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ABSTRACT

Project Genesis is a preventative program which tries to identify potential learning deviancies before children enter kindergarten, and which provides individualized programming to offset future learning problems. Clinics held in the spring test each child entering kindergarten the following fall on perceptual-motor abilities, hearing, speech, language development, vision, developmental maturity, and learning readiness. Any child who displays a potential learning problem during the screening has an individualized program of learning activities developed for him by a master teacher trained in developmental learning. A perceptual-motor aide and a vision consultant assist in program planning. The prescribed program is carried out through individual weekly or daily sessions. The teacher in each child's regular classroom and the child's parents also participate. (NH)

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PROJECT GENESIS

funded under Title III

of the Elementary and Secondary Education Act

1967 - 1970

Lake Shore and Lakeview Public Schools
St. Clair Shores, Michigan

FINAL REPORT

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To Terrie and Diane who did far more than "Aide" children with learning problems, and to Martha who tallied the final calculations;

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To Ron and Barb who had to chart new waters and keep on course through a rough sea;

To Dick St. Amand and Frank Hermann, principals of the pilot schools, whose constant support has sustained us;

To the teachers and staff of Lingemann and Princeton Schools for their cheerful acceptance of the inconveniences we have caused in our efforts to help children;

To the special services personnel and directors who have initiated a truly cooperative approach to the prevention of failure;

To the administrators who have given generously of their time beyond serving on the Executive Committee, especially Bob Burgoyne who has been with us all the way;

To the superintendents and school boards of Lake Shore and Lakeview Public Schools who have maintained faith;

To Don Goodson, Head of Michigan Title III Projects, and Dr. Harry Groulx, who have pulled us through when in need;

To our many consultants whose knowledge has saved us from misdirection, particularly Drs. Lakin and Von Gunten who have confirmed that vision is more than sight;

To our friends and advocates whoever and wherever you are;

And especially to George Fohey who created us!

With beholden thanks,

Dorothy Jones
Coordinator

PHILOSOPHY

"A developmental task is a task which arises at or about a certain period in the life of the individual, successful achievement of which leads to his happiness and to success with later tasks, while failure leads to unhappiness in the individual, disapproval by the society, and difficulty with later tasks." - Robert J. Havighurst

The philosophy of Project Genesis is based on Developmental Learning Theory. Whether one discusses developmental theory as envisioned by the Gesell Institute, Freudian developmental theory, or the biological theory of developmental growth; there are always two basic premises in this philosophy of development:

- 1 - One develops through stages. He begins in stage A, matures, develops through stage A, gets ready for stage B, goes into stage B, matures, develops through stage B, gets ready for stage C, goes into stage C, etc.
- 2 - If a person does not develop fully, maturely, in stage A and goes on into stage B, he can never mature fully, develop completely in stage B unless he goes back and patches up the holes in stage A.

The philosophy of Project Genesis is to find the lowest sensory-motor stage at which a child can not function maturely. Through individualized programming he is helped to learn to use each sensory system singly and integratedly with the other sensory systems so that he can achieve at an automatic level of performance. This will permit him to deal efficiently and effectively with school demands as well as the general demands of life. Due to their misperceptions children with learning disabilities often have as many problems in interpersonal relationships as they have in school work.

Project Genesis deals with three basic stages of development which are;

MOTOR - the era of the muscle, when the child learns to move,

PERCEPTUAL - the era of the nerve, when the child learns to register on the brain and deal with stimuli he is receiving through the different sensory systems, and

CONCEPTUAL - the era of the mind, when the child learns to think and use abstract thoughts and ideas. He no longer needs to move nor to receive outside stimuli.

All three of these levels are involved in Project Genesis programming.

"How do innovative concepts get inserted into a school system in the face of inertia, fear, misunderstanding, and unwillingness to be flexible? This is the significant issue." - William M. Cruickshank

The beginning of Project Genesis occurred in a request by the current coordinator in June, 1966 when she filed her end-of-the-year report for psychological services rendered. In the state of Michigan there is enabling legislation for the cost of school psychological services to be reimbursed by the state, but the Department of Education's regulations governing these services link them to the mentally retarded programs. During the 1965-66 school year 88% of the children newly referred to the diagnostician for psychological evaluation as "suspected mentally retarded children" were in fact children of normal intelligence whose primary problem was that of one or more specific learning disabilities. Most of these children were boys, and most of them had reached the 4th, 5th, or 6th grade level. Almost all of these children suffered from a secondary emotional disturbance overlay. The literature and research at that time, and even more so today, stressed early identification and remediation as an absolute necessity in helping children overcome specific learning disabilities. Therefore, with the final numerical report a request was made to train all kindergarten teachers in the administration of the Anton Brenner Developmental Gestalt Test of School Readiness. This test requires about 10 minutes per child and is given individually. The information from this test plus the screening for speech and language problems administered by the speech therapist could serve as a gross sieve for finding children who needed help before they had been exposed to academic work and failed.

Mr. George A. Fohey, then Director of Special Education for both the Lake Shore and Lakeview Public Schools, carried the ball further. In a conference with Mr. James R. Rossman, Superintendent of the Lakeview Public Schools at that time, drawings and protocols of the learning disabled children were reviewed. His question was, "Why test the kindergarten children if you are not going to do something about it?". Mr. Fohey was then assigned the task of writing an encompassing preventative program which would be submitted with an application for federal funding. He named the project, created the acronym Child-er, which is the name Genesis teachers carry, and added the concurrent emphasis on parent education, besides enlarging the scope of the screening and remediation.

Princeton School was chosen as a pilot school and a meeting with the principal and members of the staff plus special services personnel was called by Mr. Fohey to discuss implementation of such a project. The writing of certain sections of the proposal was assigned to the psychologists, nurses, speech therapist, elementary counselor, and a kindergarten teacher. Mr. Fohey and Mrs. Jens traveled to Lansing to consult with Mr. Don Goodson, currently director of all Title III projects in the state of Michigan, and they were advised to use two school districts in the pilot program. This suggestion was submitted to the Lake Shore administrators and they accepted, choosing the Adrian A. Lingemann School as their pilot school.

The cooperation between the two districts was so successful this consolidation continued for the life of the project.

Dr. Walter Ambinder, Director of the Learning Abilities Laboratory at Wayne State University, agreed to serve as a consultant to the program, if it was funded, and to conduct workshops as needed. In an interview with Mr. Fohey and Mrs. Jens he stated that preschool and kindergarten screenings had been done before, but that remedial follow-through had not been carried out.

The other consultant arranged for in advance was Dr. Donald H. Lakin, an optometrist who had been trained in the field of Developmental Vision by Dr. G. N. Getman of the Gesell Institute at Yale University. He agreed to: train the school nurses to administer a vision screening test which would encompass binocularity, muscular rotations and depth perception besides acuity at near and far; to educate the director and Child-er in the area of developmental vision; to service both pilot schools, devoting 1/2 day a week to each school during the school year; to examine children with vision problems; and to aide the Child-er in planning and developing programs for children.

The original prospectus of Project Genesis was submitted on January 13, 1967, and it was accepted, without rewriting. The final grant award was received on June 2, 1967, with funding for \$45,467.00 to begin on June 15, 1967. On the last day of school, June 16, 1967, a director and Child-er were chosen. Mr. Ronald W. Cole, former physical education teacher, junior high counselor, and Title I coordinator, was chosen to direct the project. Miss Sue Chojnacki, kindergarten teacher with

three years experience and a master's degree in Child Growth and Development, was hired as the original Child-er. Miss Barbara Charleston was hired as the secretary following graduation from Lakeview High School. A staff of three persons was considered adequate because the director would spend 80% of his time working with the children.

Throughout the 1966-67 school year speeches and workshops were conducted by Mr. Bernie Falk, Grosse Pointe elementary physical education consultant; Miss Margaret Bannochie, teacher of one of the Lakeview Aphasic classes who also supervised a Title I after school perceptual-motor program which trained physical education teachers and high school aides; and Mrs. Jens on subjects concerning developmental learning, perceptual handicaps, neurological dysfunctions and motor training. These sessions were presented to administrators, parents, teachers, and special services personnel at in-service and staff meetings. Although not directly tied to Genesis this was a groundwork for understanding Genesis's purpose, philosophy and planning.

In January, 1968, when a second proposal had to be written to request further funding based on the one year pilot program, an increase in staff was requested. Due to administrative duties Mr. Cole had found it impossible to spend time working with children, and there would be two grade levels with which to work the following year as the initial group of children moved into first grade and the second group of preschool screened kindergarteners came into school. The original plan of expanding

Genesis to all 18 elementary schools in the two districts by the third year had to be dropped when Title III monies were curtailed. Although Genesis had requested \$99,730, the second year of operation was funded for \$60,009. Mrs. Sue Gravel, with a background in kindergarten and preschool teaching experience, was hired as a second Child-er, and Miss Marytherese Misico and Miss Diane Weiler were hired as perceptual-motor aides. This increased the staff to six. With the addition of an aide in each building the Child-ers found that they could service from 75 to 90 children a week in each school. This can be considered more economically feasible than servicing children with learning problems in self-contained classrooms such as developmental kindergartens, perceptual development rooms or learning disability classes where one teacher services only 10 to 12 children. Furthermore, the negative aspects of segregation and labeling are avoided.

For the third and final year of Title III funding a staff of six was again recommended even though a third level of programming would be added for the initial kindergarteners who would then be entering second grade. Mr. Cole, Mrs. Chojnacki, and Miss Charleston resigned necessitating three new staff members for the 1969-70 school year. Mrs. Jens agreed to a year's leave of absence as a school psychologist in order to coordinate and evaluate the project, and Mrs. Sue Lee was hired as a Child-er to replace Miss Chojnacki at the

Lingemann School. Mrs. Lee's background was in special education majoring in mental retardation and learning disabilities. Miss Weiler, now Mrs. Wood, continued at Lingemann as a perceptual-motor aide, and Mrs. Gravel and Miss Misico continued to service the Genesis children at Princeton School. Mrs. Dolores Vogel was hired as the secretary for the project. Funding was established at \$60,480 for the final year.

New staff members acquired training as they entered the project. Mr. Cole and Miss Chojnacki visited Dr. Lakin's Clinic, the Bloomfield Hills and Lamphere Preschool Projects, and Grosse Pointe's Speech and Language Program during the summer of 1967. The following summer Miss Chojnacki and Mrs. Gravel worked in Dr. Lakin and Dr. Von Gunten's clinic 2 days a week for 6 weeks. Miss Misico and Miss Weiler worked in the clinic for 8 weeks. The Child-ers also attended a course given by Dr. Ambinder under Genesis funding. Nineteen teachers also attended this summer seminar. One more workshop was sponsored for teachers by Genesis but paid for out of local funds in January, 1969. Mrs. Lee was trained during the summer of 1969. She worked in Dr. Von Gunten's clinic 2 days a week for 8 weeks, helped in both the Lingemann and Princeton Genesis summer programs each of 5 weeks duration, and took a course entitled "Problems in Special Education: the Perceptual Process" given by Dr. Orlando Piroli, Director of Special Education for the Macomb County Intermediate School District, with credit at Wayne State University.

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PRESCHOOL SCREENING

"The one essential universal need, as we see it, is that every kindergarten applicant should be screened prior to placement, and that he should also receive a full developmental examination in the spring of his kindergarten year. Any new child coming into a school system should have at least one full developmental coverage." - Louise Bates Ames

The screening of all children before they entered Kindergarten to identify any deviancy that might cause a future learning problem was the first emphasis of Project Genesis. Screening for children who would enter kindergarten in the fall of 1967 was conducted by special services personnel who were hired for the month of August to develop screening materials and forms and to conduct the screening of all Lingemann and Princeton School entering kindergarteners. Although some of the methods, forms and personnel have changed over the three year period, the same areas are still being examined.

