of social skills appropriate to sex and role, and of daily living skills, including caring for personal and social needs. In addition, learning to move in the environment safely and efficiently, with and without a mobility aid, requires instruction in orientation and mobility.

Subject Areas. Physical education is an integral part of the regular school curriculum in most schools, and physical education programs are mandated by P.L. 94-142. Regular physical education programs help visually impaired students to improve their orientation, social skills, and concept development through such activities as movement work, rhythm training, and games. Children with severe visual impairments must learn to use their bodies in space, to improve their gross and fine motor abilities, and to move gracefully. Supplementary physical education is needed by pupils who lack psychomotor skills. In addition to physical education, there should also be instruction in leisure time and recreational activities.

Vocational education is specifically mentioned in P.L. 94-142, and it is particularly critical for the visually handicapped because discrimination still exists in the job market, and the nature of visual impairment itself restricts occupational choices. Thus, early exposure to the world of work and work activities, the acquisition of prevocational skills, and realistic vocational counseling are needed.

Communication skills, both oral and written, are necessary in our highly verbal society, and visually handicapped pupils should learn to express themselves in writing and to master the use of the typewriter. Minimal handwriting skills, such as signing their names legibly, should also be taught.

Finally, human sexuality is a necessary curricular area for visually handicapped children, partly because they lack the visual input that facilitates learning for sighted children, and partly because this is a sensitive area where parents have difficulty communicating information around a visual impairment.

Many of the educational needs listed above apply not only to visually handicapped children, but also to other handicapped children as well. For example, instruction in orientation and mobility is needed by physically handicapped and some severely mentally handicapped children; daily living skills constitute an important component in the curriculum for the severely mentally impaired. And some of the needs apply to nonhandicapped students also. For example, skill in the use of the abacus, and in using all avenues of sensory input are valuable elements in the regular school curriculum.

All teachers can improve their instructional programs through the use of concrete materials and actual experiences, which are so commonly a part of education for visually handicapped pupils. The addition to the regular school curriculum of many of the activities described here would enrich the educational program for all children, and would, at the same time, enable more handicapped children to obtain their appropriate education in a regular classroom.

An important by-product of special education should be the improvement of education for all children. Special education teachers are well aware of the unique needs of the handicapped pupils they serve. Many times these needs are unique only because they are not viewed as integral elements in the regular curriculum. The teachers in this study viewed education of visually handicapped pupils as a joint enterprise between regular and special education. Except for certain special materials such as braille and the Optacon, most of the unique needs of visually handicapped children can be met in the regular classroom if they are included in the curriculum for all children. The task for special education would be greatly facilitated and the education of all children would be enhanced if some of the unique needs of handicapped children were also considered unique needs for all children.

References

DHEW. Education of Handicapped Children. *Federal Register*, (Tuesday, August 23, 1979), pp. 42474-518.

Scholl, G. T., and Wehl, C. A. A Survey of Special Curricular Areas to be Included in Day Programs for Visually Handicapped Pupils. *Education of the Visually Handicapped*, 11 (Spring 1979), pp. 18-23.

Integrating Visually Handicapped Children in the Regular Classroom

The classroom integration of visually handicapped children with their normally sighted peers is essential for the adequate educational and social development of the visually impaired. Little research has been done, however, to determine what criteria can determine the readiness of the visually impaired for integration. The present study investigates how factors such as age, grade placement, sex, visual acuity, and arithmetic and reading achievement correspond with the adjustment of visually handicapped children in regular classes. Sixty-one visually impaired children enrolled in the Detroit Public School System were involved in the study. These children were randomly chosen from grades 3-11, and from ungraded classes for the multiply handicapped-visually impaired. The students ranged in age from 8 to 22 years, and their IQ scores ranged from 44 to 127. Data on each child was collected and analyzed with respect to the amount of time he or she spent in the regular classroom.

Results showed that age was, by far, the most important factor influencing the amount of time spent in the regular classroom. This supports previous research indicating that, although some visually impaired children may be included in selected regular class activities as early as nursery school, the amount of time spent in integrated classes increased as the child became older and advanced through school. The present study found 25 percent integration among third graders, which gradually increased until grades 9 and above where a 97 percent integration level was reached. Other factors relating to school integration included arithmetic achievement, psychomotor curriculum, grade placement, the degree of visual impairment, and sex. Those variables investigated but found not to significantly influence integration included: reading achievement, visual pathology, race, reading medium (print or braille), and intelligence.

Thomas, J. E. Factors influencing the integration of visually impaired children. *Journal of Visual Impairment and Blindness*, November 1979, 73(9), pp. 359-363.

The Blind Learning Aptitude Test

The Blind Learning Aptitude Test (BLAT) is an individually administered educational assessment instrument for visually handicapped persons which measures the process of learning rather than retained knowledge that is the product of learning. Because the BLAT is not based on acquired knowledge, which can be influenced by socioeconomic factors, it is especially useful for culturally disadvantaged blind students. While designed for use with children aged 6-12, the test can also be used with less capable adolescents and adults. The test consists of 49 items that require students to match or compare embossed geometric figures given as "questions" with others given as "answers." By presenting the test items in a braille-like manner, the BLAT allows students to be tested by sense of touch—the modality through which they do most of their learning. The BLAT is meant to complement, not replace, the Hayes-Binet and the verbal portion of the Wechsler Intelligence Scale for Children, both of which contain a mixture of learning process and learning product items.

T. E. Newland, 702 S. Race St., Urbana, IL 61801. \$20 per test.

Combined AEVH and AFB Conference

A combined conference of the Association for the Education of the Visually Handicapped and the American Foundation for the Blind will be held in Boston from June 22-28, 1980. The title of the meeting is Helen Keller Centennial Conference: A Blueprint for the Future. Keynote speaker will be Eric T. Boulter, Director of the National Institute for the Blind, London. During the course of the conference 48 workshops on a variety of matters which touch the lives and education of the handicapped will be held. For further information contact: Association for the Education of the Visually Handicapped, 919 Walnut St., Philadelphia, PA 19107. Telephone: 215/923-7555.

