To determine the extent of expansion of services to emotionally disturbed children in British Columbia, questionnaire responses from 68 administrative officials were compared to responses from the original 1969 study. Among the 42 areas investigated were the following: existence of policy regarding education of emotionally disturbed children, definition, student assessment, personnel, support services, special classes, teaching methods, liaison between school and other agencies, financing, and students at the Learning Assistance Centre. Recommendations from 1969 were reviewed in light of the 1981 findings. Cited among charges were that more school districts in 1981 addressed themselves to establishing policy guidelines, there is a significant increase in supervisors of special education, over one third of the classes use behavioral methods of teaching in 1981, and more school districts assume financial responsibility for students placed in treatment centers. Appended materials, which make up one-half the document, include procedures for identification of students with special needs, policy for programs for emotionally disturbed children, descriptions of 12 programs, and a copy of the questionnaire and letter sent to each school district. (SB)
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Educational Provisions for Emotionally Disturbed Children in British Columbia: A Status Report

Marg Csapo
University of British Columbia

Educational Research Institute of British Columbia
Discretionary Grant No. 302
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Introduction</td>
<td>1</td>
</tr>
<tr>
<td>A. Conditions in the late sixties</td>
<td>2</td>
</tr>
<tr>
<td>B. Present Survey</td>
<td>5</td>
</tr>
<tr>
<td>II. Procedure</td>
<td>7</td>
</tr>
<tr>
<td>III. Results</td>
<td></td>
</tr>
<tr>
<td>A. Comparison of replies received in 1969 and 1981</td>
<td>9</td>
</tr>
<tr>
<td>B. Laycock's recommendations and the 1981 questionnaire's responses</td>
<td>38</td>
</tr>
<tr>
<td>IV. Discussion of the results</td>
<td>52</td>
</tr>
<tr>
<td>V. Conclusions</td>
<td>61</td>
</tr>
<tr>
<td>VI. References</td>
<td>64</td>
</tr>
<tr>
<td>VII. Appendices</td>
<td>65</td>
</tr>
</tbody>
</table>
I. INTRODUCTION

The need for educational services for emotionally disturbed children has been stressed repeatedly by provincial and national reports in the late sixties and early seventies. Most of these reports, One Million Children (Roberts and Lazure, 1970), Standards for Education of Exceptional Children in Canada (Hardy et al., 1971) and Children in Canada Residential Care (Rae-Grant and Moffat, 1971) urged federal and provincial governments in Canada to assume responsibility for the education of emotionally disturbed children, and local educational authorities to provide educational services for all children within their jurisdiction. At this time in the United States, Hirshoren, et al., (1970) surveyed the status of educational services for emotionally disturbed children and found them numerically inadequate and governed to a great extent by permissive rather than mandatory legislation. The greatest impediment to the development of services and research was seen as the lack of a universally acceptable definition of this disorder.

Over the last decade significant changes have occurred in both countries with reference to provision of services to children with various disorders. Public Law 94-142 (Education for All), the Handicapped Act (1975), (a federal act), by mandating education for all children, gave an unprecedented incentive for program development for all
children in the United States during the past few years. In Canada six provinces have adopted mandatory legislation, and the general trend is toward the extension of services to most children with whom schools can cope. The progress of development in the provision of services for emotionally disturbed children varies greatly from province to province (Csapo, 1981). The growth of services in the province of British Columbia during the past decade will be examined in a detailed manner in the following sections.

A. Conditions in the late sixties

The existing state of educational provisions for emotionally disturbed children at the end of the sixties is documented in the report, "Educational Needs of Emotionally Disturbed Children in the Schools of British Columbia" (Laycock and Findlay, 1969).

At the initiative of the Metropolitan (Vancouver) branch of British Columbia School Trustees Association and with a grant from the Educational Research Institute of British Columbia, Laycock and Findlay (1969) conducted a survey of educational provisions for emotionally disturbed children.

A forty item questionnaire was distributed to the fifty-four district superintendents of schools in charge of the eighty-two school districts of British Columbia during the 1968-69 school year.

On the basis of the responses received and after a search of the literature, Laycock and Findlay (1969) made 95 recommendations dealing with the whole spectrum of the education of emotionally disturbed children embracing all levels of educational intervention, at the departmental, school district, school, classroom and community levels.
The major areas of these recommendations referred to the acceptance of responsibility by school districts for the education of disturbed children and the development of policy guidelines for the education of children whose primary or secondary handicap is emotional disturbance. Specific recommendations dealt with definition, labeling, educational objectives, individualization of curriculum, early identification, team-based diagnosis, hiring of supportive district personnel, establishment of special classes, parent involvement, cooperation between schools and treatment centres, selection of teachers, inservice education of teachers, training of special counsellors, school psychologists, remedial teachers and remedial consultants, the need for financial aid from the Department of Education to smaller school districts and the development of broad curriculum outlines for the province.

The highlight of the findings of this report, in 1969, was that 65% of the districts had no definite policy concerning the education of emotionally disturbed children. Only 19% had separate special classes, and 42% had "special learning disabilities classes" that contained learning disabled and emotionally disturbed children. Some autistic children were sent to a special school for the trainable retarded.

Haycock and Findlay (1969) found a great degree of intra- and inter-program variation from district to district with respect to both definition and placement for emotionally disturbed children. It was
believed that these differences did not so much reflect urban and rural differences, but more likely the emphasis and beliefs of the district school administrators.

All school districts reported that they would favor keeping a disturbed child in the regular classroom if adequate support services were available. However, the available support services ranged anywhere from "very little" to "fairly complete diagnostic and consultant services." Consultants were available to advise teachers who had emotionally disturbed children in their classrooms in 87% of the districts and 78% of the districts formed an educational plan for each child either with the help of the principal involved or with the help of local mental health personnel. In 46% of the districts there was agreement on the need to consider the individual's background and needs when designing such a program.

The special classes were seen as rehabilitative, expecting the students to return to the regular class. The success rates reported varied from 40-50% of the children returning to regular class the first year, 80% the second, and 95% of the children returning by the third year of the program.

Additional services that would best meet the needs of the emotionally disturbed child in the public schools were identified as more mental health clinic or psychiatrists' services (25%); special classes for emotionally disturbed children (15%) and a school psychologist (12%). The importance placed on the medical model in the delivery of services was reported by one quarter of the respondents.
The rest of the recommendations were based on a review of contemporary literature and advice to the school districts on the provision of services for emotionally disturbed children.

B. Present survey

Provincial guidelines or School Acts in 1969 did not use the term "emotionally disturbed." It was not until 1975 that the Provincial Guidelines for Special Education incorporated "Rehabilitation Alternative Programs" as one of the funding categories. These programs at the secondary level were designed to serve the needs of secondary school students who were experiencing great difficulty at school or who have dropped out of school. A survey (Csapo and Gittins, 1979) indicated that 63% of these pupils were labelled by teachers as emotionally disturbed. In 1977, a separate category "Autistic Children" appeared in the Provincial Guidelines for Special Education as a new and separate category for provincial funding.

Not until the first draft of the "Special Programs--A Manual of Policies, Procedures and Guidelines of the Ministry of Education, B.C. Special Programs Branch" (1980) appeared that children with severe behaviour problems were included for the first time amongst the handicapping conditions as eligible for provincial funding.

The umbrella term "emotionally disturbed" used by Laycock and Findlay (1969) was broken down into three distinct categories by the Ministry of Education by 1980, autistic, rehabilitation programs, and children with severe behaviour problems, reflecting the growth in
development of services to emotionally disturbed children. Mention of the mildly and moderately disturbed did not appear in the provincial guidelines.
II. PROCEDURE

In order to gauge the extent of the expansion of services to emotionally disturbed children at the district level during the past decade, a survey replicating the original 1969 study of Laycock and Findlay was conducted taking into consideration the three categories for which special approvals were proposed by the Ministry of Education and adding a fourth category, that of mildly-moderately emotionally disturbed for each question. Four additional questions reflecting the change in policy in the proposed guidelines were added to include rehabilitation classes at the elementary level, exclusion of emotionally disturbed children from learning assistance centers, existing support services outside the jurisdiction of the Ministry of Education and possible differences in policy in the provision of services between the elementary and secondary school levels. (See Appendix.)

Questionnaires were sent to the 78 administrative officials in charge of coordinating special-education services for one or in some cases two school districts. In the majority of cases these were supervisors, directors or coordinators of special education or superintendents.

The responses were compiled question by question and compared to the results of the 1969 study of Laycock and Findlay. This was followed by selecting Laycock and Findlay's recommendations directly arising from the result of their findings and matching each recommendation with the responses in the 1981 questionnaire.
The questionnaires were followed by a meeting during the Special Education Association Spring Conference, 1981, to discuss district policies for emotionally disturbed children. Site visits to various school districts and programs provided additional information for this report.
III. RESULTS

Due to the disruption of the mail services, the responses arrived during the Spring and in August, 1981. Altogether, 68 (87%) questionnaires were completed and returned.

Each question was tabulated. Results will be described by displaying the 1969 responses for each question followed by the responses received in 1981 (A) and by matching each recommendation arising from the 1969 questionnaire with the responses of the 1981 questionnaire (B). In order to assist the reader to compare the past with the present the past tense is used to describe conditions in 1969 in contrast to the present tense in describing the 1981 responses.

A. Comparison of replies received in 1969 and 1981

In this section, replies received in the 1969 survey will be compared, question by question, with the replies received in 1981, and answers to the four questions added to the survey will be tabulated.

1. Existence of policy with regards to the education of emotionally disturbed children.

1969

Ten years ago, 65% of the districts did not have a definite policy on the education of emotionally disturbed children. Only 35% of the districts had guidelines on how to provide support services either in a special class or in a regular class.
1981

<table>
<thead>
<tr>
<th>Category</th>
<th>Districts with Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autistic</td>
<td>46%</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>69%</td>
</tr>
<tr>
<td>Severe</td>
<td>48%</td>
</tr>
<tr>
<td>Mild/Moderate</td>
<td>51%</td>
</tr>
</tbody>
</table>

An average of 53% of the school districts have policy guidelines on the provision of services for emotionally disturbed children.

Many of the rural districts have a policy on programs if they happen to have identified a student who needed a specific program.

The large urban districts and various smaller lower mainland districts have clear policy statements and programs for the four categories of emotionally disturbed children.

2. Definition

1969

In 1969, 75% of the districts accepted the California definition suggested by Laycock and Findlay, namely:

Emotionally disturbed children include those with one or more of the following characteristics:

i. An inability to learn which cannot be explained by intellectual, sensory, or health factors.

ii. An inability to maintain satisfying interpersonal relationships.
iii Inappropriate behaviour or feelings under normal conditions.

iv A general pervasive mood of unhappiness or depression.

v A tendency to develop physical symptoms, speech problems, pains, or fears associated with personal or school problems (Bower, 1959).

Laycock and Findlay added two more characteristics:

vi Difficulty or inability to face reality; and

vii A very poor self-concept.

Others made no attempt to define emotional disturbance, leaving the decision to the experts, or place emphasis on maladaptive classroom behaviours.

1981

Half of the districts have no definition; 20% used the Ministry guidelines for the definition of autistic children and students for rehabilitation classes; 30% have their own definition. School District #71 (Courtenay) gives the following definition: "Any child showing the following tendencies: (a) aggressive behaviour; (b) poor peer relations; (c) weak family controls; (d) poor self-image; (e) beginnings of juvenile delinquency; (f) police and probation problems; (g) learning disabilities that affect the behaviour of the child; (h) general social inadequacies."

School District #35 (Langley) and #11 (Trail): "A child is emotionally disturbed when he is diagnosed by a professional as having severe emotional problems which interfere with the learning
process, relationships, and/or personal adjustment within school settings. The child's primary difficulty is emotional/behavioural and cannot be explained satisfactorily by other handicapping conditions."

Five school districts leave definitions to the professional judgments of professionals other than educators. In 1981, no district uses the California definition (1959).

3. Distinction between emotional disturbance and other handicaps.

1969

Fifty-six percent of the school districts distinguished between emotionally disturbed and mentally or physically handicapped; 17% of the school districts did not make this distinction. No information was provided on the remaining 27%.

1981

Three quarters (75%) of the school districts do not distinguish between mentally retarded and autistic children.

Over two-thirds (70%) of the school districts have a policy of differentiation with definite behavioural criteria for rehabilitation classes.

Almost two-thirds (60%) of the school districts distinguish between severely emotionally disturbed and other handicapped, but

Eighty-five percent (85%) of the school districts have no policy for differentiation of the mildly/moderately emotionally disturbed.

Rehabilitation problems and severe (and mild/moderate) emotional/behavioural problems are seen as the primary problem for children to be admitted to programs. Other children with mild/moderate emotional/
behavioural problems are placed in programs designed for learning disabled or mentally retarded children. Autistic children are generally categorized with the trainable mentally retarded.

4. Assessment of pupils.

1969

Suburban and urban districts made full use of specialized school personnel before calling in the services of the health agencies and the mental health clinic. The school nurse and the family doctor were key people in the diagnostic work. The rural school districts relied more on the mental health clinic because of a lack of available specialized personnel.

The teacher and principal were involved in forming an educational plan to carry out. In very few districts, where there was a coordinator of special education, he was also involved.

1981

An in-district referral process is used in 80% of the districts. This process includes the coordinator of special education, psychologist, parents, learning assistance teacher, classroom teacher, and district counsellor. An outside assessment is used in some districts as well as in-house assessment. In 30% of the districts, the Provincial In-Service Resource Team, the Children's Diagnostic Centre and mental health clinics are mentioned as possible sources for assessment.

The majority of the school districts have a coordinator or supervisor of special education who often plays a significant part in assessment.
5. Personnel available

<table>
<thead>
<tr>
<th>Position</th>
<th>1969</th>
<th>1981</th>
</tr>
</thead>
<tbody>
<tr>
<td>School psychologist (full or part-time)</td>
<td>15%</td>
<td>68%</td>
</tr>
<tr>
<td>Supervisor of special education</td>
<td>22%</td>
<td>86%</td>
</tr>
<tr>
<td>Special district counsellor</td>
<td>46%</td>
<td>55%</td>
</tr>
<tr>
<td>School counsellor (secondary)</td>
<td>89%</td>
<td>89%</td>
</tr>
<tr>
<td>School counsellor (elementary)</td>
<td>0%</td>
<td>32%</td>
</tr>
<tr>
<td>Consultative teacher (including remedial teachers)</td>
<td>42%</td>
<td>65%</td>
</tr>
<tr>
<td>Child development worker</td>
<td>4%</td>
<td>30%</td>
</tr>
<tr>
<td>School social worker</td>
<td>17%</td>
<td>23%</td>
</tr>
<tr>
<td>School nurse</td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td>School physician</td>
<td>0%</td>
<td>13%</td>
</tr>
<tr>
<td>Mental Health Consultant Service</td>
<td>75%</td>
<td>75%</td>
</tr>
</tbody>
</table>

6. School based team.

1969

A school based team was used for making decisions regarding an educational plan in 78% of the districts.

1981

A school based team is used for making decisions regarding educational plans in 89% of the districts. Ten percent said that a school based team is not part of the process for making educational decisions.
7. Parental consultation.

1969

Parents were consulted concerning their child's placement in 95% of the districts. Five percent of the districts did not contact parents.

1981

Parents are consulted for their consent concerning child's placement in 96% of the districts.


1969

Keeping a child in the regular class with support services was the policy in 97% of the districts. The giver of this help was not mentioned.

1981

For those emotionally disturbed children who remain in a regular class, extra help is available for the teacher and/or student from:

Learning Assistance Teacher, Aides, Human Resources Worker, Consultant Teacher, Personal Attendant, and in a few cases, the Psychologist.