Perceptual-motor
Vision
Hearing
Speech and Language
Psychological
Developmental History

Due to the June initiation date it was necessary to screen in August the first year. During the following years the Genesis screenings were held in spring so that students needing work during the summer could be identified and helped before actual entrance into kindergarten. The schools were unused during August so both Lingemann and Princeton Schools were utilized for the screening. In May, 1968, a centrally located church was rented for the screening and parents from both Lingemann and Princeton brought their childrer by appointment. In May, 1969, stations were arranged in each pilot school while regular school was in session. The cost of extra salaries in August, 1967, and the church rental of May, 1968, had now been eliminated, and the

utilization of school personnel and buildings were made by shifting a few priorities. Other than printing the forms, the May, 1969, screening did not cost any money from the budget. In May, 1970, under the supervision of the Lakeview Elementary Curriculum Director, 433 children who will enter the nine Lakeview elementary schools for kindergarten in September, 1970, were screened using the Genesis format. Actual cost to the local budget was \$14.80, again for printing forms. This is less than three and a half cents per child!

SCREENING PROCEDURES

Following a parent meeting where the Genesis screening procedures were explained along with the benefits from such information, a letter was sent to the parents of each entering kindergartener with an appointed day and time to attend the screening. Six children were scheduled at first then two more every 15 minutes. The total procedure seldom took longer than 45 minutes per child. Each child wore a name tag with the 5 stations listed. After completing a station a star was glued to his name tag after that station. Mother volunteers circulated the children, carried the forms for each child and checked the forms and name tags to be sure each child attended each station. A table with puzzles and games was set up in the hall for children who had to wait a few minutes between stations. The only station requiring more than 5 or 10 minutes was the Psychological which usually required

about 15 minutes. Therefore two or three psychologists worked during the screening to keep the flow even. Clinics, store rooms, offices and different parts of the gym were used for stations.

SCREENING STATIONS

PERCEPTUAL-MOTOR This station examines a child's ability to use his body efficiently and effectively upon command and at a level of expectancy for his chronological age. The norms which have been utilized were compiled from Kephart's work at Purdue, the Gesell Institute at Yale and recently Bryan Cratty's work in California. Screening a number of four and five year old children soon gives one an understanding of expected motor skills. The child is asked to walk a balance beam, stand with eyes closed and arms raised, kick, hop, jump, and skip. He is asked to touch certain parts of his body for identification, throw and catch a ball, and to lie on a mat and perform the commands given for Angels-in-the-Snow. (See form in appendix.) The first summer a teacher of neurologically handicapped children and a physical education teacher manned this station. The second year the Genesis Child-er was in charge of this station at the church. In May, 1969, the stations at the Lingemann and Princeton schools were conducted by each school's assigned Child-er and Perceptual-motor Aide.

Materials - balance beam, 15" diameter ball, gym mat at least 4' X 4'.

Scoring - High, Expected or Low Response on six items; balance beam, jumping-hopping, body parts, ball throwing, ball catching angels-in-the-snow.

VISION The school nurse who has been trained by the optometric consultant conducts this station. The equipment has changed during the three years but not the areas which are checked. Visual acuity at distance and near is checked with the Goodlite Chart. The child indicates whether the open parts of the E (or "table legs" of a 3 legged table) point toward the sky, bunny, grass or flower. This is checked with the child at 20 feet. They are shown three sizes of E to check for 20/40, 20/30 and 20/20. Plus lenses are put on the child and with the same letters he is rechecked for far sightedness, a condition which often causes near-point problems.

Ocular Motility is screened by the school nurse using a wand. Observations are made in the areas of versions, rotations, and pursuits. This test also checks for convergence facility and quality of eye movements. Choppy and unyoked movements are recorded. A cover test determines esotropia, where one eye turns in, or exotropia, where one eye turns out. Problems in these areas can frequently be aided by orthoptic and visual training. Assymetry of the eyes, droopy lids, or other abnormal characteristics are noted by the nurse.

Binocularity is checked in several areas; simultaneous perception (first degree fusion) is checked by using test #1 of

the Keystone Stereoscopic cards (the dog jumping over the pig), second degree fusion (flat fusion) is checked by test #4 fusing the 4 balls into 3, third degree fusion or gross stereopsis is checked by using card PP11 which shows a clown, dog, and balloons. All tests are performed while the child looks through a binocular stereoptic viewer. In answer to the question "What do you see?", fusion of the two eyes can be ascertained if both dog and pig are seen. If the child sees three balls in a straight line he has achieved flat fusion. Depth perception (stereopsis) can be determined by asking the color of the balloon that is the closest. As each balloon is also numbered, the nurse records how the child answers this question; pointing, saying the color or the number.

Gross stereopsis is further checked by placing polaroid glasses on the child and showing him a booklet which has a large picture of a fly on it. Because some children have been frightened by the realness of the picture, the nurse usually shows the book to the child before putting on the "magic" glasses. The child is told to, "pinch his wings", and the distance out from the book is recorded. Continuing to wear the glasses the child tells which animal "pops out" on three lines of animals and which circle in 9 sections of four circles each. Because of the difficulty on this item the average four year old can usually only distinguish 3, 4, or 5 of these correctly. These last three tests are contained in the Titmus Stereo Tests booklet.

For many years the only vision check used was the Snellen chart which checks acuity at far. Later both acuity at near and

far was tested, but the great majority of visual skill problems found in children entering school are in the muscular accommodation and binocularity areas. Amblyopia (one-eyed blindness) frequently can not be remediated after a child is six. The child has learned to negate the sight of one eye because of the distortion he received when using both eyes together (binocularity). Approximately 1/3 of the children entering our schools have difficulties in the visual skills. This whole area must not be overlooked any longer by the schools.

Materials - Good-Lite Visual Acuity Chart; translucent, model A, (Good-Lite Co., 7426 Madison St., Forest Park, Ill.)
+1.50 Sphere Lenses
Bioptror (Stereo Optical Co., Chicago, Ill.)
Keystone Cards; Test No. 1, No. 4 and PFl1 (Keystone Stereoscopic Service, Meadville, Pa.)
Wand
Occluder
Stereo Tests (Titmus Optical Co., Petersburg, Va)

Scoring - High, Expected, or Low Response on Visual Acuity - Distance, Visual Acuity - Near, Rotations, and Binocularity.

SPEECH A speech therapist conducts the testing in the area of speech and language. Kindergarten children had routinely been screened for speech in both districts before Genesis, so this testing was incorporated into the Genesis screening and adjusted for the younger age of the children. Although materials may differ from one speech therapist to another, each child is checked for articulation problems using all of the English sounds in initial, medial and final positions in words. This is usually

done by showing the child pictures printed on cards and by asking him to name these familiar objects. If a child has difficulty in identifying any of the objects this is also recorded. To obtain conversational speech and an estimate of language ability the therapist often asks other questions about the pictures. Stuttering, of course, is recorded for further help, but so also are immature and infantile speech as well as poor syntax. Difficulties with l, r, s, and t sounds are not unusual at this age level but are noted. If a child is unwilling to use any oral expression he is marked for a retest in the fall. This does not occur very often.

Materials - Scott Foresman Articulation cards, age 3-5 year level.

Scoring - High, Expected, or Low Response on Oral Structure, Voice, Language, and Articulation.

HEARING A speech therapist also conducts this station with an audiometer. Ear phones are placed on the child's head, and it is called "playing pilot". The child is taught to raise his hand on the side on which he hears the sound. Both ears are checked at a 20 decibel level at the 500, 1000, 2000, 4000, and 8000 frequency. Although this is the area which scores lowest in the number of difficulties found, it is a very significant one. One child when rechecked by a doctor had a Q-tip far up in the ear which had failed this test, and another child needed a secondary adenoid operation for a condition which could have led to total deafness in one ear if not performed quickly.

Materials - I.S.O. Calibrated Audiometer

Scoring - High, Expected, or Low Response for Right Ear and Left Ear.

PSYCHOLOGICAL A school psychologist asks the child to perform several tasks which would establish developmental age levels in different learning areas. The list of items has been revised and shifted a number of times during the three years, and they are listed below. Those children failing the August, 1967, screening were evaluated with a full psychological battery in the fall. This led to a number of children receiving a full workup which was not necessarily needed. There also was some concern that a few of the items on the first screening form were items to which parents might try to teach and thus not sieve for the things sought in future years when mothers knew what the test contained. Before the spring, 1968, screening, two forms, A and B, were devised that checked five areas; development, auditory perception and memory, conceptualization, language, and visual-motor integration. Form A was used during the spring screening. Any item failed on Form A was then rechecked in the fall using the equivalent item from Form B. Thus there were few false negatives. If 4 or more items were failed on Form B a full psychological workup was undertaken. The items used for the three years of screening are as follows;

August, 1967

Draw-A-Person (Goodenough scoring)
Peabody Picture Vocabulary Test, Form A
ABC Inventory
(plus other items developed by Kevin Foster
Paige such as knowledge of name, address,
counting, reading letters, printing, directions)

Fall, 1968
Form A

Draw-A-Person (Koppitz scoring)
WPPSI Sentences
Binet Pictorial Similarities and Differences
II, Level V
WPPSI Vocabulary
Beery-Buktenica Developmental Test of Visual-
Motor Integration

Fall, 1968

Draw-A-Person (Koppitz scoring)
ITPA Auditory-Vocal Sequencing (old form)
WPPSI Similarities
Peabody Picture Vocabulary Test, Form A
WPPSI Geometric Designs

Spring, 1969
Form A Revised

Draw-A-Person (Koppitz scoring)
ITPA Auditory-Sequential Memory (revised)
WPPSI Similarities
Peabody Picture Vocabulary Test, Form A
WPPSI Geometric Designs

Fall, 1969
Form B Revised

Draw-A-Person (Koppitz scoring)
WPPSI Sentences
Binet Pictorial Similarities and Differences
II, Level V or Cognitive Abilities Test,
Primary 1, Form 1 (Thorndike, Hagen and
Lorge) after CA 5-11
WPPSI Vocabulary
Beery-Buktenica Developmental Test of Visual-
Motor Integration

Materials - Original testing materials required for each item used on that form, primary pencils and eraser, protractor and manual for scoring. (Pertinent pages were xeroxed from original manuals and compiled into a manual for each form.)

Scoring - Developmental age for each item was determined by using norms in the original manual. When transferred to the profile as High, Expected or Low Response, they were translated by using a 90 to 120 developmental quotient as the Expected Category.

DEVELOPMENTAL HISTORY At this station the Developmental History form for each child which had been filled out by the mother at

home was collected. In August, 1967, a school social worker reviewed the history with the mother while the child was moving through the other stations. After the first year it was decided that the social workers could be better utilized by making classrooms observations in the fall and checking on referrals from the screening committee or classroom teacher. In the spring of 1968, kindergarten teachers, who had asked to be involved in the screening procedure, interviewed the mother using a similar form. For the 1969 spring screening the forms were collected at the intake desk in one school. No interview was held as the teachers were conducting their own kindergarten classes, and they expressed a preference for a fall interview with the parent which would contain more current information. In that school the Child-er reviewed the information on the form, sharing important facts with the teacher and other special services personnel. The other school followed the 1969 procedure. No materials were involved at this station other than the form (see appendix), and no scoring was attempted.

PROFILING THE SCREENING DATA

After the screening in August, 1967, the screening personnel sat down and discussed every child, his prospects in school and whether he needed programming by the Child-er during his kindergarten year. This was time consuming and led to a shorter route. In 1968 the Child-er collected the screening data for

each child. Except for the psychologists these evaluations were ready following each child's examination. She then transferred the information onto a profile (see next page) which could alert her at a glance to the areas in which the child would need programming if he did not pass the retest in the fall. Those children showing the severest need were referred for summer programming.