Reading Materials for the Visually Impaired

There are two libraries in Pennsylvania that cooperate with the Library of Congress on materials for the visually impaired: The Free Library of Philadelphia's Library for the Blind and Physically Handicapped, and Pittsburgh's Regional Library for the Blind and Physically Handicapped. Both provide a variety of reading materials and services to the physically and visually handicapped throughout Pennsylvania. To qualify for these services, visually impaired and physically handicapped persons need only complete a brief application and certification of disability, which the library supplies. When the application has been approved, the client becomes eligible to borrow materials, and receives a catalog of holdings and bimonthly updates. Clients then request materials which are sent to them free of charge, along with any machinery that is required. Materials available include talking book discs and cassettes of best sellers, classics, poetry, mysteries, biographies, historical novels, nonfiction, sports, and such popular magazines as Newsweek, Reader's Digest, National Geographic, Good Housekeeping, Sports Illustrated, and Jack and Jill. The library also has recordings of plays, speeches, foreign language instruction, old radio programs, and short stories in foreign languages. A number of large print and braille books and magazines are included in the collection as well. In addition to these materials, a number of special services such as book fairs, assistance to college students, and aids for the blind are also available. For further information contact: Library for the Blind and Handicapped, 919 Walnut St., Philadelphia, PA 19107. Telephone: (local) WA5-3213; (elsewhere in Pennsylvania) 1-800-222-1754. Or, Library for the Blind and Physically Handicapped, 4724 Baum Blvd., Pittsburgh, PA 15213. Telephone: (local) 687-2440; (elsewhere in Pennsylvania) 1-800-242-0586.

Alonso, L., Moor, P. M., & Raynor, S. **Children with Visual Handicaps.** U.S. Government Printing Office, Washington, DC 20402. 1978. 128 p. \$3.25. Part of the Mainstreaming Preschoolers series, this book is intended as an introduction to both mainstreaming and visual handicaps for parents, teachers, clinicians, and others who work with preschool vision impaired children. Chapters address such topics as: What is mainstreaming?; What are visual handicaps?; How visual handicaps affect learning in three- to five-year-olds; Mainstreaming children with visual handicaps; Parents and teachers as partners; Where to find help; and an appendix with information on screening and diagnosis, child development, and a glossary.

Florance, C. L., & O'Keefe, J. **Articulatory Intervention for the Visually Impaired.** *Language, Speech, and Hearing Services in Schools*, July 1979, 10(3), 139-144. This article explains a modification of the Paired-Stimuli Parent Program which the authors used for the treatment of articulatory errors of visually impaired children. The article presents a discussion of the treatment methodology and a report of the results of the program, including a two-year follow-up evaluation which measured the permanence of behavior change.

Krebs, C. S. **Hatha Yoga for Visually Impaired Students.** *Journal of Visual Impairment and Blindness*, June 1979, 73(6), 209-216. This article describes a Hatha Yoga physical-fitness program designed to meet the developmental needs of visually impaired students. The program emphasizes body image, spatial/movement concepts, proper posture, and relaxation techniques. Includes teaching suggestions, instructions, and photographs for 12 beginning exercises.

Seven, S. M. **Environmental Interpretation for the Visually Impaired.** *Therapeutic Recreation Journal*, First Quarter-1979, 13(1), 12-18. This article examines the sensory stimuli that visually impaired persons need to experience and interpret information during a visit to a public site, and suggests guidelines for how such locations can be made more accessible to the visually impaired.

Sexuality and Disabilities. Fall 1979, 2(3). This special issue is devoted to sexuality and the deaf, the blind, and the deaf-blind. It contains articles entitled: Sexuality Among the Visually Handicapped: A Beginning; Sexuality and the Blind Disabled; and Another Perspective on Sexuality and Those Who Are Deaf and Blind. In addition, the journal contains four papers from a workshop on human sexuality and the deaf-blind which was held in Oklahoma City, Oklahoma in January 1978. The papers address: Sexual Implications of Deaf-Blindness; The Legal Rights of Handicapped Persons with Regard to Procreation; Sensorially Impaired Adolescents; and Sexuality in Deaf-Blind Persons.

Spungin, S. J. **Competency Based Curriculum for Teachers of the Visually Handicapped: A National Study.** American Foundation for the Blind, 15 W. 16th St., New York, NY 10011. 1977. 216 p. \$5.00. This volume reports the results of a project undertaken between 1973 and 1975 to define those competencies teachers of the visually handicapped require over and above those needed by teachers of sighted children. The project identifies 12 goal areas where competencies were required by teachers, working in full time special classes, resource rooms, itinerant programs, teacher consultants, and residential schools. This book includes information on the operation of the project, the competencies identified, and the results of a national study of teacher reactions to the proposed competencies.

Yoken, S. **Living with Deaf-Blindness.** The National Academy of Gallaudet College, Kendall Green, Washington, DC 20002. 1979. 178 p. \$9.50. This is a collection of nine profiles of the lives of deaf-blind persons which was written for those who work with the deaf-blind. It is not a collection of success stories, but raw material from which readers can form conceptions of the experiences and needs of the deaf-blind, and search for methods for developing effective services. Those profiled are from widely divergent backgrounds and became deaf-blind at different ages from various causes. They talk about their schooling, jobs, families, plans, fears, and hopes.

The Seven Minute Lesson is a film that demonstrates the proper technique of acting as a sighted guide for the blind. Carl, a blind lawyer, is shown traveling independently on a bus to meet his girlfriend to do clothes shopping. As they go about their shopping trip, the film details the proper way to guide a blind person. Carl's friend first explains the setup of the department store to him, and then addresses how to walk with a blind person, including walking up and down narrow aisles, reversing directions, going in and out of doors, and traveling up and down a staircase.

16mm/color/sound/7 minutes/1978/\$60.00

American Foundation for the Blind, 15 W. 16th St., New York, NY 10011.

Physical Education for the Blind is an inspirational film which discusses the importance of physical education for the visually impaired, and demonstrates specific techniques that can be employed in physical education classes which include both sighted and visually impaired students. In addition to demonstrating specific physical education techniques, the film seeks to motivate those concerned with physical education to use their imaginations and make their programs more fulfilling for the visually impaired. The film was prepared under the direction of a blind man who is an expert in physical education for the handicapped, and it is partially narrated by a school principal who is blind.