9. Kinds of Support Services

1969

The support services available to a child and teacher ranged from nothing to complete consultant-diagnostic services (no numbers given).
The kind of help offered to the regular classroom teacher by the personnel mentioned in question 8 is:

- Consultation: 69%
- Direct help by aides: 30%
- Coordination of services: 18%
- Behaviour management: 17%

10. **Transfer to another regular class**

1969

All districts would move a child to another regular class if the school based team thought this was a better placement.

1981

All districts stated that they would move an emotionally disturbed student from one regular class to another regular class if the school based team thought this might be a better placement for the child.

11. **Teacher aides**

1969

Most of the districts did not have paid teacher aides. The districts that did have paid aides did not necessarily use them for helping teachers with emotionally disturbed children. Two districts had hired tutors at the expense of parents.
Many school districts hire paid and volunteer aides.

Paid teacher aides: Volunteer aides:

- Autistic: 58% 13%
- Rehabilitation: 65% 17%
- Severe: 58% 13%
- Mild: 51% 20%
- MEAN: 58% 17%

12. Crisis situation

1969

Most school districts had no specific policies regarding crisis situations and it was left to the teacher’s/principal’s discretion. The child was removed from the situation to the office or taken home. The special counselor, principal, or school nurse offered support at this time. Punishment was mentioned in only one district.

1981

With regard to a crisis situation, the following practices prevail:

- no policy/teacher discretion: 13%
- removal of child from situation to somewhere in school or to home: 87%

In an in-school situation, the child goes to:

- Time-out room or place: 41%
- School office: 34%
- Learning Assistance Centre: 15%
- Other: 10%
And is accompanied by:

- Child Care worker or aide: 24%
- Teacher: 24%
- Principal: 20%
- Counsellor: 6%
- Learning Assistance Teacher: 6%
- N/a: 20%

The crisis is then taken over by:

- Principal: 56%
- Teacher: 34%
- Aide: 1.4%
- Counsellor: 1%
- Learning Assistance Teacher: 0.6%
- Other: 1%
- No reply: 6%

13. Special classes

1969

Seventy-four percent of the districts did not have special classes. There were only 16 classes for the emotionally disturbed in the province. Thirty-five classes, however, included emotionally disturbed along with learning disabled and other disorders. These were called special learning disabilities classes or remedial classes. Many classes for show learners included emotionally disturbed children whether they had been diagnosed as mentally retarded or not. A few districts had special schools for the trainable retarded which included autistic students.
Most of these programs were provided at the elementary and intermediate levels.

1981

Special classes: 31% of the districts do not have special classes for emotionally disturbed pupils.

<table>
<thead>
<tr>
<th>Autistic</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No class</td>
<td>65 %</td>
<td></td>
</tr>
<tr>
<td>Included in classes for mentally retarded</td>
<td>18 %</td>
<td></td>
</tr>
<tr>
<td>Special class for autistic</td>
<td>17 %</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Rehabilitation</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary</td>
<td>10 %</td>
<td></td>
</tr>
<tr>
<td>Intermediate</td>
<td>13 %</td>
<td></td>
</tr>
<tr>
<td>Secondary</td>
<td>65 %</td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>24 %</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Severe</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary</td>
<td>15 %</td>
<td></td>
</tr>
<tr>
<td>Intermediate</td>
<td>34 %</td>
<td></td>
</tr>
<tr>
<td>Secondary</td>
<td>0 %</td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>51 %</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mild/Moderate</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary</td>
<td>13 %</td>
<td></td>
</tr>
<tr>
<td>Intermediate</td>
<td>7 %</td>
<td></td>
</tr>
<tr>
<td>Secondary</td>
<td>3 %</td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>86 %</td>
<td></td>
</tr>
</tbody>
</table>
14. **Basis for selection for special class**

1969

Basis for selection of students for special class placement was applicable in only 26% of the district's (74% of the districts had no special classes). The general agreement was that an emotionally disturbed child should not be placed in a special class without clinical assessment by a psychiatrist or psychologist. This assessment was then reviewed by the school where an educational plan was formulated.

1981

The basis for selection of students for special class placement includes a medical, psychological, and educational assessment that are reviewed by a school district based team. If necessary, outside assessments are also included. This is the majority of responses (90%).

15. **Source of help for special class teachers**

1969

Special class teacher in 26% of the districts received help from: (no specific numbers)

- Special counsellor
- Psychologist
- Nurse
- Principal
- Consultant teacher
Supervisor of special education
Mental health/child guidance clinic
Social worker

1981

The special class teacher for the emotionally disturbed receives help from the following people:

- Mental Health Workers: 14%
- Counsellors: 14%
- No one: 14%
- Special Services Coordinator: 12%
- Psychologist: 12%
- Aides: 9%
- Ministry of Human Resources: 9%
- Provincial In-Service Resource Team: 7%
- Consultant Teacher: 4%
- Speech pathologist: 4%
- Other: 1%

There is no one category of person in particular who consistently provides consultation to teachers throughout British Columbia.

16. Teacher aides

1969

There were paid teacher aides working in classes for the emotionally disturbed or in the regular class with an emotionally disturbed child in 2% of the school districts. They were
paid $2.00 or $2.20 per hour. Their duties were to assist the teacher.

1981

Paid aides are employed in classes for autistic children, rehabilitation classes, classes for the severely and classes for the mildly/moderately disturbed. Wages range from $6.00 to $9.08 per hour, with average of $7.59 per hour.

Training:

A wide range of responses was received concerning the training of teacher aides. A child care worker certificate was the most common response (34%). The educational background of aides ranges from secondary school training (grade 12) to teacher certification.

Aides are most often hired by the principal and the supervisor of special education (52%); in 21% of the districts the teacher is also included in this process. The most common duties mentioned are: (a) to team with teacher (55%) or (b) one-on-one tutoring (45%).

17. Volunteer aides

1969

Volunteer aides were reported working with emotionally disturbed pupils in 1% of the school districts.

1981

Volunteer aides are used much less frequently than paid aides. The Canadian Union of Public Employees does not allow
the use of volunteer aides in most districts.

Mild/Moderate 21%
Rehabilitation 17%
Autistic 13%
Severe 13%
Mean 17%

18. Labeling the classroom

1969

The following labels were attached to classes for emotionally disturbed children.

Adjustment classes 18%
Special class or learning disorder or learning assistance 13%
Teacher's name 9%
Special remedial classes 4%
'E' classes for emotionally disturbed children 4%
Class for emotionally disturbed 4%

1981

Program names vary from "Mrs. Jones' class" to "adjustment class". No class was called "a class for emotionally disturbed children".
19. Characteristics of the class for emotionally disturbed children

1969

Classrooms for emotionally disturbed children were the same size as the regular class, but contained fewer students. Almost two-thirds (60%) of the classes had temporary carrels and 1% permanent fixtures or carrels.

1981

A rehabilitation classroom looks different from a regular class because it is a separate facility, often in a portable, on the school grounds or in a separate building away from the school. Often the interior does not look like a classroom or a school. The classroom for the severe population is different in 28% of the districts because of the internal layout, and contains a time-out room. The classroom for the mildly emotionally disturbed student is not different. The autistic classroom in one district has a toilet.

In two districts the stimuli are reduced in classrooms for the emotionally disturbed by having blank walls.

Over three-quarters (77%) of the districts have temporary carrels available for emotionally disturbed special class programs.

20. Teaching Methods Used

1969

No one teaching method was advocated. Methods/theories ranged from "operant conditioning" to "self-concept theory." Only 44% of the districts answered this question and no breakdown of the percentage of responses was given.
Not one single method is advocated by every district. The following are teaching practices that were suggested to teachers:

- Behaviour modification: 36%
- Individualized educational plan: 10%
- Eclectic: 6%
- Patience: 6%
- Nothing: 42%

21. Who selects special class teachers

1969

In the twenty districts that hire special education teachers, the principal, superintendent and supervisor of special education were involved in the hiring process.

1981

- District Superintendent of Schools and District Special Education Personnel: 66%
- District Superintendent of Schools: 18%
- Director of Elementary Instruction: 3%
- Director of Elementary Instruction and Special Education: 3%
- Special Education Supervisor: 3%
- Breakdown not given: 7%
22. Type and degree of training required

1969

Only 40% of the districts replied to this question. Answers ranged from "anything we can get" to a degree in special education. Some emphasized experience in the classroom, others did not.

1981

The non-categorical responses concerning teacher training include certified teacher plus special education coursework (24%), special education B.A., B.Ed., special education masters (3%), and special education masters plus two years teaching experience (20%). However, many of the rural districts stated these qualifications are what they look for, but they often hire certified teachers without special education coursework or teaching experience. Half of the districts require certified teachers without special education training.

23. Supervision of classes

1969

No clear response was given as to who supervised the work of the teacher in either regular or special class. Only one third of the districts answered. Replies ranged from "no one" to supervisor of special education and principal.
school based team) in conjunction with the supervisor of special education in 52% of the districts. The district office determines the size in 48% of the districts.

26. **Aims of special class**

**1969**

Special classes were seen as rehabilitative. They expected 100% of their students to return to the regular class. The success varied from 40% - 50% returning the first year, 80% the second, and 95% the third.

**1981**

Ninety-five percent of the districts with special classes aim to return all of their students, 4% of the districts aim to return 50%, and 1% of the districts does not aim to return the autistic population to a regular class. In the classroom for "severely" disturbed pupils, 95% are returned in one district, 70% in another district, and 30% in two districts. The rehabilitation class figures are much lower as students leave school or finish in the rehabilitation program without returning to the regular program. Rehabilitation figures vary from 15% to 80% returning to the regular class. Five districts that aim to return 100% of emotionally disturbed students to the regular class do not give figures for the actual returns.
27. Tracking by regular class teachers

1969

Half of the regular classroom teachers were not encouraged to keep track of the child once placed in a special class, while 50% were encouraged to do so.

1981

In 58% of the districts, teachers are encouraged to keep track of a child who leaves their class and receives special class placement. In 42% of the districts, teachers are not encouraged to keep track of such children.

28. Transportation

1969

No consistent policy was described, some children travelled on regular bus, others received bus tokens for city bus and some were transported by the parents.

1981

In 75% of the districts, transportation is provided for special education students by the school district. In 25% of the districts, no transportation is provided for special needs students by the school district.

29. Liaison between school and other agencies

1969

Liaison between clinic and school was established by the use of phone, visits, and meetings. The principal, school nurse,
teacher, or special counsellor arranged these contacts.

1981

In 66% of the districts contact concerning individual students is established between special education personnel and clinic treatment centres. This contact is in the form of meetings (75%) or weekly contact by phone (10%). The other 15% of the districts either responded as not applicable, or that nothing is being done (10%).

30. **Liaison between clinic and school**

1969

In 80% of the districts, the clinic personnel did not come to observe the child receiving treatment in the school setting. Clinic personnel did observe the children receiving treatment in school settings (20%).

1981

In 80% of the districts, personnel from a clinic that treats a child come to observe the child in school. In 20% of the districts, no one from a clinic which provides treatment to a student comes to observe the child in school.

31. **Program evaluation**

1969

In 20% of the districts, evaluations of programs on a research basis were carried out, while the remaining 80% did subjective evaluations on a regular basis. These were carried out by the
superintendent of schools, principal, teacher, school psychologist, and/or special education personnel.

1981

In 25% of the districts program evaluations are carried out, 15% of the districts use subjective evaluation procedures and 10% of the districts evaluate on a research basis. The evaluations are carried out by any of the following: teachers, principals, coordinator of special education, psychologists, counsellors, and/or school based team.

32. Follow-up programs

1969

In 48% of the districts, a follow-up program for the student when he moved from a special class to a regular class was initiated. The special counsellor was the person most frequently mentioned to perform this service. Other personnel involved were principals, teacher, learning consultant, school psychologist, and the social worker.

1981

When a child is returned to a regular class from a special class, contact is maintained by the special education teacher in 40% of the districts. In 30% of the districts contact is maintained by someone from special education (e.g. coordinator, teacher where possible, aide, liaison person). In one district the Learning Assistance Teacher fills this role. In 30% of the districts there are no special classes.
33. Financing

1969

One third of the districts accepted financial responsibility for an emotionally disturbed child who was either being schooled in a neighbouring district or at a residential treatment centre. Two thirds of the districts replied that they were not responsible or that the question was not applicable.

1981

In 66% of the districts, the school boards consider themselves responsible for the education of a child who has been removed to a residential treatment centre. In 32% of the districts, this situation is not applicable. Only 2% of the districts do not feel responsible for such a child's education.

34. Liaison between school and treatment centre

1969

Twenty percent of the districts gave no answer when asked what arrangements were made to keep contact between a child's school and a treatment centre where the student was placed temporarily. Those that did respond gave such meagre evidence as to suggest that once responsibility was assumed by another district or agency, the home school cut ties with such a child.
When a child is transferred to a day school or residential treatment centre, contact is maintained between staff at the school and treatment centre by regular phone contact and visitations (38%), by attending exit conference (5%), by stipulations spelled out in the child's program (10%). Contact is not maintained in 20% of the cases, and 37% report that the question is not applicable.

Return from treatment centre

When a child was transferred back to the public school system from a treatment facility, 33% of the districts made a substantial effort to gather as much information as possible concerning the returning student.

When a child is transferred from such a treatment facility back to the regular school, the school based team or special education staff coordinates this transfer to include an exchange of records, visitations, and any necessary meetings in 75% of the districts. In 25% of the districts, this is not applicable.

In-Service on mental health education

No special provisions were made for in-service training of school staff in development of mental health of pupils in 46% of the districts.
In 60% of the districts, in-service education on mental health topics is available for teachers. Such programs are offered by the school, the Ministry of Human Resources, or Ministry of Health. No such in-service is available in 40% of the districts.

37. Information sharing

In 62% of the districts, special education staff was given an opportunity to share information concerning mental health of students with other staff and the public.

In 95% of the districts, special education staff have an opportunity to acquaint other teachers with the needs of the emotionally disturbed student. These districts have professional days or after school meetings run by special education staff (75%), or public meetings which include parents (20%). Other districts indicate the lack of time for sharing information on a formal basis.
Additional services needed

1969

Additional services needed to best meet the needs of the emotionally disturbed child were identified as:

- More mental health clinic services or psychiatric services 35%
- Special classes for emotionally disturbed pupils 15%
- Group living homes for 12 - 15 year olds 12%
- A school psychologist 11%
- Special counsellors 8%
- School oriented social workers 7%
- Residential treatment centres 6%
- Teacher aides (paid or voluntary) 6%

1981

This question asked the districts to suggest additional services which would best meet the needs of the emotionally disturbed in their area.

- More school counsellors (elementary and secondary) 33%
- Trained personnel/consultant teachers, behaviour modification consultant 20%
- More special classes for elementary rehabilitation programs and secondary programs for the mildly disturbed 20%
- Better assessment facilities 12%
- More treatment centres - Laurel House, Cedar Lodge, The Maples 3%
- More aide time 3%
More involvement from Ministry of Health 3%
Child psychiatrist for consulting 1%
Family counselling 1%
Early intervention programs 1%
Lower child/staff ratio in regular classes 1%
Supervisor for special education 1%
School supported summer program 1%

The following questions (#39 and #40) appeared on the 1981 questionnaire only. These questions arose from the suggestions of the Proposed Manual of Policies 1980 of the Ministry of Education which stated that Learning Assistance Centres should not provide services to emotionally disturbed children, and added a new form of service, rehabilitation classes at the elementary level.

39. Emotionally disturbed pupils at the Learning Assistance Centre 1981

In the new guidelines the definition of Learning Assistance Centre excludes services for children with emotional problems. However, 45% of the districts consider that Learning Assistance Centres are servicing these children, while others wish to see these children in special classes (24%), in regular class with other support (20%), or in the regular classes without support (5%). Six percent of the districts responded that this is not applicable.
40. **Purpose of elementary rehabilitation program**

Eighty per cent of the districts expect the elementary rehabilitation program to function as a segregated alternative program within the regular school, while 5% see it as a short term placement while children are partially integrated in the regular class. All districts describe the population to be served as acting out, poorly behaved students who cannot cope in the regular class and for whom other placement alternatives have been exhausted.

