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The study identified themes running through special class programs for the emotionally handicapped, analyzed classroom procedures, and described the teachers' backgrounds, attitudes, and purposes and the students' perceptions of the programs. Initially, 117 public school programs for the emotionally handicapped were located and surveyed by mail; then 54 programs were selected for site visits. Areas surveyed were the origin and operation of the programs, general characteristics of pupils, and classroom conditions and operations. The following conclusions were drawn: pupils, teachers, and observers found positive change as a result of participation, and program types were shown related to changes; specific pattern and uniformity in approach were lacking; school personnel realized that their original program plans required extensive modification and that flexibility was needed; program types differed widely; programs maintained a school related focus; and clinical support and understanding were helpful. The major statistical findings and evaluations are provided. (BW)

Public School Classes for the Emotionally Handicapped: A Research Analysis

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A Project of
The Council for
Exceptional Children, NEA

Public School Classes for the Emotionally Handicapped: A Research Analysis

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There were two groups of collaborators. First were individuals on the research team conducting the site visits. Special local site visit teams operated in California and Hawaii.

Finally, a major contribution was made by those on-the-line workers in the field. Teachers, administrators, psychologists, and others gave most generously of their time. Because of the confidential nature of much of the data, no identifying references have been made.

William C. Morse
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Origin, Nature, and Scope of the Research

Mental illness is recognized as the nation's number one health problem. In recent years, our approach to this problem has undergone a profound shift. Earlier, we were concerned with the treatment of the mentally ill, primarily in large custodial institutions, only when their disturbance had become so profound as to represent a major intrusion upon their lives. Knowledge of mental illness was limited and the treatment methods were confined to custody in a protected setting, and, when it was available, one-to-one psychotherapy. Later, as the spectrum of drug therapies became available, the hope for quicker and more effective treatment was increased. Still more recently, we have come to recognize that treatment of the patient in his normal life situation, with an emphasis upon lifespace management and situational manipulation, is a powerful tool in our efforts for better mental health.

Gradually, the vital importance of the primary social institutions such as the school and the family in preventing and treating emotional problems has been recognized. Primary prevention, early case finding, and treatment in the context of the existing institutional agencies have become of central importance. In this development, the public schools play a key role. The school is a mass agency which cuts across the total population, and thus serves as a gathering place for children upon whom our primary preventive efforts may be focused. Further, the school compels the child's attendance. It has contact with the child over a long period of his life and has a commitment to mental health goals.

Critical manpower shortages in the traditional mental health professions indicate further the need to involve the schools and their personnel in the mental health struggle (Joint Commission on Mental Illness and Health, 1961). But while it is apparent that the schools should be playing a central role in preventive and early remedial efforts, it is by no means so clear just what this role should be (Allinsmith and

Goethals, 1962). Mental health is but one of many competing goals. Even if mental health were the schools' primary function, there is little agreement on how the mental health goal is to be served. Procedures and boundaries are vague and varied; and highly autonomous school systems are developing diverse approaches. We seem sure of little more than the fact that we ought to be doing something.

Many school systems in many states have for a long time been committed to the special class concept as a means of dealing with children who have or who pose special problems. As the schools approach the problem of mental health, it is natural that they will seek to apply a time tested design, that of special classes. But it is important that we recognize that the special class design is not the only one being attempted by the schools. The present study touches upon but one piece of the total puzzle. It is, however, a piece upon which schools are placing increasing stress, and thus one which deserves our careful attention.

Special public school classes for the emotionally handicapped child are a relatively recent development, and typically, the last of the total spectrum of special services. But in another sense, the public schools have been active on behalf of some kinds of emotionally handicapped youngsters for a long time. Delinquent and recalcitrant pupils have given rise to a variety of programs. Some very early public school programs for such children were dynamically oriented, while others were primarily custodial, or even penal. Recent developments represent only an extension of existing concern for children with all kinds of maladjustments: neuroses, psychoses, character disorders, instances of cultural deprivation, failures in socialization, etc.

A surge of mental health activity designed to give relief to regular classes as well as to help the emotionally handicapped themselves is sweeping through the public schools. Experimental programs are proliferating, and the commonest involves the special class concept. But there is little common conceptualization underlying these developments. Designs for the conduct of the special classes range from permissive, relaxed, therapeutic approaches to traditional educational programs in the context of tight controls. Once a class is established, the number of pressures upon the participating personnel and administration to view it as successful are many. Acclamations of success are commonplace. As a parallel development, teacher training institutions are now training special teachers for the emotionally handicapped. Most of these developments have taken place in the context of little "firm" evidence for the utility of the special class design.

The work of Hollister and Goldston (1962) offered a foundation for the present study, and indicated the need for detailed information on

special class programs. The present research attempts to answer the following questions: (a) What are the salient themes that run through programs? (b) What are the classroom practices? (c) What are the results from given styles or approaches? (d) What are the underlying attitudes and purposes in the minds of the teachers? (e) What are the backgrounds of the teachers? (f) How are the programs perceived by the pupils? and (g) Are there deeper strata that characterize these operations which will allow us to understand underlying theoretical orientations?

Originally, the study was intended to gather only descriptive data, but as the design and instrumentation developed, the possibility of attacking certain limited cause and effect problems appeared. Thus, two types of information were collected: (a) descriptions of existing conditions, as seen by teachers, pupils, administrators, and site visitors; and (b) data on past and perceived future status of the children, which allowed for selected probing of program effects. The strokes are broad and introductory, and the intention is to stimulate needed detailed research.

A key problem in identifying and selecting programs for study appeared in the ambiguity of the phrase "emotionally handicapped children." For example, aggressive, acting out, and anti social children may be variously termed delinquent, emotionally disturbed, socially maladjusted, or even culturally deprived. Depending on the setting and the particular history of the program, children who appeared clinically similar in these terms were often assigned to programs with quite different designations. In this research local usage defines the sense of the term emotionally handicapped. By collecting data on each child it was possible to analyze certain things about the meaning of the term emotionally handicapped as the schools defined it.

Identification and Selection of Sample

The first step was to locate all special classes serving the emotionally handicapped which had been defined by local or state authorities throughout the country. Using US Office of Education records and contacts with all state departments of education and/or mental health, a total of 117 public school programs specifically designated for the emotionally handicapped were located. Both changes through time and in method may be reflected by the fact that in 1958, 47 of the 48 states reported programs, while in 1962, only 30 of the 50 claimed to have programs. Some sharp individual decreases are also included in this general decline. Perhaps behind these figures, and underlying the entire development, is the lack of a reasonable definition both of emo-

tionally handicapped and of public school classroom programs. On occasion, there appears to be a willingness to use the term to fill out the categories of special education even though the program is remote in concept or location from the regular school program. There is no doubt that this survey missed many programs which do exist. In the publication, *A Directory of Special Enrollments in Local Public Schools,* some 475 separate programs are identified as serving the "socially and emotionally maladjusted." Certain of these programs listed one, two, or three pupils, and would seem to be a part of the homebound teaching program. Eliminating those programs which serve three pupils or less reduced the total number reported to 306. Among these were a number which appeared to be directed at only social maladjustment or delinquency per se. The total may be further reduced by special school programs which are operated by institutions and agencies other than the public school, including hospitals, foster homes, etc. Nevertheless, it does not seem likely that the 117 represented more than 75 percent of the public school programs for emotionally handicapped.

The second step included a more intensive mail survey of the 117 programs previously identified. Additional facts were obtained about: type and number of children served, history and administrative arrangements in the program, support patterns, goals, personnel involved, estimates of success, etc. On the bases of this information, programs were selected for visitation.

Site visits and intensive data were secured from a total of 54 programs, 74 classrooms, and more than 500 children. This is not a random or statistically representative sample—rather, it represents as many of the states as possible, rural and urban districts, small and large programs, and established and experimental programs. In the end, our sample followed closely the distribution of programs throughout the several states, which, in turn, was closely correlated with national population distribution. Thus, the East and North, Florida, Texas, and California were more heavily represented. The central West and deep South provided smaller numbers of programs. The large metropolitan areas are under-represented. For example, only three classes out of more than sixty which existed in one metropolitan district were visited. However, this was a well established program, and while there was obvious variation in teacher style, etc., the overall program design was the same throughout the system. This departure from a representative sample was in the interests of overall diversity, and in no way reflects on the relative merits of large city versus small county district programs. Site visits and data collection were accomplished from March 1 to June 15, 1963.

The data collection procedures are listed in the following table. Subsequent details of this report will clarify the content of each.

Data Source	*Completed by*	*Type of Material*
1. Preliminary Survey Form	Responsible Administrators	Overall nature of program
2. Supplementary Information Form	Responsible Administrators	Overall nature of program details
3. Schedule A	Pupil with assistance of psychologist or other trained personnel	Perceptions of past school
4. Schedule B		Perceptions of present class
5. Schedule C		Perceptions of future class
6. Schedule D	Teachers	Details of past, present and prognosis re each individual child[a]
7. Schedule E	Teachers	Nature of class as a whole, methods, etc.
8. Schedule F	Site visitor from administrators and teachers	Administration, referral, diagnosis, etc.
9. Schedule G	Site visitor	Ratings of teacher and pupil behavior and practices[b]
10. Narrative Report	Site visitor	Overall impressions, anecdotal material, etc.

[a] Included were symptomatic behavior list of Peterson and Quay (1959); material from Fouracre (1961); Morse, Bloom and Dunn (1961); Cutler and McNeil (1963) and Hollister and Goldston (1962).
[b] Ryans (1960) rating procedure was incorporated here.

Thus, information from a variety of sources made possible a comparison of various points of view on certain salient matters. For example, both teacher and pupil responded to questions concerning the pupil's progress, prognosis, level of control, peer relationships, etc. Similarly, both teacher and administrator told about program goals and successes, the use of diagnostic materials, and diagnostic and referral processes. Finally, the site visitor's observations of teacher style and pupil interaction may be compared to what the teacher said about himself and about the group interaction.

There were obvious limitations in the nature and method of data collection. Time limitations forced a dependency upon retrospective data from both students and teachers. Parts of the instruments were developed on an a priori basis, without known standardization. Test-retest reliability data could not be collected in all cases where such data were desirable. The most disconcerting aspect of the entire study was the lack of adequate records of intelligence and achievement tests.

The fact that it was necessary to utilize several different site visitors introduced another uncontrolled variable. Ryans has demonstrated that training of observers can induce a comfortable degree of inter-rater reliability when his scale is applied to normal classroom situations. However, no comparable evidence existed for typical classrooms and an unknown degree of unreliability was thus introduced into the rating process. Finally, a great deal of the information gathered was of the open ended response variety. One could not anticipate the categories of responses which certain questions produced. This procedure yielded data which were very difficult to analyze by statistical means. Wherever their nature made it feasible, these data were reduced to scores, indices, and rankings. In other instances, a qualitative approach to the data seemed more productive.

2

Origin and Operation of Programs

This section presents the analysis of data from the Supplementary Information Form and from Schedule F, collected by the site visitor.

Basic Impetus for Programs

What underlies the development of a special class for emotionally handicapped children? One fundamental reason is the immense concern held by the public schools for the children for whom they are responsible. But how this basic concern is expressed in a specific instance is quite varied, as illustrated by the following selected quotations:

> Young children were being asked to leave public schools because they could not adjust to the classroom setting. Each year they would return for a trial placement—cause considerable confusion for themselves, their parents, and the teachers—and then be asked to leave again. There seemed to be nothing available which might help their situation.

> . . . to help the child who is having difficulty accept himself and have better feelings toward himself—to have something that will be noncondemning and have a noncensoring attitude toward each child no matter what his problems.

> We just felt that we weren't doing an effective job with quite a large group of pupils, mainly those who had problems around hyperactivity (and) inability to control themselves—we also had many children with normal IQ's who, for one reason or another, were underachievers who couldn't do assignments . . . our program is for these kids, and is structured to help them develop some inner controls.

A basic concern for children seemed to operate in nearly every instance, but a wide range of other forces appeared to be at work in specific cases. One of the most frequent of these was the need to relieve pressure on regular classroom teachers, who often felt that emotionally handicapped children produced such a drain on their own resources that they could not adequately serve the relatively normal children in their charge. While such motives were typically altruistic, sometimes the regular classroom teacher had simply "had it" with aggressive, acting

out children, and wanted more than anything else not to have to deal with them in the regular classroom.

Certain programs were also initiated as a result of the passage of specific state legislation, or under the urging of state educational authorities. Administrators were caught between demands from parents or teachers for the exclusion of such children, and equally strong urgings from special services personnel to provide help and service instead of exclusion. State level directives gave administrators the rationale they needed to resolve such conflicts.

Instances were noted of pressure being brought by mental health personnel outside the schools. Private psychological and psychiatric practitioners, child guidance clinics, and others, recognized that some treatment design which involved more than their individual services, and which would maintain the child in the school setting, was highly desirable. The orientation of such persons is almost universally one of keeping the child in a school or school like setting, and most communities cannot offer such special programs outside the operation of the public school.

One motivational element which often lies hidden behind the actual formal initiation of such programs is the driving zeal of a single dedicated individual who is simply determined that the needs of such children will be met. Certain programs were brought into being almost single-handedly by such individuals, who were sometimes actively opposed, sometimes merely tolerated, and only occasionally met with whole hearted support. The sustaining power behind the continuation of several programs was in fact the devotion of such individuals.

There were also several instances where parent groups generated pressure for the provision of such services. Typically, such parents had children who were disturbed, in treatment, and often excluded from school. Their wish to avoid institutionalization and/or impossibly expensive private care caused them to push the schools, and to express a continuing interest in a program once it was established. In some instances, parental pressure forced classes to be started before the school was really ready, and dissatisfaction on both sides resulted. Closely related to this motivation was one which involved a joint recognition by parents and schools that children who were excluded from school and taught in homebound programs became increasingly withdrawn and apathetic.

Individual teachers played their part in stimulating program development. Some felt a natural empathy toward handicapped children. Others, having grown up in culturally deprived areas, were especially sensitive to the needs of aggressive, lower class children. Still others

found stimulation in reading, workshops, and/or inservice training activities which led them to a recognition of the children's needs and the possibility of doing something about them.

Finally, one or two programs appeared to have emerged from the shock created in both school and community by a particularly dramatic instance of emotional handicap. In one instance, a violent teenage homicidal orgy created the feeling that the school might do something more effective in dealing with such children before their disturbance reached devastating proportions. In another, violent assaultive tendencies in an adolescent boy highlighted the growing number of children in need of special assistance. Other special situations included a dramatic instance of pregnancy in an early adolescent girl, and a highly transient school population which posed special and severe problems to educational personnel.

Program Goals and Aims

Goals were stated very generally, and little difference in program types existed among the many kinds of children served. In planning the development of their programs, very few of the responsible agents sought to draw upon the experience of prototype programs in other areas and many found solace by complaining that the experts could not agree on what was to be done. Most of the planning was entirely *de nouveau,* and agreement upon goals and designs existed only at a very general level. Most program developers felt that their local situations were sufficiently unique so that a specific plan had to be developed to meet their individual needs. Neither the profession of mental health nor that of education offered enough solid conceptualization of psycho-educational problems to allow for a basic common framework of goals, structures, and implementing activity to be developed.

Typically, an important difference in approach existed between the educators and the clinicians. These differences were not always identical with the individual's normal sphere of operation, for we found some strongly education oriented persons working in what were nominally clinical settings, and an equal number of clinicians housed within the walls of educational institutions. In some instances, the difference in point of view was so great that diplomatic relations had been broken off, and one or the other point of view thoroughly dominated the program. More often, of course, continuing efforts at resolving differences and establishing a workable conceptual framework were apparent. The basic problem, however, remains. Neither orientation alone offers a sufficiently meaningful way of dealing with the problems of the child operating in the total psycho-educational complex.

The diffuseness of the goals within many programs was often brought dramatically to light by the divergence in view between two staff members describing the same effort. The overriding consideration was, of course, to help. But who was to help and how was often another question. Diagnostic categories were vague or lacked implications for differential treatment. In one instance it was felt that "the state regulations demanded too psychiatric an orientation to the program." At the other extreme were programs which demanded that all participants be in concurrent individual psychotherapy.

Sometimes, an experimental view dominated, and the programs were recognized as demonstration efforts rather than as solutions per se. The rare program set its goals in terms of a method which had been presented as successful in the literature. But, in the main, there was little uniformity across programs in terms of goals and aims. Neurologically impaired children were included in some programs and specifically excluded from others. Most programs did not try to serve the child in need of institutional care, yet others with similar designs tried to serve very disturbed, autistic, or schizophrenic youngsters. Table I provides a summary of responses to our question, "For what type of child is your program designed?"

TABLE 1

Program Goals—Who Is to Be Served?

($N = 54$)

Type of Pupil	*Percent*
General adjustment difficulties	32
Psychiatrically disturbed—moderate	29
Acting out pupils who disrupt regular class	28
Psychiatrically disturbed—serious	10
Recognized delinquent—antisocial	1
Underachievers, learning difficulties	0
Total	100

The figures in Table 1 represent only first-choice statements. Ninety percent of the programs investigated gave multiple responses to this question, so that the above figures cannot be taken to represent pure program types. Most programs aimed to serve a mixed clientele even at the outset, and, as will be seen later, virtually all served a more heterogeneous population than they originally intended. It appears that, to many, delinquency is still considered as a specific syndrome of behavior not basically allied with emotional handicap, and requires another program style for its effective management. Certain cities actual-

ly ran parallel programs for the two types of difficulties. The lack of emphasis on underachievement and other specific educational handicaps was somewhat surprising. Even though children were not picked primarily for their educational difficulties, these programs did, in fact, serve a large number of children with educational handicaps.

These figures highlight another difficulty, namely, that of problems surrounding the diagnosis of children who eventually participate in such programs. School personnel tend to look for children in the terms that are used in Table 1. These terms are largely behavioral-descriptive, and relate to activities that can actually be seen in operation in the classroom. The kind of child who reaches a special class may well have an underlying difficulty which is more severe than these categories indicate; i.e., his acting out may result from a prepsychotic or psychotic condition, even though it is the behavior rather than the underlying pathology which gets him into the class. Still other acting out children are doubtless neurotic or sociopathic, but again the underlying cause is less important than behavior in his selection. The site visitors came away from many classrooms with the impression that numbers of children were quite disturbed, but that their acting out was the predominant problem so far as the classroom operation was concerned.

Table 2 presents a summary of responses to our question concerning overall program aims as seen by administrators.

TABLE 2

Aims of the Program

Stated Aim	*Percent*
Expedite change in pupils to enable them to return to regular class	54
Foster normal educational achievement in emotionally disturbed pupils	43
School has a responsibility to educate all pupils	29
Provide special educational rehabilitation and remediation	26
Free the regular classroom from behavior problems	25
Provide a useful, secure placement for disturbed pupils	19
Foster social and emotional rehabilitation	18
Purely experimental—to see what can be done	4

In Table 2 are included all of the aims stated by the 54 programs, rather than one first-choice aim.

Incubation Time

Much variety existed in the speed with which systems moved to develop the special class plan, following recognition of some existing need. Total time spent was spread out over many months of relatively sparse activity, or was concentrated within the space of a few months. Pro-

grams sometimes developed in haste, in response to parental or state level pressure. Occasionally, the availability of money was dependent upon putting a program into operation within a limited period. In other instances, difficulties in obtaining adequate personnel, space, or cooperation with other agencies slowed down the process. A few programs were operating only two or three months after the idea originated. A few took a year and a half to two years, and one a full three years. However, by far the most frequent pattern was one which took somewhat less than a year, with the idea developing early in one school year, and commencing operation at the beginning of the next.

Relationship of Programs to the Public and to Other Programs

As indicated earlier, some programs began as a result of parental pressure and active cooperation by parents during development. Where this was the case, there was likely to be considerable community awareness of the program and its purposes. In those instances where the impetus came from within the school or another agency, public awareness and participation ranged from great to zero. In certain instances the entire approach was one of keeping the program under a kind of protective cover, with a less said the better attitude. There was considerable anxiety lest some person in the community ask embarrassing questions. At the other extreme, and much more frequent, were those programs which employed active public relations, complete with newspaper stories and pictures designed to disseminate the results of their efforts. These programs were almost universally well received by the public when presented in a candid, forthright way.

The public relations function was most often in the hands of one of the prime movers of the program, typically a psychologist, special educator, or administrator. While a few programs had all of these persons operating in a quasi-public relations role, the typical division of labor involved the principal dealing with parents, PTA, and explaining the program to other teachers. Meanwhile, the special educator, psychologist, or other mental health specialist maintained liaison with cooperating agencies, interpreted the program to the general public, and served as coordinator and expediter within the system.

Patterns for cooperation with existing mental health agencies varied both in extent and quality. Some programs required concurrent psychotherapy for any child participating; others were almost openly antagonistic toward psychiatry or psychology. In many instances, existing mental health facilities were only partially utilized because of long waiting lists, differences in orientation and goal, or geographical inaccessibility. There were few instances of full fledged school-community

participation along the lines that the developing concept of community mental health practice would suggest. The programs were seldom seen as preventive. Rather, they were a relatively isolated segment of the total remedial effort, a segment composed of the specific problems which emotional disturbance produces for schools and school children. Virtually all of the programs studied had a range of other special education services already in operation. These included classes for the mentally handicapped, underachievers, poor readers, speech problems, hearing, visually, and physically handicapped, as well as programs for the homebound and several unique projects, such as classes for the culturally deprived. Special classes for the emotionally handicapped were usually developed in a context where a variety of educational, psychological, and community services were already available to support them. But, for the most part, established patterns of operation, definition of professional role or function, conceptual orientation, entrenched prerogative, defensiveness, or sheer inertia prevented full use from being made of the community resources which might reasonably have supported a special program for emotionally disturbed children. More effective coordination of the total effort continued to be needed.

Early Operational Problems

Problems in the early operation of the programs centered around two areas: the obtaining of suitable personnel to manage the classroom aspects of the program, and the selection of children to participate. The difficulty most frequently mentioned was in getting trained teachers, and many programs, recognizing the acute scarcity, did not even seek especially trained persons. In some instances, this was deliberate, since the program initiators felt that personal qualities of warmth, patience, and experience were more important than formal training. Shortage of trained professionals other than teachers was less of a problem. But, in those instances where the program contemplated intensive treatment as a requirement for participation, there were the usual problems in obtaining sufficient psychotherapeutic service.

Many other problems resided in the early operational stages of a special class program for emotionally handicapped children. The established special services and administrative hierarchy in the system engaged, in some systems, in what can only be called haggling over where the program was to be lodged. Depending on whether the program was viewed as a plum or a prickly pear, everyone wanted it, or no one did. The same problems applied to the location of a class within a particular building, with principals alternately seeking and avoiding it. Many resistances needed to be overcome; principals, teaching staff, and central

administration often needed to be won over to the idea. Those principals who did not understand the work often undermined it, even after classes were lodged in their own buildings. Teaching staffs in certain buildings welcomed the program as a means to assist them with their own problem youngsters, but an equal number remained suspicious or concerned lest the emotionally handicapped children would become their inheritance. In a few instances, resistance from parents was noted.

Other concerns, less frequently expressed, involved the following: how to keep placement from being regarded as punishment or stigma; how to reduce the time lag between recommendation and placement, particularly if the program was conceived as serving the entire system; and how to maintain good working relationships with nonschool agencies. One or two instances were also found where policy had been established to take care of the problems of a particular child, and which then became binding on all subsequent pupils even when it was not applicable. Finally, transportation arrangements posed a considerable difficulty, particularly in smaller, consolidated districts, where a classroom program was centrally, yet remotely, located. In several instances, parents themselves took over the responsibility for transporting their children daily, since existing bus facilities of the school, or public transportation, would not suffice.

Granting that these were cooperative ventures involving not only a great number of persons within the school, but a number of outside agencies and points of view, problems were far fewer than might have been expected. Some of this may be due to the fact that the planning and initiation stage is usually past history, so that certain difficulties were repressed or forgotten. And, of course, those who planned, tried, and failed were not in the study at all.

Responsibility for the Programs

The administrators directly responsible for these programs are, almost without exception, the directors of special education in the various systems. With this orientation, they inevitably impose an educational mien on nearly all of the programs, even those which are, in theory, frankly clinical or therapeutic. In some instances, the administrator was an integral part of the selection and support process. In others, he had little contact beyond providing space and financial support. Formal policy statements were few; the experimental and/or demonstration nature of the programs was such that they did not require much formal policy making. Decisions were typically the function of a group or committtee, although there was the occasional highly formalized administrative arrangement, with decision making resting at, or near, the top. Whatever

the formal arrangements, the actual responsibility for the conduct of the programs rested in the hands of the special classroom teacher. He had immense autonomy, and usually stood alone in making on-the-line management decisions or handling crises. In many instances, his class was treated almost identically with regular classes in the same building, with the result that the first-line back-up was the building principal. In cases involving discipline or special management, the building principal was too often put in the position of having to treat all the children alike; under special circumstances, he was almost forced into nonhygienic treatment of these children.

Methods of Financing Programs

The most common method of financing such programs combined support from state and local sources. In three-fourths of those programs studied, financing followed the pattern of other special education programs where state reimbursement was combined with local funds. In several instances, this was in fact a county-local rather than a state-local combination. About one-fourth of the programs were entirely locally financed. One had help from the United Fund, another was partially supported by a fraternal group, and several were aided by foundation grants or agency contributions. None used federal money.

The basic methods of state supplementation deserve further discussion. In one, so much was given per pupil, and each child was counted as a double or triple unit. A fixed sum (e.g., $500) was granted to each child over and above the regular state aid formula. Another method was to give a percentage of actual cost: e.g., 50 percent of total cost, 86 percent of excess cost, or 75 percent of the teacher's salary. Still another method involved the payment of a fixed sum (e.g., $2600) toward the teacher's salary. It was obvious that the pupil pay plan encouraged maximum class size, and that the other plans were more likely to encourage programing on a student need basis.

Physical Facilities and Locations

More than once, a major stumbling block in program development turned out to be a matter of physical facilities. In view of acute room shortages around the country, hospitable, supportive administrators were not always easy to find. However, those physical facilities observed were generally adequate, but far from plush. Regular classrooms were the most frequent facilities made available. Converted music and art rooms were next most common. At the extreme were programs housed in factory buildings converted to school use, and even one in a converted auto repair shop. Seldom were there especially designed facili-

ties, although many did have available special items of equipment (e.g., isolation booths, audio-visual materials, etc.) or special budgets for supplies. Typically, however, the classroom teacher had to rely on the regular equipment and supply sources in his building, or to resort to begging or wheedling.

Teachers and Auxiliary Personnel

As indicated, one of the most trying problems was obtaining suitable personnel for actual classroom work. Many program initiators did not seek teachers with special training, but all did seek persons with special qualifications, either in terms of experience or personal attitude and skill with children. Program directors frequently stated, "What we were looking for was a person who had a history of successful work with children in the regular classroom." Others sought teachers with special qualities of warmth, firmness, or competence in subject matter, and/or teaching methods. All in all, program administrators seemed unusually well satisfied with the personnel. However, when programs were viewed as less than satisfactory, the classroom teachers were more likely to receive the blame.

Data on teacher experience and specialized training are summarized in Tables 3 and 4. The categories in Table 3 do not adequately reflect the range of and variety of experience represented in our sample. A total of 19 teachers reported that their previous experience had been principally in elementary schools; this group averaged seven years experience prior to entering their present special assignments; eight teachers had had the majority of their experience in high schools; 19 others had functioned principally as teachers of the mentally retarded, either exclusively, or in combination with regular classroom experience. Fifteen reported that their principal experience in the past had been in clinical settings, such as in psychiatric facilities, courts, or readng clinics or programs. Six reported no previous classroom teaching experience beyond that gained in student teaching. Experience in the

TABLE 3

Teacher Preparation—Experience

($N = 71$)

	Percent
One to three years—regular classes	19
Four to ten years—regular classes	18
One to ten years—special education	21
More than ten years—special education	33
Long term specialized background	9

TABLE 4

Teacher Preparation—Training

($N = 71$)

	Percent
Trained as regular classroom teacher	32
Trained in other special education areas	30
Short term training with disturbed	19
Extensive specialization with disturbed	19

present, or similar programs ranged from one to ten years, with the large majority reporting only one to two years of experience.

Four teachers in Table 4 had a two year diploma, eight took their bachelor's degree without teaching credentials, and 25 were certified as teachers on obtaining the A. B. degree (14 elementary, 11 secondary). Eleven started with a degree in special education, six in the area of the emotionally disturbed and five in mental retardation. Fourteen had done some graduate work in special education, eight of whom specialized in work with the emotionally disturbed. Nine others had some graduate work in another field, typically in another area of education, or in psychology. Seventeen had masters degrees or more, including 12 specialist degrees and one Ph.D. Examination of these figures, and a comparison of them with the data in Tables 3 and 4, reveals a total considerably exceeding the total N in our sample. It should be obvious that this is true because the several categories are not independent.

It was quite clear that this group of teachers was neither broadly trained nor experienced in the special area of the emotionally handicapped. The basic picture which emerged was one of a bimodal distribution of both training and experience, though the two variables were not highly correlated. One group represented the regular classroom teacher who had developed a special interest in the handicapped child, and had developed special skills or acquired special training as time and energy allowed. Some had a history of success in dealing with children, and were chosen by someone who recognized what seemed to be special personal talents for the work. The second group, a smaller but rapidly growing number, were persons who had chosen special education as a career from the outset, who had been trained (and had worked) with retarded children and had more recently branched out into the newer area, or who were younger persons that had taken advantage of the few special training programs for teachers of the emotionally handicapped which are in existence.

Several programs were taking advantage of formal training programs at the college level, and of inservice efforts, to upgrade the performance

of their teachers. Much of the continuing training made available to these teachers was through the relationship of the teacher to the co-operating mental health professional or special education worker. This type of inservice contact was not one with which teachers had become familiar in their training. It was, in fact, much more closely allied to the clinical supervision provided to the social worker, psychiatrist, or psychologist. As such, it required a personal involvement that the majority of teachers found stimulating and helpful, but which, to some was upsetting because of its highly personal nature.