16mm/color/sound/18 minutes/1977/\$195.00

Campbell Films, Inc., Cony Hill, Saxton River, VT 05164

The Talking Eye is a multimedia kit for the study of the human eye. The kit includes a model eye which is six times life size and can be disassembled, a cassette or record that contains a lesson on the composition and function of the eye, a film-strip that compares the operation of the eye to a camera, and a teacher's guide. Because it is realistically designed and can be disassembled, the model eye can be used to help visually handicapped students gain an understanding of the physical make-up of the eye. The teacher's guide lists a number of upper elementary, junior high, and high school textbook chapters which correlate with the kit. The guide also contains a script of the audio lesson, question and answer sheets, and activities to be used with the eye model.

Denoyer-Geppert, 5235 Ravenswood Ave., Chicago, IL 60640.
1975. \$119.00.

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PARISE reporter

issues and happenings in the
education of the physically handicapped
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pennsylvania resources and information center for special education 1913 West Ninth Avenue, King of Prussia, Pa. 19406, 215/265-7321

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THE CHALLENGE OF THE PHYSICALLY HANDICAPPED STUDENT WITHOUT SPEECH

Judy Montgomery
Director, Non-Oral Communication Center
Fountain Valley, California

Education—the transfer of knowledge from one person to another—is dependent upon a give and take between students and teachers. The teachers base their next step of instruction on the feedback from their students. Whether it takes the form of verbal responses, gestures, motor activities, or facial expression, student response guides the instructor's approach. This communication becomes even more crucial in special education, as students require individualized instruction and rarely benefit from mere exposures to learning. But, what happens if no feedback, no communication, is possible? How does the teacher teach; how can the student learn?

Severely physically handicapped children who are unable to speak or communicate clearly present just such a problem in the classroom. Children with significant neurological disorders frequently have little or no usable speech. Their vocalizations may consist of only a few overused words or unintelligible struggles to gain adult attention. Cerebral palsy, developmental delay, head trauma, and similar disorders cause this speechless condition. When these deficits are combined with an inability to reach, grasp, point, or indicate with body motions, the result can be a devastating lack of classroom communication.

Since these nonoral or nonverbal children cannot respond consistently or understandably, their entire educational future can be uncertain. Instructors present them with fragments of the regular curriculum—most often basic skills such as colors and numbers and shapes—and watch for a response. Without a two-way communication system the process soon bogs down to a daily repetition of lessons, always dependent upon a "signal" that the student comprehends. Student and teacher expectations are subsequently diminished, since little progress can be made without communication skills.

As more physically handicapped students join our educational programs, we will see increasing numbers of nonoral children. Their needs are unique and their potentials unexplored. Yet educators must construct programs to serve these students. Facilities and professionals who serve this special population face two great challenges:

How shall we assess the nonoral physically handicapped child?

How shall we provide communication systems and educational settings for the nonoral child?

An effort was made to explore these concerns through a Title IV-C ESEA grant at the Non-Oral Communication Center. The center is located at Plavan School in Fountain Valley, California—a setting built specifically for mainstreaming physically handicapped and able-bodied students. The staff at the center includes a project director, a full-time speech and language pathologist, a half-time instructional aide, a half-time occupational therapist and a secretary. The team provides a supplemental program to the classroom and works very closely with teachers, psychologist, and other support personnel.

The Non-Oral Communication Center took on the two-part challenge to assess and educate students who could not exhibit meaningful or consistent communication. During the first year of the grant, 15 students ages 4-15 were identified as being physically handicapped and nonverbal. None of these students, nor the subsequent ones in the next two years of the project, had the motor dexterity to use sign language. All of them were totally dependent individuals who required assistance with feeding, personal grooming, and ambulation. The children were considered untestable due to their severe disabilities and lack of communication. Behavioral and academic projections for the students were sketchy at best. Yearly psychological evaluations reported no change or improvement in their skills and often included statements of probable severe mental handicaps.

Since traditional assessment devices were not fruitful, the project constructed new methods as follows: Nonoral students are seen individually for assessment. The team gathers information through standardized tests, observation, interviews, and project-made scales. The gathering of data often requires repeated sessions with the student, as seating balance, fatigue, anxiety, appropriate display of stimuli, and other factors are vital to the outcome. Tests are given with an observer present who notes gestures and other indications the student may use which the examiner doesn't have the opportunity to notice. Standardized test materials sometimes need to be enlarged, reduced, back-lit, etc., for students to respond to the task rather than the presentation. These modifications are duly noted on the test protocols. Since assessment is not an end product but rather the first step toward valid educational programming, these modifications are justifiable. The team sifts through the data analyzing it for these four aspects: motor capabilities, psycholinguistic skills, cognitive functioning level, and environmental needs.

With this information in hand, the student is introduced to one or more "systems" of communication which fit his or her profile of motoric, linguistic, and social needs. Repeated experimentation with switches, light boards, language board layouts, typing apparatus, etc., provides the bridge from assessment to intervention. Since the nonoral student's paramount need is a communication system to augment unprofitable ver-

bal skills, a method of response must be taught and reinforced. At this point the multidisciplinary team becomes very important. Input is gathered from many sources and weighed to determine the sequence of skills to teach. Examples on prerequisite skills for augmentative communication include use of eye gaze, object permanence, cause and effect concept, auditory and visual sequencing, left to right scanning, eye hand coordination, and picture generalization.

An individual plan is then drawn up for each child, outlining his or her present skills and interests and the early learnings necessary to utilize a system of communication. The age, prognosis for eventual oral speech, and home support of the child also enter into the decision. Systems are introduced at this time on a trial basis with constant alterations to personalize the child's program as much as possible.

Nonoral severely physically handicapped children in the program use many different forms of communication to benefit their education and develop their peer and social interactions. Each system evolves over time in keeping with the changing needs and abilities of the students. Several of the older children were involved in the selection of their aids and systems. Not all the nonoral children use mechanical or electronic systems, some use communication handkerchiefs, language boards, and scanners; others combine computer systems with telegraphic oral speech and gestures.

For example, Glenn age 16, uses a nonoral communication system of very graphic facial expressions, a highly sophisticated speech synthesizer for conversation, and a typewriter for class assignments.

Monica, age 10, combines her limited oral speech with a specially designed lap-tray language board placed on her wheelchair. For telephone conversation, she can use a TTY unit with a three-row keyboard. In the classroom she completes all written work on a modified electric typewriter.