Question #41 tried to establish additional services outside the educational resources and question #42 looked at differences in policy at the elementary and secondary levels.

41. **Additional resources**

1981

When all educational resources have been exhausted the district turns to:

- Ministry of Human Resources 80%
- Ministry of Health 15%
- Interministerial Children's Committee 12%
- Attorney General 8%
- Regional Mental Health 3%
- Children's Hospital Diagnostic Centre 3%
- Medical personnel (neurologist, psychiatrist) 1%
- Ministry of Education Special Programs Branch 2%
- Cedar Lodge 1%

*Some respondents marked multiple categories, hence the sum total exceeds 100%.*
42. **Difference in procedures regarding elementary and secondary pupils.**

1981

No difference in policy is indicated between secondary and elementary students with reference to the procedures outlined in the questionnaire (60%). The difference noted by 40% of the districts are listed below:

- Integration more desirable and easier for elementary students
- Preventative agencies (Ministry of Human Resources and Ministry of Health) should be more involved
- Less resources for secondary
- Coordination more difficult at secondary
- Secondary has counselling facilities
- Secondary may be involved with probation
- Secondary programs combine acting out and withdrawn students.

B. Laycock's recommendations and the 1981 questionnaire's responses

Laycock and Findlay made 95 recommendations in their 1969 report based on the responses of the 1968/69 questionnaire and on the review of literature. The following is a summary of the recommendations arising from the 1969 questionnaire and directly related to the responses of the 1981 questionnaire. In each case the 1969 recommendations will be stated first, followed by the 1981 responses.
Recommendation #1: "that children may be considered as emotionally disturbed when they usually exhibit such primary symptoms as:

(i) inability to have effective relationships with peers and teachers;
(ii) inappropriate behaviour of feelings under ordinary conditions;
(iii) a general pervasive mood of unhappiness or depression;
(iv) difficulty or inability to face reality;
(v) a very poor self-concept;
(vi) a difficulty or inability to cope with the learning situation in spite of the usual remedial measures such as remedial reading, perceptual training;
(vii) a tendency to develop physical symptoms, speech problems, pains or fears associated with personal or school problems."

1981: No school district uses the above definitions.

50% of the districts have no definition.

20% uses the Ministry guidelines.

30% has a definition. (Question #2)

Recommendation #3: "that in the case of mentally and physically handicapped children who have a secondary handicap of emotional disturbance, adequate provision be made for treating their emotional handicap in whatever group of handicapped children they may be placed in the school."

1981: Autistic - no policy of differentiation made between autistic and mentally retarded.

Rehabilitation - policy of differentiation behavioural criteria (70%).

Severe - policy of differentiation. Behaviour assessed by psychologist or teacher (60%).

Mild/moderate - no policy of differentiation (85%). (Question #3)

Recommendation #4: "that school boards, educational administrators and teachers consider the education of emotionally disturbed and other handicapped children to be an integral part of the education provided by the school district for all its children and as part of the modern trend
to fit the school experiences to each child's own unique needs by providing the necessary supportive services and school facilities that make this point of view feasible."

1981: Policies on the provision of services and programs exist in various school districts.

**Autistic**
- no written policy regarding education for autistic (65%)
- policy provides program in special class or regular class with support services (35%).

**Rehabilitation**
- have a program with policies 40%
- have a program without policies 30%
- no program, no policy 30%

**Severe**
- no program, no policy 45%
- program with written policy 35%
- program without policy 20%

**Mild/moderate**
- no policy, no program 50%
- program with written policy - regular class 25%
- special class 20%
- program without written policy 5%

(Question #1)
Recommendation #6: "that since a conservative estimate of five percent of school children have emotional problems for which they require help beyond that which the regular classroom teacher can furnish under present conditions, district school boards provide special educational supportive services which will enable the great majority of these children to function in the regular schools."

1981: A variety of personnel provide supportive services:

- School psychologist: 66%
- Supervisor of special education: 75%
- Special counselor for the district: 50%
- School counselor (SEC): 76%
- School counselor elementary: 30%
- Consultant teachers: 33%
- Child development workers: 30%
- School social worker: 20%
- School nurse: 58%
- School physician: 10%
- Mental health clinic consultant services: 75%

Recommendation #8: "that the teacher and other school personnel involved in the education of emotionally disturbed children set up specific objectives for teaching each disturbed child and that these objectives be based on all available diagnostic data concerning his specific physical, intellectual, emotional and social strengths and weaknesses including his own individual style of learning, his attitudes to himself and others, and the degree of acceptance or rejection he is accorded by others in his home, school and community."

1981: Programs are prepared for the emotionally disturbed child by:

- A school based team: 80%
- No such team: 20%
Recommendation #12: "that the emotionally disturbed children remain in their regular class in school provided that they can receive adequate help in solving of their problems through the availability of the supportive services to the child and his teacher, or such specialized school personnel as special-counsellors, school psychologists, remedial consultants, school social workers, etc., and where necessary the services of health and clinical mental health personnel."

1981: The policy is to keep as many children as possible in regular classes. Supportive services include Learning Assistance teachers, aides, child care workers, consultant teachers, school counsellors, personal attendants.

The kind of help given by the above people was broken down in the following manner:

- Behaviour Management: 17%
- Consultive Support: 69%
- In-class help: 9%
- Mental Health Clinic support: 2%
- Family counselling: 2%
- Administrative help for individualized education plan: 1%

(Question #8)

Recommendation #14: "that school administrators adapt the policy of transferring an emotionally disturbed child from one regular class to another in the same school or in another school in the district when one teacher's personality and methods are likely to fit more adequately the needs of a particular child than was the case with his previous teacher."

1981: All districts stated that they would move a child from one regular class to another if the school based team thought this might be a better placement for him.

(Question #10)
Recommendation #16: "that school boards consider the possibility of using the services of an itinerant supportive teacher who has special training in the field of emotionally disturbed children, and that, where necessary, two or more school districts share the services of such a teacher."

1981: Consultative help is available to teachers in 69% of the districts in various forms. Integrative and supportive teachers are employed by various districts.

(Question #9)

Recommendation #17: "that, as one possible method of helping both emotionally disturbed and other types of pupils who have learning disabilities in the area of school work, school boards consider the appointment of remedial teachers of reading and speech, and that this is especially important if the school board has the policy of providing for emotionally disturbed children in regular classes."

1981: All districts employ learning assistance teachers.

Recommendation #18: "that school boards in their attempt to meet the needs of emotionally disturbed pupils, organize special classes for those moderately disturbed children whose educational needs cannot be met effectively in a regular class by the provision of adequate supportive services but whose needs can be met more adequately by remaining in the normal setting of the community's school than through being placed in a residential treatment centre under welfare and health auspices."

1981: Approximately one third of school districts do not have special classes for emotionally disturbed children.
### Special Class Provisions:

**Autistic**
- Special class: 17%
- Included in classes for mentally retarded: 17%
- No class: 65%

**Rehabilitation**
- Secondary: 65%
- Elementary: 10%
- Intermediate: 3%
- None: 34%

**Severe**
- Intermediate: 34%
- Elementary: 15%
- Secondary: 0%
- None: 51%

**Mild/Moderate**
- Elementary: 13%
- Intermediate: 7%
- Secondary: 3%
- None: 86%

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Recommendation #20: "that no disturbed child should be placed in any type of special class, whether one organized exclusively for the emotionally disturbed, a learning disabilities class, or a class for slow-learners without a complete diagnosis including an individual psychological assessment."
1981: In the majority of the school districts the basis for selection for special class placement includes a medical, psychological and educational assessment.

(Question 14)

Recommendation #21: "that the decision as to a disturbed child's educational placement be made at an educational conference which includes the school administrator, specialized school personnel, teachers, and, where necessary, clinical personnel from outside the school."

1981: District based teams review assessment and make final decision.

(Question 14)

Recommendation #22: "that the size of a special class for the emotionally disturbed be limited to six to eight pupils in accordance with the severity of disturbance of the children concerned and on whether or not the services of a teacher-aide are provided."

1981: Class sizes ranged from four to 20. In rehabilitation classes the range was from 10 to 20 pupils, less than 10 in classes for the autistic and the severely disturbed. Paid teacher aides and voluntary aides were employed for classes of autistic children, rehabilitation classes, classes for the severely and mildly/moderately disturbed.

(Question 25)

Recommendation #24: "that in selecting individual pupils for a particular special class, consideration be given as to which disturbed children can function in the class group without limiting or destroying its effectiveness."
1981: All districts take into account the compatibility of individual children when placing them in classrooms. (Question #24)

Recommendations #34 and #35: "that, whether a disturbed child's emotional problems have an organic basis or are rooted in his early environmental experiences, the school, because of the inevitable partnership of parents and teachers in the emotional and intellectual development of all its pupils, has no choice but to seek both the understanding and active cooperation of the disturbed child's parents in its attempts to help the youngster to solve his emotional problems, and that such cooperation be sought on the basis of respect for the parents, even if the latter exhibit disturbed behavior themselves;" and "that in seeking the cooperation of an emotionally disturbed child's parents, the school make full use of conferences at the school with specialized personnel, visits to the house by such of its staff members as the school nurse, the special counselor, or the school social worker, and that it help the parents, where necessary, to utilize the services of social agencies, mental health personnel and private psychiatrists."

1981: School districts involve parents in planning, and their consent is necessary to placements suggested by the school based team. (Question #7)

Recommendations #36 and #37: "that, where a child is transferred to or from a public school, to a public or private residential school or treatment centre, close cooperation be established between the transferring and receiving school or centre so that there may be an adequate sharing of experience and knowledge of the needs of the child and a sense of shared team work in promoting his long-range development;" and "that, where it is decided that the education and treatment of emotionally disturbed children can best be furthered in a residential school or treatment centre, district school boards work cooperatively with such schools or centres, whether public or private, by receiving into their schools on a trial basis those pupils whom the centres believe are ready for this aspect of normal living but are not yet ready to have the residential school or centre, and that, in turn, the residential centres be asked to receive those pupils from the public schools who might profit from a period of time in a residential setting."
In 66% of the districts contact is established between special education personnel and treatment centres. In 80% of these districts, personnel from the treatment centre come to observe the child under treatment in the school. In 40% of the districts, contact is maintained between the special education teacher and the treatment centre after discharge. Two thirds of the districts assume financial responsibility for the emotionally disturbed child who is either being schooled in a neighbouring district or at a residential treatment centre.

When a child is transferred to a day school or residential treatment centre, contact is maintained between staff at the school and treatment centre by regular phone contact and visitations in 38% of the districts. When a child is transferred from a treatment centre back to the school, the school based team or special education staff coordinates his transfer.

Recommendation #40: "that when a disturbed child is transferred from a regular class to a special class, provision be made for his teacher and principal to visit the special class in order to reassure the child of their continuing interest, as well as to observe the teaching techniques used and the special facilities provided."

In 56% of the districts, teachers are encouraged to keep track of a child who leaves their class to go to a special class placement.
Recommendation #41: "that, when a disturbed child is transferred from a special class to a regular class, this transfer be carefully prepared for and, if possible, be carried out in stages through attendance in a regular classroom for a part of the day only, and that, when the transfer is effected, the specialized supportive personnel, who have been helping the child and his teacher, give continuing help, as is necessary, to the child in his new environment and to the regular classroom teacher to whose class he is transferred, and that where possible, the special class teacher have the opportunity for some continuing contact with the pupil and his new teacher."

1981: When a child is returned to a regular class from a special class, contact is maintained by the special education teacher in 40% of the districts. (Question #32)

Recommendation #45: "that great care be taken in the selection of teachers for emotionally disturbed children and that, in such selection, such personal qualities and characteristics as emotional maturity and stability, patience and a sense of humour, as well as a liking and respect for children and the ability to establish warm relations with them, be given high priority, with special training of the disturbed regarded as means of making such personal qualities and characteristics maximally effective."

1981: The district superintendent of schools and district special education personnel select the teacher for these classes. In 53% of the districts, teacher certification without special education training is accepted. Special training with the emotionally disturbed is subsumed within a master's degree in special education preferred by 20% of the districts who also require an additional two years of teaching experience. (Questions #21 and 22)
Recommendation #46: "that the teacher of a regular or special class which contains emotionally disturbed pupils needs, in order to be most effective, help from a variety of specialized personnel—district special counsellor, school psychologist, school counsellor, supervisor of special education, school social worker, school nurse and remedial consultant as well as from clinical personnel from within the school."

1981: The following sources of help are available:

<table>
<thead>
<tr>
<th>Source</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Workers</td>
<td>14%</td>
</tr>
<tr>
<td>Counsellors</td>
<td>14%</td>
</tr>
<tr>
<td>No one</td>
<td>14%</td>
</tr>
<tr>
<td>Special Service Coordinators</td>
<td>12%</td>
</tr>
<tr>
<td>Psychologist</td>
<td>12%</td>
</tr>
<tr>
<td>Aides</td>
<td>9%</td>
</tr>
<tr>
<td>Ministry of Human Resources</td>
<td>9%</td>
</tr>
<tr>
<td>Provincial In-Service Resource Team</td>
<td>7%</td>
</tr>
<tr>
<td>Consultant Teacher</td>
<td>4%</td>
</tr>
<tr>
<td>Speech Pathologist</td>
<td>4%</td>
</tr>
<tr>
<td>Other</td>
<td>8%</td>
</tr>
</tbody>
</table>

(Question #15)

Recommendation #48: "that the role of district special counsellor be that of a consultant to classroom teachers of emotional and other behavioural problems and also that of a counsellor to disturbed children who do not require the services of a psychiatrist, and that the special counsellor also act as a liaison officer to assist the teacher of emotionally disturbed children and their pupils in securing adequate supportive services from within and without the school."

1981: Counsellors were stated to be sources of help by 14% of the school districts.

(Question #15)
Recommendation #49: "that in view of the wide variety of skilled services which can be provided by a well-trained school psychologist, school boards make plans to employ such personnel, and that, when necessary in smaller districts or rural areas, two district school boards share a school psychologist's services."

1981: Psychologists were reported as source of help by 12% of the districts. (Question #15)

Recommendation #50: "that, the supervisor of special education in a school district be a well-trained person with a broad knowledge of the needs and problems of emotionally disturbed children and the ability to plan special services to meet the needs of such children, as well as to work closely with special education teachers and specialized personnel from within and without the school in making the program for disturbed children an effective one."

1981: The majority of school districts employ the services of a coordinator or supervisor of special education. In 12% of the districts, it was reported that the coordinator was the source of help to teachers of the emotionally disturbed. (Question #8)

Recommendation #58: "that paid teacher aides be provided for teachers of special classes of emotionally disturbed children and also for teachers of regular classes where one or more moderately disturbed pupils are enrolled."

1981: Paid teacher aides were employed in classes for autistic children, rehabilitation classes, classes for the severely and for the mildly/moderately disturbed pupils. (Question #16)
Recommendation 1159: "that the schools enlist the help of a selected group of mature and stable individuals as volunteer aides who will each provide a continuing one-to-one relationship with an emotionally disturbed child in the school for a part of two mornings a week, giving the youngster warm acceptance and help in his work and play activities."