Another way of reflecting on the adequacy of training and experience was to determine what additional work the teachers themselves felt was necessary. Seven felt no need for additional training, some quite emphatically. Several others felt that inner resources and personality were more important than any combination of training or formal experience. Teachers desiring further training, were fairly well split between those who wanted course work training, either in the teaching of the emotionally handicapped or in background areas such as diagnostic methods, psychology, curriculum, learning problems, group methods, or remedial reading, and another group which stressed practical skills in child management, motivation, and understanding children. The latter group also expressed the need for more supervision and consultation as a means of gaining the practical skills which they wanted.

A scattering of other training needs was also observed. Two persons felt that they needed training in research methods, one wanted social work skills to help in dealing with parents, and several obviously wanted more security in dealing with the users of established psychological jargon. Others wished for conference seminars with other workers in the field, or for the opportunity to visit similar classes in other areas. A few anticipated benefit from additional clinical experience if it could be available.

Apart from additional training for themselves, many teachers volunteered ideas about how their own situation could be improved. Most frequently mentioned was the wish for auxiliary assistance—an aide, or a team worker to allow the teacher more time for individual work, easier access to consultation, so that "we could be more sure of exactly what to do for a child who is in trouble at the moment," or fuller co-operation from individual therapists. Many had worked out arrangements with regular classroom teachers nearby, both to allow for fuller attention to children in emergency need, and as a means of obtaining additional help in moments of high stress.

It was clear then that the majority of teachers saw the need for more training, though not typically in the "take another class" vein. Many

pointed out that they wanted real and practical help from people who knew something about children and their problems; they did not want the typical academic approach. If teachers themselves could choose, selected course work in background areas and practical methods would be balanced by on-the-line consultation and work-oriented supervision. Smugness or self-satisfaction was certainly not a typical characteristic, though, as the site visitors observed, there was the occasional instance of defensiveness. Considering the immense pressures under which this group of teachers operated, and the relatively little practical preparation they have been given, it is no wonder that they seek opportunities for professional growth. Our personal reaction was to view them as a collection of devoted professionals trying their best to bring some light into difficult and uncharted waters.

In addition to the classroom teachers themselves, several programs used lay personnel for ancillary and supportive work. Typically, interested housewives or retired teachers worked as aides, tutors, hall monitors, and relief workers for the regular teacher. In one program, retired teachers who were experts in the needed fields were screened and selected with great care, and then served as tutors and relief teachers. Aides were also used as slow down and cool down agents in halls and/or in crisis or quiet rooms. However, the proportion of programs studied which used lay personnel in any but the most incidental capacity was very small.

Basic Characteristics of the Clientele

No one who is involved in these programs is under any illusions about what they are doing compared to the size of the job that remains to be done. Table 5 illustrates this point clearly.

Two of the three large programs served giant metropolitan areas, where the number of emotionally handicapped children probably num-

TABLE 5

Pupils Presently Served in Programs

Number of Pupils Enrolled	*Number of Programs*
Over 150	3
100-150	0
75-100	1
50-75	2
25-50	7
10-25	14
1-10	11
Incomplete Data	16
Total	54

bered in the tens of thousands. The typical program, in a small or medium sized district, served something less than 25 pupils, and must be considered a pilot or demonstration effort.

An even more dramatic illustration of the inadequacy of the total effort is seen in Table 6.

TABLE 6

Total Pupils Served by Programs since Origin

Number of Pupils Served	*Number of Programs*
Over 200	4
150-200	2
100-150	2
75-100	2
50-75	8
25-50	11
10-25	6
1-10	6
Incomplete Data	13
Total	54

Once again, the top category contained two large metropolitan programs. The typical small or medium sized district program had been in operation for one or two years, and had accumulated a total service load of between 25 and 50 pupils. Closely associated with the data in Table 6 are those in Table 7, which indicate the length of time the various programs which were studied have been in operation.

TABLE 7

Length of Program Operation

Less than 1 year		2
1 - 2 years		10
2 - 3 years		12
3 - 4 years		3
4 - 5 years		3
5 - 6 years		6
6 - 7 years		5
More than 7 years		4
Incomplete data		9
Mean = 3.1 years	Total	54

Thirty-one of the programs were organized on a permanent basis. Fourteen were characterized as chiefly experimental, to which no permanent commitment had been made. Most of the administrators in

these situations had adopted a wait-and-see attitude, although it was clear that two or three programs would be abandoned as failures at the close of the current year.

The overall impression gained from Tables 5, 6, and 7 is clear. Special classes for the emotionally disturbed child are a relatively new and small scale venture. If a program survived for two years or more, it was likely to become permanent, but there was little evidence of continuing expansion of established programs to meet existing need.

Another interesting demographic item concerns the grade levels of children served by the programs. Table 8 represents a summary of these data. Here it is obvious that the concentration of effort was at the later elementary and junior high school levels. Several reasons for this may be adduced.

TABLE 8

Grade Placement of Pupils in Programs

Designation	*Grades*	*Percent of Programs*
Early Elementary	1 - 3	7
Later Elementary	4 - 6	43
Junior High School	7 - 9	32
Senior High School	10 - 12	11
No Data or Unclassified		7

First, it was obvious that these programs were designed primarily as remedial, rather than preventive. Thus, a child must have accumulated a history of school disturbance before he was likely to be considered for class placement, or, before a class placement was developed to serve him. Later elementary and junior high school pupils often manifested sufficient deviation and yet they appeared susceptible to help of the sort offered by these programs; i.e., many had not had time to become grossly academically retarded and their antisocial behavior was less serious and generally more easily contained. By the time disturbed children reached high school age, they were much more difficult to handle, their pathology was likely to be deeply ingrained, and their anti-social behavior as often as not had taken them out of school and into the hands of a secondary social agency. Their less bright prognosis, and the limited efficacy of educationally oriented remediation made the schools less willing to undertake special programs of this sort for them.

It should also be noted that the age level of pupils for the grades served was generally higher than that indicated by age-in-grade equivalents alone. Some pupils were operating in grade at age level, but a good many were academically retarded, some as much as three years.

In general, if the grade levels are used as a base, one to two years should be added to the top of the normal age range to determine the ages of the oldest children in the classes. Thus, the age range was considerably greater than indicated by the data in Table 8. Because of the academic retardation which characterized many of these children, it must be considered that many of the junior high school programs were actually dealing with some high school age children who were really at a later elementary level of competence.

It should also be noted that the distribution of grades served was unrepresentative. The original survey uncovered very few high school level programs and a disproportionate number were visited. Thus, the fifty odd high school pupils shown in Table 8, where $N=519$, represents nearly two-thirds of the total number of high school students in located programs at this level. By contrast, the two hundred odd later elementary pupils represents only a minor fraction of that group.

The vast majority of the pupils were boys. Reliable sexual identification was available on 455 children. Of these, 380 were boys and 75 were girls, a ratio of more than five to one.

A problem in program design is revealed by an examination of the length of time children have stayed in the various programs. Table 9 presents the relevant data.

TABLE 9

Length of Pupil Participation in Programs

($N = 519$)

	Percent
Less than 1 year	42
1 - 1½ years	28
1½ - 2½ years	10
2½ - 6 years	5
No data	15

Here it is seen that the majority of children have been in the programs for a relatively short period of time. Programs were typically designed to provide a terminal experience after which the child would return to the regular classroom. For children who were not helped by the program within the specified time, the notion was to find another placement for them. However, a large number of pupils reached the upper age or grade limit without sufficient recovery to return to regular classrooms, yet were sufficiently stabilized to contra-indicate institutional placement. Thus, more and more programs were being forced to retain the child in less and less appropriate classes, or to phase in programs

which would meet the needs of the older handicapped child. Many have not been able to do either, with the result that the child was sometimes returned, inappropriately, to a regular classroom setting even though he was manifestly unprepared for this. Attention must be given to longer term opportunities in special settings for the emotionally handicapped child, lest the beneficial effects of effort already expended be lost.

Intake and Disposition Policies

The single most time consuming effort involved in establishing the programs concerned the screening and selection of pupils. Very few systems undertook mass screening programs, and even fewer utilized existing screening instruments. When broad range screening was undertaken, the typical system circulated questionnaires to teachers, asking for nomination based essentially on classroom observation of behavior. One large metropolitan area has developed a screening battery which seems quite promising, but it has not been applied on a mass basis.

Mass screening was avoided in most systems, because it was obvious to everyone concerned that such a procedure would turn up more candidates than could possibly be served. In smaller districts, the children who eventually participated in the classes were likely to be those who were most manifestly disturbed or disturbing in the classroom. Referral by the regular classroom teacher was the single most common first stage in the screening process. Typically, children who were so referred were then subjected to a more intensive appraisal, sometimes consisting only of a review of his cumulative record and test scores, and sometimes involving a very comprehensive diagnostic workup, including psychiatric evaluation. Arrangements for the conduct of the screening and diagnostic process were usually well formalized. A typical pattern was as follows: the regular classroom teacher (or principal) became aware of a behavioral or educational difficulty which the child was manifesting in class. He may have had a reasonably long history of acting out, withdrawal, or underachievement. Usually, he was causing someone trouble, and/or someone was concerned with helping him. At this point the teacher or principal may or may not have known of the existence of the special class program. Accompanying this early stage of awareness of the child's problem was the fact that the school had, or contemplated, a special program. This knowledge usually came to the teacher or principal through a special services person or through the administrator assigned to apprise the system of the program's existence. The child was then called to the attention of the psychologist, social worker, or special class program director. Testing of the child typical-

ly took place at this stage, or was preceded by a consultation between his teacher, his principal, and a representative of the special program. Diagnostic information was then accumulated, usually under the direction of a special program representative. Following this stage, an individual in charge of the program decided that the child was an appropriate candidate. Usually, however, a group decision was made, involving the regular teacher, the special class teacher, building and/or special program administrators, special services persons connected with the special program, and occasionally outside consultants. At this conference, a diagnostic summary was presented, placement discussed, and a plan made. If all of the omens were positive at this point, the child was likely to be placed in the special class. Parents were usually, but not inevitably, drawn into the process and participated in decisions. If the child was already in the care of a private practitioner or mental health agency, their consultation was typically, but once again not inevitably, sought.

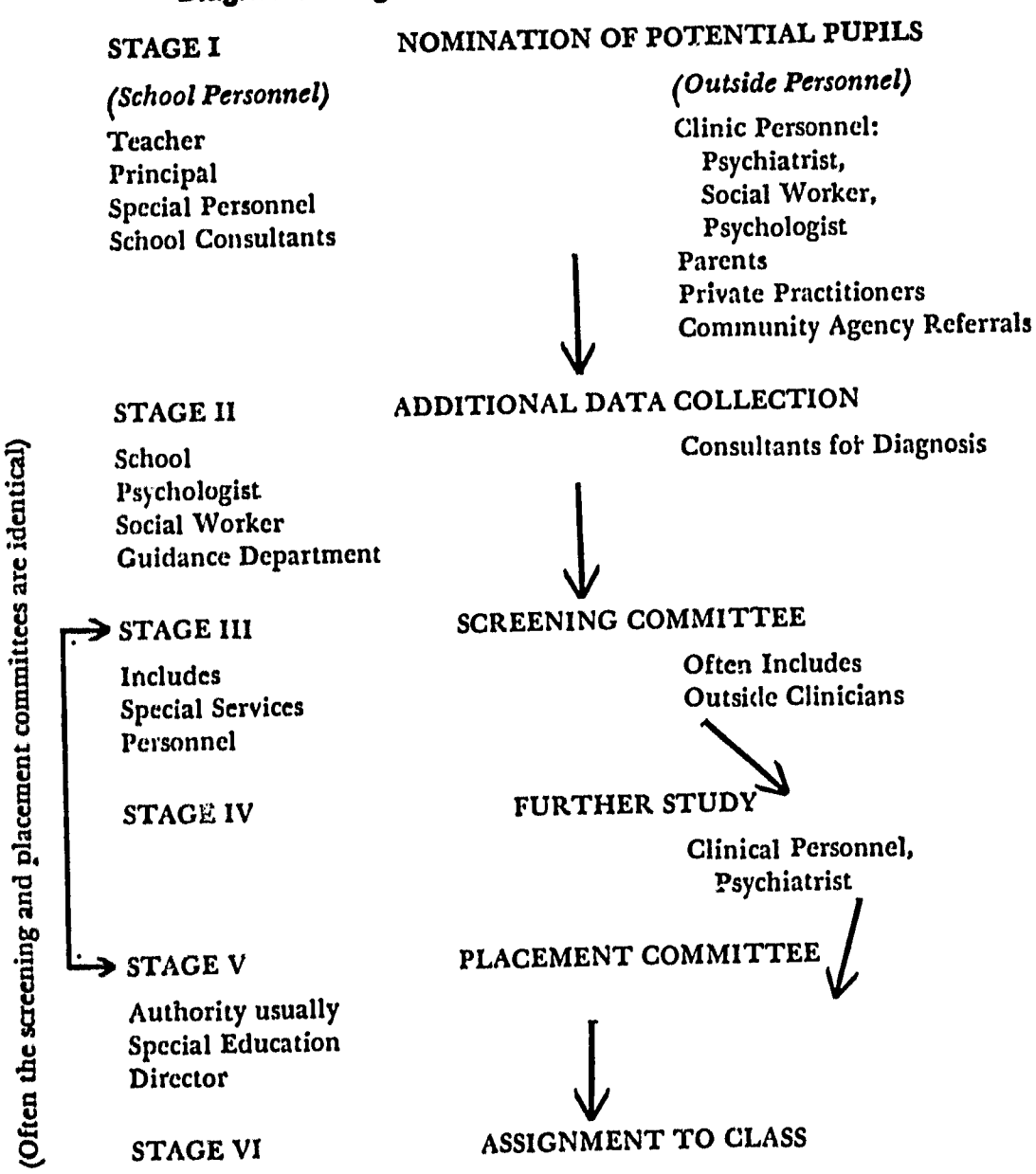
Departures from this typical pattern are many, and space prohibits a detailed presentation of the variety of patterns. One or several of the persons mentioned above may be excluded from the process. In some instances, neither the regular teacher nor the special class teacher had any choice about placement. Programs existed which bypassed the detailed diagnostic process almost entirely, or which collected detailed data and then ignored them. But the pattern noted above, in some variation, applied to probably three-fourths of the programs observed, and deviations arose as a result of specific local situations.

In any event, the screening process is a time consuming one, and raises several problems of which the prospective program developer should be aware. Often one uncovers too many candidates for the facilities available, with the result that interpersonal stresses and political pressures develop. It is a rare program which uncovers just the number and type of student it needs. As a consequence, early plans for the development of a special class for a given diagnostic group usually go down the drain, and the administrator is forced to respond to expediency. Most of the administrators felt that they were not serving the kind of children that they had initially sought, and that it was next to impossible, under present circumstances of knowledge, to do so. The fact is, available transportation, age span of the group, and eagerness of the present school to sponsor a candidate constitute potent screening elements seldom listed in the brochure.

More time was spent in the intake and placement process than in any other aspect of the program. This fact may indicate the care taken in assigning children to the special class, or it may reflect some of the

FIGURE 1

Diagram of Stages and Personnel Involved in Intake



anxiety that school personnel experience in decreeing a pupil to be maladjusted. Figure 1 represents a schematic view of the process.

Obviously, not all programs included all six stages, although some followed this scheme completely. One person, such as the regular classroom teacher, served at several or all the stages. The role of consultants varied more than any other single element in the diagram; they were used only for very difficult cases, or when a child was already in individual treatment outside the school, or they were involved in a determining way at every stage. Under certain circumstances, such as nomination of a child by a clinic, Stages 2, 3, and 4 were bypassed completely

and committee action was taken at Stage 5. Another widely variant element was the level at which parents became involved. Sometimes, schools found it necessary to seek parental permission to conduct more than the most routine testing; others did not involve the parents until the decision was all but made.

Often the work of Stage 2 had been accomplished before the child was nominated, and occasionally was even the cause of the nomination. Frequently, the same committee operated at the several intermediate levels simultaneously or successively, wearing different hats in the process. The composition of the committees was relatively uniform, and included the psychologist, a psychiatrist if there was one, the director of special education, one or more teachers, a social worker, and one or more administrators. At the other extreme was a committee composed of a program director, an aide, the regular teacher, and the school principal. The membership of the typical committee may have been fixed, or it may have varied, depending on the nature of the child's problem, political considerations, and the level of involvement of local building personnel. In general, the longer the program had been in operation, the more focused these operations became, with those who had specific responsibilities carrying the weight while those involved in a more marginal way dropped out. One important point of contention within many programs was the degree of influence which nonschool personnel such as consulting psychiatrists and psychologists should have had. It was one thing to come to an essentially academic agreement that placement was desirable; it was often quite another to say that the available class should absorb the pupil in question. By and large, it was some school person, typically the director of special education, who had final decision power. But in the main, unilateral decisions were not made; several persons were involved, and the entire complex of needs and resources was considered and weighed.

Surprisingly, few programs could define rigorously those diagnostic indicators which determined whether the child was considered to be a likely candidate. "We analyze clinical material" and "test results have an important bearing" were typical explanations of what proved to be a rather cloudy process. Decisions seemed to be based on clinical feel, the degree of trouble the child was producing, and the availability of a "slot" for him.

Whatever the style of operation, it was much easier to get a child into a program than it was to get him out again. While some programs explicitly attempted to return the child to regular class experiences (if only on an hour by hour basis) as soon as he showed the ability to tolerate it, the majority were enough isolated from the regular classes (either

by concept or geography) that an assignment to the special class had the effect of an indeterminant sentence. When the child was "cured," or when his academic performance was up to regular class standards, or when he was too old for the special program, he returned to the regular class.

It would have been profitable to spend at least as much time planning for and implementing the child's return to the regular class as was spent screening and diagnosing to get him out. There was evidence of a psychological let-down in the process as soon as placement was made. Insufficient use was made of available information in providing continuing help to the classroom teacher, and, in large part, the child became his exclusive responsibility. The pressures on special services staff and consultants to feel that placement itself had done something for the child were very great, since there was the press of many others for screening and placement.

Even in those instances where explicit attention was given to the return of the child to the regular class, procedures for return were less clear and formalized than those for admission. General criteria seemed to include improved school achievement, self-control, and attitude toward school. Figure 2 attempts to schematize the process.

FIGURE 2

Channels for Return

STAGE I—GENERATION OF CONSIDERATION FOR RETURN

Major Instigators—Teacher
Principal
Psychologist
Outside Clinician
Screening Committee

STAGE II—STAFFING CONFERENCE

A given sequence of steps may or may not be utilized

STAGE III—PLACEMENT ALTERNATIVES

Trial or Permanent	Part Time or Full Time	Host School or Outside School

STAGE IV—EXCLUSION

As this figure shows, the major instigator for return was the special teacher, working in a team relationship with the principal. Impetus for

reassignment may have come from the original screening committee meeting in reappraisal session, from the school psychologist or outside clinician, or, in one instance, from a special discharge committee. Two programs mentioned requests from parents or pupils as motivating elements. There was reason to believe that the forces working toward return may have been used to encourage or to coerce reassignment whether or not the child was clinically and educationally ready.

Staffing sessions around the return process were either formal or ad hoc, and involved from two to twenty persons. Usually the teacher, local principal, and certain clinicians were involved. Less frequently, the receiving personnel were involved. Parents were typically consulted, and sometimes even had to give permission.

Except for the few pupils who were never completely separated, the first time back into a regular class was a trial or half-way house placement in a regular classroom in the host school. If this was successful, the time was extended, and a gradual expansion to regular status ensued. Then the final step was a carefully chosen placement in a regular school program, although the child was most frequently not reassigned to the school from which he originally came. Visits were sometimes arranged for him, and there were frequent conferences between his old and his new teachers.

Missing in the formal data was the site visitor's discernment of pupil anxiety; that is, how the pupils viewed their own return and their occasional wish to hold on too long or cast off too early. To some pupils, stepwise reassignment gave time for a gathering of strength, to others it suggested an ambivalence which was far from reassuring. It was not so much a matter of which way to do it, but rather a question of what each child could use best.

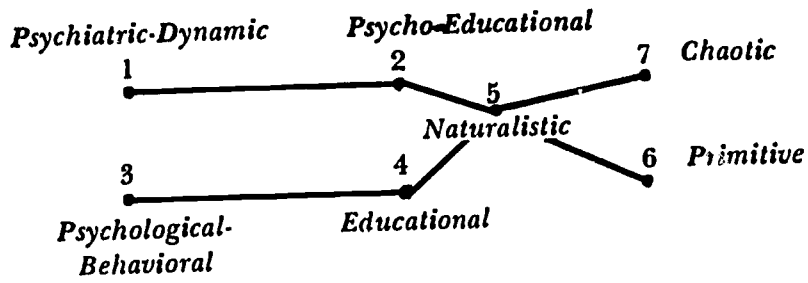
Categorization of Program Types

It was obvious that a multitude of dimensions ran through the complex characteristics of the several programs, and that no single dimension or set of categories sufficed for their description. Certain extremes were clear, but no single continuum encompassed the variation. A rough classification scheme is presented in Figure 3, and elaborated in the following categorical descriptions.

1. *Psychiatric Dynamic*

Major emphasis was on dynamic therapy and pupil acceptance, with educational aspects played down or secondary. Individual therapy was expected or required. Parental therapy was stressed. There was heavy psychiatric involvement in diagnosis, decision making, treatment proc-

FIGURE 3
Paradigm for Class Categorization



Note: The series 1, 2, and 7 have dynamic substrata while 3, 4, and 6 have as substrata specific learning or conditioning theory. Type 5 is circumstantial. Details are found in the text.

esses, consultation, and evaluation. Emphasis was on acceptance, use of interpersonal relationship, and overall tone.

2. *Psycho-Educational*
Psychiatric and educational emphases were balanced with joint planning and interweaving-equality of two emphases, educational and clinical. Educational decisions were made with a consideration of underlying and unconscious motivation. Educational aspects stressed creative, project type work, individual differences, and a benign but not permissive atmosphere. Clinical participation was apparent, but not omnipresent or decisive in day to day actions.

3. *Psychological Behavioral*
This series was based in systematic psychology of learning theory, with emphasis on diagnosis of learning potential capacities and relationship to specific remediation techniques. It involved the use of associative learning and formal habit. It contained a nonpunitive structure with emphasis on changing symptomatic responses through specific techniques on a planned, ego level.

4. *Educational*
Emphasis was on formalized, accepted educational procedures such as routine drills, work books, inhibition of symptomatic behavior, and attention to skill training and drill. Little use was made of group processes. Emphasis was on control with restrictive handling seen as corrective. Atmosphere was nonhostile. These classes relied largely on extension of traditional educational procedures without much systematic attention to the theoretical design.

5. *Naturalistic*
The teacher operated on a "green thumb" naturalistic basis without organized approach or any specific design. The work was dominated by

ad hoc responses to individual problems (academic-behavioral) as they appeared. Frequently the teacher assumed a benign, kind but demanding mother-teacher role. Various procedures were used without any well developed plan. Sometimes the method of control involved joking. The teacher interaction was pervasive in interventions and decision making as the process evolved, but there was not much depth or fundamental consistency to the interventions.

6. *Primitive*

There was an overall coarseness evidenced in both rationale and handling procedures. Sometimes the teacher was aloof and cold. Control was maintained by establishing limits through a "no monkey business" approach by domination and fear. The class was essentially a holding company operation, with a lack of sensitivity in the overall tone. Emphasis was on surface compliance for its own sake.

7. *Chaotic*

Here, impulsive behavior broke through continually and any semblance of order was momentary. This might have been a consequence of extreme passivity and permissiveness or an inability to cope with the situation and a lack of adequate back up or removal. There also may have been, in some instances, a belief or rationalization regarding the therapy of permissiveness.

These categories were used in an attempt to search for meaningful relationships among methodological patterns of pupil change, and other factors. In the following table, a comparison of the judgments of the site visitors and the local administrators is presented.

TABLE 10

Identification of Program Types: Site Visitors and Administrators

	Program Type	*Site Visitors Percent*	*Local Administrators Percent*
1	Psychiatric Dynamic	14	7
2	Psycho Educational	26	34
3	Psychological Behavioral	4	1
4	Educational	29	27
5	Naturalistic	15	5
6	Primitive	7	1
7	Chaotic	1	0
	No Data	4	25

As the local administrators described their programs, they saw, naturally, less of the designs that site visitors rated negatively—naturalistic, primitive, or chaotic. They also saw less of the psychiatric influence in the pattern than did the site visitors.

In this section, an overview of the programs involved in the research has been presented. Heterogeneity is the obvious summative characteristic. With such great variance on every dimension thus far mentioned, it is a challenging task to attempt to find some underlying order and cause.

3

General Characteristics of Pupils

In this section, an analysis is made of the pupil population, including age, sex, academic achievement level, and family background conditions. Finally, an attempt at symptom and syndrome classification is made.

Chronological Age and Sex Distribution

With the growing emphasis on primary prevention which characterizes the mental health movement today, one hears considerable talk about getting to children when they are young. In those programs where the concentration is on later elementary children, the wish that the programs could be started at a lower grade level was often expressed. Several factors militate against this downward extension of these services, however. First, screening and case finding procedures for preschool and kindergarten children are less reliable than those which are applied somewhat later. It is often difficult, even for the trained clinician, to distinguish reliably between transient disturbances which are a relatively normal part of the younger child's growth, and those which are prognostic of more serious disturbance. Second, parents are often harder to convince when the children are young, since whatever pathology does exist has not yet taken on a form which is socially or educationally handicapping. Third, it is not until the middle elementary grades that increased demands for academic performance and conceptualization bring latent school pathology to the surface. Fourth, the school itself is more likely to be able to absorb the relatively mild acting out of younger children, whereas the behavior disturbance of a middle elementary child will be felt more acutely by his teachers and peers. For these reasons, it is not surprising that the distribution of children served follows the pattern which is obvious in Table 11.

Table 11 reveals several other interesting characteristics. Boys are favored in the distribution by about five to one, supporting the by now common observation that manifest pathology is much more frequent among them than among girls. The increased number of girls served

TABLE 11

Age and Sex Distribution of Pupils

Age, Nearest Year	*Boys (N)*	*Girls (N)*	*Age Level Percent*
5	3	1	1
6	29	4	8
7	51	13	15
8	55	5	14
9	60	13	17
10	51	11	14
11	38	5	10
12	32	4	8
13	24	11	8
14	11	4	4
15	2	1	1
	Totals 356 (83.2%)	72 (16.8%)	
	$M = 9.4$ years	$M = 9.8$ years	

at age 13 may be related to problems associated with the onset of puberty. Nevertheless, it is clear that emotional handicap, as seen by the public schools, is largely a male phenomenon.

At the senior high level, many children who would otherwise have been candidates had no doubt dropped out. Some observers pointed out that the distribution of the pupil's classes among several teachers at the intermediate school level reduced the intensity of teacher response. The teacher apparently puts up with difficulties for the single hour since the pupil will then leave for another teacher. The manifestations of pathology become more socially troublesome as the child grows older, so that certain junior high and high school youngsters become the responsibility of secondary agencies.

Academic Achievement Levels

One of the factors of high interest was the academic achievement patterns of emotionally handicapped children. It is a matter of common clinical observation that many such children are academically retarded. The number of available students with sufficiently complete achievement scores was entirely too small to allow for any statistical analysis whatever. What would seem to be a central process in charting the child's progress was neglected in these programs. Teachers usually knew about the retardation and often felt that specific tests were not necessary or might have given misleading information. At any rate test-retest data were scarce.

There was abundant anecdotal evidence that academic retardation did constitute a significant problem. Again and again, reading was re-

ferred to by both students and teachers as a special area of concern and work. Special help in reading was often a necessary accompaniment of psychoeducational efforts on behalf of the emotionally handicapped child.

Information on both reading and IQ was available on only 154 cases. The interest was in whether or not these pupils were retarded relative to their present mental potential as measured by the quotient, $\frac{\text{Reading Age}}{\text{Mental Age}}$.

TABLE 12

Reading Quotient Distributions
(154 Cases)

	Percent
Below 68	3
68 - 84	17
85 - 100	35
101 - 116	29
117 - 132	12
Above 132	4

Fifty-five percent were functioning below 100 and 44 percent above (a ratio approximately expected but not nearly as great as one might surmise from other evidence).

Though formal test results were almost totally lacking, there was an alternate source of information on the child's academic status. Each teacher was asked to indicate the degree of academic retardation he saw, and also the degree indicated to him by the child's former teacher at the time he entered the special class. This information showed that academic retardation was an important accompaniment of emotional handicap in a majority of the children observed. The relevant data are presented in Table 13.

TABLE 13

Teacher Perception of Academic Retardation

Degree of Retardation	*Former Teacher Percent*	*Present Teacher Percent*
None	21	30
0 to 1.5 years	5	5
1.6 to 2.5 years	1	1
More than 2 years	2	1
Retarded, degree unspecified	52	44
Retarded, specific area	3	4
No Data	16	15

Whether or not the most frequently used category "Retarded, degree unspecified" indicates a level of retardation which is significant, either in the minds of the teachers or for the pupils, is not known. Site visitors' observations indicated that remedial efforts in this area constituted a large part of the classroom program.

A high degree of agreement would seem to exist between the views of the present teacher and those of the former. The product-moment correlation between these two sets of judgments was +.56. However, this correlation contains a built-in contamination because both were in fact presented by the present teacher.

Intellectual Level

It seemed imperative to determine the intellectual level of our population of children. There was the possibility that these classes were serving children who were basically intellectually inferior, and that their school problems arose from this rather than from genuine emotional handicap. A wide variety of individual and group intelligence tests were used in the programs. IQ data were evaluated on 298 children, a number which comprised nearly three-fifths of the sample. Table 14 summarizes these data.

TABLE 14

Intelligence Quotient Distribution by Sex

IQ Range	*Boys*		*Girls*	
	N	*Percent*	*N*	*Percent*
68 - 84	18	7	3	6
85 - 100	66	26	11	24
101 - 116	99	39	10	22
117 - 132	44	18	15	33
Above 132	25	10	7	15
Totals	252		46	

Both these distributions are skewed negatively, that is, more children appear at the higher levels of intelligence than would be expected in a normal distribution. Even considering the possibly limited reliability and validity of certain tests on which these IQ's were based, it seems clear this was not a group in which intellectual retardation was a significant issue. These were reasonably bright, or perhaps even unusually bright children, and it seems safe to say that whatever academic retardation did exist, it was based upon other than intellectual factors. A slightly different categorical breakdown of the data reveals that only 13 percent of the boys and 22 percent of the girls fell below the normal range of intelligence, and that less than 10 percent of either group were considered retarded.