Jeff, age 7, indicates yes or no with gross body movements, but completes his feeding activities and reading readiness tasks with a 16-message visual display electronic board. In two years, his oral speech has increased from one word *hi* to approximately 25 intelligible words. His vocabulary parallels the augmentative systems he is using and the increased contacts in his environment.

Vince, entering high school next year, has developed a multifaceted nonoral communication system. He depends upon a wheelchair-mounted miniature keyboard computer with printed output for social conversations, on-the-spot class response, and community activities. Class assignments, letters to his pen pal, and articles for the school newspaper are composed on an electric typewriter with a keyguard. He is very interested in computer technology and spends much of his spare time with small electronic games of sport or skill.

Each student in the Non-Oral Communication Center has been evaluated for skills and needs. These former "untestable" and "unreachable" children now have useful communication systems and meaningful educational goals. Progress can be measured while children take an active role in their school environment. They can make things happen!

The educational process—the animated give and take of information exchange—can be utilized with students who cannot speak, write, point, or gesture. Once a reliable communication system is established, a meaningful curriculum can be devised and offered to the physically handicapped nonoral student. Appropriate and functional assessment of these youngsters can lead to a profitable educational experience for both students and teachers.

Communication Aids Library

The Speech Department of the Pioneer Education Center, part of the Pittsburgh Public Schools, has been awarded a Title IV-C grant to establish a library of communication aids to assist students with severe communication handicaps. The equipment will be used to supplement speech and language services provided to physically handicapped nonverbal children at the school. The project will develop a library of existing devices, attempt to develop criteria for use by professionals serving these children, and explore the use of the devices in the home and community. The equipment to be used includes electronic language boards which have taped voices, or picture, symbol, graphic, or word faceplates; coded digital instruments which have artificial voices; and microprocessor computers and their software. For further information contact: Marie Capozzi or Jacqueline Territo, Pioneer Education Center, Dunster at La Moine Sts., Pittsburgh, PA 15226. Telephone 412/531-0626.

Program for Preschool Handicapped

The Fuhrman Clinic Schools of the Easter Seal Society have been granted approval by the Pennsylvania Department of Education to admit handicapped children into their programs at age two. The schools provide preschool programs to the physically and mentally handicapped at their locations in Philadelphia, Lansdale, and Levittown. The students receive classroom instruction, and physical, occupational, and speech therapy as designated in their IEPs. Therapeutic programs in recreation and music are also provided. For further information contact: Mark Sklar, Easter Seal Society, 3975 Conshohocken Ave., Philadelphia, PA 19131. Telephone: 215/879-1000.

National Association of the Physically Handicapped

The National Association of the Physically Handicapped (NAPH) was founded in 1958 as a nonprofit organization which seeks to advance the social, economic, and physical welfare of physically handicapped adults. NAPH has 1100 members, and chapters in 29 states. Although there is no local chapter in Pennsylvania, residents over 16 years of age who are physically handicapped or able-bodied may become members at large. The focus of the organization is encouraging legislation to benefit the physically handicapped and to make the public more aware of their needs. Other activities include a newsletter, an education and research committee, a pilot project in building housing for the physically handicapped, and efforts to promote barrier free design of public buildings. This year the NAPH national convention will be held from July 27 to August 1, 1980 at the Holiday Inn Cascade in Akron, OH. For further information contact: James Truman, 525 Diagonal Rd., Apt. 1016, Akron, OH 44320.

Conferences

The Third International Congress on Physically Handicapped Individuals Who Use Assistive Devices will be held in Houston, Texas from April 10 to 15, 1980. For further information contact: Thorkild Engen, Institute for Rehabilitation and Research, Texas Medical Center, 1333 Moursand Ave., Houston, TX 77030.

The 1980 World Congress of Rehabilitation will be held in Winnipeg, Canada from June 22 to 27. For further information contact: Canadian Rehabilitation Council for the Disabled, P.O. Box 1980, Winnipeg, Manitoba, Canada Rec 3R3.

Atwater, M. H. **Rollin' On: A Wheelchair Guide to U.S. Cities.** Dodd, Mead & Co., 79 Madison Ave., New York, NY 10016. 1978. 290 p. \$8.95. The book is designed to be used as both travel planner and as a guide once at a destination. It is written for the independent wheelchair traveler, as only those sight-seeing adventures that can be done without assistance, are suggested. It provides detailed accessibility facts for the popular U.S. cities and sources of travel information for the physically handicapped. Individual chapters cover Chicago, Honolulu, New York, Philadelphia, San Antonio, San Diego, San Francisco, and Washington, DC. Abbreviated information is also included for Boston, Denver, Miami, New Orleans, Phoenix, and Seattle.

Best, G. A. **Individuals with Physical Disabilities: An Introduction for Educators.** C. V. Mosby Co., 11830 Westline Industrial Dr., St. Louis, MO 63144. 1978. 210 p. \$13.50. This book presents an overview of the educational and social needs of those with physical disabilities. The emphasis is on individuals rather than their disabilities. The first part of the book identifies and discusses characteristics of disabilities and disability related services; the second part outlines various concepts of learning, and approaches to educational placement and practices. A special section written by and about adults with disabilities is also included. The conclusion takes a look at the current trend and the implications of Public Law 94-142.

Calhoun, M. L. & Hawisher, M. **Teaching and Learning Strategies for Physically Handicapped Students.** University Park Press, 233 E. Redwood St., Baltimore, MD 21202. 1979. 362 p. \$15.00. This is a textbook to prepare teachers to meet the educational needs of physically handicapped children. It deals with meeting the requirements of Public Law 94-142 and presents specific curriculum ideas. It covers the nature of physical handicaps, the psychological and special needs they present, and the assessment, placement, and program mandates of the law. Normalization and creative problem solving are emphasized and resources to aid in the teaching of the physically handicapped are included.

Cook, P. F.; Dahl, P. R., & Gale, M. A. **Vocational Opportunities: Vocational Training and Placement of the Severely Handicapped.** Olympus Publishing Co., 1670 E. 13th St., Salt Lake City, UT 84105. 1978. 163 p. \$7.95. This book describes the attitudes, communication problems, environmental barriers, and lack of skills confronted by the severely handicapped in obtaining vocational training and job placement, and suggests strategies for surmounting these barriers. It is intended for providers of vocational training and job placement services and trainers of such personnel. The handbook is useful for: identifying jobs; designing programs to train people in various skills; identifying job clusters that may be open for development to persons with certain types of handicaps, and providing information to handicapped persons and their parents.