1981: Volunteer aides are used much less frequently than paid aides. The Canadian Union of Public Employees does not encourage the use of volunteer aides. (Question #17)

Recommendations #61 and #62: "that, since there is no one method of teaching, the teacher of emotionally disturbed children concentrate his attention on modifying each child's present mal-adaptive behavior through the use of such educational techniques as are likely to help the pupil to succeed in desirable forms of behavior, and that these techniques be drawn, where necessary, from one or all of the major approaches to teaching disturbed youngsters, namely the psychodynamic-interpersonal approach, the sensory-neurological approach and the behavior-modification approach;" and

"that, since success in using a variety of educational techniques drawn from differing philosophies of teaching emotionally disturbed children implies in the teacher both an ability to assess each disturbed child's strengths and weaknesses and also a thorough knowledge of the different strategies used in teaching such children, every effort be made to see the teacher of disturbed children have an adequate background of special training."

1981: The following teaching techniques were suggested to teachers of the emotionally disturbed:

- behavior modification: 36%
- individualized education plan: 10%
- eclectic: 6%
- patience: 6%
- no technique: 42%

Fifty-three per cent of the school districts hire teachers without special training. (Question #20 and #22)
Recommendations #63-#66: "that careful evaluation of the administrative devices and methods of teaching used in the education of emotionally disturbed children and the extent of the progress made by these children be carried out on a systematic basis from time to time by the classroom teacher and specialized school and clinical personnel;" and

"that informal evaluation of the progress of emotionally disturbed pupils in terms of their achievement and classroom behavior be constantly carried out by the teacher (and other personnel) as a way of determining whether the specific objectives for each pupil are being attained and whether the methods of teaching used are the most effective ones that could be used and that, in such an evaluation, use be made of observation, anecdotal records, rating scales and tapes of teacher and pupil responses in classroom situations;" and

"that every effort be made by those responsible for special services for emotionally disturbed children to further research in the use of administrative devices and the methods of teaching emotionally disturbed children whether such research be carried out by school personnel as by university or clinical personnel from outside the school:"

1981: In 25% of the districts, program evaluation was carried out, subjective evaluation procedures (15%) and objective evaluation procedures (10%) were used. (Question #31)
IV. SUMMARY AND DISCUSSION OF THE RESULTS

When comparing the replies of the 1969 and the 1981 questionnaire, changes can be observed in most of the areas surveyed.

More school districts in 1981 address themselves to the task of establishing policy guidelines for the provision of services for emotionally disturbed children (35% versus 53%) at the district level.

While 75% of the school districts in 1969 accepted the California definition (Bower, 1959), no school district uses this definition in 1981. Fifty percent of the schools have no definition in 1981 versus 25% in 1969.

Distinction between emotionally disturbed children and children with other mental and physical handicaps is made currently by more school districts than in 1969 (56% versus 70%). However, this excludes the mildly and moderately disturbed sub-category.

The availability of specialized district level personnel permits the use of in-district referral and assessment procedures in 80% of the school districts at present.

There is a significant increase in supervisors of special education over the past ten years (22% versus 86%). In addition, growth in the area of resource personnel is indicated: elementary school counselors (0% versus 32%), school psychologists (15% versus 68%), and consulting teachers (42% versus 65%). School based teams (78% versus 89%) function in most school districts.
Growth is also indicated in the area of support services, namely paid teacher aides and volunteer aides.

There is a definite pattern of growth in special classes for emotionally disturbed children. While in 1969 there were only 16 special classes for emotionally disturbed children in the province, at present 17% of the district have classes for autistic children, 75% have rehabilitation classes, 49% classes for the severely handicapped, and 14% classes for the mildly handicapped. The emphasis has shifted from psychiatric/psychological to educational/psychological assessment.

The label "emotionally disturbed" is no longer used to designate these classes.

While the main distinguishing feature of a classroom for emotionally disturbed children was in 1969 the reduction of the number of pupils per class, in 1981 many rehabilitation classes differ distinctly from regular classrooms. Often these classrooms are located outside of the school building, in rented offices, apartments, portables, church basements and offer a variety of features with regard to decorating, furnishing, and general conduct rules which makes them differ from regular classrooms.

No one specific teaching method for emotionally disturbed children was in use or is in use within the district. Over one third of the classes (36%) use behavioral methods of teaching in 1981.
No specific provincial requirement for the preparation of teachers of the emotionally disturbed existed in 1969 or exist in 1981. Only 42% of the school districts specified special education courses or degrees as a requirement in 1981.

Supervision of teachers of the emotionally disturbed shifted from no supervision (69% in 1969) to 55% being supervised by the supervisor of special education and 45% by the building principal.

While 100% of the emotionally disturbed children were expected to return to special class in 1969, in 1981 95% aim to return to regular classes, 4% aim to return 50% of the students, and 1% does not aim to do so.

Teaching children who were transferred to a special class by the regular classroom teacher increased slightly (50% versus 58%).

Transportation of emotionally disturbed children is provided by 75% of the school districts in 1981, while there was no policy on transportation by most of the school districts in 1969.

A greater number of personnel working with emotionally disturbed children observe these children in the school setting (20% versus 80%). Information sharing between personnel of treatment facilities and school personnel on the return of the emotionally disturbed child to the school has increased considerably (33% versus 75%).

More school districts assume financial responsibility for students placed in treatment centres (33% versus 66%).

More teachers are provided with opportunity of sharing information about the emotionally disturbed child (62% versus 95%).
While in 1969 teachers identified needed additional services mainly as services outside of the school, clinics, group homes, or in-the-school special classes, in 1981 the needs are specified as needs within the school system: hiring of more counsellors, trained personnel and the establishment of rehabilitation classes at the elementary level.

Research-based evaluation declined over the years from 20% of the district in 1969 to 10% of the districts in 1981.

The four questions which appeared exclusively on the 1981 questionnaire revealed that:

- almost half of the school districts see the Learning Assistance Centre as a resource of emotionally disturbed children, in spite of the exclusionary clause in the new guidelines;

- acting out, poorly behaved students, who cannot cope in the regular class and for whom other placement alternatives have been exhausted, need placement in a rehabilitation program at the elementary level;

- when all educational resources have been exhausted, the district turns to the Ministry of Human Resources (80%), Ministry of Health (15%), the Interministerial Children's Committee, Attorney-General's Department (8%), and less frequently, to other resources;

- no difference in policy was indicated between emotionally disturbed elementary and secondary students in general.

On considering Laycock and Findlay's recommendations based on their questionnaire and the replies provided by the 1981 questionnaire, the following observations emerge:
(a) The recommendation to use the California definition (Bower, 1959) is not followed. The Ministry of Education's guidelines provide definitions, and school districts have their own definitions, while 50% of the school districts do not have a specific definition.

(b) The recommendation to cater to emotional disturbance as a secondary handicap—no policy of differentiation exists in cases of mild or moderate emotional disturbance. In the case of rehabilitation programs and severe emotional disturbance, behavioral criteria allow for such distinction.

(c) The acceptance of the recommendation that the education of emotionally disturbed children be accepted as an integral part of the education provided for all its children and supportive services be provided is shown by the variety of the program approvals for autistic, rehabilitation programs and severely behaviorally disordered children, and the growth in the specialized resource and support personnel hired by school districts and the involvement of consultative help from outside of the school districts.

(d) The recommendations for individualized programming is being attended to by the school-based teams in 80% of the districts, complemented by a district-based team.
(e) The recommendation that special classes be organized for moderately disturbed children is not followed by most of the school districts. There are special class provisions for the mild/moderate subgroup in 86% of the districts.

(f) The recommendation that special class size for the emotionally disturbed be limited to six to eight pupils is followed in a flexible manner. Some classes for autistic children contain less pupils, and rehabilitation programs contain more.

(g) The recommendation for parental involvement in planning and the need for parental consent for placement is followed. Parental consent is necessary for special class placement, but the degree of parental involvement in planning varies.

(h) The recommendation for increased cooperation between school and residential centre personnel is shown by two thirds of the school districts which establish contact, track the child's progress, and facilitate transfer back to the school.

(i) The recommendation that regular class teachers and special education class teachers track the child upon transfer from one class to another is followed in approximately half of the school districts.
The recommendation that teachers of classes of emotionally disturbed children have special training is accepted by 47% of the districts.

The recommendation that counsellors, psychologists, supervisors of special education be a special source of help to teachers with emotionally disturbed children is not followed, since only 14% of the districts stated that counsellors were sources of help and 12% mentioned psychologists and 12% mentioned supervisors of special education as sources of help.

The recommendation that careful evaluation of the programs for emotionally disturbed children be made to assess teaching effectiveness and further research is followed by only 10% of the districts.

The last ten years witnessed the fast development of provision of services for exceptional children in British Columbia. When Laycock and Findlay (1969) wrote their report and made recommendations for the education of the emotionally disturbed children, only 16 special classes existed in the province for the emotionally disturbed children. Based on their findings and literary reviews, a number of recommendations were made to foster the development of services. While the label "emotionally disturbed" is not used in the comprehensive guidelines issued by the Ministry of Education, Special Programs Branch in the Spring of 1981, categories for funding approvals refer to autistic, severely behaviour
disordered children, and rehabilitation programs. In spite of the
trend towards integration of special education programs, the services
for emotionally disturbed children expanded with the establishment
of a number of segregated classes for all three categories. Services
for the mildly and moderately emotionally disturbed remain indistin-
guishable, probably because the emphasis is placed on integrated
services to children who can cope in the regular classroom. One
might only guess that the majority of these children receive support-
ive services at Learning Assistance Centres, in spite of the guide-
lines to exclude them.

The expansion of the program to include children who are severely
emotionally disturbed was facilitated by an expansion of supportive
and resource personnel.

In principle, with the resource and supportive services avail-
able, an individualized program could be planned for each emotion-
ally disturbed child in the schools in order to provide a learning
experience for effective adjustment. Two major factors may prevent
this service from being fully effective: the lack of emphasis on
teacher training in special education, and the lack of stress on
evaluation of the effectiveness of the programs. Only about half
of the school districts make it a necessary prerequisite that
teachers of the emotionally disturbed have Special Education training,
not necessarily in the area of emotional disturbances. The lack
of comprehensive individual assessment and research in the classrooms
hinders program improvement. Without a comprehensive evaluation of
district programs for emotionally disturbed children, the value of these programs can only be appreciated at a subjective level which does not provide the teacher or the supervisor of special education with a sound basis for program alteration.

Without mandatory provincial legislation for the appropriate education of all children, a major thrust towards accountability in terms of teacher preparation and monitoring the effectiveness of the programs is not likely to occur, unless the leadership in special education is able to set certain standards and expectations, and facilitate their realization.
V. CONCLUSIONS

There is no universally accepted definition of emotional disturbance or behavioral and social disorders. Labels, as well as attempts to characterize the disturbed child population, vary with the orientation and mandate of the socializing agency. Educational definitions reflect the administrative arrangement provided for these children or the observations of educators of characteristics of these children. Some describe the child as disabled, others specify deficiency in certain areas of behaviour, while others focus on the interaction between pupil and teacher.

Van Osdal and Shane (1974) defined the emotionally disturbed child as "one who cannot emotionally, intellectually, and socially function in a manner that is acceptable to his peers, teachers, parents, and legal authorities within his school, home, and community environment." (p. 229). The definitions used by many school districts in British Columbia focus on the interrelationship between student and teacher, student and peers, student and school, and student and community. This particular focus necessitates the careful assessment of the social environment of the child who presents behavioural problems. The emphasis is on the quality of interaction which highlights all those who are involved in the situation, not just the child in difficulty. This shift of attention from the child "as disabled" (California definition, 1959) to the social interaction "as inappropriate"
reflects closely the trend in thinking about emotionally disturbed children within the social context.

This emphasis on social interaction brings the role of the school in the rehabilitation of emotionally disturbed children into central focus. The recognition by the teachers, the school, the peers, the educational agency can provoke change on its own, or, with the help of other socializing agencies, forms the basis of a series of programs for emotionally disturbed children which have been established during the last decade.

Indeed, in the span of ten years, many of the recommendations made by Laycock and Findlay (1969) had been realized and attempts had been made to provide services for "emotionally disturbed children" in a greater number of the school districts.

The issuing of formal provincial guidelines in special education including most of the students who would fall under the portmanteau term "emotionally disturbed" facilitates the recognition, specifies the funding arrangement and legitimizes the provision of services. While the label "emotionally disturbed" is not in use in British Columbia, the three provincially recognized categories, severe behaviour disorders, rehabilitation programs, and autism, appear to cover most children who were traditionally described as severely emotionally disturbed. Attention to the mild and moderate categories (if this distinction can be made clear for other than administrative reasons) is not given by the Provincial Guidelines in Special Education. These remain the responsibility of the regular classroom teacher.
In order to prevent mild or moderate emotional handicaps from becoming more severe, it is necessary to provide the regular classroom teacher with the training necessary to recognize the problem, to make use of the resource and support services available, to alter the social/educational environment of the student to facilitate better adjustment. This highlights the need for special education training for the regular classroom teacher who is the cornerstone in integrated programming for exceptional children.

The provision of services to all children without the exclusion of anyone is not written in the School Act of British Columbia in 1981. However, the observable trend is in the direction of providing more individualized solutions to students with problems. The next step, once services are provided, is to improve the quality of these services through systematic district-side program evaluation and research. The task of the eighties is clearly indicated as program extension, and program improvement, using objective data base originating within each school district and compared with findings of recent research into the area of educating emotionally disturbed children.
References


Appendices

A. Procedure for Identification of Students With Special Needs - Vancouver School Board.

B. Policy for Programs for Emotionally Disturbed Children - Langley School District.

C. Description of Programs for Emotionally Disturbed Children

1. Class for severe Behavioural Problems - Qualicum Beach Middle School.

2. Rehabilitation Program - Granisle

3. Programs for Children with Severe Learning Problems - Special Remedial Classes for Behaviour Disorders Children - Vancouver.

4. Programs for Children with Severe Behavioural Disorders - Osler Observation Class

5. Programs for Children with Severe Behaviour Disorders - East 1A (Vancouver General Hospital)

6. Residential Programs - Children's Foundation.

7. Programs in Treatment Centres - Joyce Centre

8. Programs in Treatment Centres - Maywood House

9. Closed Therapeutic Centre

10. Autistic Children - Lord Tennyson

11. Alternative Rehabilitation Programs - Vancouver

12. Duties of Support Workers - Shuswap

D. Copy of the questionnaire and letter sent to each school district.
A. Procedure for Identification of Students with Special Needs

Vancouver School Board - 1980 January

STUDENTS WHO HAVE SPECIAL NEEDS:

Education and health professionals share with parents the responsibility to provide the optimal opportunity for each child "to live and to learn". Our knowledge and sensitivity to the processes of "normal growth and development" assist us in recognition of those children who are developmentally vulnerable, at risk, or who manifest a specific difficulty. All those caring for the child must work cooperatively to enhance his development.

It is well recognized that the difficulties experienced by many school children are a mix of physical, intellectual, social and emotional factors and may lead to secondary emotional or behavioural complications. Of greatest concern is the fact that some of the child's developmental needs are not being fully met. Whatever the difficulty, each child is affected uniquely and requires a unique program in school, based on individualized assessment, planning and evaluation of progress.

Identification

Parents, administrators, teachers and health professionals are key persons in the identification of difficulties. Once the difficulty is recognized, it is the responsibility of these key persons to initiate an assessment. When requesting assessment of a child, it is important to clarify the general nature of the child's difficulty. Normally, the request for assessment is after a preliminary discussion by the school based team.
The school based team consists of:

**Secondary**
- Administration
- Counsellor
- Psychologist
- Teacher(s)
- Nurse and/or Doctor

**Elementary**
- Principal
- Referring Teacher
- Learning Assistance Teacher
- Area Counsellor
- School Psychologist
- School Nurse
- School Doctor

The school based team meets on a regular basis with referrals from teachers and discusses appropriate educational plans for students. The school based team shares their concerns with the parents.

**Augmented School Based Team**

When the problems involved seem to warrant other specialists, the team may be augmented by:

- Speech and Hearing Specialists
- Ministry of Human Resources Personnel
- Vancouver Health Personnel

Often the Augmented School Based Team consider making referrals to outside agencies for additional services.