Family Background Factors

This research was not designed to explore in depth the genesis and dynamics of the children's disturbance. But teachers were asked to provide some basic data on family size, estimates of family morbidity, etc. Specifically, they checked family characteristics on a list of eleven possible items such as negative history, chronic illness, rejection, marital conflict, and cultural deprivation. These were selected as items with which teachers might be expected to be reasonably familiar in order to rate them. Additionally, for each parent, the teacher checked six possible items such as neurotic, antisocial, etc., which seemed to reflect on specific contributing conditions in the parent-child relationship. These check list items were then cumulated for each child into a total morbidity index, both for the family situation as a whole and for each parent.

Teachers generally saw the children in their special classes as coming from homes where a moderate to severe degree of psychological morbidity existed. Relatively few morbid conditions were ascribed specifically to the mother or father. Rather, teachers appeared to see general home conditions as the major source of whatever background problems their children had. Table 15 illustrates these facts.

Aligned with the teacher's view of relatively low morbidity in the individual parent-child relationships was the consistent observation by site visitors that most program personnel had found parents to be less resistive and productive of difficulty than was anticipated. In those

TABLE 15

Teacher Ratings of Home and Parental Morbidity

Number of Negative Items Checked	*Percent Overall Family* ($N = 519$)	*Percent Mother* ($N = 479$)	*Percent Father* ($N = 474$)
0	7	25[b]	39[b]
1	15[a]	34	28
2		28	20
3	18	10	11
4	15	3	2
5	12		
6	7		
7	4		
8	5		
9 or more	15		
No Data	2		

[a] Where 1 or 2 overall family items were checked, they were pooled in a single category for convenience in machine computations.

[b] Includes an indeterminate number of "no data" cases, probably not exceeding one-fourth of the cases in this category.

few instances where parent counseling, discussion groups, formal therapy, or group therapy had been attempted, increased cooperation and improved results were reported. Thus while most parents, especially fathers, do not eagerly seek participation in the total psychoeducational effort, it appears to be worthwhile to involve them in a variety of ways. Program developers may wish to be sensitive to suggestions which indicate "don't call it therapy" or "have the teacher work with parents—it's less threatening."

Another element of the child's family situation concerned teacher perceptions of parents' ambitions for their children. This measure may have reflected only the teacher's projections rather than actual parental ambitions for their children. If so, however, the measure should have related to other teacher attitudes. If such teacher judgments were objective, they should have had relevance for various attitudes expressed by the pupil regarding his own chances for success. An additional possibility was that the teachers' ratings adequately reflected what the parents said, but that the parents themselves presented a facade of unreal hope or unreal discouragement. Table 16 presents the summary of our findings on this variable.

TABLE 16

Teacher Perception of Parental Ambition for Child's School Success

Parental Ambition Level ($N = 519$)	*Percent Mother*	*Percent Father*
Low	21	14
Average	37	23
High	18	12
No Data	24	51

It is obvious that teachers felt that they knew more about maternal than paternal attitudes toward the child's school success; not a surprising finding when one recognizes that our culture defines the mother as the school contact person. When "no data" responses were eliminated, 75 percent of parents expected average or better academic success from their emotionally handicapped children. Teachers considered a somewhat similar proportion to be academically retarded. It is clear that great improvement in these children will have to occur in order to avoid parental disappointment. It is apparent from other data that parental pressure is in fact an important element in the lives of the pupils.

Conjunctive Psychotherapy

While the programs studied varied widely in the relative emphasis of education versus clinical orientation in the actual classrooms, all of

them, by definition, proposed an alteration in the child's mental health. At the extreme, a very small number of schools attempted to coerce parents to put the child in psychotherapy by keeping him on homebound status, or semipermanent exclusion, until they complied. Typically, such instances did not represent district wide policy, but rather were individually applied measures developed to meet the unusual individual case. In one or two instances, however, the policy was clearly "no conjunctive therapy, no class participation," and other means were found to deal with the child who did not get into formal treatment. In programs which stressed conjunctive therapy, it was not uncommon to find a proportion of parents in treatment, too. This orientation to parental participation was generally somewhat different than that described earlier, which placed more stress on group discussion or treatment with a view to providing insight and understanding into the child, rather than into the parents.

A few programs felt that conjunctive therapy was useless or impractical for their particular clientele. "Therapy has become a status symbol for the upper crust, while the lower socio-economic groups, if they can be induced to try, soon feel that it is unhelpful to them." An additional problem, faced by some programs which have considered the issue, was found in the relatively high transiency of segments of their school population. High cost or unavailability of services were other reasons which seemed to play their part in program developers' attitudes toward conjunctive therapy.

TABLE 17

Occurrence of Conjunctive Therapy: Pupils and Parents

	Pupils		*Parents*	
	Percent Before Entry	*Percent During Program*	*Percent Mothers*	*Percent Fathers*
Yes	22	26	22	9
No	59	58	28	29
Unknown, No Data	19	16	50	62

Table 17 presents the percentages of pupils and parents recognized by teachers to be in treatment outside the classroom program per se. Whether or not cotherapy was really indicated, it appeared to be a fairly widespread practice, with about one-fourth of the children and more than one fifth of the mothers known by the teacher to be in treatment during the child's participation in the special class. For 16 percent of the children the teachers did not know. As we moved to the more remote area of the mother, and eventually to the father, the teacher became understandably less and less well informed. "In therapy" has so

many meanings that caution is indicated in ascribing a particular significance to the mere designation. Questions such as "with whom," "how often," and "with what specific intent" should concern those programers who consider requiring conjunctive psychotherapy as a condition of participation in the special classes.

Classification of Child Pathology

There was no broadly accepted way of classifying psycho-educational problems. Some efforts seemed to be only scaled-down versions of adult psychiatric nomenclature with little meaningful application to children. Others were little more than symptom lists of the rawest, descriptive sort. In collecting data from school personnel, it made little sense to offer them psychiatric diagnoses to check or not check. Even in the hands of highly trained clinicians, arriving at such diagnostic classifications was not a highly reliable process. Behavior description check lists alone did not seem to offer sufficient opportunity for qualitative distinction. Open-ended questions were included to obtain data, later to be classified into a system of psychoeducational categories. An extended check list of behavior descriptions and underlying cause was also included for future study. Quay (1964) has shown the feasibility of overall packaging of behavior check list items into meaningful syndromes, and this became the basis for the behavior descriptions.

For the classification system, we are indebted to Rabinovitch (1963). His system proposes six basic categories of psychoeducational disturbance, with subcategories adduced where clinical experience indicates that they are meaningful for differential treatment. These categories are as follows:

1. Neurotic
   (a) Internalizing (depression, withdrawal, obsessions, phobias, psychophysiological reactions, etc.)
   (b) Externalizing (acting out, counteraggression, negative oppositional attitude, etc.)
2. Encephalopathic
   (a) Motor involvement (driven-ness, emotional instability, overreaction to stimulation, perseveration, etc.)
   (b) Language symbolization involvement (dyslexia and related learning problems, orientation deficiency, symbolization difficulty, etc.)
   (c) Convulsive disorders
3. Schizophrenic
   (a) Relatively intact intellectual functioning (verbal communication present, accessible to relationships, etc.)

(b) With retarded intellectual functioning (mutism, marked withdrawal, autism, inaccessibility, etc.)

4. Primitive-Neglected
   Relationship capacity relatively intact, but skills and values impaired with resultant behavior problems
5. Affectionless Personality
   Capacity for depth relationships severely impaired
6. Undifferentiated Academic
   (Note: Category 6 does not appear in the original Rabinovitch list.)

It was often difficult to assign cases to specific categories for two reasons: (a) frequently there was a lack of definitive information in the responses to our open-ended questions; and (b) often the evidence seemed to indicate a combination of two or more syndromes. Additionally, the primary diagnosis was often clouded by secondary overlay of quite a different sort. In practice, the information on each pupil was studied and an assignment made independently by two clinicians. Disagreements, amounting to 57 percent of the total *N* on which data were available, were discussed and resolved, except for 190 cases, in which a third, more experienced clinician made the final determination. In 77 cases, data were insufficient to allow any assignment to these categories. Table 18 shows the distribution, by sex, over the several diagnostic categories.

Thus, on the basis of data provided by the teachers themselves, more than half the children in our sample fell into the general neurotic classification. The largest single group was made up of acting out neurotic

TABLE 18

Distribution of Diagnostic Categories by Sex

Syndromes			*Boys Percent* ($N = 367$)	*Girls Percent* ($N = 75$)	*Total Percent* ($N = 442$)
Neurotic	[a] (1)	Internalizing	21	29	22
	(2)	Externalizing	42	15	38
Encephalopathic	(3)	Motor	4	1	3
	(4)	Language symbol	3	7	3
	(5)	Convulsive	1	0	1
Schizophrenic	(6)	Intact	8	7	8
	(7)	Retarded	1	0	1
Primitive-Neglected	(8)		13	28	16
Affectionless	(9)		1	3	2
Undifferentiated Academic	(10)		6	11	7

[a] Numbers indicate arbitrary designations for convenience in machine use.

boys, a syndrome which appeared significantly less often among the girls in these special classes. It should be borne in mind that these categories were actually representations of behavior descriptions made on the basis of teacher observation, and did not take into account the many possible sources of such manifest behavior.

The relatively large number of neglected children who evidenced disorganization and inadequate ego formation was unexpected. Very few withdrawn schizophrenics or convulsive organics are finding placement in these classes. Once again, the conclusion is inescapable that the children who were being served in these classes were more likely to be those who caused difficulty for their peers or teachers in the regular classrooms, and for whom no other kind of placement had been developed. In chapter one, it was apparent that the stated program goal in many instances was to serve a different, or at least a broader, group of children.

The problem of organicity was of high interest, since some studies have contended that this is a most significant group in terms of who find their way into these classes. With only about seven percent so designated, it would appear that this notion was not supported by data. Once again, limitations on the data imposed by the distinction between underlying cause and behavioral manifestations may have weakened the conclusion. Even with this limitation, it seems clear that these classes were not typically becoming havens for children with marked and obvious organic difficulty.

As yet another check on the issue of organically damaged children becoming a major clientele of these special classes, a specific question was asked concerning the child's neurological condition. Only 93 children were reported by their teachers as having sufficient neurological diagnosis available to permit the teacher to make a firm statement. In 42 of these 93 cases, organic involvement had been definitely ruled out. Forty-one cases revealed mild or moderate organic involvement, and ten others were reported as having severe neurologic disabilities. It is very possible that this matter did not come under adequate scrutiny in the diagnostic study of these pupils reported in the tabulations in Table 18.

Finally, in a totally exploratory effort, a list of some 140 behavior descriptions was presented to the teachers, who were asked to check which items reflected the problems of each child. Having done this, each teacher then indicated which of the problem items were severe ones for the child in question, and then in turn ranked the several most severe problems. These items were drawn largely from Peterson and Quay (1959), with some additions in order to fill out areas. Beyond this, each teacher was asked to indicate, on a list of underlying causes, which severe

problems were associated with which causes in the case of the individual child then being described.

Shields (1963) has explored these data in detail. Among other things, teachers stated that "lack of self-confidence" was the most frequent and most severe problem in the behavior of their children. They attributed to "needs or lacks reassurance about self," "poor self-image," "fears rejection," and "needs affection" the major causal place in the production of this behavior.

In this instance, the distinction between behavior and cause is not altogether clear because of an underlying ambiguity in the items. However, several of the next ranked items are more clear in this regard. Table 19 summarizes those behaviors which were seen most frequently as troublesome, and indicates in order the causes most frequently associated with them.

In the order of total frequency of mention, the next nine behaviors are as follows: (a) easily upset (231); (b) short attention span (230); (c) teases (255); (d) fearful (219); (e) disorganized in work (209); (f) angers easily (203); (g) defiant of authority (203); (h) restless (197);

TABLE 19

Most Frequently Occurring Behavior Problems and Causes As Viewed by Classroom Teachers

Behavior Description	*f* Mild	*f* Severe	*Associated Causes*
Lacks self-confidence	116	116	Needs reassurance, poor self-image, fears rejection, needs affection, wants recognition.
Unable to concentrate	139	107	Needs reassurance, poor self-image, inadequate intellect, fears rejection, needs affection, insufficient control at home.
Needs prodding	182	61	Needs reassurance, poor contact with reality, fears rejection, needs affection, needs reassurance.
Feels inferior	152	90	Needs reassurance about self, poor self-image, needs affection, fears affection, rejected by parents, wants recognition.
Poor self-control	125	113	Insufficient control at home, needs reassurance, poor self-image, wants recognition, fears rejection.
Argues	148	83	Insufficient control at home, wants recognition, fears rejection, needs affection, needs reassurance.

and (i) blames others (195). Eliminating those items which are behavioral-inferential rather than purely behavioral, the major problems seen by the teachers involved aggressive, acting out behavior. This was quite consistent with the emphasis seen earlier in the Rabinovitch classification upon neurotic externalizers as the single largest group of problem children in these classes.

At the other extreme, there was little evidence of behavior which would indicate that many of the children were severely disturbed. Descriptions like "mute" (4 mentions) "nauseous" (6 mentions), "soils or wets self" (9 mentions), and "exhibits self" (15 mentions) were most infrequently used, indicating that behavior evidence associated with very severe disturbance was seldom seen.

As to sources of the behavior disorders, the teachers restricted themselves to rather common-sense, basic mental hygiene notions. Most frequently stated as causes were items such as "needs reassurance about self" (665), "poor self-image" (612), "fears rejection" (611), "needs affection" (561), and "insufficient control at home" (514). Dynamic or psychoanalytically oriented causes were most infrequently used, although general home conditions and parent-child relationships were seen rather frequently as causes. Apparently teachers were reporting on children using terms in which they were taught to think; they did not rely on dynamic theory. In view of the nature of their conceptualization about children, it is no wonder that difficulties in communication arose between the teacher and the clinician.

Summary

This section has reviewed certain factors regarding the nature of the clientele, including their age, sex, intelligence, and academic achievement. These pupils seemed to suffer a significant degree of academic retardation, even though intelligence quotients were normally distributed throughout a large sample. Many children came from families which showed pathogenic interpersonal and sociological conditions, although individual parent-child relationships did not appear (in the teachers' eyes) to be as bad as expected. More than half the sample were neurotic, with the majority of these showing significant acting out. Another large group was the primitive-neglected. Few cases of organic impairment were recognized, but it is believed that the group contained many cases of mild perceptual deficit associated with reading problems. Caution was indicated in the interpretation of these data because the categorizations were based almost exclusively on behavior descriptions.

Teachers for the most part responded to problems which involved

acting out of one kind or another. Their view of causes was basically oriented to a commonsense, mental hygiene approach, and psychoanalytic-dynamic causes were little recognized. Disturbances in the family constellation did play a part in the teachers' thinking about how the children developed their problems. It is apparent that the classes had a high quota of acting out youngsters, and that psychotic or severely disturbed neurotic children were not common.

4

Classroom Conditions and Operations

This section contains a detailed examination of the actual conditions and operations found in the special classes. The concern is with physical conditions, class size, length of day, time utilization, preparation of the students for placement, various methodologies, control and back-up procedures, individualization, and the use of consultation.

Physical Conditions

It was more common to find programs housed in basements than in specially designed facilities, but, overall, the physical arrangements provided were quite good. Typically, the special classes were housed in regular elementary classrooms, and were fairly well lighted, ventilated, and equipped. In general, except in the junior high, teachers regarded the self-contained type as more adequate, since it allowed for continuing supervision of pupils, and avoided their continual use of halls where contact with other children and classes sometimes produced management problems. A simple rating scheme was devised: it took into account: accessibility, room adequacy and size, lighting, toilet facilities, special equipment, space for individual and group work, space for isolation of a child, etc. Table 20 presents the distribution of this physical facilities index across the fifty-three classrooms on which data were obtained.

TABLE 20

Adequacy of Physical Facilities

Category	*Score range*	*Percentage*
Very poor	0 - 4	6
Adequate	5 - 9	52
Very good	10 - 14	36
Outstanding	15 - 19	6

A matter of concern to many teachers was the availability of space for isolation, segregation, or removal. Adequate space for crisis management, individual work, or private consultation with children was a strongly felt need and one which was not adequately met. Some teachers suggested that it would be desirable if space were available to provide individual booths for the pupils, similar to those advocated for work with the brain damaged. Others expressed a wish for quiet rooms familiar to workers on psychiatric wards. For the most part, such special facilities were not provided, and the teacher had to improvise. Table 21 presents the data on available segregation space.

TABLE 21

Space Utilized for Pupil Segregation

Type of Space	*Percent Utilized* ($N = 74$)
Nothing available	40
Out of room, in hall or adjoining room	26
Within room, by dividers, screens, bookcases	12
Individual booths for each	3
Special isolation room	4
Principal's office	3
No Data	7

While facilities for general program purposes were good, the condition was much less satisfactory where special segregated space was concerned. In one or two instances, booths and segregated space were available but not used. Some programs were even forced to call the parent to come and remove the child when crises occurred. The function of the principal's office was viewed as important in this as well as in other ways. Forty percent of the programs possessed no segregation space whatsoever. Space alone did not solve the problem and back-up personnel were vital. Many teachers recognized in their children a wish to use private space when the child himself felt the need. Closets, bathrooms, and other marginal areas were sometimes pressed into service. Some programs established segregated hall areas, which were defined only by the presence of a chair or screen. There was recognition that segregating a pupil alone was often more damaging than helpful, and that separation in the context of human support was the goal.

Class Size

Table 22 indicates a general commitment to the notion of smaller classes with more individualization and easier control as goals.

No classes contained more than 19 children at any one time, although the highly transient programs would often run as many as 35

TABLE 22

Class Membership: Minima and Maxima

($N = 74$)

Class Size	*Percent of Classes of Given Class Size*	
	Maximum Size	*Minimum Size*
0 - 4	7	27
5 - 9	58	57
10 - 14	29	15
15 - 19	6	1

children through a single classroom in the space of a year's time. The most common arrangement was: begin small, add pupils until a modal group of 7 to 10 has been reached, and then maintain the core of that group through the year. Other programs continued to add students all through the year and/or paid less attention to group interaction. Finally, certain programs started out with 15 or more children and discovered empirically which related well, after which those who posed difficulty to a particular group were weeded out. Some states have established class size by legislation, and the magic number in these instances seems to be ten. Underlying such legislation is a variety of pressures aimed at keeping costs down, providing some individual attention, and drawing upon the experience of other special classes, e.g., mentally retarded.

Length of School Day

Most of these programs operated on a regular or slightly shortened school day, typically 9 a.m. to 3 p.m. Some operated their programs for the full day but had a different clientele in the a.m. and the p.m. Most pupils attended full-time, though it was obvious from the preceding that this sometimes meant a half-day schedule. Those who did not participate in the special class for the entire day may have been integrated in regular classes part-time, may have been in nonschool placement, or may have been at home. It was interesting that transportation factors often determined when a pupil left school. Pupils were placed on reduced schedules for a variety of reasons, including "improvement," "after a while he exceeds my tolerance level," "to keep the group from falling apart," or "he falls apart himself by noon."

In spite of this awareness of school tolerance differences, by far the majority of children were expected to conform to whatever full-day or half-day schedules were established. Table 23 indicates the distribution of programs over several typical school day lengths. It can be seen that the majority of programs were planned to be essentially a full-day operation, and that reduced time programs were relatively rare.

It is questionable whether the last hour or so of the longer sessions

TABLE 23

Length of School Day

Hours	*Percent of Classes* ($N = 74$)
Less than 3	4
3 - 4	7
4 - 5	33
5 - 6	46
No Data	10

are satisfactorily tolerated by either the pupils or their teachers. In addition there are infrequent relief provisions for teachers (or pupils) whose psychic energies are largely exhausted by the demands of an especially trying day.

Pupil Perceptions of Present Class

Somewhat under one-half of the programs indicated that they utilized a regular plan to prepare the pupil for the special class. Either school or clinical personnel were utilized for the purpose, with the psychologist, social worker or program administrator being most often used. Sometimes joint sessions were held in which parents, child, teacher, and psychologist went over hopes and plans for the placement. More elaborate preparation included pre-placement visits by the child and/or parents to the special class, or careful individual counseling. The typical pattern, however, where any preparation was done, involved the teacher, or more typically the principal, breaking the news, influencing the parents, discussing the pupils' particular problems, and describing the remedial work that would be attempted.

In a few cases, facts were faced apparently in a blunt way. Some typical quotes illustrate this approach: "you are not doing well–this program may help"; "you are going to be placed in a special class to get individual help with your academic problems"; and "the child knows already, so we don't talk formally unless it is requested."

With this variety of practice, it was not surprising to find that an equal variation existed in the pupils' perceptions of how they came to be in the special class. Naturally, a good bit of information was given to them, either directly or implicitly, once they entered the class. One is left with the feeling that the pupils had a surprising level of insight into the reasons for their participation. Table 24 reveals the actual responses of the pupils to the question "How did it happen that you came to this class?"

TABLE 24

Pupil Perception of Reasons for Assignment

Reasons Stated	*Percent Stating* ($N = 454$)
Rationalized (e.g., "I decided to")	6
Forced (e.g., "I had to come")	10
Behavior (e.g., "temper, way I acted")	36
Achievement (e.g., "couldn't do work")	28
Didn't like other school or teachers	2
Didn't like kids, trouble with kids	2
To get help with school work	15
Miscellaneous	1

Pupils saw the twin problems of behavior and achievement as accounting for about two-thirds of their placements. If we add those who believed that they came for academic help, we have over three-fourths of the population. Less than one-fourth found it necessary to project or rationalize the responsibility.

The children's perceptions of their situation, both in terms of problems experienced and in terms of satisfaction with the placement are presented in Tables 25, 26, and 27.

TABLE 25

Pupil Perception of Biggest Problem in Special Class

Type of Problem	*Percent Stating* ($N = 519$)
Have no problems	8
General (e.g., no fun, etc.)	20
Academic problems (Specific subjects 37)	49
Peers	13
Teacher	2
No response	8

Nearly half of the children saw academic problems as their major difficulty. This was in contrast to the 28 percent who believed that their placement was motivated by academic difficulties, and also reflected the emphasis placed upon academic work in many of the classes. Another interesting item which appeared is the difficulty with peers. Peer relationships were a more serious problem in the special class because of the intensity of relationships in the smaller groups, and because of the high saturation of children with problems. There were fewer "cushion" children to absorb the pathology, and the more in-

tensive interaction brought peer relationship problems out in the open. Among the areas of academic difficulty, reading was most frequently mentioned.

TABLE 26

Pupil "Likes" about Special Class

"I Like Best"	*Percent Stating* ($N = 519$)
Everything	13
Teacher	22
"Kids"	7
Help I get, success	20
Classroom activities	26
Nothing	4
Miscellaneous	3
No response	5

TABLE 27

Pupil "Dislikes" about Special Class

"I Would Like to Change"	*Percent Stating* ($N = 519$)
Nothing	34
Teacher	7
"Kids"	15
Academic aspects	12
Classroom activities	4
Everything	9
Miscellaneous	11
No response	8

The majority of the pupils appeared to be quite satisfied with their placements. Only 12 percent found the academic aspects of the class the most important thing to change, so that while almost half saw academics as their major problem, they apparently felt that this problem area was being dealt with fairly satisfactorily. Only 9 percent were totally dissatisfied while 13 percent liked everything. Peer relationships seemed again to be generally important, both positively and negatively. Teachers can be gratified to note that they are not the central focus of feelings of dissatisfaction which existed; they did, in fact, rate high in the "likes" category.

Teachers Perceptions of Class as a Whole

Teachers perceived motivation and behavior control as the major problems characterizing the great majority of these classes. These were es-

pecially trying problems for the teachers at the beginning of the classes, as one pungent quote implied: "The early weeks were hell." This attitude was implicit in the comments of many others. "Coventry" was an expression used to describe a condition which included screaming, throwing books, injuring each other, name calling, swearing, and general chaos. Some few classes were never seen as anything other than disciplinary centers, although this was not generally the case and a few teachers reported that they had never had any real discipline or control problems.

As the year progressed, teachers saw the problems vastly reduced or leveled off. A few, however, stated that control problems were never entirely eliminated. As a matter of fact, most classes were seen at a time when a slow-moving second stage was in progress, with major chaos eliminated but with periodic outbursts by individual pupils. In this second stage, efforts and problems centered around more individualized help with both behavior and academics. Since the early confusion was brought under control in a relatively short time, teachers often developed unreal expectations that the more basic problems would be dealt with as quickly. In this, they were disappointed, but most of them gradually accepted this and applied their energies to the long effort.

What might the teacher expect after the basic control level is established? Silliness, manipulation, and attention seeking behavior replace the more unacceptable acting out. Often the problem moved from behavioral difficulty into the academic realm, with motivational and learning problems becoming paramount. In some instances, fearful, withdrawn children began to act out. Some found an increasing number of instances of peer friction, as the intensity of the group relationship increased and the children tested increasingly what the limits were in peer relationships. Increased competitiveness among the children was noted as a result of the development of individual pupil-teacher transferences in the context of group tensions. Other issues mentioned were the difficulties involved in weaning children away from the intensive relationships of the smaller class, and moving them back into regular class settings. Highly disturbed children remained a problem throughout, both in terms of the teacher's relative uncertainty about what to do with them, and the disruptions they produced in the group operation. Teachers also felt strongly that they were differentially capable of working with particular types of children, although every type of child was favored by at least one teacher. Finally, preventing regression to previous levels of academic or behavioral performance was seen as a continuing problem by several teachers.

Thus, when things began to get better, the classes seemed much more like normal ones, and expectations for rapid internal change to accompany the greater outward adjustment may have been too high. Teachers then reality tested the situation, and for the most part, things settled down to continuing constructive work. Tables 28 and 29 provide a summary of teacher perceptions of their initial and present problems with their classes.

TABLE 28

Teachers Perceptions of Initial Problems

Type of Problem	*Percent Indicating* ($N = 74$)
Control-management	54
Hostile-aggressive behavior	51
Academic-motivational	24
Intra-group conflict	23
Underachievement	19
Hyperactivity	16
Wide individual differences	13
Withdrawn children	12
Perceptual problems	4
No problems or no data	11

Most teachers listed more than one problem. The majority of the cumulated total fell into the control and management categories, with academic, motivational and underachievement problems running a poor second. The special problem of the withdrawn child or the child with a perceptual handicap was mentioned relatively infrequently, although there was awareness of such problems.

Table 29 indicates a general decrease in the number of problems mentioned and certain interesting shifts in emphasis. Again, academic-

TABLE 29

Teacher Perceptions of Present Problems

Type of Problem	*Percent Indicating* ($N = 74$)
Same, reduced intensity	50
Fighting, bickering, rivalry	10
Academic-motivational	27
Attention-seeking	18
Nonresponsive pupils	9
No problems	2
No data	13

motivational problems played a growing part, as did the problem of individual pupils who failed to respond. Aggressive acting out behavior, while still of consequence, played a much smaller role. The most noteworthy single finding was the general reduction in intensity of problems, particularly those concerned with management and control. Lest the reader be led to consider that these changes represent a "bed of roses" condition for the special class teacher, it is well to note that the closer to normal the external behavior becomes, the more difficult it is to account for continued achievement and peer relationship problems. As one teacher stated, "It is harder to live with the annoying than with the traumatic—when they behave really badly, you don't expect too much—but when they settle down, you begin to want them to achieve as much as the child in the normal classroom, and when they don't you wonder what you're doing wrong." Problems remained, as Table 30 shows, and motivation became a more significant difficulty.

TABLE 30

Teacher Perception of Motivational Problem

How Hard is Class to Motivate Now?	*Percent in Category (N = 74)*
Not hard now	27
Somewhat difficult	25
Very difficult	40
No Data	8

TABLE 31

Teacher Perception of Control Problem

Is the Class Hard to Control Now?	*Percent in Category (N = 74)*
Yes	10
Sometimes—outbursts	23
Particular Children	12
No	48
No Data	7

Table 31 indicates the level of control problems perceived by the teachers. Instances of general class upheaval were considerably fewer, and control problems revolved more around the problems and occasional outbursts of individual children. Teachers said they had learned "just how to deal with this group," "how to make limits stick," etc.

Physical punishment played no large role in the control efforts. Physical control, as opposed to punishment, did play a part in many classes, although special problems were posed by older children who were physically stronger than the teacher. In such instances, help was often called in if the teacher's resources were exceeded.

Classroom Methodology

One of the most interesting, and yet one of the most difficult examinations of these programs concerned the specific methodologies which were applied in the several classrooms. Data were drawn from two major sources: descriptions of the actual program methods used and supplied by the teachers, and observations made by the site visitors.

Some preliminary insight into the diversity of the programs was provided by two bits of data obtained by site visitors. Through a series of questions, the site visitor sought to ascertain the principal emphasis used by the teacher in conceptualizing and describing the problems of his children and his approaches to them. These questions and their responses were then summarized by the site visitor in an overall index, "How the Teachers Describe Pupils." The proportion of teachers utilizing each of the several overall categories, as determined by the site visitors, is presented in Table 32.

TABLE 32

Site Visitors' Ratings of How Teachers See Pupils

Category	*Percent Utilizing* ($N = 74$)
Educational	46
Symptomatic—descriptive	24
Psychodynamic	18
Mental Hygienic	8
Complex psychoeducational	1
No data	3

Teachers conceived problems primarily in educational and behavioral-descriptive terms. A minor proportion showed the effect of their contact with clinicians and/or previous institutional work. The mental hygiene framework, which involved a minor use of dynamic concepts, was not widespread in the judgment of the site visitors.

The site visitors also made an appraisal of the teacher's methodological approach along the therapeutic-academic dimension. Table 33 indicates the proportional distribution of the classrooms along this dimension.