A copy of the Profile was kept in the child's CA60 (cumulative folder) as well as a copy in the Genesis folder. Cards covering the areas of screening, marked pass or fail, were also placed in each CA60. (form follows)

Child's Name _____ School _____
 Birthdate _____ Child-er _____

Project Genesis
 PRE-SCHOOL SCREENING

Screening:	Date _____		CA _____	Retest: Date _____		CA _____
	Pass	Fail	Tester	Pass	Fail	Tester
Motor Coordination	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Hearing	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Speech	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Vision	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Developmental Testing	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Draw-A-Person	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Auditory Memory	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Conceptualization	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Language Development	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Visual-Motor-Integration	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

COMMENTS:

PROFILE

Project Genesis

NAME _____ BIRTHDATE _____ SEX F SCHOOL _____ TEACHER _____

ADDRESS _____ PHONE _____ PARENT OR GUARDIAN _____

PERCEPTUAL-MOTOR			VISUAL			SPEECH			HEARING		PSYCHOLOGICAL			
		Balance Beam												
		Jumping, Hopping												
		Body Parts												
		Ball Throwing												
		Ball Catching												
		Angels-in-the-Snow												
		V.A. Distance												
		V.A. Near												
		Rotations												
		Binocularity												
		Oral Structure												
		Voice												
		Language												
		Articulation												
		Right Ear												
		Left Ear												
		Development												
		Aud. Perception and Memory												
		Conceptualization												
		Language												
		Visual-Motor Integration												

HIGH RESPONSE
 EXPECTED RESPONSE

LOW RESPONSE

COMMENTS :

SCREENING RESULTS

	<u>1967</u>	<u>1968</u>	<u>1969</u>
Number of Children Screened	181	147	165

Percentage of Children Failing One Item or More
in Areas and Subareas of the Preschool Screening

	<u>1967</u>	<u>1968</u>	<u>1969</u>
<u>Perceptual-Motor</u>	70 %	71 %	80 %
<u>Vision</u>	65 %	65 %	62 %
Acuity	57 %	49 %	47 %
Binocularity	20 %	34 %	33 %
<u>Hearing</u>	5 %	18 %	9 %
<u>Speech</u>	38 %	54 %	56 %
<u>Psychological</u>	41 %	75 %	61 %
Draw-A-Person	25 %	37 %	31 %
Auditory Perception	(not given)	19 %	22 %
Conceptualization	20 %	15 %	27 %
Language	19 %	25 %	14 %
Visual-Motor Integration	(not given)	54 %	28 %

The following screening forms will be found in the
Appendix;

Perceptual-Motor Screening Form

Vision Screening Form

Speech and Hearing Screening Form

Psychological Face Sheet for Form B

Developmental History Form (Kinder-
garten Pre-School Data Sheet)

INDIVIDUALIZED PROGRAMMING

"Maturation unfolds in continuous interaction with stimulation. Thus, the educator cannot afford to wait passively for maturation to occur, as was done in the 1920s, nor should he expose the child to a kind of instruction that is clearly inappropriate at his particular stage of growth. What is desirable is to match teaching methods to the child's specific developmental needs." - Katrina de Hirsch

The Project Genesis Child-er met with each kindergarten teacher and discussed the expectancies for each child assigned to her classes. The individualized training program planned for those children who had indicated potential learning problems during the screening was examined. Schedules for training sessions in the Genesis office were prepared to least interfere with regular classroom activities. In the fall of 1968 schedules were also prepared for first grade children still needing further remediation, and in the fall of 1969 individualized programs were prepared for second and first graders continuing to need remediation as well as the kindergarteners.

The areas listed below are those in which training has been primarily needed. In the training sessions an orderly developmental sequence is followed for each child. Sometimes two or three children with the same problem work together if they are progressing at a similar rate. Methods and materials for remediation which have been found to be most valuable are listed after each problem area.

I. INABILITY IN PERCEPTION INVOLVING MOTOR ACTIVITIES

A. Body Imagery - identification of body parts.

1. Angels-in-the-Snow
2. Mirror
3. Simon Says
4. Mannequin and dolls
5. Feltboard cutouts
6. Ditto of hands and body parts

- B. Laterality - consistent right or left-sided approach in use of eyes, hands, and feet.
1. Sighting with a telescope
 2. Throwing a ball
 3. Cutting with scissors
 4. Drawing and writing
 5. Kicking a ball
- C. Directionality - the ability to know right from left, up from down, forward from backward, and directional orientation outside oneself.
1. Using visual clues to reinforce directionality
 - a. Wear a watch, bracelet, or paste a star on one hand.
 - b. Place colored balloon or marker on one side of the room.
 2. Right-left chart - child decides which direction picture is facing and hangs it on corresponding side of hook board.
 3. Walking pattern - follow two colored markings on floor with corresponding feet which are labeled with colored yarn for matching pattern.
 4. Trail hop (moveable flat rubber discs)
- D. Gross Motor Skills - development and awareness of large muscle activity.
1. Developing skills such as rolling, sitting, crawling, walking, running, throwing, jumping, hopping, skipping, dancing, balancing and rhythm.
 2. Using instructional materials such as exercise mat, utility balls, cage ball, medicine ball, pogo sticks, scoop games, parachute, tunnel of fun (for crawling through), trampoline, balance beam, rocking board, jump board, stepping stones, drum and beater, rhythm instruments, hula hoops, scooters, tooti-toss, ladders, indoor hockey.
 3. Homemade equipment for obstacle courses.
 4. Records telling what movements to make.

5. Creative utilization of playground equipment.

E. Fine Motor - development and awareness of small muscle activity.

1. Feeling different textures
2. Feely Box
3. Snap clothespins and can
4. Gadget boards
5. Buttoning, lacing boards
6. Cutting different textures with scissors
7. Tracing
8. Coloring
9. Rubberband board
10. Blocks, puzzles and pegboards
11. Typing on primary typewriter

II. INABILITY IN VISUAL PERCEPTION

A. Vision

1. Marsden ball exercises plus visual tracking.
2. Visual tracking with small object (penlight or wand).
3. Chalkboard routines.
4. Discrimination in likenesses, differences - Tachistoscope.
5. Stabilization of form regardless of its setting with variations in size, color, and position.
6. Designs with parquetry blocks in sequence.
7. Noting missing parts and part-whole relations.

8. Reproduction of form from memory.

9. Marbletrack (homemade).

B. Visual Motor - eye-hand coordination

1. Ball handling

2. Beanbag toss

3. Tooti-Toss - or other throwback games

4. Drawing, tracing, cutting, coloring

5. Sewing and lacing cards

6. Template activities

7. Copying designs

8. People puzzles

9. Dot to dot games and figure completion drawings

10. Frostig remediation materials

III. INABILITY IN AUDITORY PERCEPTION

1. Identifying source of sound

2. Identifying specific sounds

3. Reproduction of sounds, words, and sentences

4. Matching sound to visual symbol

5. Foreground-background stabilization
(distinguishing specific sound among others)

6. Repeating sequences of sounds, such as tapping for rhythm

7. Ear training through use of tape recorder, records, and rhythm instruments

8. Identifying rhyming words, initial and final consonants, etc.

9. Following directions in sequence
10. Listening to stories and retelling in own words (auditory memory)
11. Finding absurdities or nonsense words

IV. LANGUAGE DEVELOPMENT - functional stage of linguistic development

A. Body Alphabet

B. Vocabulary

1. Use of Peabody Language Development Kit
2. Card games and lotto games
3. Using puppets, body puppets, costumes to act out situations, etc.
4. Collect pictures and objects of new words learned
5. Make notebook or card file of new words
6. Games involving opposites, occupations, rhyming words, etc.
7. Develop conversational vocabulary.
8. Field trips, group discussions, Show and Tell, Sesame Street

V. INABILITIES IN ORGANIZATION AND JUDGMENT - functional level of concept attainment and general reasoning ability.

A. Number Concepts

1. Arranging objects in groups
2. Grouping objects by more or less
3. Counting various objects, such as sticks, blocks
4. Use of abacus, feltboard, pegboard for counting

5. Domino games
6. Matching numeral and object charts

B. Classification

1. Concrete experiences with concepts such as up, down, above, below, in front of, behind, next, in, out, etc.
2. Grouping ideas, objects, pictures according to specific categories or classification.
3. Forming pictures and designs in sequence.
4. Completing sequential pattern with concrete and abstract media (bead string, pegboard).
5. Forming relationships - which of several items belong together.

C. Comprehension

1. Making judgments of size (which of two objects is larger in reality).
2. Judgments in weight, length, temperature, time
3. Judging pictured concepts for size or distance (which of several pictured objects would in real life fit into a specific space)
4. Making associations such as "Snow is white; grass is _____. Trees are near; stars are _____."
5. Lotto games
6. Field trips to develop judgmental skills

VI. GIFTEDNESS

1. Alphabet dictionary
2. Creative art or writing
3. Stop during oral reading of paragraphs or sections and discuss verbally anticipated events and alternative action.

4. Introduce junior encyclopedia and source books as reference materials.
5. Provide records, songs, poems, etc. to memorize.

To carry on individualized programming the services of three types of personnel are needed.

THE CHILD-ER

The acronym Child-er derives from the duties she performs and accentuates the emphasis on the child.

C	Consultant
H	Helper
I	Innovator
L	Leader
D	Doer

The average classroom teacher has neither the time nor the skills to properly diagnose and program for the individual child with learning problems. The Child-er, specially trained in developmental learning, has the ability to plan, revise and shift emphasis of training as the child progresses. She helps coordinate the efforts being made to aide the child in the classroom, by the parents and by other special services personnel, such as speech therapists, social workers etc. Her relationship with the child is a very comfortable one as children enjoy the games and activities of Genesis remediation, and there is no stigma attached to leaving the classroom. The child is not "labeled" by his peers.

THE PERCEPTUAL-MOTOR AIDE

Much of the training required by children with learning difficulties can be done by a qualified aide who works under the supervision of the Child-er. The teaching methods and procedures are prescribed by the Child-er and carried out in a one-to-one setting or with a small group of children having a similar problem. In the area of giftedness (or enrichment training) knowledge in a diverse number of subjects or topics is often needed. Usually one member of the team is more proficient than the other in some of these areas and thus takes on that assignment. Project Genesis has been most fortunate in finding college girls for this role who are not only supportive but devoted to a team approach.

VISION CONSULTANT

The first year Dr. Lakin spent one-half day a week in each pilot school to retest those children failing the perceptual-motor and visual skill screening sections. He aided the Child-er in developing appropriate programs in the visual integrative skills. Miss Chojnacki and Dr. Lakin published a paper covering their first year's work in Genesis entitled "Observations of Visuomotor Maturing During the Kindergarten Year".

Dr. Lakin's associate, Dr. Fred L. Von Gunten has been the Genesis Vision Consultant the past two years, spending one-half day a week in alternate schools. He has trained the school nurses and Genesis staff in revised vision screening techniques

(form in Appendix), examined individually children failing the vision screening and determined which children should be referred to eye doctors for further diagnosis and treatment. He consulted with classroom teachers concerning specific children and made general suggestions for a healthier visual environment. Furthermore, he has presented the importance of individualized perceptual-motor training to the joint school boards and central administrators.

Bringing an optometrist into the schools has been a unique experience. In writing the original proposal Dr. Lakin had expressed the belief that much of the training he was required to do in his clinic could be done in the school, if properly supervised. His valuable office time could then be used more advantageously in diagnosis, writing programs and conducting therapy for more severe cases. It is staggering to speculate how uninformed the Genesis programming might have been without the able guidance of these two capable consultants.

PARENT EDUCATION

Parent meetings have been held throughout the life of the project, but the most valuable contact made by the Genesis staff has been the Child-er's participation in the parent-teacher conferences. These are held twice a year in one school and three times in the other. The Child-er prepares a progress report on each child with whom Genesis staff is working. This is handed to the parent during the conference and contains suggestions of activi-

ties that could be encouraged at home. Sometimes parents met separately with the Child-er, but most frequently the Child-er attended their scheduled conference with the classroom teachers. Parents felt this service was very valuable and sometimes phoned the Child-er for further information. Many of the answers on parent questionnaires stated that they now understood their child so much better.