Before involving people outside the Vancouver School Board or when referring to Central Screening Committee a consent form must be signed by the parents.

1. This release form is necessary because often in devising an appropriate program for the student other agencies have to be consulted.

2. It is advantageous, if the student or his family have a Ministry of Human Resources worker or other agency, to involve the worker.
in the augmented school based team decision.

3. In particular, if the possible plan includes referral to a treatment centre such as the Maples or Children's Foundation, the Ministry of Human Resources worker would be involved in preliminary planning. This involvement will greatly facilitate such referrals since referral to treatment resources often requires thorough documentation by a Ministry of Human Resources worker who can only make the referral after investigating all other alternatives.

4. If the family has had no contact with the Ministry of Human Resources the counsellor can help facilitate such involvement.

5. If a release form is not obtained and the Screening Committee actively considers placement at the Maples or Children's Foundation or other resources outside of the school, there may be a considerable delay in expediting such placement because of the need to involve the worker at that point.

Procedures when recommending outside agency help in referral to Central Screening Committee:

- Preliminary discussion leads the team to consider outside resource help.
- Parents are requested to sign release consent form to appropriate agencies so that this outside help can be sought.
- School Based Team involves Ministry of Human Resources worker in an augmented School Based Team Meeting for preliminary planning.
- School Based Team refers the case to the Central Screening Committee.
REFERRAL TO THE VANCOUVER SCHOOL BOARD CENTRAL SCREENING COMMITTEE

For those children whose educational plan requires referral to a special education facility or community resource, it is essential for the school-based team to send its recommendation to the Vancouver School Board Screening Committee to facilitate this placement. The referral to the screening committee should include:

1. A resume of the problem as defined by:
   a) administrator
   b) teacher
   c) area counsellor
   d) school psychologist
   e) health team
   f) speech and hearing specialist
   and may include reports from:
   g) Ministry of Human Resources personnel

The resume should include a summary that outlines the specific problems and when possible the kind of program that may be appropriate.

All reports must be in to the screening committee before that committee can take any action on the referral.

2. A signed parental consent form.

The deadline for referrals and information for the Central Screening Committee meeting is now the Tuesday before the meeting. The meetings are held the 2nd and 4th Tuesday of the month.
VANCOUVER SCHOOL BOARD

SCHOOL BASED TEAM CONSULTATIVE PROCESSES

STEPS

I. IDENTIFICATION
   - Teacher awareness
   - Counsellor involvement
   - Psychological assessment
   - Speech & hearing assessment if indicated

II. SCHOOL TEAM
    - SCHOOL BASED CONSULTATION
      - Secondary Team
        - Administration
        - Counsellor
        - Psychologist
        - Teacher(s)
        - Nurse and/or Doctor
        - Skill Development Centre Teacher
      - Elementary Team
        - Principal
        - Referring Teacher
        - Learning Assistance Teacher
        - Area Counsellor
        - School Psychologist
        - School Nurse
        - School Doctor

Where necessary

III. AUGMENTED SCHOOL TEAM
    - Social worker
    - Health care personnel
    - Speech & hearing specialist

IV. PLACEMENT
    - DECISION, IMPLEMENTATION

V. EVALUATION
    - ONGOING REVIEW
    - STUDENT PROGRESS
REFERRAL TO
CENTRAL SCREENING COMMITTEE

TO BE COMPLETED BY SCHOOL COUNSELLOR

DATE: ____________________

NAME ____________________
Surname ____________________ First Name ____________________ Initial ______

ADDRESS ____________________

PHONE NUMBER ____________________

BIRTHDATE ____________________ AGE ____________________
Year ______ Month ______ Day ______

PARENT'S OR GUARDIAN'S NAME ____________________

PRESENT SCHOOL ____________________ GRADE ____________________

IF M.H.R. WORKER INVOLVED, GIVE NAME AND TELEPHONE NUMBER ____________________

SCHOOL COUNSELLOR ____________________

ENCLOSED WITH THIS REFERRAL ARE:

LETTERS AND REPORTS NECESSARY FOR SCREENING

PRINCIPAL'S REPORT ____________________ DATED ____________

TEACHER'S REPORT ____________________

COUNSELLOR'S REPORT ____________________

SCHOOL PSYCHOLOGIST ____________________

HEALTH TEAM ____________________

SPEECH & HEARING ____________________

RELEASE FORM ____________________

SKILLS DEVELOPMENT CENTRE REPORT ____________________

Atthep ____________________

Return this form with documents to:

Chairman, Central Screening Committee
Vancouver School Board
1595 West 10th Avenue
Vancouver, B.C.
V6J 128
REFERRAL TO
CENTRAL SCREENING COMMITTEE

TO BE COMPLETED BY AREA COUNSELLOR

NAME ____________________________ Sex ____________
Surname First Name Initial

ADDRESS __________________________

PHONE NUMBER ____________________

BIRTHDATE ____________ AGE ____________
Year Month Day

PARENT'S OR GUARDIAN'S NAME __________________________

PRESENT SCHOOL __________________ GRADE ____________

IF M.H.R. WORKER INVOLVED, GIVE NAME AND TELEPHONE NUMBER:

AREA COUNSELLOR __________________________

ENCLOSED WITH THIS REFERRAL ARE:

LETTERS AND REPORTS NECESSARY FOR SCREENING

PRINCIPAL'S REPORT

TEACHER'S REPORT

AREA COUNSELLOR

SCHOOL PSYCHOLOGIST

HEALTH TEAM

SPEECH & HEARING

RELEASE FORM

LEARNING ASSISTANCE REPORT

OTHER

Return this form with documents to: Chairman, Central Screening Committee
Vancouver School Board
1595 West 10th Avenue
Vancouver, B. C., V6J 1Z8
B. Policy for Programs for Emotionally Disturbed Children

Langley School District

EMOTIONALLY HANDICAPPED PROGRAM

Objectives

These programs are for students of average or better ability who have severe learning problems as a result of a Specific Learning Disability. Often, there are secondary behavioral difficulties associated with the learning disability, which require management so that the child can function when he returns to the regular class.

The instructional program is intended to be prescriptive in nature, and is aimed at closing the gap between the student's ability level and his achievement. As well, it is aimed at developing self-direction and appropriate school-related behavior.

Students are integrated into regular class programs on an individual basis as much as possible in activities and subjects where they appear to function well.

Programs use the "Structured Success" (Hewitt and Taylor) model as a theoretical framework, coupled with a prescriptive approval to activity selection.

The expectation is that within a two year period these children will be returned to their neighbourhood regular class, with Learning Assistance if necessary. Provisions will be made for students to remain in the program if after thorough re-assessment the student shows a need for continued small group placement and programming.
CRITERIA FOR ELIGIBILITY

1. Intellectual Ability:

Intelligence quotients on tests individually administered by a qualified psychologist which place the student no lower than one standard deviation below the mean, allowing for the standard error of measurement on the test and for judgment about the sample validity.

2. Academic Achievement:

A significant discrepancy between actual performance and expectancy as predicted by measures of academic aptitude. Performance is to be assessed on an individually administered standardized measure of academic achievement or pre-academic development.

A significant discrepancy is defined as more than one standard deviation from expectancy.

3. General Classroom Performance and Adaptive Behavior:

Students who exhibit such severe emotional or social difficulties so as to interfere with their effective learning and/or that of their peers in a full-time regular class setting.

Relative severity is to be determined by District staff psychologists who may rely on a variety of assessment devices and professional colleagues in making this decision.

Students must meet criterion one and either criterion two or three in order to be considered eligible for the program. Students who are marginally eligible may be placed on a short term basis if space is available in the program.
Placement

Placement in the program is co-ordinated by the Program Consultant in Learning Disabilities.

The capacity of the program is such that it is intended to focus on about 1% of the student population. Maximum caseloads are outlined in Policy 5019-8.

Location

There are four such programs in the following elementary schools: Alice Brown, Fort Langley, Parkside and Glenwood.

Each program consists of a Primary and Intermediate level.

Enrolments are limited to ensure individualized instruction. Classes are open to all students in the District who meet requirements, through the normal referral and placement procedure. Often there is a waiting list.

REHABILITATION PROGRAM

The purpose of a Rehabilitation program, as outlined by the Ministry of Education in 1975, is:

"To enable young people who are experiencing great difficulty at school, or who have dropped out of school, to acquire basic academic skills which will make it possible for them to re-enter the school system or to proceed to further training or employment."

The program is jointly funded by the Ministries of Education and Human Resources, with the latter providing for Child Care Worker staff.
Rehabilitation programs in the Langley District are organized in two stages: the Alternate Learning Environment and the School-based Rehabilitation programs:

a) Alternate Learning Environment

The A.L.E. is an alternative for students who have been or are judged likely to be unsuccessful in their regular Junior Secondary School despite program modification. For a variety of reasons the students' have developed a resistance to programs which resemble the regular school environment.

Clientele: Most students are between the ages of 14 and 15. These students will have a history of:

1. A continuing pattern of maladaptive and disruptive school behavior which is both chronic and excessive.

2. Evidence that inappropriate school expectations are not causative or contributing factors. Staff consensus should be reached in making these judgments.

Location: The program is currently operating out of two portables located behind the Teachers District Resource Centre on 32nd Avenue just off Carvolth (200th Street). There is a staff of 3 1/2, two teachers and 1 1/2 child care workers, and a maximum enrolment of twenty students.

Objectives:

1. To re-establish behavior which will enable the student to function in a regular school setting.
2. To re-establish positive attitudes toward academic learning.
3. To teach the student the basic life skills.
4. To pursue areas of interest to establish future academic and/or career areas.
5. To develop interpersonal and communication skills necessary for effective living.
6. To develop a sense of personal self-esteem.

Program: Four major program areas are emphasized:

1. Academic
2. Physical Recreation
3. Practical Skills
4. Environmental Exploration

Admissions: Referrals should be forwarded via the Special Services Department to the Senior Counselling Psychologist from:

1. High School Counsellors
2. Ministry of Human Resources
3. Probation Service Staff

Placement procedures will follow the guidelines laid out in School District Policy. Referrals may be accepted at anytime during the school year, but placement will be dependent on the availability of space.
For more information: A brochure outlining A.L.E. should be available in the Guidance office of any high school.

Enquiries may also be directed to:
Co-ordinator, Alternate Learning Environment
19240 - 32nd Avenue, Langley, B.C.
Attention: Mr. J. Fuller
Telephone: 530-4011

b) School-Based Rehabilitation Programs

Three school-based Rehabilitation programs are located at Brookswood Junior, D.W. Poppy Junior and Aldergrove Secondary Schools:

These programs provide for a transition of high-risk students of Junior High School age into a secondary school environment, and are intended for students who:

1. Demonstrate serious learning difficulties and/or behavioral problems.
2. These difficulties are not solely attributed to low ability.
3. Are functioning two or more years below their appropriate achievement level on standardized achievement tests.
4. Usually, the student is below 15 years of age.

Total enrolment in the three programs will be between 35 and 45 students.

The Programs are:

1. Brookswood Terra Firma
2. D.W. Poppy Pre-employment
3. Aldergrove Junior Prep.
In each case the program consists of three major areas:

i) Academic upgrading

ii) Behavior adjustment and motivation

iii) An orientation to the world of work in terms of long-term goals

Details of each program are available by contacting the schools where programs are located.

Admission to Rehabilitation programs is by referral to Special Services in accordance with procedures laid down in district policy.

An Admissions Committee consisting of the Supervisor of Special Services (or delegate), one representative from the referring school, two representatives of the receiving school, and the parents, reviews the referral. Admission may occur at any time during the school year.
Subject: SPECIAL SERVICES (CLASS SIZE)

Class size Policy #5022 indicates a maximum size of Special Classes to be 15. There are certain types of Special Classes, however, which cannot be operated with efficiency unless the maximum class size is considerably less than 15.

The following is a realistic guide to Special Education Class maximum size:

<table>
<thead>
<tr>
<th>Programmes:</th>
<th>Maximum</th>
<th>Optimum</th>
</tr>
</thead>
<tbody>
<tr>
<td>E.M.A. Programmes:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary</td>
<td>15</td>
<td>(optimal 12-13)</td>
</tr>
<tr>
<td>Intermediate</td>
<td>10</td>
<td>(optimal 8)</td>
</tr>
<tr>
<td>Primary</td>
<td>8</td>
<td>(optimal 6)</td>
</tr>
<tr>
<td>Adaptation Programmes:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary</td>
<td>15</td>
<td>(optimal 12-13)</td>
</tr>
<tr>
<td>A.L.E.</td>
<td>20</td>
<td>(optimal 18)</td>
</tr>
<tr>
<td>O.H. Programmes &amp; Language Disabilities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intermediate</td>
<td>10</td>
<td>(optimal 8)</td>
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<tr>
<td>Primary</td>
<td>8</td>
<td>(optimal 6)</td>
</tr>
<tr>
<td>T.M.R. Programmes:</td>
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</tr>
<tr>
<td>Senior</td>
<td>10</td>
<td>(optimal 7)</td>
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<tr>
<td>Intermediate</td>
<td>8</td>
<td>(optimal 6)</td>
</tr>
<tr>
<td>Primary</td>
<td>7</td>
<td>(optimal 6)</td>
</tr>
<tr>
<td>Integrated Learning Disabilities:</td>
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<tr>
<td>Multi-handicapped and Autistic - All levels</td>
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<td>(optimal 3)</td>
</tr>
<tr>
<td>Profoundly Deaf (T.C.)</td>
<td>5</td>
<td>(optimal 4)</td>
</tr>
</tbody>
</table>
C. Description of Programs for Emotionally Disturbed Children

1. CLASS FOR SEVERE BEHAVIOURAL PROBLEMS
   QUALICUM BEACH MIDDLE SCHOOL
   October 1980

A. Goal
   To provide a behaviour management and academic program which is intended to result in the integration of students with a history of severe behavioural problems back into regular classes.

B. Objectives
   1. To offer a behaviour program designed to reduce inappropriate behaviours and to encourage acceptable ones.
   2. To design individual education programs for each student in the core academic subjects.
   3. To integrate students with their peers into physical education, industrial education/home economics/design craft and elective programs as soon as possible.
   4. To accommodate within a given year on a rotating basis a minimum of 4 to a maximum of 18 pupils with no more than 6 enrolled at any given time.

C. Rationale
   It is felt the objectives can be met by providing a setting with:
   1. program flexibility;
   2. individualization of instruction;
   3. adequate counselling potential;
   4. a potential to offer increasing opportunities for self responsibility;
   5. opportunity for good peer group relationships.
D. Criteria For Entry

Potential candidates will be selected through a prescribed process.

(a) Application for program admission will be initiated by referring school, signed by parent and forwarded to principal of Qualicum Middle School.

(b) Parents will meet with the principal of Qualicum Middle School and agree upon an appropriate means for home-school coordination. Parental contact with the teacher and aide will be required. This can be undertaken in one of the following ways:
   1. Parent visits school minimum 3 times per week. This can usually be combined with dropping off or picking up child.
   2. Daily reporting form taken home, signed by parent and returned by pupil. Parents take part in a weekly meeting.
   3. Daily phone call by parent. Parents take part in weekly meeting.

(c) Complete assessment carried out by a psychologist. Principal will refer applicant for psychological assessment.

(d) Advisory Committee meets and final selection is made.

E. Advisory Committee

A Behavioural Program Advisory Committee will be established to provide input and guidance in the overall operation of the program. It will also function as a Screening Committee.

This Committee will be comprised of the following: Coordinator of Special Education, principal of receiving school (Chairman), program teacher, psychologist from Mental Health Unit and referring teacher or principal.
F. Program Outline

The behavioural program is a District program. Pupils considered for participation will generally be between the ages of 10 and 14. Exceptions to this may be made on the basis of need. The program will use a continuous intake and exit procedure. Ideally pupils should be integrated into regular school electives 50% of their school time. The program teacher shall have time free from his/her teaching duties in order to monitor pupils' abilities to cope in regular classes. The program teacher shall also have time free from his/her teaching duties in order to do follow-up with pupils who have been re-integrated into regular programs.