Hofman, H. H. & Ricker, K. S. **Sourcebook: Science Education and the Physically Handicapped.** National Science Teachers Association, 1742 Connecticut Ave., N.W., Washington, DC 20009. 1979. 284 p. \$6.00. This sourcebook is designed to aid in integrating physically handicapped students into science classes in grades K-12. Includes chapters on law and the handicapped; teacher training programs which include training in science for the handicapped; resources containing bibliographies, lists of appropriate agencies, organizations, associations, and journals; science for the blind, deaf, and orthopedically handicapped; and careers in science and related fields which can be pursued by the handicapped.

Lifchey, R. & Winslow, B. **Design for Independent Living: The Environment and Physically Disabled People.** Watson-Guption Publishers Inc., 2160 Patterson St., Cincinnati, OH 45214. 1979. 208 p. \$25.00. This book presents profiles of seven disabled men and women and assesses their needs in relation to their environment. The book reflects many of the advances that have been made in Berkeley, California where the Center for Independent Living has assisted the physically disabled lead more independent lives. The aim is to aid designers and planners in developing an approach to integrating physically handicapped people into the fabric of their communities. It also gives a perspective of what it means to be a disabled person in a world of able-bodied people. Numerous photos and descriptions of adaptive devices are included.

Velleman, R. A. **Serving Physically Disabled People: An Information Handbook for All Libraries.** R. R. Bowker Co., P.O. Box 1807, Ann Arbor, MI 48106. 1979. 392 p. \$17.50. The objectives of the book are to explore the information needs of the physically handicapped people, to determine the role of the librarian in helping to meet these needs, and to offer pertinent sources of information. Private and state rehabilitation agencies, hospitals and institutions will find this text useful in developing and expanding their own libraries. Includes information on providing library services to those with specific disabilities, as well as general information.

Job Readiness Training and Vocational Success

Recent research suggests that job readiness training can be useful in overall vocational preparation and the success of job placement of the handicapped. This study investigates the effects of job readiness training on workplace adjustment and attitudes toward employment. Twenty-two physically handicapped full time employees in a sheltered workshop were involved in the study. The employees were divided into experimental and control groups. As a whole, the two groups were found to be relatively equivalent in age, sex, race, number of dependents, educational level attained, length of time working in both sheltered and competitive employment, intelligence level, functional reading level, length of time disabled, and the severity of disability. The experimental group participated in a 3-week job readiness training program. One-hour classes were held daily. The curriculum was designed to prepare clients to self-appraise their vocational interests and aptitudes, to provide them with knowledge concerning job seeking skills, and to help them exhibit more appropriate job maintenance behaviors once they acquired a job. The experimental group participated in the program while continuing in their sheltered workshop jobs. The control group continued with their usual workshop jobs. The Guilford-Martin Personnel Inventory (GMPI) was used to obtain both pretest and posttest measures on the two groups. The inventory consists of three scales: 1) objectivity (freedom from self-centeredness and judgmental disposition); 2) agreeableness (friendliness and compliance); and 3) cooperativeness (a willingness to accept conditions and people as they are). An analysis of the posttests showed that agreeableness, as measured by the GMPI, reflected significant difference between the experimental and control group employees after the job readiness training. These differences indicated a strong positive change in the experimental group's work personalities and ability to get along with co-workers and supervisors. Employees in the experimental group seemed to show greater friendliness and compliance with the

desires of others, as contrasted with the control group's general desire to dominate others. Less significant differences between these groups were found on the objectivity and cooperativeness scales, with the experimental group employees showing positive change in both areas. On the cooperativeness scale in particular, the experimental group appeared to show more tolerance and acceptance of conditions and people as they are than the control group. The authors conclude that the results lend further support to the use of job readiness training as a means of improving individuals' attitudes toward obtaining and maintaining employment. Further research on the efficiency and effectiveness of job readiness training was recommended.

Tesolowski, D. and Halpin, G. Modifying work personalities of the handicapped. *The Vocational Guidance Quarterly*, June 1979, 27(4) 334-340.

The Scanning Strip Printer is a row-column scanning communication board which also emits a printed strip of paper with the selected message spelled out on it. When one of the 63 characters on the display is selected, the character (number, letter, sign or punctuation) is printed on heat sensitive paper. The arrangement of the characters on the keyboard is such that the most frequently used keys are the easiest to select. To select a character the student must first activate the scanning device by means of a pressure sensitive switch. One lamp is lighted at a time and follows a predetermined path in the matrix. The scanning rate is adjustable. When the switch is pressed again, the light will stop at the desired character, illuminating it on the board and printing it on the tape at the same time. Switches other than a standard control are also available from the manufacturer. These include switches that allow the board to be controlled by blowing, sucking, gross hand or arm movements, or by the lips or tongue. A joystick control enables the user to control the direction of the scanning, and custom designed switches are also available.

Prentke Romich Co., R.D. 2, Box 191, Shreve, OH 44676
\$990.00.

PRISE *Project*

What Is CP? is a videocassette program which describes the symptoms, causes, and treatment of cerebral palsy. The first part of the tape discusses the two major symptoms of the handicap: retardation of motor development and abnormal symptoms or patterns of movement. Several children with cerebral palsy demonstrate the various problems associated with the disease, and the technical terms used by the physical therapist/narrator are defined and illustrated. Other defects frequently found in CP children are mentioned. The second segment of the presentation describes the multidisciplinary aspects of the care of the child. Early intervention and total parent involvement are emphasized. An interview with a mother gives the viewer insight into the problems and situations faced by families of cerebral palsied children. Due to the multiplicity of symptoms involved in CP, this presentation stresses the importance of a team approach on the part of parents, teachers, therapists, and physicians in the total care of the infant and young child. This video program is appropriate for use with all those working with and teaching cerebral palsied children.

3/4" video cassette/b&w/52 minutes/1974/\$80.00

Child Development and Mental Retardation Center, University of Washington, Media Services, Seattle, WA 98105

PRISE is a federally funded project. The local education agency sponsoring PRISE is the Montgomery County Intermediate Unit No. 23, Dr. Dennis Harken, Executive Director.