PROGRAMMING DATA

The first year of the project only one Child-er serviced both schools. She worked with 57% of the kindergarteners that year. The second year with two Child-ers and two Perceptual-Motor Aides 80% of the new kindergarteners and 33% of the first graders were serviced. This past year the staff of four has individually programmed 81% of the new kindergarteners, 22% of the first graders and 11% of the second graders. Had Project Genesis continued, the expected figures are 6% of next year's third graders, 11% of the second graders and 27% of the first graders. Lakeview's recent screening suggests that 81% of next year's kindergarteners would benefit from individualized programming.

Percentage of Children Receiving Individualized Programming

	<u>Kindergarten</u>	<u>First Grade</u>	<u>Second Grade</u>	<u>Third Grade</u>
Screened 1967	57 %	33 %	11 %	(6 %)
Screened 1968	80%	22 %	(11 %)	
Screened 1969	81 %	(27 %)		

The figures in brackets are projections for next year, were the Genesis program to be in existence as it is now structured.

AREAS OF PROGRAMMING

The enclosed charts refer only to children who obtained prechool screening and moved through school at a normal rate. During the three years 14 new children moved into Genesis serviced classes. They received Genesis screening after entrance but are not counted in the original group for their class. Twelve of these children received programming. All retainees were programmed but no longer counted with either class. Thirteen children were retained in kindergarten the first year. The second year ten were retained in kindergarten and four in first grade. One child skipped first grade and went from kindergarten to second grade. This June there will be five kindergarten retainees, five first graders, and no second graders. Four children have been referred for Learning Disabilities classes due to their continued difficulties and the unavailability of Genesis help next year.

From the originally screened group 29 have moved away; 18 were receiving programming. Eight of the original group have now been placed in Special Education classes. Six were placed in the educable mentally retarded classes, one in an Aphasic program and one in a Learning Disabilities class.

The group screened in the spring of 1968 has lost 26 members who have moved; 17 of whom were being programmed. Five children have now been placed in Special Education; all in educable mentally retarded programs.

Of the children screened in spring, 1969, two have been certified for educable mentally retarded classes next year.

Just as the Child-ers have followed children into the parochial schools and continued their programming, they have followed children placed in Special Education programs as their schedule allowed.

With the original group no child was excluded from kindergarten because the guideline that Genesis would try to help all children had been established. However, it was decided before spring, 1968, that children who appeared very immature from the screening data would be recommended for individual Genesis help each year but not enter kindergarten until a year later. Several of these children attended summer programming. There were four exclusions in 1968-69 and five exclusions in 1969-70. These children came to school for one hour sessions with the Child-er each week.

AREAS OF PROGRAMMING

The chart on the accompanying page distinguishes which areas the Child-er found it necessary to program. Some of the children received programming in several areas. The percentages are based on the number of previously defined children who received programming.

Number of Children Receiving Programming						
	Screened 1967			Screened 1968		Screened 1969
	Kin.	1st	2nd	Kin.	1st	Kin.
Programmed	97	60	19	118	32	134

These are the figures used for the percentage chart.

Percentage of Children Receiving Programming

	Screened 1967			Screened 1968		Screened 1969
	Kin.	1st	2nd	Kin.	1st	Kin.
GROSS MOTOR	64 %	5 %	10 %	43 %	34 %	72 %
FINE MOTOR	15 %	5 %	16 %	27 %	34 %	11 %
VISUAL MOTOR	24 %	69 %	79 %	47 %	78 %	34 %
AUDITORY PERCEPTION	-	7 %	5 %	16 %	19 %	19 %
LANGUAGE DEVELOPMENT	7 %	8 %	-	6 %	3 %	8 %
CONCEPTUAL THINKING	24 %	17 %	10 %	17 %	9 %	8 %
ENRICHMENT (Gifted)	2 %	5 %	10 %	-	3 %	0.8 %

Of the nineteen known "premature babies" all needed programming. During kindergarten nine needed gross motor, four needed fine motor, and eight needed visual motor. Two also needed language development training and one conceptualization. Of the nine who reached first grade three needed visual motor training and one auditory perception. Only one child reached second grade, and he was programmed for visual motor at that level.

SUMMER PROGRAMMING

The 1967 summer was devoted to developing and expediting preschool screening, while the next two summers were planned for further in-service training of the Genesis staff and for preschool programs. Both schools participated in the summer

prekindergarten classes which were expanded from two weeks in 1968 to five weeks in 1969.

An interesting situation occurred this past summer in the program of one of the pilot schools. After five weeks devoted primarily to gross motor training, 50% of the children were at a mature enough level to be dropped from programming in that area. This same group of children, when rechecked for vision in the fall, had also made phenomenal progress in that area, too, without specific training. We offer this merely as an observation.

The summer programs which serviced 162 children were conducted as classes rather than as individualized sessions. However, priority was given to the children who needed Genesis typed activities.

SUMMARY

Until very recently there were few places where a teacher could take training in developmental learning. Much of the knowledge of the Child-ers and Aides was acquired "on the job" by reading, attending conferences, making visitations, and working with children who had specific problems. There is not now, and probably never will be, a recipe of methods and materials that will work for all children. Each child is unique, and finding the way he can be remediated takes ingenuity, patience, and a feeling of empathy.

BUDGET

"Federal, state and local funding does not comprise the Garden of Eden. Unless ample effort and thought and planning and training also go into its cultivation, the habilitative program's most abundant crop will be weeds." - Sheldon R. Rappaport

FEDERAL CONTRACT 67-3522

The complete budget as appropriated for the three years existence of Project Genesis is as follows;

June 15, 1967 - June 14, 1968	\$ 45,467.00
June 15, 1968 - June 14, 1969	60,009.00
June 15, 1969 - June 13, 1970	<u>60,480.00</u>
Total 1967-1970 Appropriation	<u>\$165,956.00</u>

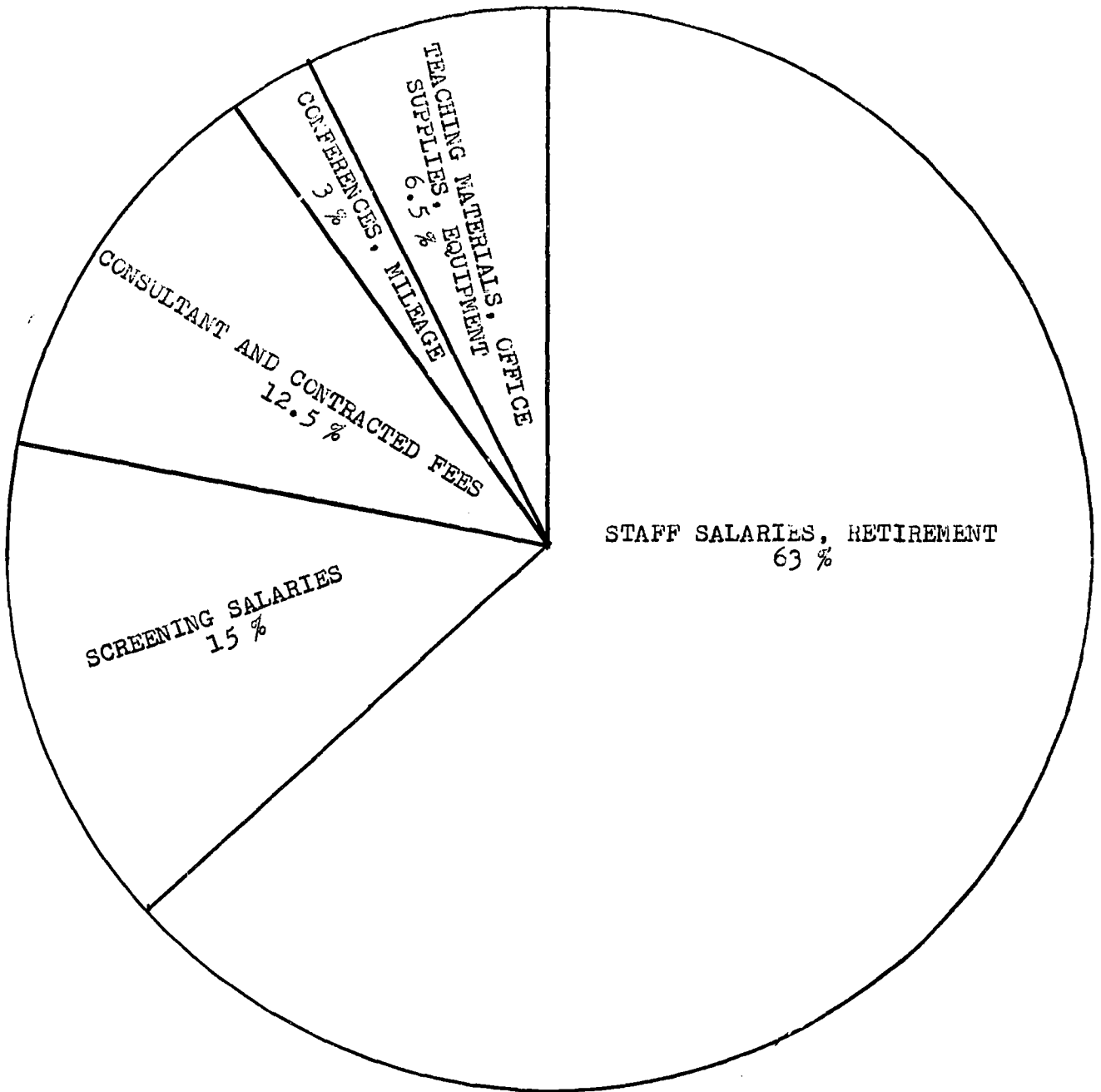
With the 1968 cut in monies available for Title III funding a decision was made by the Executive Committee to intensify the work being done in the two pilot schools rather than expanding to new schools as had been anticipated in earlier planning. The addition of a second Child-er and two Perceptual-motor Aides utilized most of the increased budget for 1968-69.

The same number of staff (six in all) was maintained for the 1969-70 budget year. By requesting to stay on a psychologist's contract, which is a teaching contract plus 10%, Mrs. Jens was able to shift enough money to the consultant category to pay for the filming, editing and five copies of the Project Genesis film which had not been anticipated in the budget request. Four copies of the film were necessary because one must go to the Office of Education in Washington, one to the Title III office in the State Department of Education in Lansing and each participating district wanted to retain one copy. The recently ordered fifth copy will go to the Michigan Association for Children with Learning Disabilities for dissemination purposes.