G. Staffing

This program shall be staffed by one full time teacher as well as one teacher aide or Child Care Worker.

2. REHABILITATION PROGRAM

GRANISLE

I. General Aim

The purpose of the program is to rehabilitate adolescents identified as being unable to function successfully within the regular school program.

II. Children to be served under the social services within schools are described as follows:

(a) male or female child up to 19 years of age
(b) children who may be moderately disturbed or who have displayed delinquent tendencies and whose disturbed or delinquent behavior is amenable to treatment within the community.
More particularly the children to be served are:

(1) Children with learning difficulties, behavior problems and social handicaps, unable to function in the regular classroom.

(2) Potential drop-outs and drop-out recovery.

(3) Age range 9 - 18 both sexes

(4) Mainly grades 8, 9 and 10

(5) Initial intake estimated at 6 and the average class size expected to be 8 or 10 students.

III Specific Objectives

Academic:

(1) To provide an opportunity for potential drop-outs and drop-outs to explore additional choices open to them through education as vocational planning.

(2) To diagnose, as required, and provide remediation for students who may consider re-entry to a secondary school.

(3) To interpret to parents the rationals, planning and development of their child's program on a regular basis.

Social:

(1) Provide family counselling when necessary

(2) Modify social behavior patterns and provide students with "life skills" necessary to function in a regular school, society and the work field.

(3) To involve community agencies in the delivering of appropriate and necessary family services.
Vocational:

(1) To assess student's vocational interests and abilities.

(2) To involve students in mini-courses, when possible.

(3) Provide a work experience program to supplement school and vocational interests.

IV Program Components

(1) Regular school work:

This includes Mathematics and English, following as closely as possible standard curriculum and texts used in secondary schools.

(2) Remedial:

A prescriptive learning assistance program based on ability. Materials, method and approach will be adapted to student's level of ability.

(3) Life Skills:

Students will learn the basic life skills necessary to survive in society. These include skills in 5 areas:

   (1) Community skills
   (2) Consumer skills
   (3) Personal/Social skills
   (4) Reading skills
   (5) Vocational exploration

(4) Work Experience:

Students will be involved in individual and group work projects within the school and in the community.

After sufficient preparation, some students will be put in a job situation to get first-hand experience in the working world.
NOTE - The guidelines to be followed for the work experience program have been established in the Career Exploration Handbook 1979-80 for School District #55.

(5) Communication:
- Involvement with parents and community services is necessary for this program to function.

(6) Recreational:
- Field Trips
- Skating
- Sports
- Camping
- Arts/Crafts

V 1. The following could recommend that a student be placed in the rehabilitation class:
(a) Principal, teachers
(b) Human Resources
(c) Parents
(d) Student

2. Referral Form is completed.

3. Referred student is assessed prior to being placed in program.

Factors considered in assessing student are as follows:
(a) Student must fit into category of students to be served under social services within schools. (Refer to Para. II for details).
(b) Consultation with parents is necessary.
VI. Evaluation Procedures:
The following methods will be used in evaluating students' progress:

1. Student records of progress
2. Staff - student conferences
3. Self-evaluation
4. Case conferences
5. Testing - vocational
   - ability, achievement
   - diagnostic

3. PROGRAMS FOR CHILDREN WITH SEVERE LEARNING PROBLEMS:

SPECIAL REMEDIAL CLASSES FOR BEHAVIOUR DISORDERED CHILDREN:

A. Program Description

Nine Special Remedial Classes have been established in Vancouver schools for pupils who are socially maladjusted, emotionally disturbed, or behaviourally disordered to the extent that they cannot be accommodated in a regular class setting.

One teacher and one child care worker or staff assistant, function in a self-contained structured setting with an enrolment of ten students. Class dispersion includes:
- two primary classes
- three intermediate classes
- three senior classes
- one secondary class.

Program emphasis is on the students' emotional and/or behavioural needs through an academic focus.

B. Program Objectives

Special remedial classes can offer the greatest potential for successful reintegration of its students by coordinating the educational
and social behavioural aspects of the student's life in an individually planned way with the goal of transmitting academic, behavioural, social and general skill abilities retained as its focus.

**Academic**

- To individualize programs in order that educational progress is made as quickly as possible.
- To develop systematic cognitive skills toward problem solving.
- To regularly assess the progress of the students and the program.

**Social/Emotional**

- To develop a basis of trust so that the students may understand and communicate their feelings.
- To help the student develop social communicative skills.
- To help the students clarify their own values and feelings.
- To help the student develop appropriate emotional responses.
- To aid in the positive integration of the student especially during free time and working toward participation in extra curricular and community programs.

**Behavioural**

- To help the students shift from a reliance on external support and discipline to internal self-reliance and discipline.
- To develop behavioural management systems and counselling procedures that will steer the student toward self-actualization.
- To provide the assistance needed to assure steady attendance.

**Transitional Liaison**

- To inform and co-ordinate the home and outside workers with the school program so that contradictions and lapses do not occur.
- To act as advisor to the student and the school (staff, administration and other students) when problems between them arise.
- To prepare a long range plan, worked out with the involvement of
the student and his/her guardians, to facilitate integration into regular school classes, pre-employment programs, job training programs or the work force.
- To aid in the transition period between the Student Development Centre and involvement in a new program.

C. Referral Procedures

School Based Team to Central Screening
- Psychiatric consultation is usually requested.

D. Evaluation

The progress of each student in the special program for behaviour disorders is evaluated on an ongoing basis by the school based team and is reviewed monthly by the consultative team. A review with Special Education Supervisory Staff will be arranged in April or May of each year to consider recommendations for alternate placements.

At the evaluation meeting, the student's program and placement are discussed in detail. Following this discussion, recommendations are made which may include:
- continue present program and placement
- modify existing program
- begin an integration process (return to regular grade on a part-time basis)
- return to regular grade on a trial basis (with ongoing monitoring by Special Education personnel)
- recommend treatment support or home instruction or, referral to the Ministry of Human Resources
- refer to Central Screening for consideration of alternative Special Education placement.
4. PROGRAMS FOR CHILDREN WITH SEVERE BEHAVIOUR DISORDERS

OSLER OBSERVATION CLASS

A. Program Objectives

The intent of this class is to provide a longer term observation of a child for whom appropriate placement is difficult to determine. The desired stay is from three to five months.

The Observation Team meets on a monthly basis to review each child and includes:
- a teacher trained in observation techniques and academic instruction on an individualized basis;
- a child psychiatrist
- a child paediatrician with an interest in neurology and auditory difficulties
- the Special Education Consultant (Vancouver School Board)
- the school psychologist
- the area speech and hearing specialist
- the principal

B. Basic Objectives

- to determine levels of functioning and modes of academic learning.
- to provide an individualized academic program.
- to evaluate neurological, sensory or health needs.
- to evaluate emotional/social needs offering support to child and parents.
- to observe peer interaction as child integrates into other classrooms.

Evaluation Procedures

Each child is reviewed on an ongoing basis through various observations, and directions from the Consultative Team which meets to review each child on a monthly basis.
When the Team considers that all aspects of observations are completed they present the information and recommendations for placement to Central Screening following the usual procedures.

5. PROGRAMS FOR CHILDREN WITH SEVERE BEHAVIOUR DISORDERS

(Continuing Program)

EAST 1A - (Vancouver General Hospital Psychiatric Assessment Ward)

A. Program Description

The Vancouver School Board provides a teacher for the Child Psychiatric Assessment Center at the Vancouver General Hospital. This is a provincial resource for elementary aged children who exhibit severe emotional handicaps. The team works with approximately 80 students within the school year. Students reside within the hospital from two weeks to three months.

B. Program Objectives

Role of the teacher

As part of the psychiatric team the teacher:

- is a full-time employee of the Vancouver School Board with a background in regular classroom settings as well as Special Education experience.
- takes part as an active participant of the East 1A team.
- attends and participates in Ward Rounds and Conferences discussing the assessment findings and making recommendations as to placement and management on discharge.
- may be requested by the Senior Therapist to discuss educational findings directly with the parents in the discharge interview.
- makes contact with the Educational people involved with the child. Organizes educational personnel with a vested interest in the child to come to a planned Conference; and to include those to be involved in the future.
When the Team considers that all aspects of observations are completed they present the information and recommendations for placement to Central Screening following the usual procedures.

5. PROGRAMS FOR CHILDREN WITH SEVERE BEHAVIOUR DISORDERS

(Continuing Program)

EAST 1A - (Vancouver General Hospital Psychiatric Assessment Ward)

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Role of the teacher

As part of the psychiatric team the teacher:

- is a full-time employee of the Vancouver School Board with a background in regular classroom settings as well as Special Education experience.
- Takes part as an active participant of the East 1A team.
- Attends and participates in Ward Rounds and Conferences discussing the assessment findings and making recommendations as to placement and management on discharge.
- May be requested by the Senior Therapist to discuss educational findings directly with the parents in the discharge interview.
- Makes contact with the Educational people involved with the child. Organizes educational personnel with a vested interest in the child to come to a planned Conference; and to include those to be involved in the future.
- Contacts the school to inform them precisely when to expect the child to return.
- Organizes the school program on the unit; using the Nursing staff to assist her when necessary. One staff member is assigned to the classroom daily. She is to assign what assistance she expects from that staff member.
- Becomes aware of the individual histories and careplans so that there can be consistency in the behaviour management program, and set limits accordingly. Nursing staff is used as a back up, so that the classroom is not disrupted.
- Provides individual assessments for each child. These include Academic as well as social skills. When assessments are made, both formal and informal tests are used.
- Provides a written report, which is attached to each medical chart and is included in the discharge summary.
- Gives a brief report each day to be passed on to the next shift.
- Considers all aspects of the function of the unit and contributes accordingly. Ideas for changes and improvements are presented as an active member in maintaining a therapeutic milieu for the children.
- Attends in-service education programs whenever possible to increase the general knowledge of Child Psychiatry.

C. Placement and Evaluation is determined by hospital procedures.
6. RESIDENTIAL PROGRAMS
(Continuing Programs)

CHILDREN'S FOUNDATION

The Children's Foundation is a residential treatment resource provided by the Ministry of Human Resources for the treatment of behaviour disordered children of elementary school age and their families.

The Vancouver School Board provides the educational components for the two classrooms. Maximum school enrollment is eighteen.

The Center has a main building housing the classrooms, and four cottages which house a treatment team comprised of a cottage supervisor and five childcare counsellors. Each cottage has access to a family consultant as well as the availability of a psychiatrist. Programs initiated in the classroom are supported and reinforced in the residential setting.

A. Program Description

The rationale of the classroom is that behaviour is subject to environmental control and can be changed. With a change in behaviour there is a concomitant increase in academic skills, given that a student is taught at his appropriate level. Interventions become successful by focusing directly on the behaviour of the child or by modifying teacher and/or peer behaviour.

Students are presented with diagnostic academic screening assessments and prescriptive teaching methods are designed and implemented.

A classroom contract system and "natural consequences" are used for behaviour management. A child must progress through five specific levels before integration begins back at the home school.

The child's entire day is monitored by structure, set limitations, consistent discipline and much positive reinforcement.
B. **Basic Objectives include:** to provide:
   - Behaviour modification of the student.
   - Parent training and support.
   - Success and confidence with the development of a secure self image.
   - Development of non-acquired academic skills.
   - Successful integration into a community school.

C. **Referral Procedures**
   - Initially the school based team, a psychiatrist and/or Central Screening may recommend placement in this residential treatment resource.
   - In consultation with the teachers, and the Children's Foundation team, the Senior Staff Committee decides if a student is accepted for placement.
   - Because the program is funded by The Ministry of Human Resources a social worker must make the referral for a child's admission to the program.
   - The program is designed to assist in improving parenting skills and parents are expected to cooperate.

D. **Evaluation**
   Once remediation of skills and behaviour are modified to a specified criteria, a gradual integration process begins. The school based team at Beaconsfield School and the support staff from Children's Foundation continue to add to the process on a daily basis, slowly withdrawing as the child becomes independent.
7. PROGRAMS IN TREATMENT CENTRES  
(Joyce Center)

A. Program Description

This is a sister program to Children's Foundation for students age thirteen to seventeen.

Students enrolled in this residential program are considered delinquent and/or behaviour disordered children who have usually had difficulty in other treatment resources.

Two Vancouver School Board teachers provide the educational component for approximately twenty adolescents. This is however, a Ministry of Human Resources Program.

B. Program Objectives

- to provide behaviour modification of the student.
- to provide parent training and support.
- to build success and confidence with the development of a secure self-image.
- to develop academic skills.
- to initiate and support successful integration into a community school.

C. Referral Procedures

Referral must be made by a social worker assigned to the child. Such a referral may be recommended to the social worker from Vancouver School Board Central Screening.

D. Evaluation

Students are usually enrolled for six months to a year with integration procedures carefully designed for placement in school settings and in many instances foster homes. A social worker will follow up each child's progress for at least six months.
8. PROGRAMS IN TREATMENT CENTERS
(Maywood Home)

A. Program Description

The Salvation Army provides a home for adolescent expectant mothers. This is a provincial resource for which the Vancouver School Board provides one teacher. The home can accommodate thirty residents at one time. One of the requirements is that each girl must attend school even if she has not been attending in the past. The majority of students are enrolled in correspondence courses.

Programming is extensive and offers:
- Pre-natal training and counselling offered on a daily basis.
- Swimming as an important part of the daily exercise program.
- The girls have the responsibility of sharing in the daily upkeep of the home.
- An indepth arts and crafts program staffed by Salvation Army staff and volunteers offers to provide productive leisure time activities.

B. Evaluation

Students are assessed academically and programs are provided. For some courses the girls attend Churchill Secondary School which is in close proximity. The English, Commerce, and Science Departments correct assignments and arrange for special training sessions or lab demonstrations and set exams for the students who are not on correspondence courses. Credits are granted to the successful students.

Placement terminates when the student's baby is born. With permission, the teacher contacts the home school to offer assistance with the most appropriate transition to regular schools.

Transcripts may be forwarded from Churchill School.
9. CLOSED THERAPEUTIC CENTRE

A. Program Description

This provincial resource center is to be established by the four Ministries - Education, Health, Human Resources and Attorney General, for pre-delinquent and delinquent students.

While criteria, descriptions, placement and referral procedures have not as yet been determined, Vancouver has been requested to provide the educational component for the program. The program is to be available in 1980 September. One approval is requested for now.

10. AUTISTIC
(Continuing Programs)

A. Program Description

Special Programs (Autistic) are designed for autistic or autistic-like children who exhibit a disability in:
- the rate of appearance of physical, social and language skills.
- responding to sensations in an abnormal way.
- speech and language which may be delayed or absent.
- relating to people, objects and events in a normal way.

In Vancouver the Developmental Center at Lord Tennyson Elementary School is the elementary training center for autistic students who require that structured setting. Autistic students are not housed together because of their label but rather according to program needs. These children are placed throughout the school system from Oakridge School, to special class and regular class settings dependent upon their need. Personal Attendants are attached to the Development Program at Tennyson School.
B. Objectives of Program

- To provide individualized goal-oriented programs with a heavy emphasis on behaviour modification procedures.

- To design approaches to remediate or control:
  (a) self-stimulation behaviour
  (b) inappropriate language parroting and perseveration
  (c) eye contact
  (d) abnormal ways of relating to people, objects, and events
  (e) resistance to change
  (f) over-selective attention

- To provide a curriculum which addresses language, motor, academics, life skills, self help and pre-vocational skills designed with sequential and behavioural task analysis, emphasizing marketable work skills.