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PARISE reporter

issues and happenings in the
education of the speech/hearing handicapped

no. 11, may 1980

pennsylvania resources and information center for special education 1013 West Ninth Avenue, King of Prussia, Pa. 19406. 215/265-7321

ROBERT G. SCANLON—Secretary of Education,
Department of Education, Commonwealth of Pennsylvania

Dr. WILLIAM OHRTMAN—Chief,
Policy, Liaison, Resource Management

BARRIER FREE EDUCATIONAL ENVIRONMENTS FOR HEARING IMPAIRED INDIVIDUALS

Charlotte Hawkins Shepard
Thomas A. Lillis
Gallaudet College, Washington, DC

It is easy to understand that a long flight of stairs up to the entrance of a public building is a barrier for a handicapped person in a wheelchair or on crutches. It is readily apparent that elevator buttons without tactile cues are a barrier to the blind. When pressed to think about environmental barriers to the hearing impaired, however, few people are able to come up with common examples. Yet the hearing impaired encounter many unnoticed barriers. They may be simply annoyances that can easily be remedied, such as total reliance on loudspeaker announcements in public places. But they can also be life-threatening, such as complete reliance on auditory fire alarm systems in college dormitories.

Legislative attention to the barriers that exist in "built" environments has been growing for more than a decade, since the passage of the Architectural Barriers Act of 1968. This legislative attention, plus the work of advocacy groups have increased the sensitivity among architects, planners, engineers, and designers to the necessity for barrier free environments. Concern for the prevention of barriers has inspired innovative design, sophisticated planning, and development of special systems and devices to meet the unique needs of many populations. The focus of this article is on those barriers, in "built" environments, which affect hearing impaired individuals and the steps which can and should be taken to surmount those barriers.

Life Safety

Fire Alarms. Visual alarm systems can be established through a number of methods. For classrooms, offices, and other non-residential units, flashing light bulbs of 60 to 100 watts can be connected to the building fire alarm systems. In residential areas, flashing high-intensity lights will alert even hearing impaired persons who are sleeping. Lights that flash less than three to five times per second are preferable to those that flash 12 to 15 times per second, as rapidly flashing lights can be dangerous to those with certain forms of epilepsy. For persons with visual and hearing impairments, an oscillating, high-speed fan can be mounted on the wall and connected to the alarm. To alert sleeping individuals, vibrators that shake their bed springs can be used. Smoke alarms can incorporate the same features as these fire alarms.

Emergency Assistance. Emergency help buttons installed outside or even within buildings can provide rapid access to emergency assistance for the hearing impaired. The alarm can be connected to a central office where someone is available to respond. Most elevators contain telephones for emergencies

that can't be used by hearing impaired persons. One solution to this problem is the installation of a special panel. When an individual pushes the emergency button, a central office responds by activating a sign stating *HELP IS ON THE WAY*. This provides immediate reassurance to the person in the elevator. Some experiments have been conducted using transparent elevator doors, so that hearing impaired persons can see that help is on the way and be able to communicate with those trying to help them.

Space and Spatial Relations

Teachers' Location in the Classroom. Hearing impaired students must be able to see the teacher's face at all times. Teachers cannot write on the chalkboard and lecture at the same time. When the teacher's back is to the students, those who are hearing impaired are penalized by not being able to see the visual cues on which they rely. The use of note takers/interpreters in classes with hearing impaired students can help alleviate this and some other classroom problems.

Space Guidelines for Classrooms. Classroom space guidelines for deaf and hard-of-hearing students have been specified by Abend, Bednar, Froehlinger, & Stenzler (1979). For a general classroom where hearing impaired students represent less than 25% to 30% of the total class enrollment, they recommend 30 square feet per student. When the number exceeds this percentage, additional square footage is required. This applies to preschool, elementary and secondary classrooms in which the hearing impaired students are integrated with hearing students into a regular class setting for all or part of the school day. For special education classrooms, they specify the following: Preschool and Elementary—70 sq. ft./student for 7 to 10 students. For each additional student up to 20, add 30 sq. ft./student. Secondary—70 sq. ft./student for 4 to 6 students. For each additional student up to 20, add 35 sq. ft./student.

Seating Arrangements. Class seating arrangements need to be in a pattern that will accommodate the communication needs of the hearing impaired student. A semicircular seating arrangement is best. It provides the opportunity for hearing impaired students to see the facial and body movements of all classmates, and is often necessary for optimum use of amplification equipment.

The use of large lecture halls for instructional sessions and activities should be avoided whenever possible. Among potential problems in this type of instructional setting are eye fatigue and eyestrain, in addition to inability on the part of hearing impaired students to receive visual cues from persons out of their line of vision.

Visual Environment

Visual Noise: Anything that distracts a hearing impaired student's visual attention may be classified as visual noise. Classrooms should be located and arranged to avoid such distractions. If an activity takes place outside a classroom window, or a door is open when there is heavy traffic, the attention of the hearing impaired student is diverted to that activity. A light that flickers or a "hot spot" (light on an area that is not germane to the subject being studied) is also a form of visual noise.

Classroom Lighting. Adequate lighting in classrooms involves several elements. If there are windows behind the teacher, the glare will pose problems for the hearing impaired. The color of chalk can make a difference. Yellow chalk on black, tan, or green chalkboards has been found to be most effective. Generally, furniture and equipment should have nonglare surfaces. Room lights should be connected to dimmer switches. This provides the opportunity to adjust the light levels to alternative settings. Such adjustments may be necessary to avoid complete blackout during audiovisual presentations, to aid in note-taking, and to facilitate visual communication between students and teacher. Light switches should control room areas, not rows of light fixtures. It is important to be able to control lighting for the various activity areas of an instructional environment.

Audiovisual Presentations. These can be effective teaching tools for hearing impaired persons. Captioned films; closed circuit television, particularly with captioned programs; slide shows with captioned slides or explanatory material shown through overhead projection; and use of interpreters—all can be excellent teaching techniques, benefiting all students. Unfortunately, many times the procedure in regular classrooms has been to darken the room by turning off all lights, closing blinds or shades, and turning on a projector or recorder that presents the explanatory or instructional message in an audio mode.

Acoustic Environment

Several measures can be taken to assist hearing impaired persons use what little hearing they may have, to the fullest. For those with any residual hearing, it is important to control the general sound transmission in the room to eliminate possible acoustical leaks. Door and wall assemblies should be installed with care and sealed against acoustical leaks.