BREAKDOWN OF 1967-1968 BUDGET

June 15, 1967 - June 14, 1968

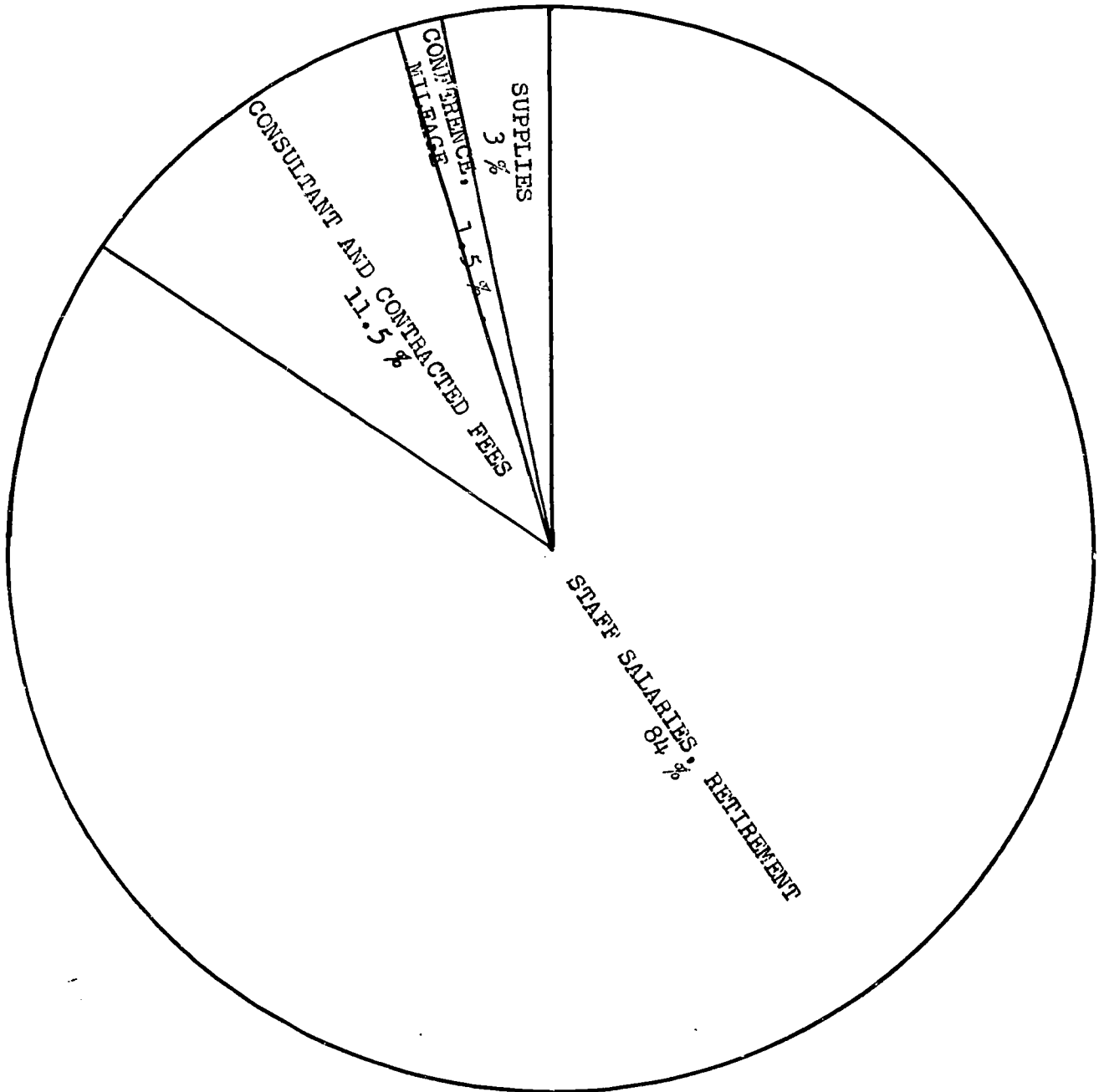
Appropriation \$ 45,467.00



BREAKDOWN OF 1968-1969 BUDGET

June 15, 1968 - June 14, 1969

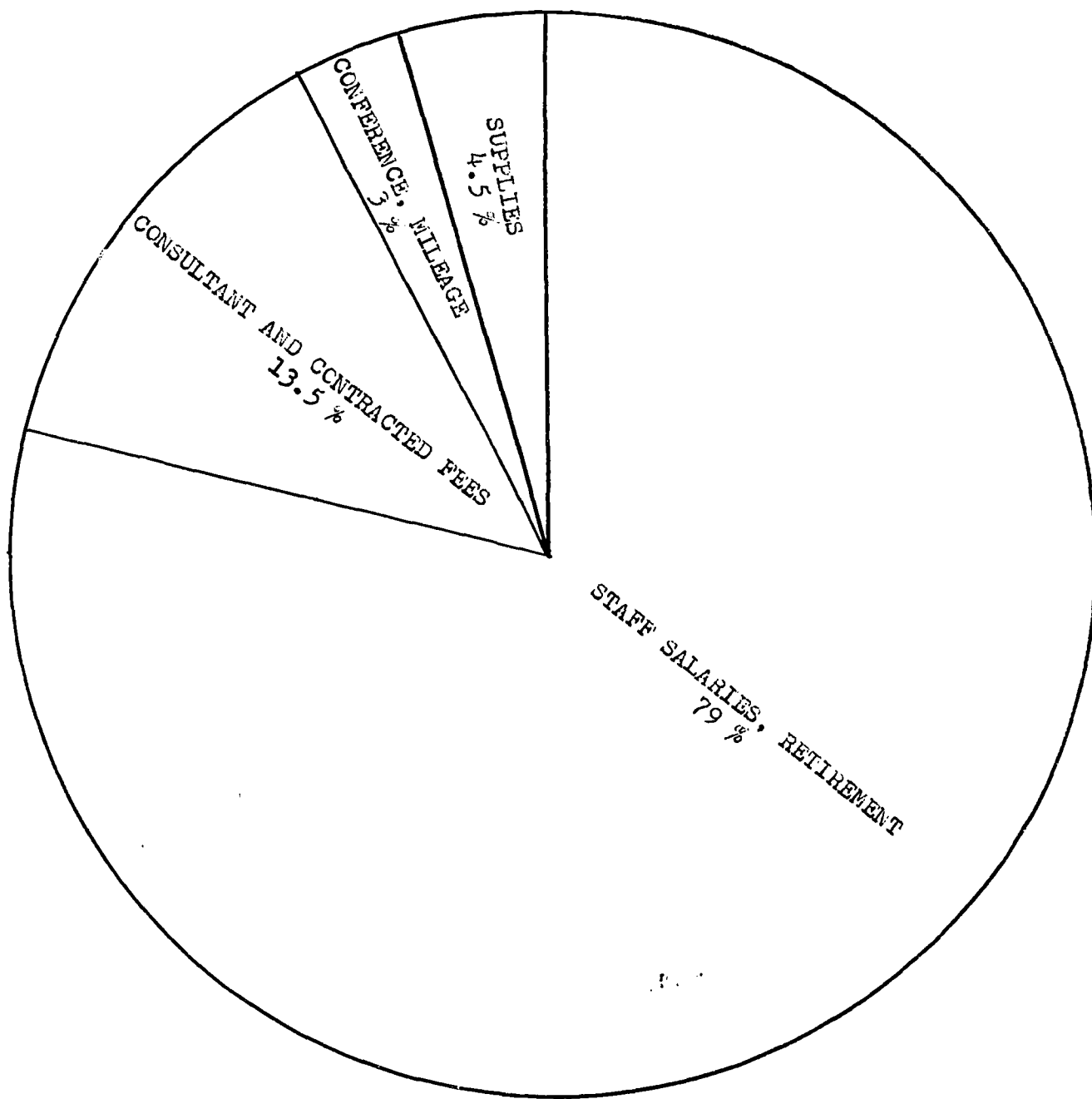
Appropriation \$ 60,009.00



BREAKDOWN OF 1969-1970 BUDGET
(Projected)

June 15, 1969 - June 13, 1970

Appropriation \$ 60,493.00



DISSEMINATION

"There is nothing more powerful than an idea which has reached its point in history." - Victor Hugo

One of the requirements placed on a project receiving Title III funds is that information about the project will be shared with all persons requesting it. What the impact of this dissemination has on the field of education would be difficult to ascertain. However, all requests for presentations and for printed materials have been fulfilled in so far as possible.

The earliest presentations of Project Genesis were made with color slides and an overhead projector. In January, 1968, a 30 minute Sony video tape was produced which demonstrated the screening techniques, the mechanics of the program, and the role of the Child-er. A 28 minute color sound 16 millimeter movie was produced in November, 1969, which shows the screening procedure, the kinds of problems Genesis finds and what Genesis does about these problems. The demand for this film has been overwhelming, and the waiting list has not yet been satisfied. With the approval of the State Department Title III Office one or more prints of this film will be loaned to the Michigan Association for Children with Learning Disabilities to circulate at minimal cost after the completion date of this project.

The final report for the 1967-68 year states that approximately 35 presentations were made that year. One national presentation was made during the 1968-69 year to the Parent Cooperative Preschools International which met in Detroit on April 18, 1968. 22 other programs are listed for that year. Two National presentations were made during the 1969-70 year;

The International Conference for Children with Learning Disabilities in Philadelphia February 12th, 1970.
Five members of the staff plus the vision consultant presented this program which included the Genesis Film.

The National Association for School Psychologists in Washington, D.C. May 1st, 1970.
Mrs. Jens and Mrs. Lee presenting plus the film.

Only 6 presentations were made in the 1969-70 year before the film was completed, but 43 were made after it was ready in January, 1970.

A new form of dissemination was tried this year by printing a folder that was distributed to the audience whenever a presentation was made. The first order of 5,000 was completely dispersed, primarily at the two national presentations, and another 1,000 were prepared by the Graphic Arts chairman, Mr. Dale VanHouzen, for distribution at local presentations. From this pamphlet came many requests for more complete information.

One television program, in which Mrs. Jens participated, discussed Project Genesis and the fact that it would be presented more formally the following day at the state conference of the Michigan Association for Children with Learning Disabilities at Oakland University. The appearance took place from 8 to 8:20 AM on the Bob Haynes Morning Show, WXYZ-ABC, Channel 7, Detroit, On March 3, 1970.

Newspaper publicity has been excellent this last year with feature articles appearing in;

The Detroit News
The Macomb Daily
The St. Clair Shores Community News

plus many articles discussing presentations that would be made for different organizations.

A Monthly newsletter was sent to the Executive Committee, teachers in the pilot schools, and for the bulletin boards of all elementary schools in the two school districts including the non-public schools. The name changed monthly beginning with the Genesis Gurgle (with a change in three members of the staff, the project almost went under water - temporarily) through the Genesis Garble, Gobble, Greeting, Gabble, Gibber, Glimmer up to the Genesis Gasp as the project phased out of being as a separate entity. In the two preceding years a flier was sent to parents printed on the PTA forms which have a different parent education message for each month, a Child-er's Chatter newsletter prepared by the Child-ers was circulated among school personnel the first two years.

During the 1969-70 year, as in former years, the Child-ers (and secretary!) spent a good deal of time compiling pages of teaching information which contained methods and materials for classroom remediation. A copy of Project Genesis Teaching Ideas will be placed in the teachers' library of all 24 elementary schools in the two districts (18 public schools, 4 non-public) the Special Education Departments and Offices of the Directors of Curriculum. This will be a duplicate of the ~~notebook~~ each K-2 classroom teacher received this year in both pilot schools. The materials, articles, and new ideas have been added to both continuously. The remediation pages are easily removable for classroom use due to the loose leaf binding and they are color coded according to each problem area;

Gross Motor Development	Pink
Fine Motor Development	Fawn
Visual Motor Development	Blue
Auditory Perception	Lime
Language Development	Gold
Miscellaneous	White

Visitors to the project to see it in action this final year have numbered over 47, and many telephone calls have been helpful in imparting further information on a quick basis. Every effort has been made to be helpful to other interested persons so that they could duplicate or use adaptations of the Genesis program in their schools.

At the present time there are 551 requests for the final report which have come from telephone calls, letters, or by signing lists at the national presentations. It is difficult to judge how many districts have planned pre-school screenings and follow-through based on information supplied by Genesis, but there is no question that many districts across the country will be using preschool screenings this next summer and fall, and the shared Genesis experiences will no doubt add facility to their endeavors. 57 copies of the original application and the 1969-70 application have been mailed during the 1969-70 school year with personal letters accompanying almost every request. Sometimes it was the screening forms that were requested, other times it was remediation methods that were sought. A number of thank you letters were also received from persons receiving this information and indicating their plans to utilize it in some form.