TABLE 33

Site Visitors' Ratings of Teacher's Classroom Emphasis

Category	*Percent Utilizing* ($N = 74$)
Intense Therapeutic	7
Mild Therapeutic	7
Balanced	25
Academic	45
Intense Academic	12
No Data	4

Obviously, conditions were not as clear-cut as these categorical descriptions would imply, but the emphasis is quite clear. Only a minority of teachers stressed therapy as the major goal, although there was no greater a proportion who would exclude it entirely. Time and again the site visitors justified their rating of balanced or academic by pointing out the therapeutic impact of gentle assistance in facing reality, fostering self-confidence, and providing for success in what was essentially an academic milieu. The site visitors also frequently observed therapeutic work with the whole group or subgroups, and also noted occasional evidences of group feeling and collective identification with the teacher. However, peer relationships had so much meaning to these children that the teacher, as the sole unifying force, made a sequence of one-to-one more familiar. Qualitative reports suggested that the group as a therapeutic means or agent was not being fully exploited.

A related aspect of the therapeutic-academic dimension involved the question of what proportion of pupils in the classes were in therapy outside the classroom. In general, when outside treatment was stressed, the orientation of the classroom itself was likely to be somewhat less therapeutic. Data of this sort were very difficult to obtain, primarily because of a lack of sufficient definition of what was meant by "outside therapy" and because of uncertainties on the part of many teachers and administrators as to what was happening to their children outside the school. Useful data were available from only 37 of the programs studied. Of these, six reported 100 percent of their students in outside treatment, three reported 80 percent, two reported 70 percent, seven reported 50 percent, five reported 30 percent, eight reported 20 percent, four reported 10 percent, and two reported none. This material was revealing: for one reason or another, about half the programs put no great stress on individual therapy outside the school. Our best estimate indicated that about 24 percent of the children in the classes visited were in outside therapy. Yet, the essential questions were not answered: If there

was therapy, how much of it was related to what went on in the educational program? Was the therapy really window dressing for the program, or was it related to the functional life of the child? Most teachers felt that it would be useful if more of their children were in conjunctive therapy.

Specific Methodologies

Seventy-four teachers reported on specific classroom methodologies used including teaching techniques, motivation methods, grouping, evaluation, etc. Site visitors, using the Ryans scale, rated pupil behavior on four dimensions and teacher behavior on 18 dimensions. Below is a listing of the frequency of occurrence of some of the techniques reported by the teachers themselves.

Frequency List of Methodological Procedures Mentioned By the 74 Teachers

Indicated by 75 to 100 percent of sample

1) *Work more highly individualized both in rate and level
2) Use textbooks, workbooks, and drill material

Indicated by 50 to 74 percent of sample

1) Special remedial reading programs
2) "Whole classroom group" instruction seldom used

Indicated by 25 to 49 percent of sample

1) Strategic seating in classroom setting
2) Employ overall remedial-corrective approach
3) Reward by self interest activities after assignments completed
4) Employ less structure—more self selection
5) Evaluation relaxed, errors minimized
6) Evaluation by use of achievement tests
7) Motivate through encouragement and deeper teacher support and encouragement
8) Employ more structure and demands
9) Gear work for success
10) Neutralize anxiety-producing material
11) Use sensory, perceptual, kinesthetic procedures
12) Employ group projects
13) Less academic stress and lower expectations
14) Use manipulative materials and games methods

Indicated by 1 to 24 percent of sample

1) Less structure—more fluid and flexible to meet situations
2) Less structure—more pupil freedom
3) Motivation—gradual increase of expectation over time
4) Repeat until correct if fails

5) Self-selection in grouping for instruction
6) Use of audio visual—films, recorders, etc.
7) Use progress charts, prizes for motivation
8) Evaluate with reading tasks, workbooks
9) Less grouping for instruction, more individual activity and freedom to move about
10) Use concrete rather than abstract materials
11) Avoid highly stimulating materials
12) Use positive self-esteem from successes for motivation
13) Reduce competition
14) Let pupil decide what constitutes good work
15) Evaluate by observation and teacher-made tests
16) Independent work and projects rather than large group
17) Use of food and treats as rewards
18) Stress material with intrinsic pupil interest
19) Utilize shorter period classes
20) [b]Use grades as rewards

[a] Highest frequency—94% of total
[b] Lowest frequency—2% of total

Diversity was once again the keynote. There were few universal practices and much less homogeneity than one would find if one gave a check sheet where presumed desirable techniques were listed and the teacher checked off those used. The class process in general resembled regular classes. In addition to the use of traditional materials—texts, workbooks, and drills, the different elements which stand out are the individualized nature of the work for each pupil, the difficulty of teaching the class as a whole group, and the special attention needed for reading. As several teachers noted, "no method or methods work for everyone. We do many different things for different pupils." There may even be nothing which is usually done, all of which points to the fact that the basic difference in methodology is the degree to which it is individualized. Another way of saying this is that any method or act is a product of a whole set of conditions operative at that given instant. There is a place for almost every technique or device. The several teachers who stressed particular conditions as determining method demonstrated the matter of appropriateness as being a function of condition.

A general conclusion was that these classes covered the regular school content whenever possible, though on a more corrective teaching basis with the rate, level, and particularly the expectation reduced. The teaching was mentioned as being more intense or handled with extreme definitiveness, clarity of instruction, and concrete procedures.

More traditional methods seemed to be used often with older children, even to the point of exams on specified content, as approved by regular classroom teachers. New material was presented with a maximum of teacher support and the teachers tried to find new and interesting subject matter material with high interest and low vocabulary. Learning was approached on many levels in an effort to make it meaningful. Still there was repetition of material which had been missed, hopefully in a different way. One teacher always obtained "a complete, positive response before the pupil goes home so that there will be no carry-over of a failure experience."

For most of the time, individual work was the rule, but social studies tended to be used for whole group learning; often the work was at several levels, but the overall vagueness of identified curriculum content here versus the accepted sequence in arithmetic probably accounted for it being the "one we all do together." Otherwise the classroom pattern was teacher-pupil one-to-one while free activity or seat work went on for the others. One teacher summarized: "I may spend an hour with one child on a task to get some success." Another felt that the individualization was necessary but it decreased the quality of the work. The fact that each child was on his own and one never had to wait for everyone to move ahead was seen as a real advantage by another teacher.

While one teacher "gets rid of all props as soon as possible," many emphasized the use of various motivational devices. There were those who included weekly individual assignment sheets and task completion requirements, but an equal emphasis was put on gratification and rewards. "We always alternate work and play. They bring their own records." Participation in sports may be used. Control by rewards was mentioned with a fair frequency. One teacher indicated that he literally pulls them along; one teacher took pictures of the class and completed projects, which of course the class liked. Self-kept files for review and progress checking were used. Tasks around the room motivated some pupils. The fact that parents were relieved when the child was less of a school problem was also utilized to spur on some pupils. One teacher found the use of teaching machines too monotonous for his pupils, though several other teachers indicated they were anxious to try these devices for stimulation but very little was reported on this method. With other pupils, work experiences in the cafeteria or waxing cars were used to teach the value of cooperation. One teacher used as rewards coffee, extra recesses, and a trip to the bowling alley but certain complications arose with routines involving the school in general. "Having a whole school with many interesting things within our room" was another procedure used to encourage and motivate the pupils. A class-

room with hand tools, punching bag, a ping pong table, refrigerator, and stove offered a variety of ways to "stimulate" children, but other teachers would say, "to distract them." A typewriter and an adding machine were mentioned by one teacher. Several mentioned pets. But all in all, it was difficult to see any great difference between the resources the majority of special teachers have and those that regular teachers use. A few classrooms were lush but most depended upon the adult's ingenuity. Choral reading helped in one case, group discussion in another while a third found group discussion too stimulating, leading to impulsiveness. There were those who made extensive use of the tape recorder, phonograph, and television. A few had head sets so a pupil could listen without bothering others. One teacher had food available at all times, and not just as a reward.

Perhaps the most surprising thing was the lack of emphasis on what might be called specific therapeutic approaches. Teachers did not talk in terms of the "therapy" except as the things they did were in themselves therapeutic. Few seemed to have any planned group therapy or counseling though they might have spent much time in trying to handle problems. There were a few who talked of finger painting or art in therapeutic terms, and one reported using such topics for themes as "a medicine I would like to invent," "what would you do if there were no teachers?" and "a machine I would like to have to help me in school." When they discussed their "inventions," the implications for the children's own lives became part of the discussion. Other teachers said that, to the pupil, each day was just another day of school. The goal was to develop a sequence of acceptance: pupil-teacher, pupil-teacher-peer, pupil-peer, pupil-outside world. Occasionally, the teacher would serve as the counselor working through such material, often with clinical guidance. Another way teachers expressed a direct therapeutic intent was through planned efforts to reduce anxiety, support the ego, and give success, when this was done explicitly for therapeutic gains. The contrary view was more common. This work was seen as just a logical extension of regular teaching with nothing really different or special. Several special teachers served as consultants to other teachers in therapeutic-educational planning for the child in the regular classroom. There was more attention to drawing (sometimes finger painting) than one might have found in regular classes. There was more freedom of movement implied. One teacher indicated the use of stories as bibliotherapy. There was the ever present more support and backing. Only two indicated that school work was secondary and not essential compared to adjustive efforts. There were a few who introduced on a planned basis high anxiety material to help the pupil build up his ca-

pacity to handle such difficulties. They employed protective intervention of "removing sharp tools until the children demonstrate control." Another introduced school projectives, story writing, and discussion upon occasion. There was the class where fear of the teacher was used at first to control a group of socially acting out adolescents. The teacher had a yardstick. "If he wanders, I'll bounce him right out of his chair. The pupils get adjusted to this and it shapes them up." The total tone of this and the overall impact was hard to determine. It is safe to state that the field of therapeutic education is a long way from any articulate synthesis if one looks at what is going on rather than the theoretical writings about what might be desirable.

Qualitative Aspects of Teacher's Classroom Role

Each teacher, in addition to the specific methodologies he applied, functioned in the classroom as a human being among human beings. The particular attitudinal stance which the teacher assumed in approaching his children had an important function in producing the total outcome. The teachers were questioned as to what they perceived to be most valuable tools, skills, and/or resources. The pattern of the teacher's values and his emphasis upon himself as an agent of change in the lives of the children was reflected in his responses.

The most significant cluster of assets was seen around interest in and love of children—a feeling for them and the ability to understand them. Qualities of empathy and sensitivity were frequently mentioned as a part of this general cluster. A second identifiable cluster had to do with being able to instill confidence, to provide encouragement, and to offer warmth and support. Patience, a sense of humor, personal stability and maturity, and sheer physical energy were also frequently mentioned. A few teachers emphasized the ability to give knowledge and skills to children as a means of providing the child with the experience of success. Not a few mentioned the capacity to be firm, and to set and enforce limits.

A general liking for and responsiveness to the type of work and challenge offered by such special classrooms was also seen as important. Surprisingly, there was no mention of specific courses or other formal methods of gaining knowledge about children, but there was a considerable emphasis upon experience with similar children, teaching smaller children, and raising one's own children. Two mentioned the ability to operate well as a member of a team and viewed the team as an important resource. A few noted special talents (e.g., in music), and one felt that the chief asset was the ability to work effectively with parents.

Irrespective of the stated therapeutic versus academic emphasis in the program, the teachers sketched an image of themselves which emphasized the interpersonal relationships of the classroom as salient.

Another qualitative aspect explored was the degree to which the teacher felt under pressure to produce academic gains in his pupils. A pilot study had suggested that there was much concern about academic gain. For this reason, teachers were asked to what extent various interested parties stressed academic accomplishment as a goal of the special classes. Successively, teachers rated the degree of involvement of pupils, the administration, the parents, and the special service personnel in this goal. Pupils have been known to have motivational problems in this area so it was not surprising to find teachers rating them as relatively low in involvement in academics, a condition implied before as a possible defensive measure on the pupils' part. The two groups with the highest involvement were the parents and the teachers themselves. Administration appeared to have a more relaxed attitude, and the special services group were the most permissive. Thus, while the teachers stressed the importance of their interpersonal role with the children, the overall conclusion was that these classes were, in their eyes, for learning, and that relationships were at least as important as means to this goal as they were as ends or therapeutic agents in themselves.

Teacher Autonomy

Almost without exception, the teachers in these programs had a very wide degree of operating freedom. Consultation, where available, was not equivalent to supervision, and many times the teacher followed his own designs with no interference and even with little assistance. As one said, "All responsibility is left to the teacher." Except in very unusual instances, teachers chose methods without consultation. In the selection and out-placement of clientele, there was much less freedom. Few had veto power over the proposed admission of a pupil, or the proposed removal of him from the classroom. All, of course, had authority for immediate management and for crisis management, and some possessed the right of exclusion for short term handling. In cases of long term exclusion or readmission after exclusion the teacher was usually only a participant (albeit usually an important one) in committee decisions, and may have had very little decision power.

Typically in matters of curriculum, help was available, usually through regular school system curriculum personnel, but there was little evidence of extensive use. Additional help was provided by special services workers or consultants. In matters of management, there was almost always some help available for the asking, although the level of

its utilization varied. One principal indicated that there was a studied hands off approach on the thought that the teacher himself knew the situation best, and that as an administrator he did not wish to intrude the viewpoint of the regular educational program.

The above made some of the devotion to the team approach in mental health somewhat less than meaningful. Teaching, at the operating level, was not essentially a team operation. The committee and supervisors, the consultants and administrators, all apparently had less influence on the moment-to-moment operation than might have been anticipated. Much depended on how much a teacher asked for help, and how he used it when he got it, but the action-impact of the multidisciplinary approach so often verbalized was, as a general thing, far from operative. When there was a difference in opinion, communication was often narrowed to include only those persons who were in sympathy with one or another point of view, and it was typically the teacher who was in primary control of the channels. In several cases the teacher also had the dominant, or exclusive, role in parental contact, including a group therapy or counseling relationship with them. In one program, the teacher was described as "the primary line of responsibility to carry out the recommendations of the interdisciplinary screening committee." In any event, it was difficult to overestimate the central role which the teacher and his point of view played in the operation of the program.

Site Visitors' Ratings of Teacher Behavior

As indicated previously, one of the tasks of the site visitors was to conduct first-hand observations of the teacher's operation in his classroom. On the basis of these observations, the site visitors then rated teacher behavior on the 18 seven-point scales of the Ryans instrument. The means and standard deviations of these ratings for the group of 74 teachers observed are presented in Table 34.

As this table reveals, the observers came away with generally a very good impression of the teachers' classroom behavior. Fair, alert, responsible, and broad were the adjectival poles of the dimensions on which the teachers rated highest. Somewhat more toward the lower end of their dimensions were the observations on Autocratic-Democratic and Stereotyped-Original. The first was as one would expect, since it was necessary for teachers to hold firm on the rein. Perhaps the second was a reflection of at least occasionally being repetitious in the efforts to develop skills and knowledge in their children.

Site Visitors Ratings of Pupil Behavior

The pupil rating portion of the Ryans instrument was also completed by the site visitors on the basis of their classroom observations. Table 35

TABLE 34

Site Visitors' Ratings of Teacher Behavior

(1)	Mean	*SD*	(7)
Partial	6.03	1.30	Fair
Autocratic	4.70	1.92	Democratic
Aloof	5.63	1.62	Responsive
Restricted	5.68	1.59	Understanding
Harsh	5.75	1.41	Kindly
Dull	5.68	1.46	Stimulating
Stereotyped	5.21	1.64	Original
Apathetic	5.94	1.23	Alert
Unimpressive	5.78	1.13	Attractive
Evading	5.98	1.40	Responsible
Erratic	5.71	1.24	Steady
Excitable	5.73	1.56	Poised
Uncertain	5.56	1.24	Confident
Disorganized	5.63	1.29	Systematic
Inflexible	5.57	1.52	Adaptable
Pessimistic	5.76	1.63	Optimistic
Immature	5.83	1.23	Integrated
Narrow	6.05	1.97	Broad

TABLE 35

Site Visitors' Ratings of Pupil Behavior

(1)	Mean	*SD*	(7)
Apathetic	5.14	1.46	Alert
Obstructive	5.07	1.49	Responsible
Uncertain	4.68	1.53	Confident
Dependent	4.20	1.78	Initiating

presents the findings on these variables for the children in the classroom groups observed.

Pupils as a whole were considerably above the central scale position on the Alert and Responsible Dimensions, but lower on Uncertain-Confident and Dependent-Initiating.

Factor Analysis of Teacher Methodology and Observer Rating Variables

As a means of ascertaining whether the myriad of techniques, methods, approaches, and behaviors on the part of the teacher were a part of any meaningful patterns or syndromes, the variables were factored. This included the ratings of teachers and pupil behavior just described and the coding of the teacher methodologies that were discussed earlier. Infrequently appearing methods were combined or eliminated to reach the final number of variables for the factor analysis. Pearson Product-Moment Correlations were computed (biserial equivalents in the case

of the two category variables), and the correlation matrix was then analyzed by the Principal Axes method. A varimax rotation was performed, and eleven factors appeared. The entire correlation and factor analytic program was run on the University of Michigan IBM 7090 Computer System.

The eleven factors which emerged were then examined in terms of the variables which loaded on them for what seemed to be meaningful and rational clusters of teacher characteristics and methods. Each factor was then designated by a brief title best comprising the essence of the variable.

Factor I, which we term "Observer Stereotype #1—Poor Teacher" is composed largely of variables from the Ryans instrument, and these load on the negative end; i.e., such teachers were seen as apathetic, immature, evading, erratic, etc. Three of the four Ryans pupil dimensions also loaded on this factor, including Uncertain, Dependent, and Apathetic. The only variables which did not arise from the site visitors' ratings were two which load only .30 and .26 respectively. These were: (a) the teacher allows self-interest activity after all regular work is done; and (b) the teacher does not impose less structure nor allow for more self-selection of activity. This factor seems to comprise a rather insecure, inexpert teacher who sticks (perhaps rigidly) to the work of educating

FACTOR I
Observer Stereotype No. 1—Poor Teacher*

Variable Number	*Variable Name*	*Loading*
55	Apathetic—alert	—.81
64	Immature—integrated	—.81
57	Evading—responsible	—.79
58	Erratic—steady	—.76
61	Disorganized—systematic	—.72
65	Narrow—broad	—.65
59	Excitable—poised	—.64
53	Dull—stimulating	—.63
63	Pessimistic—optimistic	—.59
46	Uncertain—confident (pupil)	—.58
60	Uncertain—confident (teacher)	—.56
47	Dependent—initiating (pupil)	—.32
44	Apathetic—alert (pupil)	—.30
22	Allow self-interest activity after regular work is done	—.30 (yes)
20	Autocratic—democratic	—.30
54	Stereotyped—original	—.30
27	Impose less structure, allow more self-selection of activity	+.26 (no)

* Percent of matrix variance = 20.6%

the children in his care, and who cannot tolerate the additional freedom which self-selected classroom activity implies for pupils. Those listed are the several variables which load on Factor I, and the degree and magnitude of their loadings. In general, negative loadings on the Ryans dimension indicate that the low, or unfavorable end of the dimension loads on the Factor. In the case of the other variables, the direction of their loadings on the Factor is interpreted for the reader by the "Yes" or "No" in parentheses toward the right hand margin.

Factor II is also composed largely of variables from the site visitors' observations. It is labeled "Observer Stereotype #2—Good Teacher." The variables and their loadings on Factor II are listed, with the direction of the loadings indicated in a way which is consistent with the description in Factor I.

FACTOR II
Observer Stereotype No. 2—Good Teacher*

Variable Number	*Variable Name*	*Loading*
51	Restrictive—understanding	+ .89
52	Harsh—kindly	+ .86
50	Aloof—responsive	+ .81
56	Unimpressive—attractive	+ .74
62	Inflexible—adaptable	+ .65
54	Stereotyped—original	+ .60
49	Autocratic—democratic	+ .56
48	Partial—fair	+ .47
20	Uses progress charts, prizes, etc.	+ .40 (no)
47	Dependent—initiating (pupils)	+ .30
44	Apathetic—alert (pupils)	+ .26
37	Use subgroups for instruction	+ .25 (no)
19	Build positive self-esteem through success	— .25 (yes)
63	Pessimistic—optimistic	+ .25
64	Immature—integrated	+ .25
65	Narrow—broad	+ .25

* Percent of matrix variance = 17.5%

It can be seen that this stereotyped teacher is understanding, kindly, responsive, attractive, adaptable, etc. His pupils are more likely to be seen as alert and capable of taking initiative. Further, he uses neither progress charts nor subgroups for instruction, but he does attempt to build a sense of positive self-esteem in the students by providing them with success. The variable "uses subgroups for instruction" is in fact a U-shaped one, inasmuch as the teacher who does not may either (a) teach an entirely traditional class, instructing the entire group, or (b) focus almost entirely on individual instruction and thus not operate

at the level of subgroups. The failure to "use subgroups for instruction" really represents a higher level of individualization than is implied in this method.

We have titled Factor III "Observer Stereotype #3—The Happy Pupil." The reasons are obvious since the major loadings on the factor all arise from the positive end of the four pupil scales of the Ryans device. Rounding out the picture is a rejection of the use of grades as rewards, a feeling of optimism on the part of the teacher, and some concern about evaluating adjustment via personality tests. The variables and their respective loadings of Factor III are presented.

FACTOR III
Observer Stereotype No. 3—The Happy Pupil*

Variable Number	*Variable Name*	*Loading*
45	Obstructive—responsible (pupils)	+ .78
47	Dependent—initiating (pupils)	+ .53
44	Apathetic—alert (pupils)	+ .62
46	Uncertain—confident (pupils)	+ .46
24	Use grades for rewards	+ .32 (no)
63	Pessimistic—optimistic (teachers)	+ .25
43	Use personality tests to evaluate adjustment	— .25 (yes)

* Percent of the matrix variance = 8.0%

In Factor IV, the teacher appears certain of what he is to do, confident of his own ability to do it, and direct in his application of it.

FACTOR IV
The Autocratic, Controlling, Teacher Centered Syndrome*

Variable Number	*Variable Name*	*Loading*
37	Use subgrouping for instruction	— .56 (yes)
13	Special remedial reading program	— .52 (yes)
49	Autocratic—democratic	— .51
28	Less set, more flexible to situation at hand	+ .45 (no)
38	Self-selection in grouping	+ .34 (no)
22	Allow self-interest activity for reward after work done	+ .30 (no)
12	Highly individualized in rate and level	— .28 (yes)
49	Dependent—initiating (pupils)	— .27
24	Use grades for rewards	— .26 (yes)
43	Use anecdotal material, etc. to evaluate adjustment	+ .26 (no)
30	More pupil freedom, less conformity	+ .25 (no)

* Percent of the matrix variance = 7.5%

The teacher is rather authoritarian, and the pupils are seen by the site visitors as dependent. There is no emphasis on flexibility, self-selection, or self-interest activity. Adjustment and its evaluation seem to be of limited importance, and there is no providing for greater student freedom. Subgroups and individualized instruction, special remedial reading efforts, and the use of grades for rewards round out the picture.

Factor V is labeled the "Protective Teacher Syndrome." In it, emphasis is placed upon letting the child function at his own level within an atmosphere of freedom. This teacher expects his children to complete tasks and assignments, but he seems to try to get them to do this in a protective, supportive atmosphere. High individualization and the reduction of competition are the keynotes of this operation. He tries to avoid overstimulation, or threats. He would have children operate in relative isolation from their fellows, so that undue competitive stress is forestalled. This teacher is nonevaluative, and is seen by the site visitors as personally attractive and as having broad interests and information. The several variables and their respective loadings are presented.

FACTOR V
The Protective Teacher Syndrome*

Variable Number	*Variable Name*	*Loading*
9	Reduce competitiveness, each child performs according to own ability	— .54 (yes)
36	More individual activity, freedom less grouping for activity	— .51 (yes)
25	Expect, require, task completion	— .44 (yes)
20	Use progress charts, prizes, stars cards for good behavior	+ .43 (no)
12	Highly individualized in rate and level	+ .33 (no)
14	Use audio-visual materials	— .32 (yes)
2	Use cubicles, screens, booths	— .29 (yes)
23	Use food rewards	+ .28 (no)
10	Avoid highly stimulating material	— .27 (yes)
33	Use achievement tests for evaluation	+ .27 (no)
56	Unimpressive—attractive	+ .26
65	Narrow—broad	+ .32

* Percent of matrix variance = 7.3%

Factor VI represented the traditional achievement-oriented, subject-matter-important classroom. The several variables which comprise it are presented. This factor is titled "The Traditional Academic-Evaluative Syndrome."

Here one sees high stress on evaluation, the maintenance of normal levels of academic expectation, no effort to reduce competition, and

FACTOR VI
The Traditional Academic—Evaluative Syndrome*

Variable Number	*Variable Name*	*Loading*
35	Use teacher made tests, observations, for evaluation	— .61 (yes)
41	Use independent work, individual projects	— .53 (yes)
29	Less academic stress, lower expectation	+ .52 (no)
31	Evaluation relaxed or minimized, no grades, correct answers emphasized	— .46 (yes)
34	Use IQ tests for evaluation	— .37 (yes)
9	Reduce competitiveness, each child performs according to own ability	+ .33 (no)
19	Build self-esteem through success	+ .32 (no)
32	Use achievement tests for evaluation	— .27 (yes)
42	Use personality tests for evaluation	— .26 (yes)
60	Uncertain—confident	+ .25

* Percent of matrix variance = 7.3%

little attention to the mental hygiene goal of building self-esteem. These teachers seem to believe that school is school, and any effort to make it appear otherwise to the children is nonsense. The high level of emphasis upon tests and evaluation speaks for itself.

Factor VII seems to be a straight forward expression of the belief that "if you do it over again, eventually you'll get it just right." These techniques suggest systematic drill, repetition, efforts at stimulation, sensory and perceptual training, etc. One suspects that this cluster represents a well intentioned approach borrowed from mental retardation. Praise, self-pacing, self-selection in grouping, etc., have little place. Freud offers a phrase that seems to catch the essence of this approach "The Repetition Compulsion Syndrome."

FACTOR VII
The Repetition Compulsion Syndrome*

Variable Number	*Variable Name*	*Loading*
11	Neutralize anxiety producing material	— .63 (yes)
10	Avoid highly stimulating material	— .58 (yes)
7	Sensory, perceptual, kinesthetic training	— .54 (yes)
18	Praise, encourage, build rapport	+ .36 (no)
58	Dull—stimulating	— .33
15	Use textbooks, workbooks, drills	— .31 (yes)
61	Disorganized—systematic	+ .28
26	Repeat until correct if he fails	— .27 (yes)
21	Self-pacing for comfort	+ .26 (no)
39	Self-selection in grouping	+ .26 (no)

* Percent of the matrix variance = 7.2%

Shorter periods, keeping track of student achievement, the use of audiovisual materials, and self-interest activity after work is completed are the highly loaded variables on Factor VIII. Concrete tasks, the remedial-corrective approach, and strategic seating as a control method also show up here. This factor seems very clear, and the cluster of activities which comprise it are common to many classes for the mentally retarded.

FACTOR VIII
The Corrective Special Education Syndrome*

Variable Number	*Variable Name*	*Loading*
32	Shorter periods for school work	— .74 (yes)
34	Use special reading tests, workbook tests, and IQ tests to evaluate achievement	— .49 (yes)
14	Use audiovisual materials	— .40 (yes)
22	Allow self-interest activity or reward after work is done	— .31 (yes)
8	Stress concrete experiential rather than abstract	— .29 (yes)
3	Use remedial-corrective approach	— .28 (yes)
42	Use anecdotal records, etc., to evaluate adjustment	— .28 (yes)
39	Use strategic seating as control method	— .26 (yes)

* Percent of the matrix variance = 6.7%

Factor IX reveals a cluster of variables which involve reduced academic stress, self-selection in grouping, letting the pupil decide what is good work, and the "Adaptable side of the Inflexible-Adaptable dimension from Ryans." There is no increase in expectation through time, no

FACTOR IX
The Passive-Permissive, Nondemanding Syndrome*

Variable Number	*Variable Name*	*Loading*
17	Gradual increase expectations thru time	+ .65 (no)
38	Self-selection in grouping	— .43 (yes)
42	Use personality tests to evaluate adjustment	+ .39 (no)
21	Let pupil decide what is good work	— .35 (yes)
3	Use remedial-corrective approach	+ .33 (no)
25	Expect task completion in school	+ .32 (no)
61	Inflexible—adaptable	+ .26
29	Less academic stress, lower expectation	— .25 (yes)
43	Use anecdotal material, etc. to evaluate adjustment	+ .25 (no)

* Percent of the matrix variance = 6.5%

evaluation of adjustment through personality tests, no use of the remedial-corrective approach, and no expectation of task completion in school. This cluster seems to describe a teaching pattern which stresses permissiveness and plays down evaluation and academic demand. For this reason, it is characterized as the passive-permissive, nondemanding syndrome. In it, there seem to be the notion that the children themselves contain the seeds of healthy adjustment, and that little direct activity on the teacher's part is necessary. An alternate interpretation is that there is little certainty about what to do, and that things are allowed pretty much to run their natural course. The variables and their loading on this Factor are indicated.

Factor X reveals a group of techniques which are essentially interpersonal and antigimmick in their orientation. Perhaps love is not enough, but this cluster of variables would indicate that some teachers think it is. Food rewards, stimulation at the interpersonal level, praise, encouragement, rapport, and success experiences for the students are the characteristics which stand out. This factor specifically excludes the use of game methods, audiovisual materials, subgroups, and whole group instruction. Individual, personal attention of a supportive and encouraging sort is the keynote. This factor is labeled "The Interpersonal Encouragement, Anti-Gimmick Syndrome." The variables which comprise it and their respective loadings are as indicated.

FACTOR X
The Interpersonal Encouragement, Anti-Gimmick Syndrome*

Variable Number	*Variable Name*	*Loading*
1	Use game methods and manipulative material	+ .74 (no)
14	Use audio-visual materials	+ .47 (no)
23	Use food rewards	— .38 (yes)
53	Dull—stimulating	+ .31
37	Use subgroups for instruction	+ .28 (no)
19	Build self-esteem through success	— .26 (yes)
18	Praise, encourage, build rapport	— .25 (yes)
38	Use whole group at times for instruction	+ .25 (no)

* Percent of the matrix variance = 6.2%

Factor XI seems to stress a restrictive, routine kind of classroom activity. Teacher characteristics such as dull and partial appear here. In addition, there is low use of materials, and group projects as well as little pupil freedom and little self-selection. The major activity which appears is a stress upon repeating materials until the pupil performs them correctly. This Factor is characterized as the "Imprisoned Tedium

FACTOR XI
The Imprisoned Tedium Syndrome*

Variable Number	*Variable Name*	*Loading*
53	Dull—stimulating	— .73
15	Use of texts, workbooks, drills	+ .42 (no)
16	Use of group projects	+ .39 (no)
25	Repeat until correct if he fails	— .40 (yes)
47	Partial—fair	— .37
30	More pupil freedom	+ .31 (no)
27	Allow for self-selection	+ .27 (no)

* Percent of matrix variance = 5.6%

Syndrome," and the variables and their loadings on the factor are presented.