Graphics. Printed signs and graphic displays can be very helpful to hearing impaired students. Any type of visual cue whether in the form of printed signs, changes in color patterns, or special lighting techniques, can aid hearing impaired learners.

Audio loops, or induction loop systems, can be installed in classrooms. These systems enable sound to enter hearing aids by means of electro-magnetic waves. The loop is a coil of wire placed around the perimeter of the classroom. For maximum benefit, the wire should be about three feet above the floor. Students with hearing aids then switch the aid to T and receive amplified speech and music with much less distortion.

Some hearing aids are not selective, and will amplify sounds indiscriminately from heating, ventilating, air-conditioning, plumbing, and lighting systems. Noise generated by these systems must not be transferred to the instructional space. Interior layouts should provide buffer zones between high-noise areas. Equipment rooms should be located away from critical acoustical areas. Heating and ventilating ducts should be insulated to control noise.

Impact sounds due to walking, movement of furniture, etc., can be reduced through careful planning. Carpeting is one effective measure. Carpets with a pile height of $\frac{1}{2}$ " will help reduce noise, yet still permit wheelchair mobility. Metal partition walls, which could cause noise problems through transmission and impact sounds, should be avoided.

Static electricity may cause interference with hearing aid operation. To prevent this type of interference, antistatic carpets can be installed, or special treatments can be used for carpeting already in place. Increasing the amount of humidity in a room is also effective in minimizing static electricity.

Although there are some architectural barriers that cost money to either remove or avoid, many environmental barriers can be removed by the simple expedient of being more thoughtful about special needs, and becoming aware of the little (and completely free) steps that can be taken to see that the full participation of disabled individuals is assured in public, private, and educational environments. The environmental barriers to hearing-impaired individuals also require sensitivity, some extra attention, and some additional ingenuity to discover methods for effectively communicating information in nonauditory modes.



Special Education Instructional Materials Information

The National Information Center for Special Education Materials (NICSEM) is a project funded by the Bureau of Education for the Handicapped and based at the University of Southern California. NICSEM has developed a data base of information on special education instructional materials for student, professional, parent, assessment, and training use. This information is available to educators through computer searches, and through a number of NICSEM publications. These books include: the *Index to Learner Materials*, a compilation of 10,000 educational media and material items, the *Special Education Thesaurus*, a list of 2,500 special education terms designed to assist in the use of the NICSEM data base; and the *Parent Index* which contains 2,500 entries on home use, parent information, and professional/parent materials; an *Assessment Index* and an *In-Service Training Index* are in preparation. To promote the use of their data base, NICSEM has received special funding to develop a training package on the use of their products and to field test the training in nine states. Pennsylvania has been selected as one of those states and on May 20, 1980 the PRISE liaisons from each IU will attend a training session in King of Prussia. After that date, your liaison will be able to provide complete information on the contents and use of the NICSEM data base.

Radio for the Deaf

Using funding from the Neal Foundation of Philadelphia, the Pennsylvania School for the Deaf created the country's first radio station for the deaf in 1976. Called RTTY, the station uses students and staff members to prepare three hours of programming each day on world events, consumer information, and matters of special interest to the hearing impaired. The stories are processed through machines that transcribe them into tapes of audible tones. The tapes are then broadcast by Temple University's radio station over a 25-mile radius, and received by 1000 persons who have special radio receivers and TTY machines. The teletype machines transform the signals into printed words or captioned radio. Station RTTY serves the dual purpose of providing information to the deaf and involving students from the Pennsylvania School for the Deaf in the station's operation. The school also offers an around-the-clock telephone news service that can be used by anyone.

with a TTY machine. For further information contact: Joseph Spishock, Pennsylvania School for the Deaf, 7500 Germantown Ave., Philadelphia, PA 19119. Telephones: voice 215/247-9440, TTY 215/247-9441, & telephone news 215/247-9442.

Brill, R. G. Mainstreaming the Prelingually Deaf Child. Gallaudet College Press, 7th St. & Florida Ave., N.E., Washington, DC 20002. 1978. 196 p. \$8.95. This book reports on a study to determine the status of prelingually deaf children in mainstreamed education. Data reported from twelve programs throughout the U.S. includes information about the organization of program, curriculum, evaluation procedures, and statistical information. The author synthesizes the data and then analyzes such aspects of these programs as oral vs. total communication, itinerant services, resource rooms, support services, class sizes, staff and student orientation, and attainment of program goals. A questionnaire given to parents of children in the programs is described and the results discussed. In a final section the author makes recommendations concerning the administration, instruction, and evaluation of the programs as well as remarking on general, personnel, and socialization concerns.

Schiefelbusch, R. L. Nonspeech Language and Communication: Analyses and Intervention. University Park Press, 233 East Redwood St., Baltimore, MD 21202. 1980. 529 p. \$24.95. This book contains a series of papers providing a broad look at communication functions and presents models and strategies for developing alternatives for children who cannot speak. Alternatives are suggested so that the nonverbal child can enjoy the benefits of communication, enhance cognitive development, and extend social participation. Sections of the volume are concerned with the analysis of language, American Sign Language, assessment of nonspeech and communication, nonspeech strategies for the physically handicapped, and strategies for the autistic and severely retarded. A final chapter analyzes the major themes and issues presented in the book.

Van Hattum, R. J. Developmental Language Programming for the Retarded. Allyn and Bacon, Inc., 470 Atlantic Ave., Boston, MA 02210. 1979. 258 p. \$15.95. This is a book designed for teachers and speech clinicians involved in planning and implementing language programs for the mentally retarded or language delayed. Background information on language and its relationship to retardation, and on the roles of the clinician, teacher, and parent in program planning and implementation is provided. A chapter is devoted to diagnosis. Programming recommendations are presented in three sections: individual or small group programs for developing syntax, group developmental language program models and activities for different age groups, and supplemental materials and resources. The book includes a checklist for assessing a child's verbal skills, numerous remedial expressive and receptive language activity ideas, record keeping suggestions, and extensive lists of tests, materials, and equipment.