Dissemination will continue long after federal funding terminates. Another 1,000 pamphlets have been ordered (making a total of 7,000). These will be distributed with the films and with the final reports. This final report, for which there are now 627 envelopes addressed, has been ordered in a quantity of 1,000 and will be mailed to those requesting it after it has been printed-for as long as copies last. There are 18 requests for the film which require shipping, and requests will probably increase after this report is out. A fifth copy of the Genesis film has been ordered from Mr. Dale Pegg who did the filming and editing. Mr. William Hershiser, who filmed the original Sony video tape and served as director of the film, arranged for Dale to make our film and for Kent Voigt, former radio announcer, to narrate it. As Director of Instructional Materials he will be in charge of circulating the Lake Shore copy of the film. Mr. Ken Olsen, Multi-Media Director, who taped the TV appearance will be in charge of circulating the Lakeview copy of the film.

But word of mouth will no doubt be our longest ally. Many parents refer to the preschool programs in both districts which are sponsored under other auspices as "Genesis". Consultants who are well informed in developmental learning are labeled "like the Child-ers". Nurses who incorporate more in their vision screening than acuity are said to use "Genesis" screening. The way of arranging the preschool screening; using stock rooms, clinics, the gym, etc. is called "the Princeton plan." Genesis funding may expire, but ~~its~~ names and methods will continue on in speech and thought far longer.

In summary, Project Genesis has used the following
methods of dissemination:

Colored Slides

Sony Video Tape

16 mm Color Film

Lectures

Workshops

Brochures

Television

Newspapers

Newsletters

Teachers Handbook

Visitors

Personal Letters

Telephone Calls

Final Reports

PHASING IN

"All children, with the exception of a few severely retarded children, belong in the public schools. Nothing makes me more angry than to see a rash of private clinics cropping up purporting to be able to teach children more effectively than the schools can. Learning disabilities are OUR educational problem, not someone else's.....The farther we remove a child from the normal stream of education, the harder it is to get him back into it." -
Jeanne McRae McCarthy

Two separate Phasing In Committees were established because Project Genesis operated in two different local school districts. The superintendent of each district appointed a group of interested persons from the administration, teaching staff, school board, and special services departments, to draw up plans for utilizing and preserving the best things developed under Project Genesis Title III funds which automatically terminate at the end of three years.

Attempts had been made earlier to move toward local funding. As mentioned under Budget the cost of screening personnel was 15% of the 1967-68 appropriation because the screening was held in August when these specialists had to be paid on an hourly basis. The following year the screening, being held in May, had no staff expenses (only a shift in priority of their time) but they did use a local church building for which the charge was \$275.00. By the third year the only expense for screening was for printing the necessary forms. Local school buildings were used that May.

Another area in which phasing into local funding was begun earlier was teacher training. Genesis funded two workshops which brought Wayne State University staff to the district to teach teachers, and the Genesis staff, about Child Growth and Development Problems and how to work with them. In January, 1969, Genesis again sponsored a workshop of this type for local

teachers, but each school district paid one-half the cost. No Genesis monies were used. Two teachers from another district willingly paid tuition to attend this program.

LAKE SHORE

The Lake Shore "Phasing In Committee" appointed by the Superintendent met on several occasions and attempted to develop a feasible plan for continuing the type of program developed under Genesis. Due to serious financial difficulties and loss of two millage elections there was no possibility of continuing the program within the regular school program in the foreseeable future.

At this point the committee suggested including a portion of the program within an E.S.E.A. Title I Summer Program. Mrs. Sue Lee, Child-er in the Lake Shore District will direct a teacher training in-service program for Title I teachers to assist them in dealing with learning problems, and she will work with a group of pre-schoolers in the program. This application has been approved by the Michigan State Department of Education, and by the local Board of Education.

In the fall a proposal has been submitted to employ Mrs. Lee as a Child-er in the regular Title I school year program to work in three Title I Target schools with children with perceptual learning problems on an itinerant basis. The Genesis screening instruments and procedures will be used to identify pre-school and early elementary children with learning disabilities, and she will work with those identified on an individually prescribed basis.

The school district is strongly convinced that the program has real merit, and it is hoped that in the near future financial means will be available to extend this type of program into more schools.

LAKEVIEW

Lakeview's committee under the leadership of Mr. Ralph Braun, Public Services Director, had two sub-committees which made formal reports. Mr. Franklin Hermann, Principal of the Princeton School, a Genesis pilot school, was assigned the task of determining what values his staff felt had accrued from having Genesis operate in his building for three years. The final report was most flattering to both the concepts and the personnel of Genesis. Their recommendation was to make these services available throughout the district. The second committee had a volunteer chairman, Mrs. Evelyn Salturelli, Director of Elementary Curriculum. Her assignment was to investigate the feasibility of screening prekindergarten children in all schools. Her report not only supported the idea but fully outlined the procedures and calendar that could be followed. It was expedited as planned and at a cost of \$14.80 as reported earlier. 433 Lakeview prekindergarteners were screened in 13 days in 9 elementary buildings using no Genesis funds but using the complete Genesis format developed during the three years of federal funding. The Child-er and Perceptual-Motor Aide participated for the full 13 days and manned the perceptual-motor station.

The Lingemann School Child-er helped at this station the few times the aide was unable to attend. This was her first screening experience. The Genesis Coordinator and Psychologist Bruce Konya spent one morning preceding the screening in training the elementary counselors and reading consultants to administer the Psychological items.

The following percentages comprise all nine elementary schools and represent the number of children indicating a problem during the preschool screening. As of May, 1970, this percentage of Lakeview prekindergarteners evidenced difficulty in the following areas:

Number = 433 children

Perceptual-Motor	33 %
Visual Acuity	6 %
Visual Binocularity	35 %
Speech	13%
Hearing	4 %
Developmental	
Draw-A-Person	34 %
Auditory Perception	21 %
Conceptualization	20 %
Peabody Picture Vocabulary Test	10 %
Visual-Motor Integration	13.5 %

In need of programming - 31 %.

Recommendations by the full Phasing In Committee were submitted to the Lakeview Board of Education on June 1, 1970.

and approved. They call for:

Screening all prekindergarteners next spring, 1971;

Hiring a Developmental Learning Specialist to work
with those children found to have problems and
with their teachers;

Hearing and vision problems to be followed up by the
nurses and even some visual training to be done
by them as time allows;

Speech therapists to work with those found to have
speech defects; and

The psychologists to recheck items failed on Form C
with the equivalent item from Form D in the fall.

Although Lakeview passed a minimal millage last year the local school budget is very tight. The addition of one salaried specialist to their staff suggests the interest, need, and awareness that Project Genesis has promoted in this school district. Through the gift of federal funding this school district has placed new emphasis on finding problems early and trying to prevent failure.

OBSERVATIONS

Officially we have preserved the screening mechanism for looking at children before they enter school in both districts. Both Child-ers will be consulting and teaching in areas where they are now well trained. The teaching materials and equipment will follow the intent of their

purchase. But broader yet is the impact Project Genesis has had on ways of looking at children, of finding causes for nonlearning and misbehavior and not just labeling them but doing something about them. This has strengthened communication between teacher and other special services personnel. For three years this process has been phasing in, and ultimately it may be the most important contribution made by Project Genesis.

"It is never too late to help children, but it is never too early to prevent failure." Could this motto of Project Genesis be accepted elsewhere as well as here in our local school districts, we would be happy to phase out-----

MAY, 1970, TESTING RESULTS

"For professionals and professional growth, compassion is not enough. As professionals we have to extend our energies beyond sympathy to the level of effective intervention." - Herbert Birch

In the original application for federal funding the following statement was made after Evaluation:

"Students placed in the Pilot Program will be compared with similar groups not participating in the program from other kindergarten classes in other buildings. Past experience has shown that the number of children showing various kinds of learning disorders is quite randomly distributed through out the districts, i.e., the number and kind of learning disorders found in one kindergarten class in the districts is likely to be very similar in any other kindergarten class in the districts. Both districts are located in the middle class suburban city of St. Clair shores, Michigan.

"A correlation study will be undertaken for the purpose of determining the extent to which there will be a significant difference between children participating in the program and those who do not -- at the end of the one year, two years, and three years (kindergarten, first grade, and second grade)."

There were further suggestions for comparison questionnaires and follow-up studies, some of which were undertaken and printed in earlier reports. However, a correlation study between the pilot schools and comparison schools had not been undertaken. Due to a moratorium on standardized testing in both school districts the data available for analysis was spotty. The original group screened in August, 1967, at Princeton School had been

reexamined individually by the school psychologists at the end of first grade and scores from the California Test of Mental Maturity which had been given in the fall of first grade were also available for this same group. At Lingemann there were Metropolitan Readiness Test scores for the original group and the second group which had been given in May of their kindergarten year.

With the advocacy of many difficulties in arriving at any meaningful comparison, a feasible plan was presented to the Executive Committee and accepted;

Second graders in the two pilot schools and in two selected comparison schools would be tested with the Screening Test for Auditory Perception (STAP) and the Developmental Test of Visual-Motor Integration (VMI). First graders in the pilot and comparison schools in Lakeview would be given the California Test of Mental Maturity, 1963 S - Form, Level 1 (CTMM), and kindergarteners in the pilot and comparison schools in Lake Shore would receive the Metropolitan Readiness Test, Form A (MRT) in groups of 15 children or less. This would utilize what previous information was available.

The testing required approximately one hour per group. Twenty-eight groups were tested. The Genesis Coordinator administered the tests with the Genesis Children and Aides serving as proctors.

The following graphs indicate the mean scores obtained at the two pilot schools (Lingemann and Princeton) and the two comparison schools (Harmon and Violet). On the STAP and VMI graphs the low and high means were obtained by finding the mean of the lowest 27% of the scores and the highest 27% of the scores. The CTMM and MRT scores are compared to scores obtained on the same instrument in the same school in earlier years. Means were computed using the norms given in the official manual and were based on the following types of scoring:

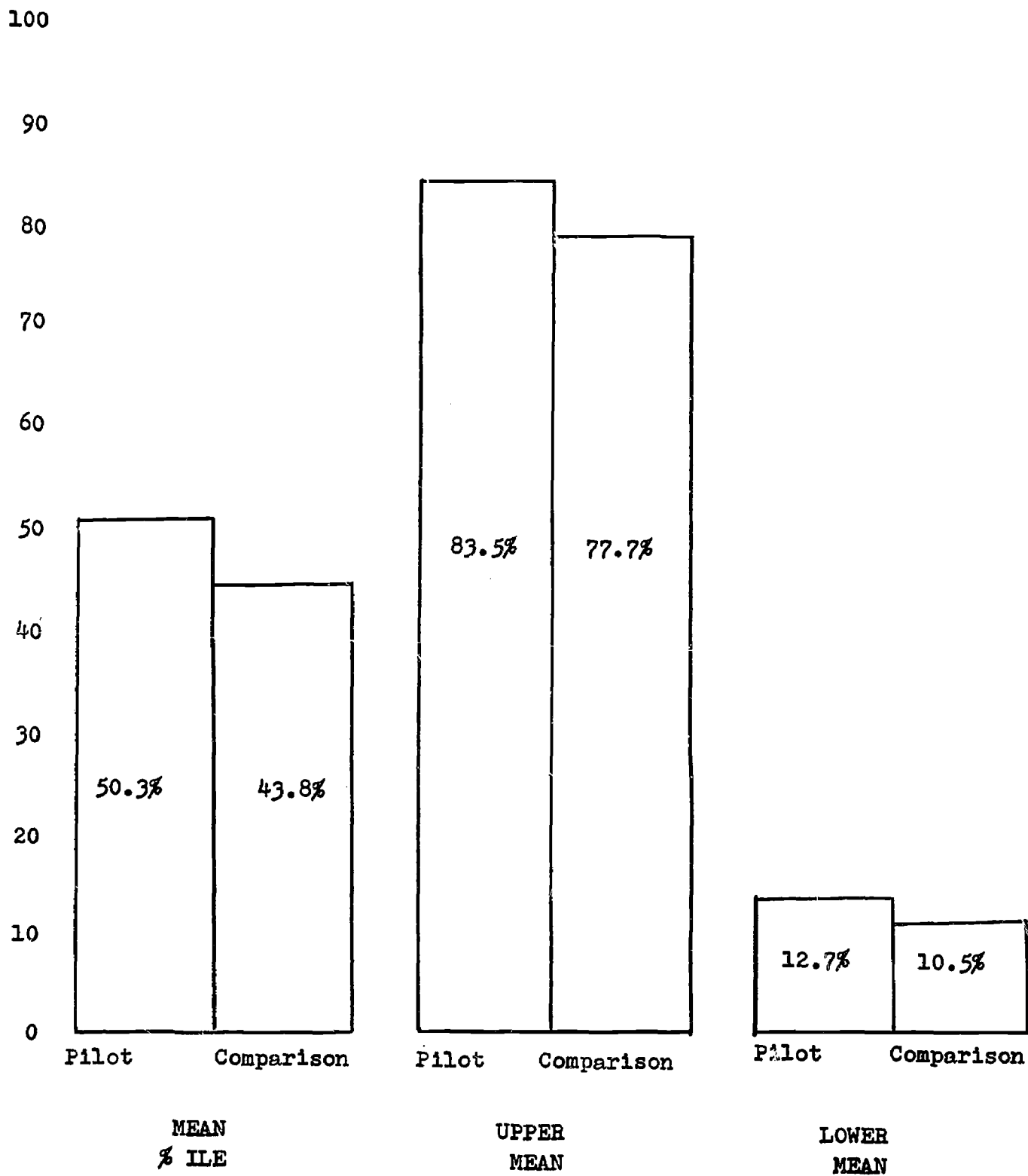
STAP	percentile rank (by age)
VMI	developmental quotient
CTMM	intelligence quotient (1964 norms)
MRT	percentile rank (by grade)