Ultimately, factor scores on each of the above factors were computed for each of the teachers in the study. These factor scores were then utilized in a correlation study which sought to relate various clusters of teacher activity and certain other variables to some basic changes which we knew had taken place in the children as a whole. The results of this further analysis are presented in Chapter five.

How Classroom Time was Spent

Implicit in the discussion of the factor analytic study of teacher methodology is a series of specific activities which were studied through questionnaire and interview methods. One of these areas of concern was how time was spent in a typical day in the classrooms. There were sev-

EXAMPLE 1
Allocation of Classroom Time

a.m.	8:15 - 8:45	Children arrive (talk—art—games)
	8:45 - 9:00	Settle class—role—lunch—count attendance—pledge, etc.
	9:00 - 9:30	Spelling
	9:30 - 10:15	Arithmetic
	10:15 - 10:45	English
	10:45 - 11:45	Group phonics—spelling—creative writing
	11:15 - 11:45	Gym
p.m.	11:45 - 12:15	Lunch
	12:15 - 12:45	Recess
	12:45 - 1:00	Settle children—rest before afternoon class
	1:00 - 1:45	Social Studies (3 groups—alternate days)
	1:45 - 2:30	Complete morning assignment—group discussion, individual help, etc.
	2:30 - 3:00	Music or art
	3:10	Dismissed

Individual reading is done throughout the day, usually 15 minutes for each child—five in the morning, two in the afternoon.

eral ways to analyze the allocation of time in special classes, and the way the time was spent in turn classified the actual working philosophy of the teacher.

Example One, which is presented in detail, represents a later elementary classroom where about 75 percent of class time is devoted to academic activities. The content is of a regular academic curriculum variety, but the level is somewhat reduced and adjustments are made for each child. The balance of time is divided fairly evenly among a number of diverse activities, and there is considerable time reserved for individual help, the completion of morning assignments, etc. The teacher stresses that no great pressure is placed on academic achievement, and that expectations are related to the capabilities of the individual child.

Example Two illustrates a balance between academic and activity experiences. The emphasis is upon the individual child, with both planning and achievement expectation geared to ability. Academic success is not de-emphasized, however. It should be noted also that this example contains opportunities for children to attend regular classrooms for certain special academic activity. The time periods assigned to art, music, and other projects appear to be used flexibly to provide individual help to pupils who need it at the time, and seem to allow for added general flexibility.

EXAMPLE 2
Allocation of Classroom Time

a.m.	8:40 - 8:50	Children enter
	8:50 - 9:00	Bible reading, prayer, flag salute
	9:00 - 9:15	Story read by teacher and class discussion (science, history, geography, or moral value). Pupil E goes to Grade 3 for science
	9:15 - 10:25	Teacher assigns reading and arithmetic to pupils C and G Grade 5. Teacher reads with, assigns workbook and corrects reading with pupils A, E, and F Grade 3. Teacher reads individually with pupils B, C, E, and H on Grade One level. When work is finished or while not working with teacher, any quiet activity may be engaged in
	10:25 - 10:30	Pupil F goes to Grade 3 for language and literature
	10:30 - 10:45	Outdoor recess
	10:50 - 11:15	Arithmetic previously assigned, completed Grade 3 Arithmetic pupils A, E, and F. Individual arithmetic workbooks and drills for pupils B, C, and H, Grade One level
	11:15 - 11:30	Pupils B, H, C, go to Grade 2 for science
	- 11:40	Pupil C to Grade 5) Geography Pupil G to Grade 4)
	- 11:30	First grade pupils dismissed
	11:30 - 11:40	Individual work with pupils A, C, E, and F
p.m.	11:45 - 12:45	Lunch Hour (lunch duty ½ hour about once a week)

Example 2, Cont.

12:45 - 12:55	Children enter
12:55 - 1:30	Pupil A to Grade 4 for English. Music as a group and individual spelling lessons with others
1:35 - 1:55	Pupils B and H have gym class with Grade 1. Penmanship practice with others at grade levels
1:55 - 2:10	Science or social studies
2:10 - 2:15	Basement break
2:15 - 2:40	Pupils C, E, and F have gym class with Grade 3. Others see film or film strip, art lesson, or story
2:45	School dismissed

Note: This is the day the psychologist often visits in the afternoon.

Example Three is a half-day program where curriculum and formal academic activities occupy less than a third of the time, and where the emphasis is more upon problems and their discussion. Almost two-thirds of the time is allocated to allow for discussion with students about behavior. In this example, no expectation is placed on the students for academic performance. The emphasis upon the adjustment aspects of the class is very clear.

EXAMPLE 3
Allocation of Classroom Time

12:45 - 12:55	Attendance taken, discuss home problems
12:55 - 2:00	Mixture of academic work, reading, playing discussion of behavior, etc.
2:00 - 2:10	Break
2:10 - 2:25	Mixture of work, discussion, play etc.
2:25 - 3:00	Games, gym, academic activities

Finally Example Four represents a fairly typical junior high level program. These are often quite traditional, and about 70 percent of the class time is devoted to academic activities. The illustrative schedule allows no specific time for art, music, etc. The low stress on adjustment and problem discussion is also apparent from the schedule. Expectations for academic performance are laid down in terms of the student's individual ability. As indicated, this is a half-day program, although it contains as many periods as the traditional junior high school day.

EXAMPLE 4
Allocation of Classroom Time

8:40 - 8:50	Pupils arrive
8:50 - 9:20	Algebra
9:20 - 9:50	U S history II
9:50 - 10:20	Senior arithmetic
10:20 - 10:50	Supervision over study group
10:50 - 11:20	Algebra II
11:20 - 11:50	English (remedial)
11:50 - 12:00	Pupils leave

Another aspect of the time allocation issue is how the teachers themselves viewed the apportionment of classroom activities. Table 36 summarizes the time allocations reported by a sample of 73 teachers, with four activity categories indicated. Column totals should, in this table, be approximately 100 percent, but inaccuracy of reporting on time allocated to "Individual and Group Discussions regarding Behavior" and to "Other" produce the deviations which are apparent.

TABLE 36

Teacher Reports of How Classroom Time Is Spent

Percent Time	*Academics*	*Art, Music, Gym*	*Individual or Group Discussions re Behavior*	*Other*
		Percent of Classes		
0 - 9	0	5	21	45
10 - 19	3	27	29	10
20 - 29	10	29	22	8
30 - 39	4	16	7	1
40 - 49	7	7	5	1
50 - 59	19	1	3	0
60 - 69	25	0	1	2
70 - 99	25	0	0	0
No Data	8	14	12	6

Teachers list academics as occupying more than 50 percent of class time in about 70 percent of the programs. Second in importance were those special activities such as art, music, and gym, which also paralleled the situation in a normal classroom.

Teachers reported a variety of practices which depended on local or temporary situations. "Some years as high as 50 percent of the time is spent in control efforts." "Free play takes 25 percent of the time, but individual play therapy may run as high as 60 percent." Other specific activities reported include crafts, rhythms, puppet shows, or field trips. Discussion groups were frequent, and subjects ranged from personal problems to television shows. In some rooms, children spent considerable time caring for plants and animals. One program indicated that pupils served the whole school as projectionists, aides, etc. Other activities reported included gym, role playing, listening to music, using a tape recorder to make their own records, going to woodshop, seeing movies, weaving, and self-evaluation using special forms designed by the program director. The breadth of the activities attests to the high creativity of many teachers.

The site visitors, through their observations of classrooms, were able to throw additional light upon the utilization of time during the school day. Their visits were almost always conducted with the teacher's foreknowledge. In spite of this, the site visitors felt that they were very seldom exposed to any special efforts to impress them, since the special nature of the classes had already made the teachers accustomed to a series of visits from outside persons. The site visitors felt that, except for the unusual situation, their presence had little effect on the children. The most common reaction was for the youngsters to just "include them in."

In some classes, the site visitors saw a kaleidoscope of what must have been the day by day picture. For the most part, the activities were those expected for the age group involved: skill learning, special projects, art, and content subjects. But there was a wide latitude; there were children lost in their own reveries and several were actually sleeping. At one extreme were comic book reading and loose free activity, and at the other, a most formal workbook drill. Several rooms were using games to teach numbers. Teachers supplied clippings, current events, and matters of general interest. Some classes were happy, vibrant, free, stimulating, and creative; others were formal, dull, pedantic, rigid, and obviously boring. There were in evidence workbooks, lecturing, board work, and textbooks, as well as art, crafts, tape recording, toys, and the preparation for special school programs. Overall the programs ran the gamut found in regular classrooms, although the sample seen tended somewhat more toward the formal and conforming end rather than toward the loose or chaotic.

Much seat work was going on during the site visits. Some of this may have been the result of the teacher's wish to have time available to communicate with the site visitor, but more likely it was evidence of a general pattern. Individualized work was common, sub-grouping somewhat less so, and total class activity rare. The work may have been completely individuated and carefully planned, or haphazard to the point where the classroom looked like an academic center with each child indifferently following a self-chosen task. The teacher spent more time in rotation from student to student than did the teacher of a regular classroom. He was on his feet a good bit, but the occasional teacher sometimes stationed himself at his desk and rotated children past, one at a time.

These pupils who experience difficulty in self-direction were oversupervised for a time and then left too much to their own resources. The possible effect of this variation on pupils who are essentially attention-hungry should be a subject for further investigation. The teacher who was able to give split attention, providing something minimally

necessary for all while providing maximally for the one, was the teacher who mastered this aspect of the game. With others, the taking turns process tended to become a continual, nagging, competitive focus. The sight of children receiving the teacher's response while others were denied it except for a periodic turn upset many youngsters in this feast or famine arrangement.

One final aspect of time allocation deserves mention. Pupils' time appeared to be split between the special class and a variety of other activities. To gain a degree of insight into this aspect of the time allocation problem, teachers were asked to indicate, for each class, whether none, some, or all of their pupils were integrated into regular classroom programs while members of the special class. The results of this are presented in Table 37.

TABLE 37

Teacher Reports of Students Integrated in Regular Classes

Condition	*Percent of Classes* ($N = 74$)
No students integrated	62
Some students integrated	29
All students integrated	1
Some students part-time	1
No data	7

Two different methods of integration were observed. In one, a common staff taught both normal and special pupils. In the other, more frequently observed, special pupils spent at least a part of their time in classes designated for regular pupils. Five teachers indicated that some of their pupils were never totally separated from the regular class program; the intent of this procedure was to avoid gross feelings of difference and to avoid the problem of reintegration. Even in those classes where no integration was reported, the special class pupils often shared lunch rooms, playground, and/or auditorium contact.

By far the commonest pattern was the segregated one. Several teachers felt that it was too early to try integration in their particular situations. Others preferred not to have to share pupils, feeling that tenuous gains might be lost in the regular classroom situation. One said "I would rather have them full time, whatever it means, than to have to patch them up later." Another reported, "The first auditorium was a fiasco, but we get along OK now."

Of the 29 percent who did try some integration, somewhat over half reported success with it. The obvious purpose was to try to get the child

ready for the regular classroom by stages rather than by total immersion. Failures in integration were explained in the following terms: many times the pupils were unable to keep up with the work, often because of reading handicaps. Some got along well in sports, but not in the formal classroom, where the pressure of competition was high. In physical education, the students did not fare as well as they did in less organized sports and games. The same was true of art and shop unless flexibility was introduced. Some students from the special classes were academic successes, but social failures, in the regular classes. Others gave up because the work was too hard, or for subtle reasons related to their specific pathology. Many failures could be traced to poor communication, or a time lag between event and information in the regular class. There was a general reluctance on the part of the home schools to take the pupils back. Some programs recognized this and replaced the pupil in a school different from his original one.

Classroom Climate and Control

The overall topic of behavior management was one of prime concern to the special class teachers. They felt relatively comfortable with their subject matter and tool instruction skills, but they were often uncertain and in need of great support when it came to dealing with acting out, defiant, or withdrawn behavior. The teachers reported their methods of management and control, as well as the back-up and support chain which extended out into the school and eventually the community. The data herein came from teachers, administrators, special services personnel, and from the site visitors.

Classroom climate consists of the sum total of teacher and pupil attitudes, feelings, and behaviors. A central element in the climate in any classroom is the rule-setting and rule-enforcing process. How do rules get established, by whom, and for what purpose? How are they perceived by teachers and pupils? And how are they interpreted and enforced?

Rules and Trouble Spots

The widely divergent attitude toward the usefulness of rules is epitomized by statements such as "no hard and fast rules" versus "we have a rule for everything." Rules were seen as solving nothing, but merely focused where discussions about behavior would take place. How a rule was stated also made a significant difference. If teacher and pupil discussed breaking the rule of not hitting, it was not the same as discussing the feelings and rights of the pupil who got hurt. There were flexible rules, common sense rules, and inside-outside the classroom rules. On

the other hand, several programs indicated that rules were the same for pupils whether in a regular class or in a special class.

Rule concern was somewhat evenly balanced between matters of social behavior and matters of academics. In the area of social behavior, physical attacking, hurting, or throwing was the first item of prohibition. In one room there was "no sneaking lunch early." The highest focus was on peers and the next on property. Several mentioned forbidding physical aggression toward the self or the teacher. One class had a "no fighting it out without permission" rule. Verbal aggressiveness, picking on, name calling, and irritating others were significant items in the code for many teachers. Several others indicated that blaming others was taboo. There was numerous mention of respect for the rights of others. Other teachers stated that they tried to establish a way of life where fairness, self control, and respect for every individual were the goals. Two made the golden rule basic. With some pupils, special matters required legislation, cigarette smoking being the most prevalent condition mentioned. Several had rules about lying, carrying knives, swearing, stealing, gambling, and the kind of clothing which was acceptable. Drifting and being late was a favorite older pupil way of resisting and resulted in numerous "be on time" rules.

Other social rules were concerned with enforcing the school's authority. Seventeen mentioned, in one way or another, the need to have the teacher's power recognized. This was put in such ways as "the teacher is in charge," "raise hands," "follow the rules," "get permission," "prolonged refusal or disobedience will not be tolerated." One teacher put it this way, "At first I am the complete authority for everything. I make high demands. They think I'm cruel the first of the term when they must conform. Then it gets better. The teacher is boss, and this has to be made clear."

In addition to the areas of major concern indicated above, there were other matters which required rules. These children often had much trouble on the playground. They got excited and rowdy in free play. Silliness became mild hysterics, and hyperactivity was always just about to break through. Teachers recognized this pattern as less crucial than the hurting, but the behaviors induced severe group difficulties and had to be stopped. Transition periods, especially the one that concerned "be in your own seat," required attention. Several teachers who had previously taught in psychiatric institutions noted that fitting into school rules, even to lining up to go outdoors or to get drinks, made for the needed school control and was expected by many of their pupils, even though as teachers they felt it not very important. It was not easy to control behavior in the halls, toilets, or lunchroom. Sharing materials caused

conflicts in a few classes. Children were marvels at finding hard-to-get-at behavior with which to confront an adult. Marginal pouting vexed most teachers. Temper tantrums were quite commonly "legislated against," but tended to become less frequent as the children became adjusted to the class. One teacher had rules for temper tantrums. At first the child was allowed to scream, argue, and fight but gradually as he calmed down, he gave signals that he did not need these behaviors.

It took many laws to make order out of chaotic pasts. Except for one teacher who indicated pressure was applied to acting out behavior only, teachers observed sanctions relative to the academic work, too. Several mentioned the only requirement was to "do the best you can," and this was flexible depending upon what kind of a day the student was having. There were two academic control items which preceded all the rest in the judgments of most teachers. The first item was that school is for learning before it is for play. Breaks, fun or even gym and industrial arts were used on occasion as rewards for learning. After the proper dosage of the bitter came the sweet. The second rule was this: do not disturb others who are working. An academically disenchanted child usually could not stand the sight of others doing their work in approved fashion. If there was one thing that could upset a teacher it was to see a trail of disruption caused by pupils talking out, walking about, engaging in demonstrations of nonparticipation or direct teasing and challenging, directed at Johnny who was finally getting down to his arithmetic. Considerable stress was also put on good work habits and finishing each day's assignment on that day. Other items mentioned by one or two teachers involved rules about paying attention, not deliberately wasting time, not handing in poor quality work, and having appropriate tools on hand. Rather than blowing up when frustrated, students were mandated to ask the teacher for help. One teacher had to have a rule so that, "I could criticize their work." All of these regulatory efforts reflected a drive to bring appropriate focus on behavior. The need for so many rules made some teachers feel like naggers and policemen, but most of them found it impossible to meet all situations ad hoc as they came up, even though there appeared to be a good deal of discussion and thought about the interpretation and meaning of a rule in a particular instance.

How were limits maintained? Behavior had to be controlled, but it was one thing to make a rule and quite another thing to enforce it.

There appeared to be three overall ways used by teachers in enforcement. And of course, one teacher may have used more than one approach. First, there was counseling, individual or group discussion, or some form of life space interviewing. This was quite frequent and embodied some approach to problem solving or learning to work out one's

difficulties. One teacher used what he called "cool offs" until rationality could be established. The quality of this appeared to vary from benign moralizing and compulsive nagging to sophisticated interviewing which attempted to get behind the manifestation of the causes. This approach, *à la* Redl, was pointed at the immediate action rather than unconscious dynamics as would be true in classical therapy.

A second general approach to control was through emphasis of individual and group responsibility. Upon exclusion, pupils were most often allowed back when they were ready, thus permitting self-determination. Seven teachers indicated group setting of the rules after discussion and planning, with teacher direction usually in the picture. Several mentioned that this produced group pressure. None noted any ill effects, such as scapegoating or impossible demands on particular individuals, even though group enforcement is obviously a medicine that cures some and makes others worse. One mentioned cutting everyone's lunch hour when one broke the rules. The amount of teacher control of the group or individual self-decision process was not clear, but several incidents suggested that teacher control may have been rather prominent, and that the so-called group process merely clarified what everyone knew the teacher expected. Even so, there appeared the possibility of making issues visible, ventilating some feeling, and getting explanations across by this method. It was noted that these children were not so much without the awareness of what should be as they were lacking in the ability to comply. For this reason, except with the predominantly antisocial, the matter of values in themselves was less of a problem than one might have anticipated.

The third major approach was indirect. The best control was a good program and reasonable routines. Several mentioned that they disciplined by serving as an example, and in that way portrayed the control that was anticipated from the pupils. This was considered as a deliberate demonstration of consistency and fairness for all. Other teachers used implied expectation rather than overt punishments for failures. By innuendo, or through cues of some sort, the teacher said, in effect, "I expect you to work." Some did this with thorough checks on each item to make what was expected clear. Others stated a rule once and did not repeat it. This apparently reduced the desire to challenge and set an expectation which became part of the milieu. Ability to create a pressure of expectation is a skill not every teacher has. It operates somewhere between a tolerance for failure and an indulgence in known limitations of the pupil.

But these approaches did not solve all of the immediate control needs. When these measures failed, direct teacher intervention was necessary and this again took many forms. On academic matters, we

found: "I lower the grades a little, make them make up the work, or have a late dismissal until they finish the work listed." Pupils were kept after school, or sent home each time a rule was broken. Deliberate directive requirements at the level of the pupil's capacity were also used. Most of the methods were applied to social behavior rather than to academic matters. Punishments were indicated as necessary in many instances, and consisted of verbal nagging or giving reminders. One teacher mentioned counting, and at the count of, say, 5 the pupil was to be in his seat. Pupils were generally made to repair or make restitution for any damages. Withholding of pleasures was employed as punishment; recess, movies, and other pleasurable activities were denied. It is noted that the deprivation was usually not in the same area as the misbehavior, i.e., one may have lost gym for not doing his arithmetic. Recess was denied not just because of trouble on the playground but because the pupil roamed from his seat too often. The next level of control intensity appeared to be isolation for a brief period of time. Removal to the office or expulsion resulted when the misbehavior persisted.

Physical punishment was mentioned by six teachers. These included unangry swatting; in one case the class had decided upon this punishment for certain infractions and "accepted it very well." Others mentioned paddling or spanking. One teacher said she was without a quiet room and no help was available so she resorted to paddling. One said her policy was "speak softly and carry a big stick." There was a difference in regard to administering physical punishment even with the few who reported its use. There were those who seemed to take physical punishment in stride as a natural and expected thing while others saw it as a "what else can you do" kind of action but did not advocate it. Another teacher said she used "punitive means," and left the matter further unspecified. Of course there were other physical interventions mentioned in addition to physical punishment: a firm grip on the arm, bodily picking the child up, touch control. Another held them close for eye to eye contact. Four stepped in and stopped all action until the group was quiet.

Teachers indicated employment of the following when control problems arose: toleration, firmness, then removal, and exclusion; special activities such as gym, clay work, painting, or swimming; release type activities such as a punching bag, work bench, talking it out, role playing, puppetry, or caring for animals. One teacher sent the others to the library; another put the class to work. Both had the intention of being able to counsel the pupil in difficulty; considerable effort was placed in conferences with the child rather than exclusion.

Rewards came in for some discussion. Certificates of merit were given

each week or honor rolls were posted with stars given for good behavior. Several used pictures or charts. Extra play activity or the use of special favored equipment was the reward. Several indicated that they rewarded the good behavior and ignored all other that they possibly could. There was a higher tolerance for noise, but not "anything goes."

The remaining control measures tended to put emphasis on interpersonal relationships and inner feelings. Several used direct appeals and encouraged pupils to please them. Application of continual pressure was called into play, and pupils were reminded of what they really could do. The attempt was to cultivate a pride in themselves and their self-achievement. Behavior was discussed with the group in order to enable peers to understand and exhibit tolerance. Rules and requirements were individualized so that they were suited to each pupil, and in keeping with his needs. Several said, "Support, don't punish, and give them another chance." Teachers tried to let them feel the adult's sincerity so they could love in return. Teachers commented: "Show your acceptance by not getting upset when they call you names." "When they seem fatigued and tired, let them rest or even go to sleep." There was a great deal of minimizing pressures when a child was obviously upset.

Site Visitors Rating of Control Style

The site visitors recorded notes about the control style as they observed. There is no simple scaling involved; obviously, teachers operated in more than one dimension.

TABLE 38

Teachers' Control Style as Seen by Site Visitors

	Percent
Punitive over control	4
Rigid control	16
Nagging reminders	1
Control to please adult	13
Tolerant—patient control	38
Planned permissiveness	10
Loose—some confusion	11
Chaotic	3
No data	4

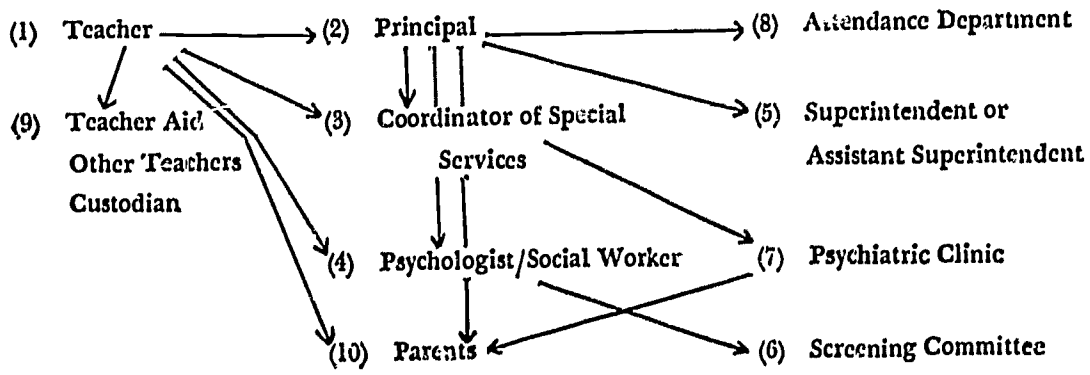
The variety was impressive; only a few were either punitive or not doing enough to stop chaos. There was the impression, however, that as a whole these teachers operated on the accepting and free side more than on the rigid, nagging side.

Back-up and Control Support Available to the Teacher

As was indicated, the study of support for control situations was difficult because of the many types of support action. This support may have been crisis help, even a matter of immediate safety. It may have been a matter of understanding the pupil more adequately without urgency for control of a given moment. Since various persons operated in various relationships, there was no singular pattern of support. The plans used were complex and complicated, but they offered some cues as shown in Figure 4. The teacher most often had the major responsibility and most incidents ended there. One administrator stated, "We have no authority problem when they come to know this kind, warm, ex-all-American." The more competent the teacher the more likely he was to be on his own. The few examples of rather limited responsibility by the teacher were atypical.

FIGURE 4

Channels For Support in Discipline Situations*



* Numbers indicate rank of involvement.

What happened when more help was needed? Most often it involved turning to the principal. In addition to whatever else he did, he usually had the power of temporary suspension. Most often he gave whatever support was needed in both academic and management matters, though there were principals who wanted nothing to do with anything that indicated discipline. They saw themselves as counselors. Some principals came into the classroom frequently and gave pep talks. A few classes had two-way sound contact between the office and classroom, or a bell system which they used to call for help. Frequently it was the principal who talked to the parents, though this might have been done by teachers or other personnel. The teacher-principal team was the pattern characteristically found. One teacher put it this way: "The principal can counsel, discipline or suspend." He usually acted only

after extensive consultation with the teacher. The intensity of teacher-principal contact ranged from very rare use to one-third of the principal's time. The latter embodied a hidden cost in time which became an issue in certain programs.

The second most frequent teacher support sequence (25 percent) involved adding the special services coordinator or director to the team. Next, and infrequently, the teacher obtained help from a psychologist or social worker. Occasionally the teacher would have immediate support in the form of a teacher aide, a "strong" regular teacher, or custodian when there was a crisis.

One gets the impression that most problems were absorbed by the teacher, the principal, the coordinator, or the psychologist or social worker. When it was too severe a problem to stop there, the principal turned to the special service coordinator for more intensive work. When a resolution was still not forthcoming, especially in chronic situations, either a higher echelon in the power hierarchy or a higher echelon in the clinical hierarchy was called into action through use of the screening committee. All the potentials of the special program might be called into action through use of the screening committee.

While the teacher was most often on his own in control matters, when things went wrong, a simple dyad was enough, or on occasion a whole series of contacts were called forth. This welter of involved people accounted for some of the difficulties in operating these programs. Who was to do what and when he was to do it required a lot of clearance. The teacher may have felt, in many instances, that all help was too little and too late.

All of these chains or sequences involved complex interpersonal relationships. In spite of this, the personalities got along. Alternately, the system looked good on paper, but the people did not get along. It might

TABLE 39

Teacher Report of Sources of Control Support

Support Agent	*Percent Reporting* ($N = 74$)
Principal	63
Special education personnel	21
Psychologist	20
Parents	19
Co-teachers or aides	15
Social worker	11
Clinical-therapeutic personnel	9
None needed or used	8
No data	9

also be noted that, whatever the eventual course of events was, the need for some immediate "crash" support for the classroom was a virtual necessity. If support was present, it may not have been activated often or at all. If it was not present, the chances were that it would be needed.

How the teacher perceived control support is summarized in Table 39.

More than one response might have been made by one teacher. The major source of immediate help was clearly to be found in educational rather than clinical personnel.

Personnel in Contact with Pupils

Administrators' viewpoint. One way the team approach was judged was by noting the integration of the actual work. It was often pointed out that these were self-contained classes, where the teacher did all and contact with even the principal was minimal. If the teacher had trouble, she handled it. Over half of the programs indicated that the principal had daily contact with the activity; here in reality was the operating team, teacher and principal. This working relationship was, no doubt, the key to success in most programs. Site visitors reported a minimum of negative interaction. In fact the prime condition was one of mutual support and professional appreciation. Some principals took a very active role, even relieving the teacher on occasion, and helping to work out difficulties even as they began to appear. An interesting side light was that principals seldom had, in their professional training, specialization in working with the disturbed. Several mentioned how uncomfortable they felt in making decisions about these children where they did not have adequate insight.

There were two conditions which beset many special education teachers: one was that they were alone with no other similar teachers around to understand their dilemma; the other was that they were alone with no support. If there was a real on the line team of teacher-principal, this was much less a problem. Over a fifth of the programs also used other teachers daily to help the special teacher. These were either regular teachers on playground duty, or itinerant art, music, and physical education teachers. Nine programs had teacher assistants or aides; one had a team of three teachers for two classes. Psychologists, social workers, nurses, and counselors were conspicuous as a minority and appeared in twelve instances; but they were mentioned more often than were cab or bus drivers, cafeteria helpers, the school secretary, and janitor as being in significant daily contact. Many times the secretary saw a great deal of pupils when they were removed from class; in one instance the custodian became the "therapist" in an action for a pupil.

When it came to regular but not daily contact, the whole gamut of special services were mentioned.

Teacher's Viewpoint. Teachers were asked how much help they had from other teachers. Over half of the teachers reported no help at all. The others said that other regular teachers helped primarily in special activities such as homemaking, industrial arts, swimming, gym, art, and even bowling. Sometimes these teachers took over the class, but more often the special room teachers stayed to work with the outside teacher. On a few occasions the special pupils were combined with regular ones for a class or particular event. It was not uncommon for special teachers to share recess or lunch duties with the regular teachers. On those occasions when the special teacher was given relief from her class, regular teachers at times refused to be responsible for the disturbed children, and referred all situations back to the special teacher. There appeared to be an impression that pupils were often expected to be normal on the playground, where the lack of structure and freedom were seductive, or in the lunch room, where all food associations tended to be activated. On the discouraging side, several teachers said they were not even allowed to use the gym, and two indicated that they had no opportunity for indoor or outdoor play. For many teachers, there was no relief until their pupils went home and the intensity of their continual preoccupation left them wilted at the end of the day.