Wilson, D. K. Voice Problems of Children. Williams & Wilkins Co., 428 East Preston St., Baltimore, MD 21202. 1979. 238 p. \$16.00. This book for clinicians reviews the current literature and practices related to voice problems. Chapters describe the organic causes of voice problems, the organic changes which occur due to abuse and misuse, and the examinations necessary to diagnosis. The different examination and remedial procedures described in the book are structured to be used by the speech clinician with children having problems due to laryngeal dysfunction, defects of resonance, or hearing loss. Basic to the prescribed therapies is a ten-step voice-therapy outline that can be used for dealing with each major aspect of a voice problem, regardless of cause.

Working with Parents of the Handicapped: A Resource Guide. Eastern Pennsylvania Regional Resources Center for Special Education, 1013 West Ninth Ave., King of Prussia, PA 19406. 1979. 112 p. No charge. This is an annotated listing of resources useful to educators working with parents of exceptional children. The books, films, kits, and pamphlets included in this guide are helpful in developing parent workshops, programs and conferences. Many of the materials are intended for use by parents in the home. The materials are arranged by topic; topics are grouped into four categories: information about handicaps, teaching the child at home, parent/school relationships, and planning for the future. Lists of national organizations serving the handicapped and publishers' addresses are also included. Resources included in the guide can be borrowed from any of the three Special Education Regional Resource Centers in Pennsylvania. The guide is available in limited quantities from the Regional Resources Center in King of Prussia.

RESEARCH BRIEF

Assessing Language Skills of Preschool Children

When speech and language pathologists are unable to assess the language skills of preschool children through direct evaluation, they frequently must rely on parents or other adults closely connected with the children for such information. This is particularly true when the children have physical, emotional, or intellectual disabilities that prevent direct testing. The purpose of the present study was to determine the accuracy of these parental observations (specifically those of mothers) in describing the language skills of their preschool children. Two hypotheses were formed. First, that there would be no significant difference between the language ages of preschool children obtained from a parent informant scale and a direct test of the preschool children and, second, that the mothers' ability to identify language skills in their children would not be influenced by such factors as age, educational level, marital status, number of siblings, birth order of a child, or the child's age. Thirty-five children ranging in age from 2½ to 5 years were involved in this study. The children were referred to a preschool diagnostic center by parents who felt their children were in need of a developmental assessment. Two standardized measures of language were used: the Verbal Language Development Scale (VLDS), an informant scale, was administered to each of the mothers; and the Utah Test of Language Development (UTLD) was administered individually to each child. In addition, further information concerning the mother, child, and family was recorded. The data obtained from the two instruments was analyzed using a Pearson correlation and a T-test for related measures. The effects of the additional variables (mother's age, educational level, etc.) were examined using a multiple regression analysis. Results of this study indicated that parents could identify their preschool children's language skills with accuracy. The correlation between the language ages derived from the two instruments was as high as test-retest performances on most standardized instruments. The children who received either a high or low score on the VLDS tended to receive a similar score on the UTLD. None of the additional family background variables studied appeared to affect the mothers' ability to ascertain their children's language skills. The author concludes from these findings that when direct testing of children's language skills is difficult or impossible, speech and language pathologists can obtain reliable information from scales designed for use with the children's parents.

Roman, V. The relationship between language ages of preschool children derived from a parent informant scale and language ages derived from tests administered directly to the preschool child. *Language, Speech and Hearing Services in Schools*, January 1980, 11(1), pp. 50-55.

Testing the Speech and Hearing Impaired

The 1978 Test of Syntactic Abilities (TSA) was primarily developed for profoundly prelingually deaf students between the ages of 10 and 19 to aid in improving their reading and writing instruction. The TSA consists of a battery of 20 individual diagnostic tests each containing 70 multiple choice items, and a screening test containing 120 items selected from the diagnostic battery. Standardized on a profoundly deaf student population, the TSA provides an in-depth profile of a pupil's strengths and deficiencies in the use of English syntactic structures. The screening test has two forms enabling it to be used for both pre- and postmeasures. Both the screening test and the diagnostic battery may be administered, scored, and interpreted by the classroom teacher. The screening test can be administered in one hour. The individual diagnostic tests take approximately 20-30 minutes each.

Dormac, Inc., P.O. Box 752, Beaverton, OR 97005. Complete TSA Kit \$95.00; TSA Specimen Set \$25.00.

Across the Silence Barrier, a WGBH/NOVA production, explores education, communications, and employment in the world of the hearing impaired. The film addresses the question of whether deafness should be viewed as a handicap to be overcome or a difference to be accepted. The continuing debate between proponents of the oral, manual, and total methods of communication is viewed within this context and all aspects of the controversy are discussed. Cued speech, lip-reading, signing and fingerspelling are described and demonstrated. Emphasis is made throughout the film that, for those born without hearing, the impact of this handicap is felt not only on the acquisition of language but on learning to read and on the development of basic living and social skills. The audience is introduced to a number of deaf adults, and their achievements both in the hearing and deaf worlds are described by them. Members of special groups such as the National Theater of the Deaf and Silent Industries are also interviewed and they provide the viewer with insights into the expressive and employment possibilities and problems for those with hearing impairments. This film is intended for secondary, college, and adult audiences.

16mm/color/sound/57 minutes/1977/\$650.00

Time Life Multimedia, Time & Life Building, New York, NY 10020.

PRISE reporter

1013 West Ninth Avenue
King of Prussia, Pennsylvania 19406

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The Universal Articulation Program (UAP) is designed to teach correct articulation under many different speaking conditions. Primarily designed for one-to-one use with school-age clients, the program can also be adapted for use with preschool, adult, or mentally retarded populations. The UAP provides for highly structured therapy sessions that enable the clinician to pinpoint the problem and then, through a sequence of tasks and activities, move the client towards increasingly difficult objectives. "StimPacs" containing stimulus materials are provided for the 13 most frequently occurring error phonemes. After assessing the client's articulation abilities, the clinician selects a target sound and the appropriate StimPac. A sound-specific criterion test is administered and the client's therapy is begun at the indicated level of difficulty. The UAP outline and a program manual provide the sequence of fourteen areas of instruction, activities for each step, and the instructions for use of the stimulus materials. Alternative activities are provided should a client fail a step. Strategies for involving the parents, teacher and classmates of the client are included. The program also includes a multimedia training kit that provides for a one-day workshop or a series of self-instructional lessons to familiarize the clinician with the administration of the program.

Teaching Resources Corp., 50 Pond Park Rd., Hingham, MA 02043. 1978. \$195.00.

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Carole L. Norris, Assistant Director

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