C. Referral Procedures

Children are usually referred to Central Screening from Laurel House or Special Pre-Schools Programs.

D. Evaluation is conducted through monthly consultative meetings—school based team meetings and regular parent meetings.
The Vancouver School Board has a number of alternative rehabilitation programs which are organized to meet specific educational and social needs of a minority group of students. These alternative programs are usually organized in small units of approximately twenty students and located near a secondary school or off-campus site. Each of these programs is responsible to the administration of the nearby secondary school.

The alternative rehabilitation programs are organized to provide more help for students who are experiencing personal difficulties and may have to drop out of school. Admission to these programs is through program teams which include the principal, teacher, child-care workers, Vancouver School Board personnel and the Ministry of Human Resources personnel.

The staffing of each unit of the program consists of a Vancouver School Board teacher, staff assistant and a child-care worker supplied by the Ministry of Human Resources or a probation assistant from the Attorney General's department.

The programs generally concentrate on basic academic and social skills. These programs try to make it possible for the student to re-enter the school system or proceed to further education, training or employment.
ALTERNATIVE REHABILITATION PROGRAMS

ALTERNATIVE PROGRAM
Phone Number
HOME SCHOOL
Phone Number
STAFF

8J-9J
255-9371
Britannia Secondary
255-9371
1 Teacher
1 Staff Assistant
1 Child Care Worker

PORTABLE CLASSROOM ON SCHOOL GROUNDS.
LIMITED TO 20 STUDENTS AGES 13 TO 16.
1001 COTTON DR.

OUTREACH
689-3211
Britannia Secondary
255-9371
2 Teachers
0 Staff Assistants
2 Child Care Workers

FIRST UNITED CHURCH,
LIMITED TO 30 STUDENTS AGES 13 TO 17.
320 E. HASTINGS ST.
ENROLLMENT INFORMATION

108 COMMERCIAL DR., LIMITED TO 20 STUDENTS AGES 13 TO 16.

PROGRAM SUMMARY

Major emphasis on social development is achieved in part through basic skills upgrading. A personal interest is taken in each student to channel the common human qualities of courage, humor, spontaneity, independence, individuality, vulnerability and the desire to learn and to know in more positive directions.

Emphasis is placed on basic skill upgrading in English and mathematics and personal development. Native studies and life skills are also prominent in the curriculum.

English, mathematics and social studies are emphasized but time is devoted to physical education and special interest activities, such as photography and various crafts.
**ADDRESS and FACILITIES DESCRIPTION**

<table>
<thead>
<tr>
<th>School</th>
<th>Address</th>
<th>Enrolment Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Byng Satellite</td>
<td>4595 west 8th Avenue, Large.</td>
<td>Limited to 20 Ages 13 to 16</td>
</tr>
<tr>
<td></td>
<td>classroom area, lounge, gym and office.</td>
<td>Minimum grade 6 equivalent</td>
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<td></td>
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<tr>
<td>Eastside Program</td>
<td>3435 Porter St.</td>
<td>Limited to 40 Ages 14 to 15</td>
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<tr>
<td>Total Education</td>
<td>5 Portables on 557 West 12th</td>
<td>Limited to 92 Grades 8 to 12</td>
</tr>
<tr>
<td></td>
<td>Also a farm at Powell Lake, a restaurant at 4th &amp; Burrard</td>
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</tbody>
</table>

**PROGRAM SUMMARY**

- Emphasis is on mathematics, English and Social Studies with classes offered in communications, self awareness and the appreciation of the world through its phenomena. Students are encouraged to seek part-time employment with the staff, counselling in job seeking skills where possible.

- Basic skills, especially English and math are stressed along with the teaching of world awareness, improvement of health, development of constructive leisure time activities and the improvement of students’ interpersonal relationships with peers and adults. Assistance is provided in planning for further education or for entering the workforce.

- Provides a program that will enable students who have dropped out of school to re-enter and complete their academic requirements for grade 12. This program attempts to overcome (academic, social, or emotional) difficulties that have caused the students to quit school or that may cause them to leave once more. The program includes:
  - a basic English tutoring program;
  - an intensive counselling program;
  - work experience, a job finding program;
  - meaningful curriculum materials which are directed towards unsatisfied students with low vocabularies and short attention spans.
<table>
<thead>
<tr>
<th>ALTERNATIVE PROGRAM</th>
<th>ADDRESS and FACILITIES DESCRIPTION</th>
<th>ENROLMENT INFORMATION</th>
<th>PROGRAM SUMMARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>OK West</td>
<td>4343 Fraser St, Classroom, individual study &amp; science area, food preparation area</td>
<td>Limited to 20</td>
<td>Course work includes grades 8, 9, and 10 with an emphasis on skill development. English, social studies, general math, physical education and guidance, along with self concept and social development assistance.</td>
</tr>
<tr>
<td>873-6727</td>
<td>John Oliver 327-8341</td>
<td>Up to grade 10 Program participation - no more than two years</td>
<td></td>
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<tr>
<td>1 Teacher</td>
<td>1 Staff Assistant 1 Child Care Worker</td>
<td></td>
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<tr>
<td></td>
<td>3495 Kingsway, Limited to 20 Ages 13 to 15 New students are always accepted on a one month trial basis if space is available</td>
<td>The program includes English, math, social studies, physical education, art or typing, general knowledge and a life skills course with regular individual and group counselling sessions. A point system is maintained where students must earn a minimum number of points each week. Goals of the program are: - to prepare students to return to the regular school; - to begin employment training or to enter the job market.</td>
<td></td>
</tr>
<tr>
<td>OK East</td>
<td>438-0818, Killarney Secondary, 435-8121</td>
<td>1 Teacher 1 Staff Assistant 1 Child Care Worker</td>
<td></td>
</tr>
</tbody>
</table>
ALTERNATIVE PROGRAM

ADDRESS

STAFF

FACILITIES

ENROLMENT

DESCRIPTION

INFORMATION

This program was established to retain native Indian students during crucial years of 12 to 15. It acts as a bridge back into the school system, upgrading basic skills, focusing on native Indian studies, fostering pride and knowledge in the rich native Indian cultural heritage. It develops an understanding of how the urban environment and its uniqueness makes demands on people, and develops the adaptive skills for successful survival in the urban environment. It also develops a positive self-concept by emphasizing native Indian culture. Chinook (to teach) or (to learn)
<table>
<thead>
<tr>
<th>ALTERNATIVE PROGRAM</th>
<th>ADDRESS and FACILITIES</th>
<th>ENROLMENT INFORMATION</th>
<th>PROGRAM SUMMARY</th>
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</thead>
<tbody>
<tr>
<td><strong>HOME SCHOOL</strong></td>
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<td></td>
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<tr>
<td><strong>STAFF</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kitsilano Secondary</td>
<td>3355 West Broadway</td>
<td>Limited to 22</td>
<td>Progress is encouraged in the basic skills toward grade level completion; or job training. Job consideration is encouraged by individual discussion, field trips, films and basic skill exercises. The program also attempts to normalize the teenager's life and social integration in all ways possible.</td>
</tr>
<tr>
<td>1 Teacher</td>
<td></td>
<td>Must be referred by</td>
<td></td>
</tr>
<tr>
<td>1 Staff Assistant</td>
<td></td>
<td>Ministry of Human</td>
<td></td>
</tr>
<tr>
<td>1 Child Care Worker</td>
<td></td>
<td>Resources</td>
<td></td>
</tr>
<tr>
<td>Vinery</td>
<td>2725 Fir St.</td>
<td>Limited to 22</td>
<td>Individualized academic courses are offered in math, English with an emphasis on life skills and social development through recreation, arts and counselling. Vocational planning is provided where appropriate. Small group instruction is practised here.</td>
</tr>
<tr>
<td>1 Teacher</td>
<td></td>
<td>Ages 13 to 17</td>
<td></td>
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<tr>
<td>1 Staff Assistant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Child Care Worker</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step Up</td>
<td>550 West 10th</td>
<td>Limited to 55</td>
<td>Basic academic skills of reading, writing and arithmetic are offered to those who have been judged delinquent. Individual programs are taught on a one-to-one basis within a very structured program to ensure success in all social and academic situations.</td>
</tr>
<tr>
<td>Kitsilano Secondary</td>
<td>2 teacher, 3 staff</td>
<td>Ages 13 to 17</td>
<td></td>
</tr>
<tr>
<td>3 Staff Assistants</td>
<td>3 probation assistants</td>
<td>Must be referred by</td>
<td></td>
</tr>
<tr>
<td>3 Probation Assistants</td>
<td></td>
<td>probation officers</td>
<td></td>
</tr>
</tbody>
</table>
ALTERNATIVE PROGRAM
Phone Number
HOME SCHOOL
Phone Number
STAFF

Tupper Bridge
874-2423
Sir Charles Tupper
874-9131
1 Teacher
1 Staff Assistant
1 Child Care Worker

Riley Park
876-3016
Sir Charles Tupper
874-9131
1 Teacher
1 Staff Assistant
1 Child Care Worker
1 Social Worker for Human Relations Class

ADDRESS

419 E. 24th
Portable on campus.

4370 Sophia St
Basement of Mountain View United Church

FACILITIES

Limited to 20
Ages 13 to 15
for those who haven't passed grade 8.

Limited to 20
Ages 15 to 17
Most have been out of school for 6 months to a year.

PROGRAM SUMMARY

This program offers credit in the basic grade eight academic courses as well as art, cooking and P.E., plus individualized instruction in the humanities along with the acceptance of responsibility. Clear expectations are set for attendance, punctuality, behaviour and work completion.

A personalized relationship with the students and individualized learning underly much of this program. One goal is to break out of the pattern of failure. Achievement is based on completion. The course of study is relevant to the immediate and future needs of the students in their relations with peers, family, fellow workers and society. Local community involvement is also encouraged to aid students in developing their interests.
ALTERNATIVE PROGRAM

Phone Number
HOME SCHOOL
Phone Number
STAFF

Sunrise East
253-0512
Vancouver Technical
255-2644
2 Teachers
1 Staff Assistant
2 Child Care Workers

2543 Renfrew St. Limited to 30
Lower floor of Grades 8 to 10
a residential duplex.

ADDRESS
and FACILITIES
ENROLMENT
DESCRIPTION
INFORMATION

PROGRAM SUMMARY

Academic courses stress basic skills in English, math, science and social studies. These courses are individualized and are based on a careful assessment of each student's achievement level on entry. English has both a developmental component and a remedial component. A tutorial component is also available for those students requiring it. Other aspects of the program relate to students' interests, career plans, their needs for enhanced self esteem and for the acquisition of life skills. The atmosphere of the program is less threatening because of its smaller size, greater informality, closer ties with the community, more integrated program, more individualized curriculum and increased flexibility.
D. Duties of Support Workers

SPECIAL PROGRAMS
School District No. 89 (Shuswap)

I. DUTIES OF THE EDUCATIONAL SUPPORT WORKER - ASSISTING THE DISTRICT SPECIAL COUNSELLOR

General Terms of Reference

Responsible to and working under the direction and supervision of the District Special Counsellor the Educational Support Worker will:

1. Assist Teachers, Administrators, and Special Programs Personnel in the following assigned areas:
   a) Observation and identification of behavioral problems,
   b) Development of behavioral goals and objectives,
   c) Monitoring of these goals and objectives,
   d) Schedules one-to-one sessions, and emphasis on genuine feeling towards self, peers, parents, etc.,
   e) Liaison, through the Learning Assistant Teacher, with classroom teachers in selected cases,
   f) Recording and correlating of behavioral task and relaying of pertinent information to applicable personnel.

2. Work With Small Groups:
   a) Aiding small groups in session to attain understanding of relationships and to foster productive behaviors towards others,
   b) Aiding students, parent(s), and teaching staff in the understanding of juvenile 'Laws and Rights',

120
3. **Assist With Family Liaison:**
   a) Helping parent(s) and students to reach improved understanding and cooperativeness,
   b) Maintenance of regular, on-going, contact with parents,
   c) Helping parent(s) and/or students in the utilization of outside agencies that can assist with problems that are beyond the scope of the educational system.

4. **Assist with Drug and Alcohol Awareness:**
   a) Convey all legitimate information available, and supplied by qualified counsellors pertaining to the adverse effects of drugs and alcohol,
   b) Assist with those who have a dependency, to understand and work through to the source of their symptoms,
   c) Ensure that students and family are aware of the services of the Society of Shuswap Drug and Alcohol Programs (Lakewood Centre).
   d) Assist in referrals to Lakewood Centre.

5. **Liaise with Law Enforcements, and Judicial Agencies that have contact with delinquent students, as assigned;**

6. **Liaise where feasible and practicable with school aged "drop-outs" and their families;**

7. **Attend Meetings and Conferences;**
   a) Be available for regular case reviews with District Special Counsellor,
   b) Attend meetings and conferences as required.

8. **Other Duties and Assignments, As Required, Including:**
   a) Participation in in-service training,
   b) Providing a viable adult model by own actions and behaviors at all times,
   c) Other duties as may be assigned from time to time.
II. GREEN LEAF PROGRAM

EDUCATIONAL SUPPORT WORKER: CHILD CARE

Duties and Responsibilities:

1. Daily Operations of Program
   - Participate in keeping up to date records and files.
   - Participate in enforcing the rules and regulations applicable to Green Leaf.
   - Participate in maintaining proper student behavior.
   - Participate in helping students with their individual problems.
   - Participate in the operation of the daily schedule of activities both social and educational necessary for the efficient functioning of the Green Leaf Program.

2. Home Visitations
   - To assist with an ongoing program of home visits.

3. Work Experience
   - To assist with the planning and proper operation of an effective work experience program.

4. Recreational Activities
   - To assist with the planning and participate in a varied program of life-time recreational activities e.g. bowling, roller skating, hockey, ice-skating, curling, pool, table tennis, etc.
   - To participate in a program emphasizing outdoor survival skills.

5. Special Interest Activities
   - To assist with the planning and development of various special interest activities based upon areas of personal interest and ability, e.g. cooking, handicrafts, sewing, woodwork, etc.

6. Counselling
   - Participate in an ongoing program of individual counselling, small group discussions, and family meetings.
7. **Rehabilitation**  
   - Assist with a developing program of rehabilitation.

8. **Supervision**  
   - To assist with the supervision of noon-hours.  
   - To assist with the supervision of all student activities.

9. **Meetings and Conferences**  
   - Attend all necessary staff meetings and conferences as required.

10. **General**  
    - To participate in whatever inservice training required to upgrade one's competency.

III. **PROPOSED JOB IDENTIFICATION TEACHER AIDE**

**Job Function**

Under the direct supervision of the Teacher, assists by giving special attention to exceptional (handicapped and gifted) children, assists in prepared exercises in basic subjects, supervises children during classroom, lunch breaks, playground sessions, etc., assists children with wash-up, toilet routine, clothing, dressing, eating when required. Prepares and runs off stencils, and dispenses minor first aid.

**Duties and Responsibilities**

Assists the Teacher by giving special attention to handicapped children, either on a one-to-one or on a small group basis.

Assists individual pupils in prepared exercises in basic subjects, such as reading, mathematics, etc.

Supervises child or children during classroom, playground sessions, lunch break, gymasia sessions, field trips, etc.

Assists child with wash-up and toilet routines when necessary.

Assists child with clothing, dressing and eating as required.
Marks pupils' work, assists pupils with corrections.

Prepares specialized teaching aids and materials for handicapped children.

Sets up and operates film projector, tape recorder, visual aids, etc.

Prepares and runs off stencils on duplicating machine.

Prepares and serves snacks when required.

Answers telephone, relays messages, or telephones parents to pass on messages from teacher.

Dispenses minor First Aid.

May assist student in the use of braille equipment.

Operates duplicating machine, film projector, tape recorder, paper cutter, visualtex machine, in the performance of job duties.