Suspensions and Removal

There were two aspects to the use of relatively long-term removal from special class: (a) as a control measure; (b) failure to benefit from the class.

In terms of suspension, the range of thought was from punishment ("they like class and don't like to be sent out") and clarifying limits ("they have to know we mean business") to getting a new look at the problem and generating new forces in the milieu. Some programs never had to suspend a pupil. While some hesitated to remove because there was "nothing for him at all except what the school provides," most programs found that some suspension was needed. The main reason for temporary suspension was to get behavior control. While occasionally this was done lightly, there were many conditions described which were far beyond argumentative refusals. There were children who threw things around—dishes, chairs, and what have you to the point of physical danger to the teacher and/or other pupils. Evidences of actual serious hurting were rare though such did take place. There were cases of physical violence to the teacher but these were rare. The other reasons tended to center around upsetting the whole class and extreme defiance

and refusal to do school work over a period of time. Using the floor as a bathroom was a given reason for removal. Doing things dangerous to the self such as sitting in open windows was also mentioned. These suspensions were usually short, a day or part of a day. A few were out a week or until something was done. Most exclusion took place early in the year, and tended to be with a few pupils only. There were examples of very disturbed schizophrenic children who had to be taken out of the group at times. Those who taught delinquents reported more need for suspensions.

It is interesting that, as the year progressed, the nature of the act of exclusion itself often changed. For example, for children who liked school and the teacher it was quite a different thing than for those who disliked school and teachers.

Over half of the programs contacted the parents to try to work things out to a satisfactory level when things got bad enough to use exclusion. One program required conjunctive therapy at this state; ten recommended it, although several of these noted there were few who did anything about it. Some effort at increased liaison with the therapist or clinic was indicated. Restaffing, tutorial programs, and EEG examinations were all procedures mentioned consequent upon exclusion.

It is clear that the school very often felt powerless at this juncture. They were able to suggest but they could not compel. It was possible that the forces that needed change were beyond their field of influence. The site visitors reported the frustration which ensued when the next steps were available, but parents or agencies did not act. Of course more often what was needed was also not available.

When the difficulty became chronic with no solution in sight, sus-

TABLE 40

Use of Removal Procedures

Type	*Percent Reporting* ($N = 74$)
Temporary—none needed or used	40
Temporary—to help pupil integrate	5
Temporary—control measure	44
Temporary—for treatment purposes	3
Permanent—none needed or used	41
Permanent—to regular class	16
Permanent—school exclusion	16
Permanent—institutional placement	16
No data	9

pension was converted to exclusion, although about half the programs (one after five years) either had not yet had to face this problem or did not reply. When it was impossible to help a pupil, the act of exclusion was frequently accompanied by re-evaluation to find better methods or other efforts to get more help such as tutoring or a trial in a regular class with support. Perhaps assistance was sought through community services with institutionalization receiving highest attention. If a child could not be helped by special classes, the presumption was that he needed total care and parents were alerted to make new plans. However in several instances, return to the regular class or a class for the mentally handicapped was the practice. Homebound or tutorial programs were seen as the school's residual responsibility and in fact were most often used. A summary is presented in Table 40. Since more than one use of removal was possible, the total exceeds 100 percent.

The nature of the data collected on class climate and control did not lend itself to inclusion, in detail, in the factor analysis on teacher methodology. The instances of "it depends" and "I don't really have any standard control techniques" were so many that one could not generalize from the basically anecdotal and situational responses which were obtained.

Individual Planning for Pupils

Was there a specific plan for the pupil's educational experience in the special classroom? If so, who made the plan, and on what basis was it made?

All but four of the programs reported that an individual plan was made for the pupil. These four were rather vague, but indicated essentially that the teacher expected to teach at a level that met the needs of both the child and the group. As far as responsibility for the development of individual plans was concerned, much variation was evident. Sometimes it was entirely the teacher's responsibility, although he might have utilized diagnostic information previously gathered. At the other extreme, the teacher may have had nothing to do with the planning; someone else developed the plan and the teacher was assigned to implement it.

Two equally prevalent methods comprised about two-thirds of the total. In one, the education staff (which usually consisted of the teacher, the school social worker, and the school psychologist with the occasional participation of the principal) was responsible. In the other, the combined clinical and educational staff made the plan. The clinical staff usually consisted of outside clinicians and frequently a child-guidance clinic team. In the second arrangement, the educational staff

usually had at least equal authority or more, but in three instances, the outside clinical staff or individual therapist gave the ready-made plan to the school.

Most pupil plans incorporated all possible information on academic accomplishment and management methods. One respondent reported it this way: "Each child is considered totally from the point of view of the various disciplines. The individual needs of the child, the symptomatology, and the degree of emotional damage are all considered very carefully. The emotional climate of the classroom, the particular and general teaching techniques and the management of behavior are all tuned to the special intellectual, social, and emotional needs of the child." The inferred impression is that some gap existed between this ideal and the actual planning practices in most programs.

There were a few programs which had a planning process rather than a plan, indicating that broad guidelines were sketched after an exploratory start had been made. The reaction, "we never know enough to make really definitive plans," was typical. In a few programs, parents were included in the planning effort, and in others there was evidence of concern about the effect of the child upon the group in which he was entered.

Twenty-three teachers reported that they made individual plans for each pupil each day. Ten others reported individual plans with some overall group or subgroup planning. Seven stressed overall plans with some individual expectations, and seven reported an overall plan for the class as a whole with little attention to day-to-day planning for individuals.

Several interesting special techniques were used in individualized planning. One teacher set aside a short period every day to insure individual private contact with each pupil. Many used parallel activities, in which five or six children were grouped around a table and worked on generally the same area (e.g., arithmetic) but each did a separately planned series of problems, followed a workbook, or used a special work sheet prepared individually for him by the teacher.

Diagnostic Information: Its Availability and Use at the Classroom Level

Great significance was attached, almost universally, to obtaining detailed diagnostic work-ups on the pupils. Collecting diagnostic data was one thing, and utilizing it for placement, planning, and day-to-day classroom management was another.

Five programs admitted that they made little overt use of the data. Four reported only the vaguest use of the information by screening committees and placement personnel. Four used diagnostic tests to screen

out retarded children; another screened out brain-damaged children using psychological tests and neurological examinations. Four used testing to screen out the too sick and the unworkable child. Specifically, the use of test material and diagnostic interviews in developing classroom plans relating to dynamic factors was indicated by only seven programs. Eight others indicated that they were used for specific academic planning in terms of the child's capabilities. With only about one-third of the programs making active use of their diagnostic procedures in planning, it was no wonder that the site visitors raised the question of whether all of the investment in diagnostic records was justified.

Another vital interest was the extent to which teachers used and had available the impressive array of diagnostic information which was collected. This problem was approached in three ways: (a) by asking the teachers directly what diagnostic materials were available to them; (b) by having the site visitors examine the actual files available and provide judgments regarding their adequacy; and (c) by conducting probing interviews with teachers on their specific use of diagnostic records in their day-to-day planning and overall efforts to understand their children.

Table 41 shows the summary of teacher reports on the nature of diagnostic information available to them.

TABLE 41

Teacher Reports of Diagnostic Information Available

Type of Information	*Percent Reported* ($N = 74$)
Educational records—cumulative record, achievement scores, etc.	73
Psychological reports	58
Psychiatric reports	34
Case work reports	30
Conference reports and/or notes	10
"Confidential" files, (e.g., visiting teacher notes, etc.)	8
Vague—"all records" etc.	7
None or no data	15

At first glance, it would appear that a considerable pool of diagnostic information was available. However, it is amazing that up to 22 percent of the children did not have even basic educational records available to their teachers, that 42 percent had no psychological reports, and that 90 percent had no conference reports. To some degree, these various

classes of diagnostic information were considered interchangeable, so that the absence of one type was supplemented by the presence of another.

In terms of the use to which they applied the information available, most teachers felt that they had what they needed or wanted. On the basis of site visitor judgments, it would appear that much more was available than was used. Table 42 indicates that only about one-fourth of the teachers made full or major use of the diagnostic information available.

TABLE 42

Teacher Use of Records—Site Visitors Reports

Degree Used	*Percent Reported* ($N = 74$)
Little or none	43
Own system not based on records	3
Minor use	26
Major, specific use	26
No data	3

Nearly half the teachers, in the site visitors' judgments, made virtually no use of records. Some teachers candidly reported that they did not get the information that they really needed, and so found minimal utility in the diagnostic work-ups. But the vast majority did not use records because they did not have the time or the orientation to do so.

The following quotations and anecdotes are intended to elucidate teacher motivations: "Much of what is there is really irrelevant to what I have to do in the classroom." "The records are too biased—all psychiatric (or psychological) and nothing to do with education (sic)." "The clinics always want to interpret the findings, and this is sometimes useful and sometimes far-fetched." Defects in the data were often cited as reasons for their disuse. A good many reports were sketchy: the psychological work-up may have consisted of a Binet IQ, of the social history, and a paragraph summary by the social worker. Two teachers said that they preferred to proceed by trial and error with their children and did not want to be biased by other persons' opinions. There were rare instances of disdain for clinical efforts, as seen in this comment: "I don't see any results in how he behaves in the classroom." Teachers kept day-to-day anecdotal records of classroom behavior which the therapist used, but sometimes got nothing back in return. The complaint was occasionally heard that clinicians did not really want to have the teachers know about dynamic material, particularly from therapy.

Too often, the utilization of records seemed to be a once a year operation. Time pressures limited the use of regular conferences in which some of these difficulties could have been ironed out. Frequent meetings and consultations which combined the information from the file with that from daily behavior tended to foster syntheses and made for mutual understanding. If there is a single lesson to be learned from these data, it is that a useful dynamic operation will not be a natural consequence of collecting diagnostic materials. Some teachers will bridge the conceptual gap on their own, but the real bridging will most often have to be an outcome of deliberate and continuing effort. By himself, the teacher tends to rely on his own knowledge, and the operation consequently plateaus on a relatively superficial level.

Table 43 reveals that about half the programs possess complete educational-dynamic information on their pupils.

TABLE 43

Records Available to Teachers—Site Visitors' Reports

Adequacy level	*Percent reporting* ($N = 74$)
None	3
Sketchy or perfunctory	14
Adequate—some dynamics, individual tests, etc.	30
Complete—educational-dynamic	49
No data	3

The teachers who contended that the diagnostic records were all psychiatric and not educational were not supported by the site visitors observation, nor by data obtained from administrators and special services persons. The highest frequency of use of any single diagnostic instrument or material was found in the area of individual intelligence tests (Binet, WAIS, WISC). Somewhat less frequently mentioned were individual and group achievements tests, including the Wide-Range, the Stanford, the California, etc. Individual reading tests were fairly common, if the reports of the site visitors and programers could be viewed as reliable. This is especially interesting in view of the difficulty in obtaining any but the most meager reports of such test findings from teachers.

In the area of personality dynamics and adjustment, the site visitors found substantial, but not by any means ubiquitous, information. Traditional projective tests (Rorschach, TAT, Bender) were frequently used. Sentence completion type tests were next most frequent in ap-

pearance. To a lesser extent, the House-Tree-Person, the Raven Progressive Matrices, and the CAT were used. One or two indicated the MAPS, the Blacky, The Szondi, the Ellis Visual Design test, and the Goldstein tests. To some extent, the choice of the infrequently used tests mentioned above, or of special tests for perceptual or organic deficit, was a function of a local clinician. Many tests concerned with deep dynamics were used in comparison to those which tap general educational function.

By far the most prevalent use of records by teachers is in the area of balancing potential against expectations for academic performance. Some teachers were even more specific, and suggested the value of knowing particular strengths or weaknesses, and pin-pointed specific areas for attention such as reading. Several said that sample materials from pupil work files were more useful than any test data. Fifteen teachers found the records to be of little use in planning the academic work for the child. There was a general impression that the pupils' previous teachers tended to overrate achievement and potential. Several teachers found their own observations in this were more useful than records. "You really have to find out for yourself—all the records do is tell you where to look."

Most of the teachers stated that records were essential for understanding the behavior of the children. Twenty-two mentioned that records permitted understanding and insight which are mandatory if the pupil is to be dealt with effectively. Seven said the records provided them with reference points in terms of what to expect, whether a bit of behavior is new, or what the prognosis is likely to be. Eleven found methodological help in dealing with behavior, hints for handling, etc., in terms of what had been done in the past. Many teachers were interested in such factors as frustration tolerance, attention span, level of aggression, and controls, and looked for evidence on these factors in the records. On the other hand, 13 teachers felt that records were of little or no help in dealing with behavior, and did not reveal what one should do. Most wished for more specific and practical help than the records gave them.

Consultation

Consultation was considered an important ingredient by everyone in the programs, and some felt it was the key to success. Consultation may have been offered to the system as a whole, to parents, to special services personnel, and to the teachers themselves.

In Table 44 the sources of consultation thought to be available by the teachers are indicated. It is obvious that most teachers responded

to the pertinent question in terms of formal consultation, since much other evidence indicated that the principal is a very important source of contact regarding various matters of educational and management concern to the teachers.

TABLE 44

Teacher Reports of Consultation Sources

Source	*Percent Indicating* ($N = 74$)
Psychologists	40
Social workers	26
Psychiatrists	20
Guidance workers	11
Other Special Education Personnel	9
Principal	6
General staff meetings	5
No consultation available	23

It is interesting to note that nearly a fourth of the teachers reported that no consultative help was available. Many of these, we are confident, used the principal and perhaps other school personnel for informal consultation.

In Table 45, teachers who reported that consultation was available (77 percent of the total) gave the amount of consultation time available per week.

TABLE 45

Available Consultation—Hours Per Week

Amount	*Percent Indicating* ($N = 57$)
No regular schedule	16
On request—varies	10
Less than ½ hour	10
½ to 1 hour	8
1 to 2 hours	23
2 to 3 hours	7
Three or over	15
No data	11

Thus it appears that nearly half the teachers to whom any consultation was available got on the average less than one hour per week. On the other hand, nearly a fourth reported two hours a week or more.

A final aspect of consultation concerns the topics dealt with in consultation, which are indicated in Table 46.

TABLE 46

Consultation Emphasis and Adequacy

Area	*Percent reporting level of attention (N = 73)*			
	Heavy	*Moderate*	*Light or none*	*No data*
Individual dynamics	59	19	5	16
Group processes	23	19	18	21
Child management	34	29	18	19
General teaching methods	10	15	42	33
Special techniques	30	26	23	21
Remedial reading	8	21	28	43
Projects	4	21	37	38
	Excellent	Good	Poor	No data
Overall adequacy	47	14	26	14

These results indicate that teachers were generally satisfied with the consultation they did receive when it was available. They often commented that the best way to improve consultation was to provide more of it, since good consultation was seen as the difference between survival and failure. Other comments which were frequently heard included: (a) the wish that consultants could come into their classrooms to see things first hand; (b) the wish that more consultation could be carried on in person rather than by phone or brief contacts; (c) the hope that they would be able to master the consultant's system of understanding children, i.e., to get a better grasp of dynamics. The overriding sentiment appeared in many places and in many forms, and involved basically the desire on the teacher's part to get more and more practical help with realistic classroom problems.

Conclusion

This section has presented a view of program operations that touched upon physical facilities, pupil perceptions of the classes, teacher perceptions of the classes, and rather extensively upon teacher methodology. Examined in detail were the problems of classroom climate and control, the support agents and processes which back up the classroom teacher, and the use of consultants.

5

Major Statistical Findings and Evaluation

An ultimate goal of this research was to determine the effects of special public school classrooms for emotionally handicapped children upon the children themselves.

Pre- and posttest data on school achievement were not broadly available, and plans to use these as a major criterion had to be abandoned. Retrospective data from both pupils and teachers were utilized instead, as were evaluative views of administrators and site visitors. In this chapter, both statistical findings and impressionistic views are presented.

Administrators' Evaluations of Programs

One simple criterion for evaluation of the programs was to pose the question to administrators, "Would you expand your program as it now exists if funds were available?" All but four program administrators indicated that they would. Several were enthusiastic or ambitious, and would add from ten to 20 more classes. Most were more modest, either in their aspiration or their evaluation, and indicated that they would like two, three, or four more classes. A frequent suggestion for expansion set one class per medium size or large size building as a goal. Others defined their needs and wishes in terms of an extrapolation of the present percentage of children served. Estimates of the proportion of children needing special service ran as high as 20 percent of the total population, although the most typical estimate was 10-15 percent. Service by other special personnel was often included in these totals.

Administrators generally reported heavy demands for additional placements, which is understandable in the light of fairly well-established minimum percentages of known disturbed children. However, on the other hand, in several locations it was difficult to obtain the full complement of pupils for the classes. The reasons for this were nearly as many as the programs reporting the difficulty. Many of the most obvious school problems did not fit the available class in terms of

age, pathology, or necessary psychiatric and parental acceptability. Often it was the vexing problem of transportation which prevented enrollment. More than half the programs studied reported waiting lists, and consequent pressures to move more children into existing classes or to develop new ones.

Needed Changes as Seen by Administrators

While some of the administrators' comments about needed change reflected unique local problems (e.g., "we need to have less clinical contamination" or "we can't seem to lick the transportation problem"), most administrators revealed a desire to serve more children, to enrich and broaden the programs, and to secure more adequate housing. Special equipment, e.g., teaching machines, typewriters, etc., were considered to be a need by many. Mentioned also was the desire to have the administration know the program better, and to be able to offer more or better inservice education. Additional help for the teacher, in the form of more consultation, aides, an itinerant teacher or substitute teacher, was an often expressed wish. While administrative frustration appeared in acute form only rarely, there was an occasional case, and it typically involved a lack of money or authority.

Ratings of Program Success

Table 47 presents ratings of overall program success.

TABLE 47

Ratings of Program Success

Category	*Percent Site Visitors*	*Percent School Personnel*
Clear failure	15	5
Limited success	11	21
Encouraging success	30	29
Outstanding success	40	21
No data	4	25

The site visitors tended to see more extremes at both ends of the success continuum. Nearly three-fourths of the programs were judged by them to be either "encouraging" or "outstanding" in their success. Totals for comparable catagories as rated by the school personnel totaled only 50 percent. On the other hand, the site visitors' judgments of clear failure outnumbered those of school personnel nearly three to one.

A good many reasons underlay the judgments of poor success found

among school personnel. The level of judged success was most often closely related to the appreciation of the teacher's efforts. Many administrators said that it all depended upon how good or poor the teacher was. If those persons doing the judging agreed with the teacher's methods, they found the program in one way or another successful. If they were not satisfied with what the teacher was doing, they tended to rate success lower. Other specific factors which seemed to be related to judgments of success and/or satisfaction were: (a) not enough structure; (b) too much expense; (c) lack of sufficient opportunity for outside treatment; (d) too few children going back to regular classes; and (e) class size and/or transportation problems.

It is obvious that the true concern about success or failure often goes much deeper and arises out of the total complex of problems previously discussed. This complex involves the establishment of goals, the screening and selection of pupils, the treatment, and finally the reintegration process. Since the goal often is to return the pupil to the regular class remediated and conforming, it is worth asking whether pupils with prognosis for quick recovery are selected. While it is true that few psychotics get into the programs, other criteria, such as family workability, age, etc., also need to be considered in the light of goals set. It is generally most difficult to set up that treatment program within the class which is most consistent with the nature of the pathology. A general approach is almost necessarily imposed on the classroom process, although it is apparent that more specific plans are not made as often as possible. Finally, there is a wide range in the efforts to return the child, as well as in the degree of acceptance he finds when he goes back.

Frequently, case successes stand out in the minds of school personnel. Generalization from the single case is tempting, either to support or to limit the program. Programs that operate for two years or more and return only 10 percent of their children to regular classes may still be regarded as successful because the children seem accepted and more comfortable, and are making some progress. The attitude of grateful parents also seems to play a large part in the feelings of school personnel.

Time Limits for Remaining in Special Classes

Time limits in special classes were not directly investigated. It is evident that the goal of quick return which dominated many of the early attempts was most difficult to achieve. Neither did the schools look with favor on classes filled with untreatable residuals. Many programs were new enough not to have faced the separation problem brought on by the pupil becoming too old. The 50 percent of classes who faced this

problem often solved it by sending the pupil back to a regular class whether he was ready or not, frequently with selected placement and the attempt to do follow-up work with the counselor. There was an attempt to adapt, but the fact of the matter was that it was seen quite plainly as a real tragedy. Home instruction, recommendation to some other community agency, or institutionalization may be all that can be done.

Older pupils present a special problem. They may become legal drop outs. One area frequently mentioned is the use of occupational training and vocational rehabilitation for the adolescent who cannot make it back to regular high school; this certainly needs more attention. With the general tight employment opportunities and their limited placeability, it would be difficult to think of a more promising road back other than employment for many work-bound adolescents. Very few programs covered the age span necessary to accommodate those who were slow to return, as well as those who could perhaps never fully return to regular classes.

One can trace the history of the problem as follows. The critical behavior became more apparent and less tolerable in the late elementary periods. The hope was for quick, intensive remediation. This proved illusionary for the most part. Discouragement became evident. Junior high levels were resistant, and the senior high more so, to upward extension. Downward extension became a goal: get them early when they can be helped. But diagnosis was also more difficult and teachers were less ready to admit defeat when pupils could still be managed. The idea of permanent support for the disturbed is slow in coming though we know recovery for many will, even eventually, be only partial. Few school systems have embarked upon a total program even in their conceptual awareness. The present pieces take so much effort that one can understand the reluctance to admit what must be.

One final fact bears on the matter of outside therapy for children and therapy or other contact with parents. Some systems have found that mandatory requirements for conjunctive therapy are unworkable, either because of the unavailability of such services or resistance or perfunctory acceptance by parents. Nevertheless, most administrators are interested in additional outside contact with the child and family.

In summary, the data presented in this section produces the impression that school administrators and special service personnel are reasonably satisfied with the programs. They recognize that success is not assured in every case, but generally take the position that their experience has justified the classes, and that what is needed is expansion and imaginative modification.

Periodic Re-evaluation and Disposition

Some of the least complete material was on re-evaluation and disposition of pupils. While it was obvious that informal evaluation of pupil progress was made almost constantly by teachers, there was limited formal activity. In many programs, re-evaluation did not occur until someone, usually the principal or teacher, proposed that the child return to a regular class. In several instances, teacher and principal conducted the re-evaluation without outside help. A very few programs did not re-evaluate until the child had reached the end of an arbitrary period, such as two or three years, or until he had aged beyond the range established for inclusion.

Established policies for disposition or follow-up of children once they left the program were rare. Many programs literally did not know what happened to children who left. Most often, the classroom teacher tried to keep track of his former children in an informal way, but transciency, lack of time, and the fallibility of memory all served to cloud the data. Virtually no data on disposition or follow-up was available. This was understandable in terms of time pressures and the attitudes of special services persons who felt that getting the children screened and admitted was more important. Nevertheless, it served as a severe impediment to a rigorous evaluation of program success.

One further aspect of the follow-up and disposition problem was reflected in the degree to which contact was maintained with the situation from which the child came. To some extent, "out of sight, out of mind" applied to the pupil once he left his regular school and entered the special class. Classroom teachers indicated the degree of contact which was maintained with the former teacher and administrators. Table 48 indicates the pattern of such contacts with the sending school. Of the 519 children in our total sample, we obtained useful information on the amount of teacher contact for 385, and on the amount of administrator contact for 393.

TABLE 48

Special Class Teacher Contact with Sending School

Degree of Contact	*Percent Sending Teacher*	*Percent Sending Administrator*
None	54	30
Rare	23	28
Occasional	9	13
Frequent	7	15
Continuous	7	14

Combining the three higher contact categories, a degree of liaison was maintained with the teachers of 23 percent of the children and with the former administrators of 42 percent. More than three-fourths of the children were "out of sight, out of mind" as far as their former teachers were concerned.

The burden of responsibility for planning reintegration rested upon the personnel directly involved in the special program. Their lack of assistance in this matter was, in part, reflected in the fact that return from the present to regular classes was seen as a desirable possibility for only 12 percent of 524 cases on which such data was obtained from the administrators and special services personnel. Another eight percent were seen as being most sensibly placed in another special program. But 80 percent were regarded as best handled in a continuation of their present placement. Thus, the special classroom teachers appeared to see few meaningful school resources existing for these children beyond the program already operating. While this may represent mere subjectivity and possessiveness, it may also suggest an unhealthy reality, namely that the child has reached a kind of trail's end service when he gets into the special class.

Teacher Prognosis Regarding Individual Pupils

Table 49 presents the views of the special teachers on whether their individual pupils will continue to need the special class.

TABLE 49

Teacher Perception of Pupil's Continuing Need for Special Class

Will Need Special Class for Most of His School Life	*Percent Indicating* ($N = 464$)
Yes	35
Uncertain	6
No	42
No data	17

While the teachers' prognoses were not totally optimistic, there were indications of their belief in the recoverability of about half the children. This was in contrast to the relatively small number who were seen as becoming able to return to their regular classes.

Table 50 presents a summary of eventual expected placement. These figures are quite consistent with those seen in the previous table, with slightly more than 40 percent of the children judged to be eventually capable of returning to a regular public school program. The larger "no data" percentage suggests less willingness to make longer term predictions.

TABLE 50

Teacher Perception of Pupil's Eventual Placement

Type of Placement	*Percent Indicating* ($N = 481$)
Regular public school class	40
Special school placement	13
Vocational training	4
Drop out or expelled	2
Institution	5
Miscellaneous—job, private school	4
Uncertain	9
No data	23

Teachers predicted the degree of each pupil's personal adjustment and academic adjustment, as well as whether or not his general adjustment was expected to meet his parents' expectations. A summary of responses to the first two of these questions is presented in Table 51.

TABLE 51

Teacher Prognosis Concerning Pupils' Personal and Academic Adjustment

Degree of Adjustment	*Personal Percent Indicating* ($N = 397$)	*Academic Percent Indicating* ($N = 406$)
Complete	32	39
Limited	54	53
Very inadequate	14	8

Once again, there was evidence of the teachers' long term faith that a third or more of their children would return to essentially normal circumstances. The outlook for academic adjustment was only slightly better than for personal adjustment, even though it was clear that the teachers' main effort and orientation was toward the educational remediation of the children. The correlation between the two measures is +.59.

The teachers also indicated that a composite 56 percent of their pupils would be able to meet their parents' expectations for adjustment. The product-moment correlation between this estimate and the teachers' own prognosis for the child's personal adjustment is +.40.

Teacher Perceptions of Success and Failure

Teachers presented what they considered to be their own greatest suc-

TABLE 52

Teacher Reports of Major Successes

Area	*Percent Indicating* ($N = 74$)
Pupil social adjustment	44
Pupil academic adjustment	38
Pupil teacher relationship	28
Pupil self-understanding	18
Pupil return to normal behavior	9
Teacher skill development	4
No data	9

cesses and greatest failures. Tables 52 and 53, respectively, summarize the teachers' reports.

Some teachers reported more than one type of major success, causing the total reports to exceed 100 percent. Obviously, the object of concern to teachers was the degree of improvement in the pupils; mentions of self-satisfaction and skill acquisition were not prominent. A few teachers expected very little, and on that basis viewed themselves as successful. Others set very high standards and were thus less convinced that they had been successful. Some teachers found secondary satisfactions in the responses of parents or changing attitudes on the part of colleagues. But the significant improvements for the teacher were in the area of interpersonal relationships with the children and in improvements in the child's academic performance.

TABLE 53

Teacher Reports of Major Failures

Area	*Percent Indicating* ($N = 74$)
No failures	8
Pupil lack of interest in school	26
Individual cases not responding	15
Limited carry over to other situations	15
Not knowing what to expect	11
Can't reach parents	9
Weakness in program	5
No response	16

The lower percentages of total responses, and the greater number of no responses indicated less sense of failure than success, or at least less willingness to admit it. Here, academic matters loomed larger, as did perceived major failures in work with parents. Children who move very slowly seem to be a source of concern.

Teacher Satisfactions and Dissatisfactions

Closely related to the above discussion are data which indicate teachers' major satisfactions and discouragements. Summary results of inquiries in these areas are presented in Tables 54 and 55 respectively.

TABLE 54

Teacher Reports of Major Satisfactions

Nature of Satisfaction	*Percent Indicating* ($N = 74$)
Improved peer and adult relationships in the children	42
Academic improvement	32
Improved self-understanding in pupils	28
Increased happiness and contentment in pupils	22
Returning pupils to regular class	11
General improvement in pupils	10
Returning pupils to normal range behavior	8
Some, even small, improvement	8
No satisfaction	4
No response	9

These findings closely paralleled teachers' reports of their successes. Only three teachers indicated that they found no satisfaction in their jobs and were determined not to continue them. Improvements in some aspect of the childrens' relationships loomed large as satisfactions, with academic improvement secondary. Thus it would seem that "making the children feel better" is at least as important to teachers as making them work better, even though the evidence suggests that in one way the teachers consider their jobs as primarily educational.

TABLE 55

Teacher Reports of Major Discouragement

Nature of Discouragement	*Percent Indicating* ($N = 74$)
Lack of parent cooperation	25
Negative results, lack of pupil progress	24
Periods when pupils regress	22
Slow progress	18
Unchanged homes, insufficient therapy	15
Lack of understanding by other teachers and/or principals	7
Personal discouragement of teacher	5
No response	11

Eighty-nine percent of the teachers listed some aspect of the work as discouraging, though generally not in as high frequencies as the satisfactions. Home difficulties, failures in gaining parental cooperation, and slow progress combined with the periodic regression of some pupils to produce the major discouragements. Personal inadequacy in understanding or guilt over loss of patience were additional causes of concern to the teachers. Thus, while hope and effort seemed to spring eternal from the large majority of teachers, it was obvious that they encountered frustrations and disappointments.

When teachers think about their individual pupils they may be encouraged or discouraged. This may be a reflection concerning their own capabilities or the confounding nature of the pupils' pathology, but it does represent a gauge of morale. Teachers responded to the question "How often do you feel discouraged about this pupil?" They answered: occasionally, 59 percent; fairly often, 22 percent; most of the time, 19 percent ($N = 393$).

The correlations of this series with personal prognosis for the pupil is +.30 and with academic prognosis +.27.