Number of Children Tested

	Pilot	Comparison	Total
Second grade	141	131	272
First grade	66	55	121
Kindergarten	83	80	<u>163</u>
			556
Total number of tests administered	828		

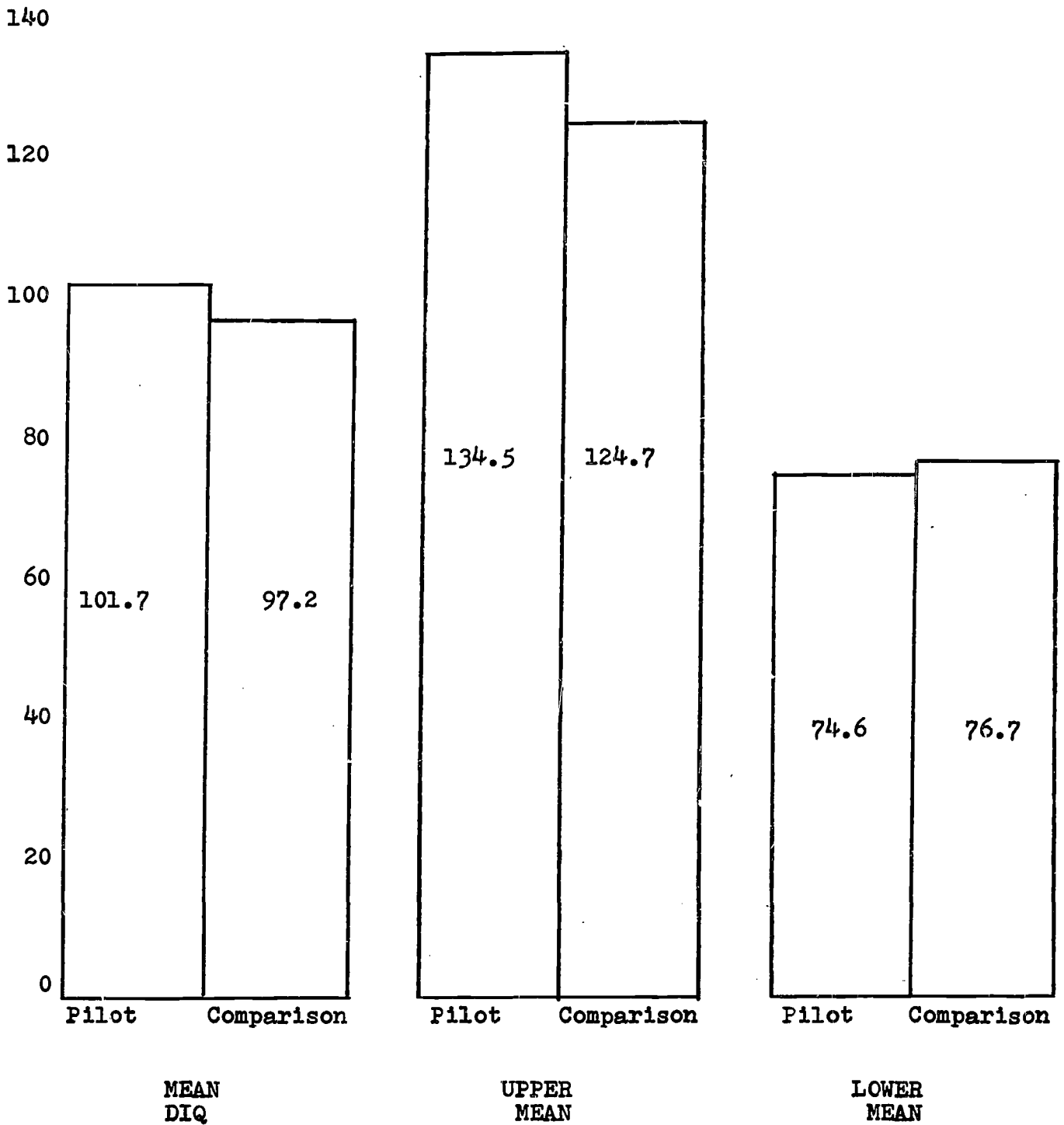
SCREENING TEST OF AUDITORY PERCEPTION

272 Children



DEVELOPMENTAL TEST OF VISUAL-MOTOR INTEGRATION

272 Children



CALIFORNIA TEST OF MENTAL MATURITY

121 Children

147 Children

140

1970

1967-68

120

100

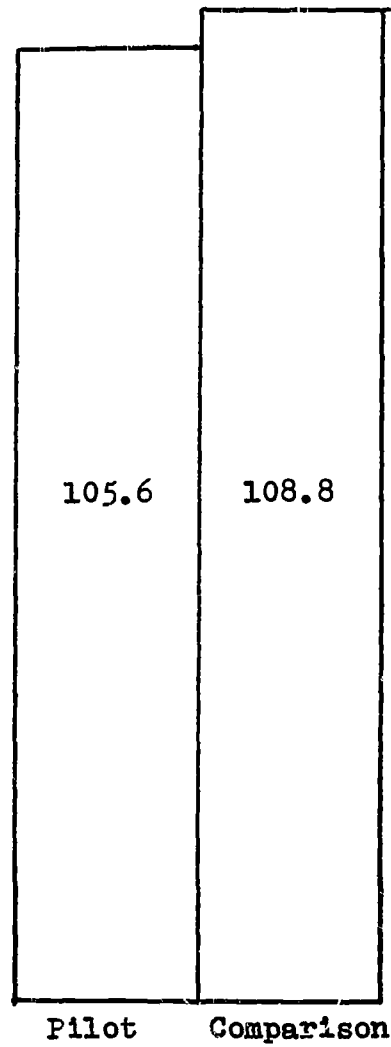
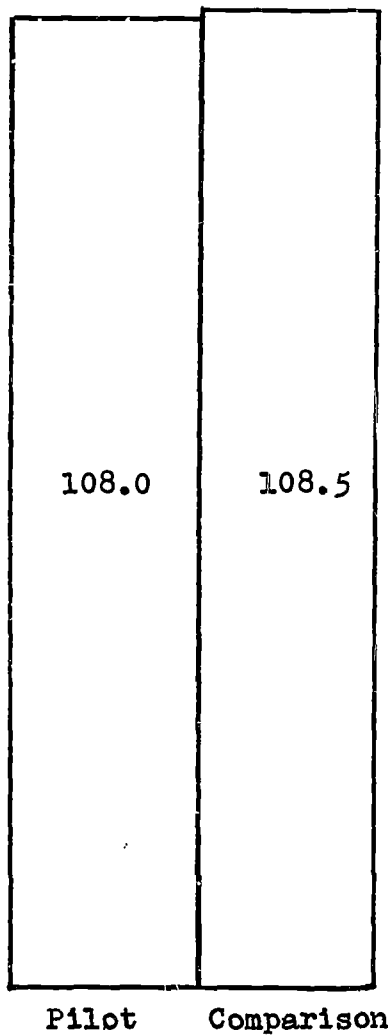
80

60

40

20

0



MEAN
IQ

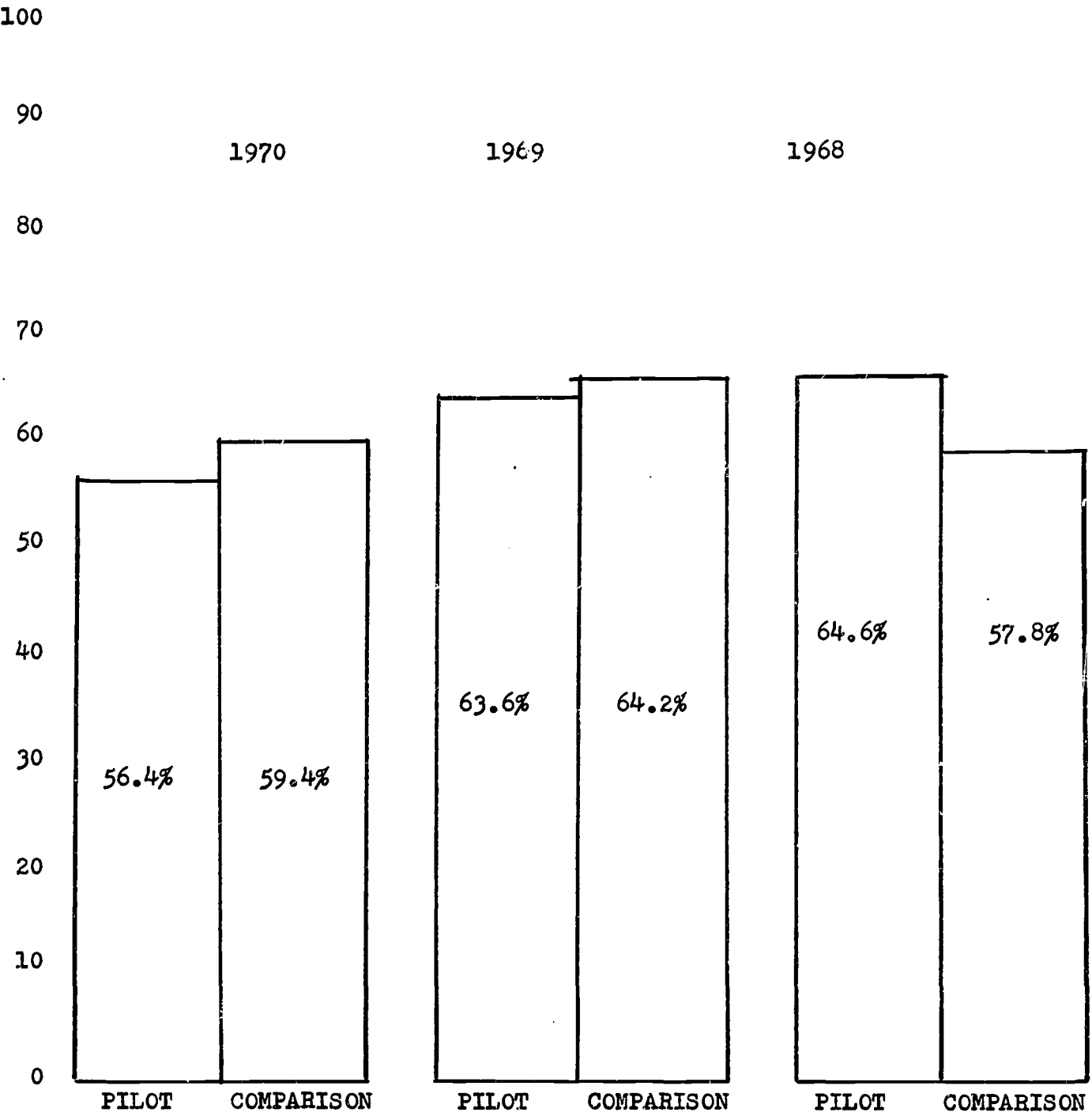
MEAN
IQ

METROPOLITAN READINESS TEST

163 Children

160 Children

140 Children



OBSERVATIONS

The results of the STAP and VMI tests administered to second graders suggest that the purposes of Genesis in helping each child use his sensory systems singly and integratedly have been effective. The average score for the STAP is the 50th percentile, and the average score for the VMI is 100 when the developmental quotient is used. The pilot schools scored above these figures on both tests, and the comparison schools scored below. The norms used to score both of these tests are based on chronological age.