The above statements reflect the general details considered necessary to describe the principal functions and duties as required, and shall not be construed as a detailed description of all the work requirements that may be inherent in the job.

IV. CHILD CARE WORKERS

Child Care Worker services at the Cowichan Valley Alternate School are funded by the Ministry of Human Resources through a contract with the Cowichan Family Life Association.

It is the responsibility of the Cowichan Family Life Association to ensure that the terms of the contract are fulfilled.

Job Description

In the performance of their duties, Child Care Workers will work under the supervision of the program directors of the Alternate School. Child Care Workers will work co-operatively with the school personnel in performing the following tasks:
1. The Child Care Workers will co-operate with personnel in the formal education component attached to this program in assisting the child to develop a positive attitude about the learning experience. Responsibilities in this area will include social skills, attitudes, and life skills.

2. Child Care Workers will participate in the work component of the Alternate School Program with the child and other staff in activities, routines, and tasks as might be desired for an assigned period of time. This could also include helping the child in seeking work experience, job placements, and also recreational activities.

3. Child Care Workers should be aware of children's identified psychological, physiological and behavioural problems, and have the skills and knowledge to respond to the child in regard to specific treatment and planning recommendations.

4. When problems in the home are interfering with the child's functioning in the school program, Child Care Worker will meet with the family to assess the situation. If it is determined that this family needs help in understanding the child's emotional and physical needs as perceived by the Alternate School staff, the Child Care Worker may assist them with parenting skills, or encourage them to utilize the appropriate community resources.

5. Other responsibilities of Child Care Workers may include representing the Alternate School in discussions regarding admissions, as a liaison person with other helping agencies, preparation of progress assessments, and program plans.

Job Specification

1. Ability to work independently without supervision and cooperatively with other staff members.

2. Willingness to work flexible hours, to meet needs of the children, parents and school.
3. Experience in motivation and supervision of children.
4. Good health and interest and ability to work in the outdoors.
5. A B.C. Driver's Licence.
6. Qualifications as a Child Care Worker (preferably a B.A. in Child Care), University training in social sciences, and/or extensive experience in the field of Child Care Work.
SURVEY OF THE EDUCATIONAL PROVISIONS FOR, AND
NEEDS OF EMOTIONALLY DISTURBED CHILDREN IN THE ELEMENTARY
AND SECONDARY SCHOOLS OF BRITISH COLUMBIA

NOTE: Where sufficient space has not been left for your comments, please continue on the back of the page or on a separate sheet of paper.

1. Has your school district a definite policy with regard to the education of emotionally disturbed children? If so, what is that policy?
   a) Autistic
   b) Rehabilitation Program
   c) Severe behavior problems
   d) Mild-moderate

2. How does your school district define "emotionally disturbed children"?

3. Do you distinguish for purposes of education, those children whose primary handicap is emotional disturbance from those children whose primary exceptionality is mental retardation, or a learning disability? If so, how?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problem
   d) Mild-moderate
4. When a teacher indicates to a principal, or to specialized school personnel that a pupil exhibits emotionally disturbed behavior, what are the next steps taken in your school district to diagnose the pupil's disability?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-Moderate

5. a) Which services of the following types of specialized school personnel and of personnel outside the school are available to the schools of your district? (Please check):

1) School psychologist
2) Supervisor of special education
3) Special counselor for the district
4) School counselor (secondary)
5) School counselor (elementary)
6) Consultant teachers
7) Child development workers
8) School social worker
9) School nurse
10) School physician
11) Mental health clinic consultant service
6. When the diagnostic study of a child has been completed and the recommendations of specialized school or clinical personnel are available, does a school-based team or planning committee determine what educational plan best meets each emotionally disturbed child's needs?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate

7. a) When it is decided that an emotionally disturbed child needs special services either in a regular or special class, is the matter discussed fully with the child's parents and their consent and cooperation secured?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate
8. Is it your policy to keep an emotionally disturbed child in his regular class if it is possible to meet his needs there effectively by giving extra help to the child and his teacher? Who gives this extra help?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problems
   d) Mild-moderate

Would you remove an emotionally disturbed child from his own class to another regular class in the same school or to a class in another school if the planning committee and/or school-based team considered this advisable?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problems
   d) Mild-moderate

10. If an emotionally disturbed child remains in a regular class, what help is given him and his teacher by the special counselor, the school psychologist, the school counselor, or other specialized school personnel, or by a child guidance or mental health clinic consultant?
11. Do you use (a) paid teacher aides, (b) volunteer aides, to help the teacher of a regular class which has one or more emotionally disturbed children?

<table>
<thead>
<tr>
<th>a) Autistic</th>
<th>Paid Teacher Aides</th>
<th>Volunteer Aides</th>
</tr>
</thead>
<tbody>
<tr>
<td>b) Rehabilitation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Severe behaviour problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Mild/moderate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12. (a) What is your policy with regard to handling "crises" where a pupil becomes very disturbed or disturbing?

<table>
<thead>
<tr>
<th>a) Autistic</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>b) Rehabilitation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Severe behaviour problems</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
(b) If the child is removed from his classroom, to what place in the school is he taken and who accompanies him?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate

(c) Who takes charge of the crisis?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate
13. (a) Do you have in your school system a special class or classes for emotionally disturbed children? (b) If so, how many classes and how many children are there in each class? (c) Are these at the primary, intermediate or secondary level?

<table>
<thead>
<tr>
<th>YES/NO</th>
<th>NUMBER OF CLASSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>P = Primary, I = Intermediate, S = Secondary</td>
<td></td>
</tr>
</tbody>
</table>

- a) Autistic
- b) Rehabilitation
- c) Severe behavior problems
- d) Mild-moderate

14. If you have a special class for emotionally disturbed children, on what basis are the pupils selected for such a class?

- a) Autistic
- b) Rehabilitation
- c) Severe behavior problems
- d) Mild-moderate
15. What help does the special class teacher receive from various types of specialized school personnel or clinic personnel?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problems
   d) Mild-moderate

16. (a) Do you have paid teacher aides in each special class for emotionally disturbed children?
   (a) Autistic  (b) Rehab.  (c) Severe beh. problems  (d) Mild-moderate
   (b) If so, how much is paid per-hour for such service?
   (a) Autistic  (b) Rehab.  (c) Severe beh. problems  (d) Mild-moderate
   (c) What background of education and training do such aides have?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problems
   d) Mild-moderate
(d) Who selects these aides?
   a) Autistic   b) Rehab.   c) Severe beh. problems   d) Mild-moderate

(e) What are their duties?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problems
   d) Mild-moderate

17. (a) Do you have volunteer aides for each special class for emotionally disturbed children? (b) Who selects and supervises these aides?
   a) Autistic   b) Rehab.   c) Severe beh. problems   d) Mild-moderate

   (c) What qualifications of personality and background should such an aide possess?
   a) Autistic   b) Rehab.   c) Severe beh. problems   d) Mild-moderate
18. (a) What name do you use for your special class for emotionally disturbed children? (b) Is the name satisfactory? (c) If not, what name do you suggest? (d) Do members of the school staff or pupils use informal names for the class? (e) If so, what are these?
   a) Autistic   b) Rehab.   c) Severe beh. problems   d) Mild-moderate

   i) Name
   ii) Satisfactory?
   iii) Suggested names.
   iv) Informal names
   v) What is it?

19. (a) In what ways does a special classroom for emotionally disturbed children differ from a regular classroom with respect to physical facilities?

   a) Autistic   b) Rehab.   c) Severe beh. problems   d) Mild-moderate

   (b) Do you reduce the stimuli present in the classroom? If so, how?

   a) Autistic   b) Rehab.   c) Severe beh. problems   d) Mild-moderate
(c) Do you have cubicles or carrels for use of pupils when required? Are these permanent or temporary fixtures in the classroom?

<table>
<thead>
<tr>
<th>Autistic</th>
<th>Cubicles and/or carrels</th>
<th>Temporary and/or permanent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rehab.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild-Moderate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

20. Is there a general teaching method recommended by your district for working with emotionally disturbed children? If so, what is it?

a) Autistic

b) Rehab.

c) Severe behavior problems

d) Mild-moderate

21. Who selects special class teachers for the emotionally disturbed?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate

22. What type and degree of training is required of special class teachers?

a) Autistic
23. If you have special provisions for emotionally disturbed children whether in regular or special classes, who supervises this work?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problems
   d) Mild-moderate

24. Is the compatibility of individual children taken into account in placing them in a special class, e.g., two highly aggressive youngsters in one class may create an impossible situation for the teacher?
   a) Autistic
   b) Rehabilitation
   c) Severe behavior problems
   d) Mild-moderate
25. Since authorities usually claim that the number of emotionally disturbed pupils in a special class may vary from four to ten or twelve pupils, who determines the size of a particular special class for the emotionally disturbed in a school?

a) Autistic  b) Rehab.  c) Severe beh. problems  d) Mild-moderate

26. What proportion of your pupils in a special class for emotionally disturbed pupils do you aim to return to a regular class? What proportion actually do return?

a) Autistic  b) Rehab.  c) Severe beh. problems  d) Mild-moderate

27. Is an emotionally disturbed child's regular teacher encouraged to keep track of him after the child has been transferred to a special class? (Please circle, either YES or NO)

a) Autistic  b) Rehab.  c) Severe beh. problems  d) Mild-moderate

28. If a child is placed in a special class located in other than his regular school, what special provision is made for his transportation? Who pays for this? Is there a Ministry of Education grant which wholly or partly covers this expense?

<table>
<thead>
<tr>
<th>TRANSPORTATION</th>
<th>Ministerial Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special provision</td>
<td>Whole Part</td>
</tr>
<tr>
<td>a) Autistic</td>
<td></td>
</tr>
<tr>
<td>b) Rehab.</td>
<td></td>
</tr>
<tr>
<td>c) Severe beh. problems</td>
<td></td>
</tr>
<tr>
<td>d) Mild-moderate</td>
<td></td>
</tr>
</tbody>
</table>
29. If a child requires clinic treatment while in a special class, what steps are taken to ensure that the school principal, the special counsellor, the special class teacher, the school psychologist, the supervisor of special education or other appropriate school personnel are full and active partners with the clinic personnel in the total treatment of the child?

a) Autistic

b) Rehab.

c) Severe behavior problems

d) Mild-moderate

30. In the event of the child being treated in a clinic while attending classes in the school, do clinic personnel come to the school to observe the procedures in regular and special classes and to study the emotionally disturbed child in his school setting? (Circle one)

a) Autistic  b) Rehab.  c) Severe beh. problems  d) Mild-moderate

YES OR NO  YES OR NO  YES OR NO  YES OR NO

31. Is adequate provision made for evaluation at regular intervals of the services provided for emotionally disturbed children in a regular or special class in your district? Is this on a research basis or by subjective evaluation? Who makes such evaluations?

a) Autistic

b) Rehab.

c) Severe behavior problems

d) Mild-moderate
32. When a child who has been in a special class is returned to a regular class, what provision is made for follow-up work and special help in the child's readjustment?

a) Autistic
b) Rehab.

c) Severe beh. problems
d) Mild-moderate

33. If a child is removed from a regular school to a special day or residential school, to what degree is his district school board responsible for his education?

a) Autistic  b) Rehab.  c) Severe beh. problems  d) Mild-moderate

34. When an emotionally disturbed child has been transferred to such a special day or residential school, what arrangements are made for contact between the teachers and specialized school personnel of the child's regular school and the staff of the day or residential school or treatment centre?

a) Autistic  b) Rehab.  c) Severe beh. problems  d) Mild-moderate

35. If a child is being discharged from a special school or treatment centre to return to a regular school, what arrangements are made to make the transition a maximally effective one?

a) Autistic
35. (continued)

b) Rehab.

c) Severe behavior problems

d) Mild-moderate

36. Does your district provide the opportunity of in-service education for teachers in which the mental health implications of teaching methods and administration practices can be discussed? Are such meetings held in school time?

IN-SERVICE SCHOOL TIME BY WHOM

a) Autistic

b) Rehab.

c) Severe behavior problems

c) Mild-moderate

37. What opportunity is provided for special class teachers and other specialized personnel to acquaint the teachers of your district and the public with the needs of emotionally disturbed children and attempts to meet these needs?
38. What additional services do you think would best meet the needs of emotionally disturbed children in your district?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate

39. In the 1960 guidelines the Learning Assistance Centre is redefined as not to include the student whose primary exceptionality is behavioral or emotional. Where do you see emotionally disturbed children who had received services in the LAC in the future?

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate
40. With the addition of funding for elementary rehabilitation programs in this year’s guidelines, (a) how do you expect these programs to function? (b) what kind of child would be eligible for the program?

If all educational services have been exhausted in finding services for an emotionally disturbed child what other resources are available in your district? (Ministry of Health, Human Resources, Attorney General Department, interministerial committee – local, regional, provincial, other (please specify)).

a) Autistic

b) Rehabilitation

c) Severe behavior problems

d) Mild-moderate
41. Are there any differences with reference to the above procedures when you compare elementary and secondary school children? If so, please specify what it is, and to which questions does it apply.

<table>
<thead>
<tr>
<th>ELEMENTARY</th>
<th>SECONDARY</th>
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</table>

At 44, 0
Dear Coordinator, Supervisor or Director of Special Education,

Your help and cooperation in filling out this questionnaire will be much appreciated.

The purpose of the questionnaire is to help tease out procedures on dealing with "emotionally disturbed" or "behaviour problem" children in school districts. While the proposed guidelines make mention of autistic children, rehabilitation programs, severely behaviour disordered children, most teachers mention an "other" category of emotionally disturbed children who test their tolerance level. For the purposes of this survey they were labelled as mildly-moderately disturbed.

Essentially we are replicating the study by Laycock and Findley, 1969, of the educational provisions for and needs of emotionally disturbed children in the elementary and secondary schools of British Columbia. When the original study was conducted there were no provincial guidelines for special education concerning the "emotionally disturbed" student. Laycock used the term "emotionally disturbed" to cover the whole range of behaviour problems from mildly to severely disturbed including autistic children.

Now that we have various funding categories and programs you are asked to answer the questions for each one of these categories. Please answer each question as it does apply to:

a) autistic
b) rehabilitation program "type" student
c) severe behaviour problem
d) mildly - moderately disturbed

Definitions from the proposed guidelines:

a) autistic
   Autism is a severely incapacitating life-long developmental disability which typically appears during the first three years of life ... These symptoms are caused by physical disorders of the brain ... They include:
   1) Disturbance in the rate of appearance of physical, social and language skills.
   2) Abnormal response to sensations.
   3) Delay or absence of speech and language.
   4) Abnormal ways of relating to people, objects and events.

b) rehabilitation programs:
   These programs are jointly funded by the Ministry of Human Resources and the Ministry of Education. They are for young people who are experiencing...
great difficulty in school or who have dropped out of school to acquire basic academic and social skills. These programs should enable these young people to re-enter the school system or proceed to further education, training, or employment.

The 1980 guidelines include a category for elementary rehabilitation programs.

c) severe behaviour problems (new in the 1980 guidelines)

Programs for children with severe behaviour problems pertain to those children whose specific behaviour problems are of such a nature that they adversely affect the individual's educational performance. Such behaviour problems include, but are not limited to, excessive fears, explosive reactions, anxieties, withdrawal reactions, perservation, and compulsive reactions. The program focuses on those children whose specific behaviour problems are of such a prolonged severity that they interfere with the learning of the basic skills expected of individuals of similar age, and a severe discrepancy exists between the individual's ability and present level of functioning.

d) Other

This category includes children in addition to those described under a), b), and c) to teachers with their problem behaviours and who are found in the regular classroom.

Kindly return the completed questionnaire to me as soon as possible.

Sincerely,

Maig Caspo, Ph.D.
Associate Professor
Educational Psychology/
Special Education

MC/mb
Enc.