Pupil Prognosis for Return to Regular Class

Another aspect of program success concerned the pupil's perception of his own situation and prognosis. Tables 56 through 59 present summaries of findings which reflect on certain major aspects of his self-prognosis.

TABLE 56

Pupil Expectation Concerning Return to Regular Class

When Pupil Expects to Return	*Percent Indicating* ($N = 519$)
Never	8
Not for a long time	10
After a few years	32
Soon, right now	45
No data	6

The pupils' collective outlook was somewhat more favorable than their teachers', and reflected a natural optimism and wish to have things back to normal. This finding was especially interesting in the light of data presented earlier, which indicated that most pupils were quite satisfied with their present classroom arrangement.

The distribution of responses over the categories is strikingly similar to that in the previous table. Since the correlation between the two

TABLE 57

Pupil Perception of When His Teacher Expects Him to Return to Regular Class

When Teacher Expects Him to Return	*Percent Indicating* ($N = 519$)
Never	8
Quite a while	31
Soon	55
No data	6

ratings is only +.38, this is not a simple projection. The ratings in Table 57, however, are related to teacher ratings at only +.15. It appears that teachers and pupils saw matters of individual prognosis quite independently.

Pupils anticipated the areas in which they would have difficulty when and if they did return to the regular classroom. Table 58 indicates the distribution of the pupils' responses.

TABLE 58

Pupil Anticipation of Difficulty in Regular Class

Area	*Percent Indicating* ($N = 519$)
No trouble	14
Academics—(specific subjects—34%)	54
Peers	10
Teacher	7
Miscellaneous	5
No response	10

Academics were the largest potential difficulty area, and expected trouble with specific subjects was a concern of about one-third of the pupils. Troubles with teachers and peers affected less than one-fifth of the respondents. The concern with academic accomplishment in the regular class is particularly interesting in the light of the teachers' earlier reported discouragement in this area, as well as the teachers' emphasis upon interpersonal successes. In spite of the overall academic orientation of most programs and individuals, it appears that this is where the problems continue to exist.

Children also indicated in three specific areas what they felt their prospects were once back in their regular class. To the statement "I will be able to do the work," 87 percent of the 519 children indicated yes; only seven percent indicated no, and the balance gave no response.

The respective responses to the statement "I will be able to keep the rules" were 86 percent, 8 percent, and 6 percent, and to the statement "I will be able to get along with the kids," they were 88 percent, 6 percent, and 6 percent. In terms of specific areas, the pupils' outlook was quite favorable. The high proportion of children who said that they expected academics to be their major problem must have felt, in the main, that they would be able to handle the problem. Once again, the pupils appeared to be able to make distinctions among the three areas, since the intercorrelations among the three ratings ranged from only +.20 to +.32—high enough to be significant with this large *N*, but not indicating much variance in common.

Pupil Aspirations for the Future

One of the major components in any pupil's motivational system is his notion concerning his prospects for the future. To a degree, this can also serve as an index of how realistic his appraisal of himself is. Students told what they proposed to pursue as a life activity once they were out of school. Table 59 presents a summary of these responses, catalogued according to Reiss' (1961) occupational index scheme.

TABLE 59

Pupils' Occupational Aspirations

Level	*Example*	*Percent Indicating* ($N = 519$)
1	Auto mechanic	25
2	Policeman	14
3	Salesman	15
4	Baseball player	11
5	Draftsman	7
6	Teacher	9
7	Scientist	6
8	Doctor	7
	No data	7

Two-thirds of the children responding aspired to the first four categories, and the mean for all responses was 3.22, with $SD = 2.3$. The pupils aspired generally to occupations which were well within their intellectual capability to manage. In interpreting the data, however, one needs to recognize that many of the children are still young enough that fantasy, rather than reality factors, plays the major part in determining responses to such a question.

The children also felt fairly confident of reaching the goals they had set. In responding to a question specifically asking "How good are your

chances of reaching the goal you have set?" 6 percent said "poor," 8 percent said "fair," 16 percent said "good," 50 percent said "very good," and 3 percent said "excellent." Eighteen percent of the sample of 519 children gave no response to the question. The mean of 3.4 falling between good and very good, indicates a reasonable degree of confidence.

Self-Perceptions of Change in the Pupils

One very important test of the success of such programs as those studied is the degree to which they induce change for the better in the children with whom they deal. It was not possible to assess these effects by extensive pre- and postprogram data.

It was necessary to rely upon retrospective data as a means of inferring changes which had taken place in the participating children, both from their own point of view, and from that of the teachers who had contact with them in the program.

Schedules A and B, which were completed by the individual children, or by trained recorders from data provided directly by the children when necessary, contained approximately 40 items which were used to assess pre- and postprogram conditions as seen by the children. These 40 items were grouped, a priori, into eight dimensions as indicated in Table 60. Each dimension contained approximately five items, and the median reliability of the dimension scores was +.60.

Schedule A required that the children respond in terms of conditions as they saw them in their previous school or class. Schedule B sought similar information on the present special class. Differences between previous and present scores on each of the eight dimensions were computed, and a *t* test for correlated arrays was then applied to each dimension. The items were scored so that a decline in mean dimension

TABLE 60

Children's Perceptions of Present and Previous Classes—Eight Classroom Conditions Dimensions

Dimension	*Previous mean*	*Present mean*	*t*	*r*	*p*
Peer relationships	2.23	1.95	8.12	.32	.001
School anxiety	2.41	1.80	18.50	.35	.001
Personal affect	2.52	1.82	17.51	.31	.001
Parental pressure	2.33	1.70	15.86	.37	.001
Teacher relationships	2.46	2.16	9.04	.22	.001
Behavior	2.49	1.81	18.82	.39	.001
Morale	2.36	2.12	8.77	.26	.001
Academic success	2.70	1.95	20.30	.27	.001

$N = 503$

score indicated improved conditions from previous to present class. Table 60 presents a summary of this analysis.

In terms of the perceptions of the children themselves, the special classrooms offered significantly better conditions than did the regular classrooms from which they came. The children, as a group, saw improved relationships with teacher and peers, felt less anxiety and parental pressure, and were happier, had higher morale, behaved better, and experienced greater academic success than in their previous settings. There was a considerable halo effect at work among the dimensions. At the same time, there remained little question that a general improvement in reactions to the school situation had occurred.

Changes in the Children as Perceived by their Teachers

Another means of evaluating changes in the children as a result of their participation in the pecial class programs was obtained from teacher reports on perceived differences in pupil ability to control themselves, their affect, their academic achievement, and their personal relationships. Each teacher provided data on his children which indicated their condition on these dimensions as reported to him from their previous class, their condition when initially seen in the special class, and their condition at present. For each of the four dimensions, difference scores were computed between previous and initial, previous and present, and initial and present conditions. Table 61 summarizes the results of this analysis. In each case, *t* tests for correlated arrays were applied, and the items were scored in such a way that an increase in

TABLE 61

Teacher Perceptions of Changes in Children—Four Classroom Behavior Dimensions

Dimension	*Means*		*t tests*		*r*	*p*
Control	Previous	3.87	Prev. - Init.	7.86	.74	.001
	Initial	4.33	Prev. - Pres.	17.87	.40	.001
	Present	5.47	Init. - Pres.	14.39	.52	.001
Affect	Previous	3.03	Prev. - Init.	6.14	.73	.01
	Initial	3.39	Prev. - Pres.	17.54	.30	.001
	Present	4.97	Init. - Pres.	15.35	.42	.001
Academic	Previous	7.17	Prev. - Init.	2.57	.30	.01
	Initial	7.58	Prev. - Pres.	8.06	.17	.001
	Present	8.55	Init. - Pres.	11.85	.50	.001
Relationships	Previous	2.96	Prev. - Init.	6.62	.73	.01
	Initial	3.35	Prev. - Pres.	20.40	.33	.001
	Present	5.00	Init. - Pres.	16.57	.39	.001

387 *N* 406

mean score from previous to initial, from previous to present, or from initial to present, indicated an improvement in the dimension.

Table 61 indicates a significant change in the perceptions of the teachers regarding the condition of their children, not only in the period during which they have had contact with them, but in the period between their previous class experience and their early contact in the special class. Several possibilities may be adduced to explain this peculiar finding. Perhaps the child's condition, as reported to the present teacher by the former teacher, was made to seem worse than it actually was. Perhaps the needs of the present teacher to see improvement were so great that they distorted his judgment or memory. Whatever the source, the changes seen by the teacher were in every case significant, and certainly indicate that things were better from the teacher's point of view.

Variables Related to Change in Individual Pupils

To go beyond the mere demonstration of these changes and to attempt to account for them in terms of other variables on individual pupils, a total of 78 variables, including the change scores on the eight pupil dimensions and the four teacher dimensions, was assembled. These were subjected to a correlation analysis. The variables included measures of pupil self-confidence and aspiration level, self-prognosis in specific areas, pupil age, family morbidity as judged by the teacher, etc., as well as the pre-, post-, and change scores on the specific pupil and teacher dimensions discussed in the previous section. Pearson product-moment correlations were computed on all possible pairs of variables, by means of an IBM 7090 missing data intercorrelation program. The program computed biserial equivalents on those pairs which had two-category variables. The intercorrelation matrix was produced, and examined visually.

This examination was not an encouraging one. A very large number of significant correlations appeared (in part because the size of the sample makes the requirement for significance very low), but the pattern of relationships did little to clarify our knowledge of the factors which were operating to produce change. For the most part, pupil variables related to one another, teacher variables related to one another, but few significant relationships crossed the party lines. For example, considering the eight pupil self-description dimensions (peer relationships, school anxiety, personal affect, parental pressure, teacher relationships, behavior, morale, and academic success) on both the previous and present conditions, significant intercorrelations were found to exist among all pairs except three in the resulting 16 x 16 matrix.

The range of significant correlations was from +.10 to +.58, with the median at +.33. These variables also related significantly to most of the change scores which were derived from them, as was to be expected. The several measures of pupil self-confidence and prognosis in specific areas also related significantly one to another, and to the eight dimensional measures and their derivatives, although less strongly.

A similar situation exists when the teacher variables are considered, although the teachers' ratings of such pupil characteristics as control, affect, relationships, etc., are less likely to be highly intercorrelated. It would appear that the teachers did discriminate among the variables, while the pupils were more likely to manifest a general halo effect in their perceptions. Once again, the teacher ratings of previous, initial condition in the special class, and present condition were strongly related within each teacher judgment variable, and also were related to the respective derived change scores. Beyond these expected patterns, meaningful intercorrelations were hard to find. A scattering of significant correlations appears throughout the matrix (far more than chance alone would provide), but most of these are so low or so remote in their interpretation as to be of only academic interest.

The level of these relationships is much too low to permit any but the most tenuous conclusions. However, a consistent pattern does seem to emerge, and while it is recognized that they may be the result of rating artifacts, response sets, etc. it is believed that they describe a meaningful syndrome which surround the improvements in the child's view of his school life. One would speculate that introduction into the special class, with reduced pressures and more tolerance from the teacher, produces a slight lessening of the child's overt pathology. The teacher in turn responds to this by seeing the child as better than he was described, and a narrow circle of hygienic relationships is developed. It is necessary to remember that every correlation plot has two ends, so that the opposite syndrome also exists for many children who do not see their lot as improved. However, the overall improvements discussed previously are of a significant magnitude, so that the proportion of children who are not benefitted is relatively low. Considering the fallibility of the measures, the difficulties with retrospective data, and the large and varied sample of pathologies, these findings represent an encouraging sign, even though they are obviously not conclusive.

Variables Related to Teacher-Perceived Change in Pupils

It was previously indicated that change scores were computed on four dimensions of pupil behavior as judged by their teachers. These four were: (a) control, (b) academic performance, (c) affect or feeling, and

(d) general relationships. Three change scores were actually computed on each dimension, indicating changes from previous class condition to initial condition in the special class, from previous to present condition, and from initial condition to present condition in the special class. For the most part, changes which emerged were of the last two types, i.e., from previous to present condition, and from initial to present condition in the special class. From an examination of the changes, several interesting patterns emerge. The low magnitude of the correlations does not permit sweeping statements about those variables which relate to change as perceived by the teacher. However, there does seem to be a consistent pattern which involves not only teacher judgments, but also pupil perceptions of the improved conditions in their school lives in the special classroom. No causal significance can be attributed to these correlational findings, but it is quite clear that the pupil now feels that he is better off than he was. Whether this is a response to the relief from classroom pressure in the regular school, with consequent amelioration in his general relationships within the special class, or whether the teacher was an active, rather than an observing, agent in the change process is impossible to determine. For whatever reason, students seemed to feel better, and teachers were aware of this in their own view of things. What is cause and what is effect must await rigorous and controlled experimentation.

One other finding is worthy of mention. Running throughout the teacher change variable is the element of academic improvement, or at least less academic retardation. This appears consistently throughout all findings, as does the teacher's perception that the improved children were those with particular academic difficulty before they entered the special class. Once again, cause and effect are difficult to separate, but the importance of the academic process to both the student and the teacher cannot be overstressed. When the child improves academically, he sees his present condition as much more desirable than his former one. Teachers are generally very gratified at the fact that students seem not to be as badly off academically as they thought, and may respond favorably to such children. A most important element underlying the helping process in these classrooms centers around the teacher expectation of academic performance, previous pupil academic failure, and the introduction of academic success experiences into the classrooms. Whether this is, in fact, the case will be elucidated somewhat by the analysis of class changes in the next section, where these group changes are examined in the context of specific teacher methodologies and techniques.

As a check on possible sex linked differences in response to the classes, separate correlation matrices were composed for the boys and the girls in our sample. Some suggestions of difference appear, particularly around girls' responses to the academic demands of school, but these are even more tenuous than the findings already reported.

Participation in Outside Therapy as Related to Change

Individual students who were receiving psychotherapy outside the classroom program numbered about 25 percent of our total sample. Because of the particular interest in the effects of this procedure upon eventual outcomes, it was subjected to a special analysis against a number of other variables. The results of this analysis are quite equivocal as far as the overall benefits of such treatment to the children is concerned.

No differences were found between those children in therapy and those not in therapy as far as teachers' judgment of their future academic or social adjustment, of their behavior in class, or of their general improvement. Among the children themselves, those in therapy saw themselves more favorably on the several classroom behavior dimensions than those who were not. At the same time, a greater percentage of the group not in therapy found their present class satisfactory as it appeared and had no changes to suggest.

Several possible explanations of these equivocal findings are possible. Perhaps there is a tendency for the more disturbed children to be in outside therapy. Teachers may not always know about treatment, so that our identification processes may be quite unreliable. Additionally, there is some evidence that teachers generally have some skepticism about outside treatment, and this may influence their judgments about individual children. No definitive evidence exists on either side of the question, and considerably more research is required in this very vital area.

Factor Analysis of Group and Group Change Variables

As a means of further understanding the nature of the changes which took place in the pupils and the variables which related to these, a factor analysis of some 89 class-relevant variables was undertaken. Included were the mean scores obtained on many of the individual variables previously discussed, factor scores for the 11 factors described in Chapter Four, and judgments made by both teachers and observers on conditions in the respective groups as a whole. All possible intercorrelations were computed, a correlation matrix composed, a principle axis solution applied, and a varimax rotation carried out. All statistical

manipulations were conducted on the University of Michigan IBM 7090 Computer System.

The results of this factor analysis provide only minor additional understanding of the factors producing change. The cluster of variables which appeared in most of the factors seems to represent characteristic attitudes and approaches of teachers, some of which were related to observations made by the site visitors, but most of which bear little relationship to the observed significant changes in the pupils. However, it seemed desirable to present the factors and to undertake a brief discussion of each, since certain leads do appear which may be of value to future researchers in the area. The several factors and the variables which load upon them are presented in a group following the close of this discussion.

Factor I-A (so designated to distinguish it from the early methodological I) is composed of all of the changes in self-related pupil dimensions, plus several variables relating to increased emphasis on academic work, greater pupil self-confidence, longer school days, and reduced time spent in discussion of behavior. Two of the site visitor observations, those of general program success and academic emphasis, also loaded positively on this factor. At first, one might conclude that academic emphasis produced change, but it is the investigators' impression that the interpretation may as well be that improvements in the children as seen by themselves created a condition in which more normal kinds of classroom operations may have been carried on. It is illuminating to note that none of the teacher methodology factors and only a few relatively unimportant teacher judgment variables appear in Factor I-A. The programs which load heavily on this factor seem to be those which are generally successful in terms of pupil view.

Factor II-A would appear to be mainly made up of good impression elements aroused in the site visitors' contact with the teacher and the program. These variables seem to make up a cluster which would appeal to the clinician, in that they play down the academic, reveal dynamic-protective attitudes on the part of the teacher, and show evidence of general dynamic sophistication on his part. The impression that this is an overall halo rating of the observer is strengthened by the appearance of the physical facilities variable, the increased teacher use of records, and the permissiveness that existed in the situation. The optimistic clinical view should be somewhat tempered by the failure of any of the change variables to appear and by the fact that the pupils themselves rated their teacher as expecting them back in a regular class program later rather than sooner.

Factor III-A is a simple one which consists only of pupil-perceived views of a present happy situation, with one single teacher rating added.

The clustering of these pupil ratings into a single factor is not surprising in view of the already demonstrated high intercorrelations among the several variables.

Factor IV-A would seem to be a general teacher pessimism cluster. This group of teachers saw the children as having poor present affect, relationships and control, as being hard to control, and as having poor academic and personal prognosis. Some of this pessimism was picked up by the observer, who rated the teacher as nondynamic in his orientation and as operating in inadequate physical settings. The teacher also tended to blame this outlook on particular home conditions and on a lack of maternal concern over the child's school success. Once again, causal conclusions cannot be made since none of the change variables appear in the factor.

Factor V-A is another internal attitude factor among teachers. This group saw the class as being in good shape, relatively easy to motivate, and capable of engaging in academic pursuits. Teacher views of parental attitude and maternal ambition were positive, and little attention was apparently necessary in the area of behavior discussions or control. The appearance of younger pupils in conjunction with this syndrome leads to the belief that this particular teacher outlook tends to come from having younger pupils who may be relatively easy to get along with.

Factor VI-A appears to be a cluster of variables which reflect low academic concern on the part of the teacher and administration, and an emphasis on relationships, behavior discussions, and dynamics. This approach is applied typically to younger pupils, and includes a generally optimistic view by the teacher of improvements in the children. However, these improvements were not reflected in increased confidence among the children about being able to return to the regular class, and none of the change variables from the self-perception of pupils appeared. We conclude that this is almost entirely an internal orientation of the teacher and that it speaks in no way for a causal relationship to pupil improvement.

Factor VII-A is another internal attitude factor which the teachers revealed. They observed the children as regressing, as requiring continued special placement, and as being poor in their present academic work and relationships. The pupils themselves reflected the failure of such programs, as did the overall ratings of the school personnel. The other end of this factor continuum, of course, is a general halo improvement, where things improved for everybody, where the teacher understood the child in rather complex terms, and where time was available to be spent on nonacademic activities.

Factor VIII-A is almost exclusively a teacher optimism syndrome.

Teachers noted good prognosis, improved affect, good class control, and low anxiety among the pupils. The teacher showed low concern about academic gain and was not easily discouraged. The only pupil variables which appeared here confirm the general atmosphere of optimism; they observed themselves as feeling better and as being able to keep the rules when they return to a regular class.

Factor IX-A represents a group of older, more experienced teachers who dealt with children much as they would in a traditional classroom. There was an emphasis on doing work over until it was right, and on keeping up contact with the sending teacher. These teachers described pupils in relatively simple terms, but saw the pupils as improving in terms of how they felt. There was concern about academic gain yet time was spent in nonacademic activities. That all was not as well in this situation as the teacher believed was indicated by the relatively low morale expressed in the pupils' self-perceptions.

Factor X-A might be characterized as a "dump 'em and forget 'em" syndrome. This approach produced some discouragement in the teacher, since his wish appeared to be to offer children relationships and to make some academic progress. However, left to his own devices, he found the class hard to motivate and obtained little support in his efforts. The children themselves reflected this with lower ratings of present morale, and the observers picked it up in their low ratings of physical facilities and adequacy of records. One would suspect that this type of class was suffering from a lack of adequate administrative support.

Factor XI-A suggests a cluster of attitudes and activities springing from student orientation—that they are retarded. It is characterized by firm control, low concern with academics, and a general nondynamic orientation. The observer noted that academics were emphasized but in a low-stress fashion. The teacher perceived the children as having good relationships and low anxiety. The pupils themselves had low self-perceived anxiety, but their present affect was relatively poor. It was a surprise that the corrective special education syndrome did not load heavily on this factor.

Factor XII-A seems to represent a cluster of attitudes held by less well-trained teachers. These teachers relied heavily on consultation and profited from it. They were not autocratic and saw themselves as having good teacher relationships with the pupils. The pupils themselves noted good teacher relationships, but did not express confidence that they would do well when they returned to the regular class.

All factor loads in the following presentation are presented so that

a plus loading indicates "higher," "better," "more," "longer," or "improvement." When ambiguity exists around the interpretation of any loading, an interpretative word or words is presented in parentheses to clarify the meaning.

FACTOR I-A *(14%)

Variable	48 - Change in academic success	(P)	+86
	42 - Change in school anxiety	(P)	+83
	45 - Change in teacher relationships	(P)	+77
	46 - Change in behavior	(P)	+77
	47 - Change in morale	(P)	+74
	43 - Change in personal affect	(P)	+69
	44 - Change in parental pressure	(P)	+67
	41 - Change in peer relationships	(P)	+65
	56 - Classroom observation, program success	(O)	+36
	77 - Length of school day	(T)	+36
	3 - Traditional academic syndrome	(F)	+31
	88 - Self-confidence	(P)	+31
	55 - Classroom observation, academic emphasis	(O)	+31
	33 - Pupil age	(T)	+28
	76 - Time spent, behavior discussions	(T)	—27
	29 - Parent attitude	(T)	+25

* Indicates percent of total variance accounted for by this factor.

FACTOR II-A *(11%)

Variable	1 - Stereotype II, Good Teacher	(O)	+87
	89 - Stereotype I, Poor Teacher	(O)	—85
	8 - Stereotype III, Happy Pupil	(O)	+80
	56 - Classroom Observation, program success	(O)	+55
	55 - Classroom Observation, academic emphasis	(O)	—47
	10 - Restrictive inaction syndrome	(F)	—43
	82 - Class anxiety, confusion	(T)	—39 (Low)
	59 - Physical facilities	(O)	+38
	2 - Protective teaching syndrome	(F)	+33
	66 - Description of pupils—simple to complex	(T)	+30
	84 - Class social relations	(T)	+30
	7 - Autocratic controlling syndrome	(F)	+29
	31 - Contact with sending administration	(T)	+29
	63 - Teacher orientation to role—dynamic	(O)	+28
	54 - Classroom observation, permissiveness	(O)	+26
	67 - Teacher use of records	(O)	+26
	23 - Teacher expects me back in regular class	(P)	—25

* Indicates percent of total variance accounted for by this factor.

FACTOR III-A *(9%)

Variable	11 - Present peer relationships	(P)	+76
	16 - Present behavior	(P)	+69
	13 - Present personal affect	(P)	+66
	18 - Present academic success	(P)	+62
	15 - Present teacher relationships	(P)	+60
	12 - Present school anxiety	(P)	+59 (Lower)
	17 - Present morale	(P)	+49
	14 - Present parental pressure	(P)	+49
	29 - Parental pressure	(T)	+26 (Lower)

* Indicates percent of total variance accounted for by this factor.

FACTOR IV-A *(9%)

Variable	38 - Present affect	(T)	—76 (Bad)
	37 - Mother's ambition for child's school success	(T)	—62 (Low)
	50 - Change in affect	(T)	—60
	36 - Morbidity index	(T)	+57 (High)
	40 - Present relationships	(T)	—40
	24 - Present control	(T)	—38
	26 - Prognosis, academic adjustment	(T)	—33 (Poor)
	63 - Teacher orientation to role—dynamic	(O)	—33
	7 - Autocratic controlling syndrome	(F)	—29
	33 - Pupil age	(T)	—29
	69 - Is class hard to control?	(T)	+29 (Yes)
	25 - Prognosis, personal adjustment	(T)	—28 (Poor)
	22 - I'll be able to get along with the kids	(P)	—26 (No)
	59 - Physical facilities	(O)	—26

* Indicates percent of total variance accounted for by this factor.

FACTOR V-A *(9%)

Variable	86 - Class school acceptance	(T)	+70
	83 - Class control	(T)	+62
	79 - Concern about academic gain, pupil	(T)	+56
	84 - Class social relations	(T)	+52
	85 - Class teacher relations	(T)	+50
	71 - Is class hard to motivate?	(T)	—50 (No)
	19 - Level of aspiration confidence	(P)	+48
	76 - Time spent on behavior discussions	(T)	—33
	74 - Time spent on academics	(T)	+31
	29 - Parental attitude	(T)	+27
	37 - Mother's ambition for child's school success	(T)	+27
	24 - Present control	(T)	+26
	28 - Teacher discouragement	(T)	—26
	33 - Pupil age	(T)	—26

* Indicates percent of total variance accounted for by this factor.

FACTOR VI-A *(8%)

Variable	80 - Concern about academic gain, administration	(T)	—80
	78 - Concern about academic gain, teacher	(T)	—73
	74 - Time spent on academics	(O)	—63
	55 - Classroom observation, academic emphasis	(P)	—41
	19 - Level of aspiration confidence	(T)	+37
	52 - Change in relationships	(O)	+35
	63 - Teacher orientation, dynamic	(F)	+37
	5 - Repetition compulsion syndrome	(T)	—31
	82 - Class anxiety, confusion	(P)	+32
	20 - I'll be able to do the work	(T)	—31
	33 - Pupil age	(P)	—30
	21 - I'll be able to keep the rules	(T)	—28
	76 - Time spent on behavior discussions		+28

* Indicates percent of total variance accounted for by this factor.

FACTOR VII-A *(7%)

Variable	51 - Change in academic success	(T)	—73
	52 - Change in general relationships	(T)	—58
	49 - Change in control	(T)	—49
	50 - Change in affect	(T)	—41
	32 - Future plans for students' return	(T)	—39
	20 - I'll be able to do the work	(P)	—35
	39 - Present academic success	(T)	—34
	66 - Description of pupils-complex	(T)	+34
	22 - I'll be able to get along with the kids	(P)	—33
	58 - Program success	(S)	—32
	75 - Time spent on art, music, gym	(T)	—32
	40 - Present relationships	(T)	—28

* Indicates percent of total variance accounted for by this factor.

FACTOR VIII-A *(7%)

Variable	25 - Prognosis, personal adjustment	(T)	+69
	26 - Prognosis, academic adjustment	(T)	+66
	27 - Child's ability to meet parental expectations	(T)	+61
	32 - Future plans for students—return	(T)	+41
	43 - Change in affect	(P)	+36
	23 - Class control	(T)	+30
	82 - Class anxiety	(T)	+28 (Low)
	81 - Concern about academic gain	(T)	—27
	21 - I'll be able to keep the rules	(P)	+26 (Yes)
	28 - Teacher discouragement	(T)	—25

* Indicates percent of total variance accounted for by this factor.

FACTOR IX-A *(7%)

Variable	60 - Teacher age	(T)	+75
	63 - Teacher experience	(T)	+63
	4 - Interpersonal encouragement syndrome	(F)	—40
	5 - Repetition compulsion syndrome	(F)	+39
	58 - Program success	(S)	+34
	53 - Class IQ	(T)	—33
	30 - Contact from sending teacher	(T)	+31
	66 - Teacher description of pupils—complex	(O)	—30
	50 - Change in affect	(T)	+28
	78 - Concern about academic gain, teacher	(T)	+28
	75 - Time spent on art, music, gym	(T)	+26
	17 - Present morale	(P)	—25

* Indicates percent of total variance accountered for by this factor.

FACTOR X-A *(6%)

Variable	68 - Highest number of pupils in class	(S)	+59
	2 - Protective teaching syndrome	(F)	—47
	10 - Restrictive inaction syndrome	(F)	—44
	28 - Teacher discouragement	(T)	+44
	31 - Contact with sending administration	(T)	—42
	17 - Present morale	(P)	—37
	59 - Physical facilities	(O)	—35
	65 - Adequacy of records	(O)	—33
	4 - Interpersonal encouragement syndrome	(F)	+27
	71 - Is class hard to motivate?	(T)	+25 (Yes)
	81 - Concern about academic gain, parents	(T)	+25

* Indicates percent of total variance accounted for by this factor.

FACTOR XI-A *(6%)

Variable	54 - Classroom observation, permissiveness	(O)	—55
	79 - Concern about academic gain, pupil	(T)	—43
	81 - Concern about academic gain, parent	(T)	—41
	67 - Teacher use of records	(O)	—41
	55 - Classroom observation, academic emphasis	(O)	+38
	75 - Time spent on art, music, gym	(T)	—30
	57 - Program design, dynamic	(O)	—30
	35 - Present academic retardation	(T)	+29
	72 - Consultation, hours per week	(T)	—29
	40 - Present relationships	(T)	+28
	13 - Present personal affect	(P)	—27
	82 - Class anxiety	(T)	—26 (Low)
	12 - Present school anxiety	(P)	+25 (Low)

* Indicates percent of total variance accounted for by this factor.

FACTOR XII-A *(5%)

Variable	73 - Consultation adequacy	(T)	+54
	88 - Pupil self-confidence	(P)	—41
	72 - Consultation hours per week	(T)	+40
	21 - I'll be able to keep the rules	(P)	—39 (No)
	64 - Teacher training	(T)	—35
	22 - I'll be able to get along with the kids	(P)	—34
	23 - Teacher expects me back in regular class	(P)	—34
	77 - Length of school day	(T)	+31
	7 - Autocratic controlling syndrome	(F)	—26
	15 - Present teacher relationships	(P)	+26
	35 - Present academic retardation	(T)	—26
	40 - Present relationships	(T)	+26

* Indicates percent of total variance accounted for by this factor.

Thus, it can be seen that the world of the pupil and the world of the teacher are far from perfectly coordinate. In large part, the teacher views spring from internal attitudes, subjective opinions, and local situations. Inasmuch as one of the local situations is the self-perceived improvement in children, teachers respond differentially to children who have apparently improved. For the most part, however, the results of this factor analysis do not clarify the causal relationships between teacher behavior, situational conditions, and pupil self-perception and change. Much more research is called for in order to illuminate these fascinating areas.

Program Types and Group and Change Variables

The final section of this report consists of a study of the relationships between various factors and program design. In order to make clear the nature of the process, brief descriptions of specific examples of the seven styles of programs are included. These will give substance to the analysis which follows.

Type One:

Psychiatric-Dynamic. The goal of the program was to provide a class for both institutionalized children and others from the public school enrollment, with the intent of returning them to regular classes. The physical facilities were better than adequate. The teacher was trained as a regular teacher with some specialized work. The method was essentially relationship where free expression and acceptance were used to bring about alterations. Psychiatric and other clinical personnel joined with the educational staff in diagnosing and planning for the child. Children were described in psychoanalytic terms; academic and remedial aspects were minimized. Goals were stated in terms of child needs for

a parent image, relationship, security, etc. There was an emphasis on food, devices for tension release, and an overall warm atmosphere.

Activities, arts and crafts and some academic work utilized class time, and all of the program was individualized. The structure and controls were loose and no strict regulations were applied. The teacher imposed such structure as was required and the children had a friendly and dependent relationship with him. As the child progressed, increasing demands were made upon him. This program was judged very successful by the site visitor and the local administration.

Type Two:

Psycho-educational. The goal was to provide an experience under therapeutic management which permitted children to return to regular classes. The physical facilities were better than adequate. The teacher's specialized training was with the mentally handicapped. Support was given by both clinical and school social work personnel. Diagnosis included both a psychiatric and clinical work-up. The teacher considered his sensitivity and empathic feelings for the pupil as most essential. Pupils were described in both educational and psychiatric terms.

Control was evident at a comfortable level with much acceptance. Mild but effective limits were enforced. Academics were stressed in this framework. It was judged highly successful.

Type Three:

Psychological-Behavioral. The goals emphasized the need to increase the achievement of the emotionally disturbed so that these children could fit back into regular classes. The physical facilities were minimal. The method used relied on patterning and fairly tight structuring both for specific behavior change and academic remediation. Emotional problems and underachievement were seen as linked, and the therapy was through academic improvement.

The teacher had been trained for work with the retarded but also had experience with the disturbed. Psychological tests were given and psychiatric consultation could have been utilized. The classroom was quite formal in organization and pupil response. There was considerable give and take between the teacher and the pupils; the approach was academic but no extreme pressures were applied. It was judged as very successful by the site visitor and local personnel.

Type Four:

Educational. The goal was to extend special education through a new classroom facility for children too disturbed to fit into regular classes.

The hope was for rehabilitation and eventual return to the regular classes. The physical facilities were excellent. The teacher's training had been in elementary and retarded, with special work in the area of the organics and mental health. Special education personnel worked with the guidance clinic in screening.

The fact that the children no longer disturbed regular classes was seen as one major advantage by the personnel. It was also clear that the pupils were happy and learning. The teacher helped with their social training, helped them to understand themselves, and worked with the parents as well. The combination of kindness, consistency, and firmness was the pattern of the teacher's behavior. Children were discussed primarily in educational and behavioral terms. There were both whole group and individualized activities; music and rhythms were almost as much a part of the day as the major emphasis, academics. While the tone was on a no nonsense level, a positive optimistic atmosphere existed. There was a strong group identification which included all the pupils and the teacher. The program was judged as highly successful by the site visitor and the local administrator.

Type Five:

Naturalistic. The goals were not too clear but they included saving regular classes trouble and salvaging the children as well. The physical facility was superior. Some of the work-ups on pupils were extensive and complete, including neurologicals. Others were spotty. The teacher had training in elementary, and with the retarded. The teacher's role was educational, but he had a deep sympathy and love for children. He valued patience and calmness above all else.

The pupils were expected to work hard, sit in their seats, and raise their hands. Misbehavior was openly criticized and sometimes recess or the like was denied as penalty. In fact, the operation was much like a strongly controlled regular class in many regards. Control was not harsh but there was not much warmth or laughter. It was judged as very successful by the local authorities and moderately successful by the site visitor.

Type Six:

Primitive. The goals were to help the acting out underachiever. The community, principal, other staff, and parents had not been kept informed of the program. The physical facilities reflected the overall inadequacy in planning. Psychological and educational studies were made but no psychiatric reports were included. Staff committee meetings for planning and operation were no longer held. The big effort had been

to establish control which proved to be very difficult to achieve. The teacher had extensive experience and training in this type of work. Staff conflicts made an aligned effort impossible and considerable use of exclusion was required.

Children were described in symptomatic terms exclusively. The orientation was academic, but the conflicts were too acute to enable any real effort. Control efforts were very strict and occasionally an individual pupil suffered an outburst. The interaction between pupils and teachers was stiff and uncomfortable. The local personnel and the site visitor both noted the effort as a failure.

Type Seven:

Chaotic. The formal statements indicated the program was to serve the maladjusted; in reality, it had become a catch-all for pupils who did not fit anywhere else. Screening included projectives and school personnel work-up but no psychiatric examination. The physical facilities were very poor. The teacher had both experience and extensive special training. He espoused a permissive, therapeutic approach, but things readily got out of hand to the dismay of the teacher and pupils alike. The administration tended to neglect the operation and all suffered from a sense of being unwanted.

While the intent was to foster academic achievement in a friendly atmosphere, most of the effort was expended with handling aggressive behavior and acting out. An attempt was made to maintain control, but deviant behavior was actually also accepted and created considerable confusion. The site visitor judged it to be a failure while the local administrator felt it was moderately adequate.

The t Tests of Differences between Program Types on Group and Group Change Variables

As a final means of seeking to understand the source of the changes in children's and teachers' perceptions of the pupils' condition, a series of t tests and F tests of differences between program types on selected variables were conducted. The complete list of these variables is presented in the appendix. Each class was categorized on the basis of data from the supplementary information form, the reports of school personnel, and the observation of site visitors into one of these types. In some instances, in order to make computations, the average of the available data on the variable was inserted to eliminate missing data. There were 73 programs in this computation: Type One, 10 cases; Type Two, 20 cases; Type Three, 3 cases; Type Four, 22 cases; Type Five, 12 cases; Type Six, 5 cases; Type Seven, 1 case. Obviously, with only one case in

Type Seven, these statistics could not be computed for any comparisons involving this group, and are ignored in the following discussion.

In a general way, the programs ranged from more to less sophisticated, and paid equal attention to dynamics. This characteristic does not apply perfectly, however, and the categories of one through seven should not in any way be considered a continuum.

It was within this scope of comparison that evidence was found of meaningful and perhaps causal relationships to change which occurred in the children. Because of their importance, the comparisons among the programs on the various change variables will be presented first, and the balance of the statistically significant findings later.

Pupil perceived change in peer relationships indicated that those children who were in Program Type Two (psycho-educational) saw themselves as improving more than children in Program Type One (the psychiatric dynamic). The difference was significant at the five percent level. Program Type Two was also superior at the 5 percent level to Program Type Four, (the educational), and Program Type Six, (the primitive).

Changes in school anxiety were found to be significantly greater at the five percent level in Program Type Two as compared to Program Type One; i.e., Type Two students reported a significantly greater reduction in school anxiety than those in Type One. A similar finding is observed in reported changes in personal affect. Type Two children reported themselves as improving more in their general feelings than those in Type One, although this finding at the five percent level is debilitated somewhat by the fact that the F test is also significant, indicating that the variances of the two distributions are significantly different and that the assumption for the application of the t test is not valid. However, Type Two children were also found to have improved significantly more on the personal affect dimension than those in Type Four or Type Six. Both findings are significant at the five percent level.

Pupil perceived improvements in teacher relationships favor Type Two programs over Type Five (the naturalistic) and Type Six (the primitive). Once again, both findings are significant at the five percent level, as is the finding that students in Type Three programs (the psychological-behavior), improved more than in Type Six (the primitive).

Type Two programs were also superior to Type One in terms of reported changes in pupil behavior, although a significant F test also reduces the impact of this finding. Pupil perceived changes in morale favor Type Two over Type One (one percent with a significant F test), Type Two over Type Six (five percent), and Type One (the psychiatric-dynamic) over Type Four (the educational). Type Two teach-

ers also tended to see parental attitudes as better than Type Four (five percent level) Type Five (five percent level) or Type Six (five percent level).

These findings strongly suggest that the effect of the psycho-educational program on the children's perceptions of their own situation was most helpful. These programs provided an educational experience in a context of therapeutic management, with the teacher viewing his own sensitivity and empathic feeling for the pupils as most essential. Firm control in an accepting context and support of the program by clinical and school special service personnel also characterized these programs.

Changes in the teachers' perception of the children also favored Program Type Two over Program Types One and Four (both at the five percent level), at least in the area of pupil control. It is illuminating that no other significant differences appear between the several program types on the several teacher change variables. It is possible that what is being reflected in the finding is a projection of the teachers' own feelings of comfort and ease of control in a Program Type Two situation. Teacher judgments of present control also favored Type Two over Type Six (five percent level). It is, of course, possible that the improvement of children under Program Type Two conditions made the teacher's control job easier, but it is equally possible that the kind of children for whom a Type Two program would be conceivable are those who are more amenable to improvement in this area. The former interpretation might seem to be favored in the light of the findings on self-perceived changes in the children.

Teacher prognosis for the child's personal adjustment favored Program Type One over Type Two (five percent level) and Type Four (one percent level). Teachers in Type One classrooms also saw their pupils as having significantly better prognosis for academic adjustment than those in Type Six. These differences may arise from the more generally optimistic outlook that originally characterized teachers in a psychiatric-dynamic program, and the atmosphere of optimism which they picked up in their contacts with supporting clinical personnel. This probably does not reflect an objective appraisal of the students' prognosis. That these reactions are attitudinal, rather than objective, is testified to by the fact that teachers in Program Type One were significantly less discouraged than those in Program Type Four (one percent level) and Program Type Six (five percent level). Once again, the supportive function of contact with clinical personnel is dramatized.

The optimistic outlook shared in general by all programs for pupils in class was not shared by all the pupils themselves. Pupils reported that they expected to return to a regular class sooner if they were in a

Type Four program than in a Type One (five percent level). Apparently the educational emphasis of the Type Four's lead the children to believe that if their academic problems were conquered, they would then be able to function effectively in a regular class, or at least believed that the teacher would expect them to do so.

Children viewed Type Two programs as better preparing them to keep the rules when they returned to a regular class than did either Type Four programs (five percent level) or Type Five programs (five percent level).

Teachers of Type Four programs, with their strong educational emphasis, saw their children as having less academic success than did either Type 3 (five percent level) or Type Five (five percent level). However, they were less likely to see the children as having been academically retarded than were teachers in the psychiatric-dynamic programs of Type One (five percent level).

Many findings were revealed which were not surprising, either due to the fact that the variables which were compared across the several programs sprang from essentially the same sources as the program categories themselves, or because a common sense rationale could easily be adduced. For example, given the clinical orientation of the site visitors, it was not surprising to find that observer Stereotype 2—good teacher—was significantly more in evidence to the site visitors in the psychiatric-dynamic type than in the primitive, and that the psycho-educational programs (Type Two) and the psychological behavioral (Type Three) were significantly more characterized by this syndrome than the educational, the naturalistic, and the primitive. The counterpart syndrome, observer Stereotype 1—poor teacher—was significantly less characteristic of Type Two programs than of Type Five, the naturalistic, or Type Six, the primitive, and also less characteristic of Type Three, the psychological behavioral, than of Types Four, Five, or Six. Similarly, the passive undemanding teacher syndrome was more characteristic of Type One classes than of Type Two, Four, and Five. However, program Types Two and Three were systematically and significantly higher than any of the other programs on Observer Stereotype 3—the happy pupil.

Classroom observations of permissiveness and academic emphasis followed much the same pattern, with permissiveness being significantly higher in Program Type One than in Types Two, Three, Four or Six. Type Two was significantly more permissive than Three or Six, and Type Four and Five were more permissive than Six. Surprisingly, academic emphasis was not significantly lower in Type One than in any of the others. Type Four showed up as more academically orientated

than either Two or Five, but less so than Type Six, the primitive. Categorization of program types and the various observations of teachers, pupils, and classroom atmosphere made by the site visitors are really multiple expressions of the same thing.

Another element in the general observer halo effect was revealed by their judgment that Type Two programs were significantly better in terms of adequacy of records than Type Four, the educational. Their judgments regarding the sophistication level on teacher descriptions of pupils' favored Type Three programs over Types Four and Five, so that some departure from the generalized halo surrounding Types One and Two was apparent. They judged Type Two and Type Three teachers as making more effective use of records than Type Six.

The observers were not the only ones who appeared to react on the basis of generalized views. Depending on the kind of program which they developed and in which they operated, the teachers, too, showed some interesting general reactions. Teachers of naturalistic classes saw their children as being harder to control than teachers of psychiatric dynamic classes. Those in naturalistic or primitive settings found their groups significantly harder to motivate than those in Type Three, the psychologically oriented classes. Type One teachers got significantly more hours of consultation a week than those in the educational classes of Type Four. And, not surprisingly, Type One teachers spent less time on academics than Types Two or Four. Type Two's spent less time on academics than Type Three. In a parallel vein, Type Two and Four teachers expressed significantly more general concern about the issue of academic gain than did Type One's. The Type Four teachers were supported in this attitude by their administrators, who placed more stress on academic matters than did the administrators of the psychiatric dynamic programs (Type One).

Where teacher ratings of present class conditions were concerned, the findings were very much what one would expect from the general view already gained from the factors involved in the different programs. Teachers in psycho-educational and educational classes noted that their students suffered from less anxiety and confusion than did the Type One teachers. Control problems were less apparent to the teacher of the Type Two than the Type One but more apparent to the teachers of naturalistic and primitive classes than to the Type Two's, and also more apparent to the naturalistic group than either the psychological-behavioral or educational groups. Class social relations were seen as significantly better by teachers of Type One than of Two, Three, and Four, and significantly worse in the primitive type classes than in the psychological-behavioral. Finally, school acceptance was seen as

higher by Type One teacher than by Type Three and higher by Type Three than by Type Five. None of these findings are really surprising, and once again reflect either the orientation which the teacher brings to class with him or the situation which is produced by the specific kind of children with which he must deal.

All in all, these findings suggest that the program types which have been identified are meaningful and bear a significant relationship both to teacher attitude and pupil change. Given all of the weaknesses of the site visitors' stereotyping, the attitudinal influences upon the teachers' responses, and the halo effect for characterizing the pupils' views of their present situation, there is no doubt that pupil problems, teacher reactions, and program types are mutually independent. The problem was and remains that of making definitive causal statements. Whether the teachers' influences change the child and thus produce a more comfortable situation, or whether the children's attitudes determine the reaction of the teacher, and in turn the kind of operating program that is established is a question. While the reality no doubt contains both these elements, the teachers' personal style and comfort in the setting is probably the major determiner of both operating program type and pupil responses. There is no doubt that certain kinds of teachers fit better into certain types of programs, and that certain children are more ready to respond to one or another program type. The specific issues implied in these statements deserve more definitive research than this study has been able to bear. However, to believe that student readiness to respond is the major determinant of teacher attitude and program type seems analogous to putting the "cart before the horse."

Conclusion

It would be redundant to attempt to summarize the extensive findings of this research. In brief, pupils see themselves as changed as a consequence of their participation in the programs. If this fact stood alone, it would suggest that the programs are doing some good. With the additional findings concerning the relationship of these changes to program types, teacher observation of change, and observers' judgments of program success, it must be said that some programs are doing more good than others. This statement, like the many other implied criticisms in earlier discussions, does not mean in any way that these efforts are failures or futile. Very few of the programs have everything. Practically none of them have nothing or could be considered damaging. The mere fact that someone is concerned enough about the problems of these children to invest time, energy, and special effort in them is in itself a worthy enterprise. Coupled with this and a fact which may not have

been made sufficiently clear throughout this document, is that the programs are good in many specific and clinically reasonable ways. It will be remembered that only a small percent were judged as failures.

Beyond this, the research reveals an amazing lack of specific pattern and uniformity in approach, much more than had been anticipated. Approaches are much less systematic and much more intuitive than had been expected. In part, this lack of systematization is a reflection of situational responses to a broadly varied set of local situations. But, it also reflects a confusion on the part of both educators and clinicians about how to proceed to solve this most trying educational and social dilemma. Here researchers and practitioners together have a heavy obligation to provide a solid conceptual system for the understanding of psycho-educational problems, and such a system manifestly does not exist at the present time. Further, more valid criteria for the success or failure of these programs needs to be provided—like most clinically oriented endeavors, judgments about outcome in this area are painfully subjective.

There is the growing recognition among school personnel that their original program plans required extensive modification in the light of experience, and that flexibility is needed in moving toward the solution of problems which the programs themselves created or revealed. Typically, a program is designed with the view that it will solve certain existing problems in school maladjustment among children. To some degree, the mere establishment of the programs does deal with the most pressing problems of teacher morale in the regular classroom, public pressure, and immediate pupil unhappiness. However, a second level problem emerges immediately, and it is concerned with finding a means to cope with the day-to-day crises, the continued academic difficulty of the children, and the maintenance of a working operation which continues to involve the persons who originally were most enthusiastic but whose enthusiasm flags when reasonably quick answers are not forthcoming. Whereas the immediate problems have the aspect of a patient battle which may be won or lost quickly, the second level problems are like a debilitating war of attrition in which a final decision is seldom forthcoming. It is this much harder movement which involves school people in the programs studied. Some few have given up—the vast majority continue even though a few stagger.

Because of the variety of these second level problems, good work takes many different forms and is expressed in many different program types. Movement occurs, although not at a speed which is very gratifying to the person in the front line trenches or even those in the administrative command posts.

Another impressive factor is the degree to which these programs maintain a school related focus. This is apparent to everyone—pupils, teachers, administrators, and clinicians. Perhaps it is inevitably so, since the programs are public school efforts and thus by definition must be directly educationally relevant. It appears that work in the school context is largely school work, and that efforts to turn it into anything else fly in the face of deeply established social stereotypes, of which the children and the adults are equal victims. It is very clear that to the pupils, success and happiness in school come from school success. Academic failure, whether cause or effect, is a yardstick for pupil unhappiness and teacher frustration. Improvement in adjustment and improvement in academic performance go hand in hand. Thus, unless the entire definition of the school function is altered, it would seem that inevitably the producers and major consumers of these programs will view them in terms of directly school related behaviors.

This is not to indicate that clinical implications or actions should have no part in the programs. To the contrary, there is strong evidence suggesting that teachers at least are happier when dealing with emotionally disturbed children if they have clinical support and understanding. The problem arises in terms of how the clinician and the educator can most effectively relate and coordinate their efforts. Once again, the need for a directly psycho-educational framework becomes apparent. Psychoanalytic theory has helped us to learn much about the internal dynamics and generic determination of behavior. But it may well be considered insufficient as a means to understanding and managing the behavior and academic efforts of children in the group action setting of the classroom. There is the obvious need for greater systematization and more rigorous research than was possible in this introductory effort. The really impressive aspect is the investment of the teachers in these children. It well may be that the nature of the interpersonal concern which they feel and express for these disturbed children is the major factor in their operation.

References

Allinsmith, W., & Goethals, G.W. *The role of schools in mental health.* New York: Basic Books, 1962.

Cutler, R. L., & McNeil, E. B. *Mental health consultation in schools: a research analysis.* Ann Arbor: University of Michigan, 1963.

Engel, Mary. Public education and the "emotionally disturbed" child. *J. Amer. Acad. Child Psych.,* in press.

Fouracre, M. H., Rooke, M. L., & Botwin, P. *The report of the study on educational needs of physically handicapped children in Pittsburgh, Pennsylvania.* Pittsburgh: University of Pittsburgh, School of Education, July, 1961.

Gage, N. L. *Handbook of research on teaching.* Chicago: Rand McNally, 1963.

Hollister, W. G., & Goldston, S. E. *Considerations for planning classes for the emotionally handicapped.* Washington, D.C.: The Council for Exceptional Children, National Education Association, 1962.

Joint Commission on Mental Illness and Health. *Action for mental health.* New York: Basic Books, 1961.

Morse, W. C., Bloom, R., & Dunn, J. *School classroom behavior. A study of school classroom behavior from diverse evaluative frameworks.* Ann Arbor: University of Michigan, School of Education, 1961.

Morse, W. C., & Dyer, C. The emotionally and socially handicapped. *Rev. Educ. Res.,* 1963, 33, 109-126.

Peterson, D. R. L. Behavior problems of middle childhood. *J. Consult. Psychol.,* 1961, 25, 205-209.

Quay, H. C. Personality dimensions in delinquent males as inferred from the factor analysis of behavior ratings. *J. Res. Crime & Delinq.,* 1964, 1, 33-37.

Quay, H. C., & Quay, Lorene C. Behavior problems in early adolescence. *Child Develop.,* in press.

Reiss, A. J. *Occupational and social status.* (With Otis Dudley Duncan, Paul K. Hatt, and Cecil C. North.) New York: Free Press of Glencoe, 1961.

Teachers of children who are socially and emotionally maladjusted. U.S. Office of Education Bulletin 1957, No. 11. Washington, D.C.: U.S. Government Printing Office, 1957.

Wilcox, John. *A status report on provisions for meeting the needs of emotionally disturbed children through public school programs.* Mimeo. Copy, 1963.

APPENDIX

Appendix A

Variables Included in Individual Pupil Correlation Study and Change Tests

Variable Number	*Variable Name*	*Source*
1	Previous peer relationships	P
2	Present peer relationships	P
3	Previous school anxiety	P
4	Present school anxiety	P
5	Previous personal affect	P
6	Present personal affect	P
7	Previous parental pressure	P
8	Present parental pressure	P
9	Previous teacher relationships	P
10	Present teacher relationships	P
11	Previous behavior	P
12	Present behavior	P
13	Previous morale	P
14	Present morale	P
15	Previous academic success	P
16	Present academic success	P
17	Self-confidence	P
18	Aspirational level	P
19	Level of aspiration confidence	P
20	"I can do O.K. in a regular class"	P
21	"I'll be able to do the work"	P
22	"I'll be able to keep the rules"	P
23	"I'll be able to get along with the kids"	P
24	The teacher expects me back in a regular class	P
25	Control, previous class	T
26	Initial control, this class	T
27	Present control	T
28	Prognosis, personal adjustment	T
29	Prognosis, academic adjustment	T

Variable Number	*Variable Name*	*Source*
30	Will pupil meet parental expectations?	T
31	Teacher discouragement	T
32	Parental attitude	T
33	Contact with sending teacher	T
34	Contact with sending administration	T
35	Future plans for pupil	T
36	Pupil age	T
37	CA at entry	T
38	CA at initial testing	T
39	MA at initial testing	T
40	Reading quotient at initial testing	T
41	Achievement quotient at initial testing	T
42	Organic/perceptual deficit	T
43	Academic retardation, former	T
44	Academic retardation, present	T
45	Number of children in family	T
46	Family morbidity index	T
47	Maternal morbidity	T
48	Mother's ambition for child's school success	T
49	Father's ambition for child's school success	T
50	Affect, previous class	T
51	Affect, initial, this class	T
52	Affect, present	T
53	Academic success, previous class	T
54	Academic success, initial, this class	T
55	Academic success, present	T
56	Relationships, previous class	T
57	Relationships, initial, this class	T
58	Relationships, present	T
59	Change in peer relationships	P
60	Change in school anxiety	P
61	Change in personal affect	P
62	Change in parental pressure	P
63	Change in teacher relationships	P
64	Change in behavior	P
65	Change in morale	P
66	Change in academic success	P
67	Change, previous to initial control	T
68	Change, previous to present control	T
69	Change, initial to present control	T
70	CA minus MA	T

Variable Number	*Variable Name*	*Source*
71	Change, previous to initial affect	T
72	Change, previous to present affect	T
73	Change, initial to present affect	T
74	Change, previous to initial academic success	T
75	Change, previous to present academic success	T
76	Change, initial to present academic success	T
77	Change, previous to initial relationships	T
78	Change, previous to present relationships	T
79	Change, initial to present relationships	T

Appendix B

Variables Included in Factor Analysis of Teacher Methodology and Observer Ratings

Variable Number	*Variable Name*	*Source*
1	Cubicles, screens	T
2	Remedial—corrective approach	T
3	Stress material with intrinsic pupil interest	T
4	Gear work for success	T
5	Manipulative materials and game methods	T
6	Sensory, perceptual, kinesthetic training	T
7	Concrete, rather than abstract approach	T
8	Reduce competition	T
9	Avoid highly stimulating material	T
10	Neutralize anxiety producing material	T
11	Highly individualized at rate and level	T
12	Special remedial reading	T
13	Audio-visual material	T
14	Texts, workbooks, drills	T
15	Group projects	T
16	Gradually increase expectation over time	T
17	Give encouragement, develop rapport and acceptance	T
18	Build positive self-esteem through success	T
19	Progress charts and prizes	T
20	Let student decide what is good work	T
21	Allow self-interest activity as reward after work is done	T
22	Food and treats as rewards	T
23	Grades and marks as rewards	T
24	Increase structure and demands	T
25	Repeat until correct if student fails	T
26	Allow self-selection	T
27	Fluid, flexible structure to meet situations	T
28	Less academic stress, lower expectation	T
29	More pupil freedom	T
30	Evaluation relaxed, errors minimized	T

Variable Number	*Variable Name*	*Source*
31	Shorter work periods	T
32	Achievement tests for evaluation	T
33	Reading and IQ tests, workbook tests for evaluation	T
34	Teacher-made tests and observations for evaluation	T
35	Less grouping, more individual activity	T
36	Never use whole group	T
37	Whole group instruction at times	T
38	Self-selection regarding grouping	T
39	Strategic seating	T
40	Use independent work and projects	T
41	Personality tests for evaluation of adjustment	T
42	Evaluate from anecdotes and staffing	T
43	Pupil behavior—apathetic vs alert	O
44	Pupil behavior—obstructive vs responsible	O
45	Pupil behavior—uncertain vs confident	O
46	Pupil behavior—depending vs initiating	O
47	Teacher behavior—partial vs fair	O
48	Teacher behavior—autocratic vs democratic	O
49	Teacher behavior—aloof vs responsive	O
50	Teacher behavior—restricted vs understanding	O
51	Teacher behavior—harsh vs kindly	O
52	Teacher behavior—dull vs stimulating	O
53	Teacher behavior—stereotyped vs original	O
54	Teacher behavior—apathetic vs alert	O
55	Teacher behavior—unimpressive vs attractive	O
56	Teacher behavior—evading vs responsible	O
57	Teacher behavior—erratic vs steady	O
58	Teacher behavior—excitable vs poised	O
59	Teacher behavior—uncertain vs confident	O
60	Teacher behavior—disorganized vs systematic	O
61	Teacher behavior—inflexible vs adaptable	O
62	Teacher behavior—pessimistic vs optimistic	O
63	Teacher behavior—immature vs integrated	O
64	Teacher behavior—narrow vs broad	O

Appendix C

Variables Included in Group Change Factor Analysis and in t and F Tests of Program Design Differences

Variable Number	*Variable Name*	*Source*
1	Observer stereotype II, good teacher	F
2	Protective teaching syndrome	F
3	Traditional academic syndrome	F
4	Interpersonal encouragement syndrome	F
5	Repetition compulsion syndrome	F
6	Passive undemanding syndrome	F
7	Autocratic controlling syndrome	F
8	Observer stereotype III, happy pupil	F
9	Corrective special education syndrome	F
10	Restrictive inaction syndrome	F
11	Present peer relationships	P
12	Present school anxiety	P
13	Present personal affect	P
14	Present parental pressure	P
15	Present teacher relationships	P
16	Present behavior	P
17	Present morale	P
18	Present academic success	P
19	Level of aspiration confidence	P
20	"I will be able to do the work"	P
21	"I will be able to keep the rules"	P
22	"I will be able to get along with kids"	P
23	"Teacher expects me back in regular class"	P
24	Present control	T
25	Prognosis for personal adjustment	T
26	Prognosis for academic adjustment	T
27	Pupil chance for meeting parental expectations	T
28	Teacher discouragement	T
29	Parental attitude	T

Variable Number	*Variable Name*	*Source*
30	Contact with sending teacher	T
31	Contact with sending administration	T
32	Future plans for pupil	T
33	Pupil age	T
34	Academic retardation—former	T
35	Academic retardation—present	T
36	Family morbidity index	T
37	Mother's ambition for child's school success	T
38	Present affect	T
39	Present academic success	T
40	Present relationships	T
41	Change in peer relationships	P
42	Change in school anxiety	P
43	Change in personal affect	P
44	Change in parental pressure	P
45	Change in teacher relationships	P
46	Change in behavior	P
47	Change in morale	P
48	Change in academic success	P
49	Change in control	T
50	Change in affect	T
51	Change in academic success	T
52	Change in relationships	T
53	IQ	T
54	Classroom observation, permissiveness	O
55	Classroom observation, academic emphasis	O
56	Classroom observation, program success	O
57	Program design	O
58	Program success	S
59	Physical facilities	O
60	Teacher age	T
61	Teacher sex	O
62	Teacher experience	T
63	Teacher orientation	O
64	Teacher training	T
65	Adequacy of records	O
66	Teacher description of pupils—simple to complex	O
67	Teacher use of records	O
68	Highest number of pupils in class	S
69	Is class hard to control?	T

Variable Number	*Variable Name*	*Source*
70	Segregated space	O
71	Is class hard to motivate?	T
72	Consultation hours per week	T
73	Consultation adequacy	T
74	Time spent on academics	T
75	Time spent on art, music, gym	T
76	Time spent on behavior discussions	T
77	Length of school day	T
78	Concern about academic gain, teacher	T
79	Concern about academic gain, pupils	T
80	Concern about academic gain, administration	T
81	Concern about academic gain, parents	T
82	Class anxiety, confusion	T
83	Class control	T
84	Class social relations	T
85	Class teacher relations	T
86	Class school acceptance	T
87	Therapy while in class	T
88	Pupil self-confidence	P
89	Observer stereotype I, poor teacher	F

Variables 1-10 and 89 are factor scores obtained from reported teacher methodology.

Variables 11-53 and 87-88 are computed class means.

Variables 54-86 are group scores, obtained from teacher and observer judgments.