The STAP yielded a mean percentile 6.5 points higher for the pilot schools, and the pilot schools obtained a mean 3.5 points higher on the VMI. At both tails of the STAP upper and lower mean scores were higher for the pilot schools again. On the VMI the upper mean was 9.8 points higher, but the lower mean showed the comparison schools to be 2.1 points higher.

One factor which was not controlled was the fact that several children were retained in the pilot schools in second grade last year in order to receive Genesis help. They were having a great deal of difficulty and had missed this service by being a year older in placement than the project. The developmental age equivalents on the VMI jump by much larger increments than on the STAP particularly the older the child. The retainees' older age and poor

performance may be a factor in this lower mean comparison.

On the CTMM there is no significant difference between the first graders in the pilot and comparison groups, but norms from earlier years would suggest an improvement for the pilot school children.

The MRT results suggest lessening ability to respond to a group readiness test. School district lines have been shifted for this pilot school which may have had some effect, but the MRT is not controlled for chronological age which might be a more important factor.

Three parting comments:

- 1 - This data should be subjected to more thorough analysis.
- 2 - Genesis may have brought a shift in thinking about child development, particularly at the kindergarten level, and the standardized tests which were used may not measure this emphasis.
- 3 - A longitudinal study of these two groups should now be undertaken.

VISUAL ANALYSIS STUDY FOR PROJECT GENESIS

June, 1970

In the past five years educators and school psychologists have become increasingly aware of learning disabilities in the classrooms of our schools. They have also accepted the concept that children's vision is in some way related to the learning process. Dr. G. N. Getman has stated that 85% to 90% of what a child learns is through his two eyes. There has been a large portion of available literature and research recently which indicates that vision is the major sense modality through which a child achieves academic knowledge. The integration of visual and motor skills is also most important because of the increased efficiency the child brings to the learning situation.

In May, 1970, all kindergarten, first and second grade children in the two Genesis pilot schools were rescreened with the aide of the Optometric Consultant. This testing disclosed information concerning:

1. Types of sight defect (Myopia, Hyperopia, Astigmatism) and refractive status in relationship to the grade placement of the child, and
2. Binocular Anomalies (suppressions, amblyopia, exotropia, esotropia) which cause reduction and deterioration of stereopsis and depth perception.

TESTING PROCEDURES:

All children received the same evaluation and analytical procedures. Data was collected in the following areas:

1. Visual Acuity, at distance and near. This checks ability of the eyes to resolve a distant object or symbol on a printed chart clearly.

2. Ocular Motility Testing. Cover testing at distance and near, rotations, versions, pursuits, and fixation ability were observed.
3. Gross Static Retinoscopy. This reveals an evaluation of the child's refractive status by observing how light reflects off the retina of the eye.
4. Binocular Fusion Tests, Third Degree Fusion and Stereopsis. Visual perception of depth or three dimensional space is evaluated as well as earlier levels of binocular functioning.

STANDARDS FOR REFERRAL TO PROFESSIONAL DOCTORS OUTSIDE THE SCHOOL:

The referral criteria was patterned after the Orinda Vision Study (Peters et. al - 1959), and the Coleman Vision Study (Coleman et. al. - 1968), and are as follows:

1. Visual Acuity: 20/40 or less in either eye.
2. Hyperopia: +1.50 Diopter hyperopia or more.
3. Myopia: -.50 Diopter or more.
4. Astigmatism: -1.00 Diopter or more.
5. Strabismus: any amount or direction of misalignment of the eye with resultant dysfunction of fusion.
6. Amblyopia: Dimness of vision without apparent reason or inability to respond to tentative refractive correction.
7. Fusional anomalies or lack of Binocularity: including suppression, suspension, tropia, and lack of fusion without strabismus present.

FINDINGS:

Total No. of Children	<u>NUMBER OF CHILDREN RESCREENED</u>		
	Kindergarten	First Grade	Second Grade
421	149	128	144

PERCENTAGE OF CHILDREN HAVING
THE FOLLOWING SIGHT DEFECTS

	Kindergarten	First Grade	Second Grade
Myopic	5 %	5 %	15 %
Astigmatic	18 %	27 %	15 %
Hyperopic	53 %	49 %	40 %
Emmetropic	28 %	20 %	20 %

PERCENTAGE OF CHILDREN HAVING
THE FOLLOWING LEVELS OF
BINOCULAR FUSION SKILLS

	Kindergarten	First Grade	Second Grade
Passed	87 %	85 %	83 %
Borderline	5 %	8 %	7 %
Failed	8 %	7 %	10 %

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS:

Although the findings relate some interesting results, there are a multitude of correlates which can still be performed in the area of visual problems related to academic achievement. From the data received, the following conclusions are relatively well-defined:

1. The incidence of refractive error in K through 2nd grade is apparently increasing, and at a faster pace than indicated in previous studies. (Peters et. al. - 1958, Coleman - 1965, Crane et. al. - 1954, Morgan et. al. - 1952, Kelly - 1957, Yasuna and Green - 1952, Sloane and Gallagher - 1952, Shaffer 1948, Leverett - 1955).
2. Little myopia was found in the kindergarten and 1st grade.
3. In the pilot schools myopia begins to appear in 2nd grade which, is a full year earlier than indicated in previous studies.

4. The incidence of Binocular Anomalies in kindergarten and 1st grade were lower than 2nd grade where the incidence of two-eyed fusional problems starts to rise.
5. Myopia can easily be found by school nurses using the Snellen tests. Hyperopia has frequently been disregarded in vision screenings due to disagreements as to its etiology and to the corrective measures which should be used.

In this study of Visual Analysis for Project Genesis, we have explored an area of considerable interest to the educational professions. The incidence of visual problems appear to increase with more visual confinement tasks given in the 1st and 2nd grades. There is a strong probability that children in a general school population may suffer from visual problems that go undetected, or are diagnosed too late. The professional educator today understands that early remediation is necessary for more adequate performance in the classroom. Surely any sensory system as important as the visual mechanism should be checked early and remediated, if necessary, to aid children generally. But more environmental and adaptation studies are needed within the schools of our nation if we are to prevent failure for the child with visual problems.

Fred L. Von Gunten, C.D.
Vision Consultant
Project Genesis
Lakeview and Lake Shore Public Schools
St. Clair Shores, Michigan 48081

To be found in the appendix:

Address list of group instruments used in
the final evaluation.

Vision Screening Form which is used by the
Optometric Consultant.

CONCLUSIONS

"The sufferings that are endured patiently as being inevitable, become intolerable the moment that it appears that there might be an escape." -- Alexis de Tocqueville

Once upon a time, not so very long ago, children went to a school, frequently of one room size, where they learned at their own rate of speed. They received ample help from the older children, often members of their own family, who could understand their difficulties because they were like their own. These children ran through the woods, climbed trees, skipped across slippery rocks in the creek, listened to all of the sounds of nature, used their eyes to follow the flying hawk and the ant creeping along the ground, and learned cause and effect by experiencing natural consequences. When school work became too difficult they did not "drop out" but "grew up" and took their place in the community as a wife or a farmer or whatever their calling might be.

Then came crowded cities, fast cars, laws about staying in school until one was sixteen years old, and television which did not encourage movement even of the eyes' focusing mechanisms because the camera did it all for you. And if a child was not ready when the calendar said he was six, off he went to a crowded classroom where he might be labeled stupid, lazy, or stubborn.

Our culture has been demanding of children a higher performance in conceptual thinking while denying them the opportunities for motor and perceptual skills to develop spontaneously. What has been taken away must be given back - in some form. If it could be done in

the early years through parent education and nursery age programs it would be even more preventative. But as public school persons to plan prekindergarten screening even four years ago was innovative.

The literature tells us, "Catch them before it's too late.....a bad habit is hard to break.....plug up the holes for a strong foundation to build on." And this we have attempted to do; to raise each child to a level of efficiency in his motor, perceptual and conceptual abilities that will hold him in good stead long after he has graduated. Academic knowledge is for teachers to impart; the job of Genesis was to encourage development through individual attention so that learning skills were at an automatic level of functioning, and the child could use his "conscious" mind for school work.

Learning developmental skills can be compared to learning to ride a bicycle. Once this ability has been learned one may not ride a bicycle for many years, but the pattern is remembered, and the muscles can quickly reactivate the appropriate sequence of steering, balancing, and pedaling all at once. Although some programmed children may have only one area of prematurity, what a nuisance that disability could have been for the rest of their life. Do you have difficulty reading maps or remembering telephone numbers?

But beyond the efficiency of mind and body what else have we achieved? One dyslexic teenager, after hearing about Project Genesis, said of the children, "And they will never know they failed!" What heart ache failure can bring to a child, be it on a baseball diamond, or in a classroom or in making friends. We believe we have helped build happier children - tomorrow's adults. We have established an attitude of caring about each individual to such an extent that every child in the classes serviced by Genesis has been to the office for a session or two so that those without problems will not have the stigma of being "left out".

Now as Project Genesis makes its Exodus we can be sure of the following things:

- 1 - You can identify potential problem areas with a spring preschool screening and a fall recheck. This does not need to be expensive, but it does mean a shift in priorities of time for teachers and special services people who are willing to become trained in this area.
- 2 - You can bring about improved sensory-motor functioning through sequenced training. The Child-ers are constantly evaluating as they plan ahead for the next step to introduce. When a child, whose earthboundness has prevented her from jumping with both feet at the same time, does a feet together bunny hop; when a child whose eyes could not stay on a piece of paper can follow a line of print; or when a child sits

listening to a record for five minutes when his span of attention used to be about 30 seconds; there is a feeling of sureness "of what we are about".

- 3 - Parents are willing to help their child when the training and need for practice are explained to them. They want advice on how to go about it.
- 4 - Teachers do find time to work needed activities into their regular classroom sessions as a supplementary way of reinforcement.
- 5 - Schools are basically people (check our budget), and people can change if they look carefully at each child and are willing to meet that child's needs whatever they may be. Today's needs are different from yesterday's. The one room schools, woods, creeks and hawks are gone from the daily experience of most of us. Tomorrow's needs of the space age may demand even greater functioning powers of the nervous system and brain -

LET'S BEGIN EARLY TO MEET THOSE NEEDS!

APPENDIX

Source of Quotation at the Beginning of Each Chapter

PHILOSOPHY

Havinghurst, Robert J. Developmental Tasks and Education, 2nd edition, David McKay Co, Inc., New York: 1952, page 2.

PLANNING

Cruickshank, Wm., James Paul & John Junkala, Misfits in the Public Schools, Syracuse University Press, New York: 1969, page 7.

PRESCHOOL SCREENING

Ames, Louise Bates & Frances L. Ilg, School Readiness, Behavior Tests Used at the Gesell Institute, Harper & Row, Evanston, Ill.: 1965, page 344.

INDIVIDUALIZED PROGRAMMING

deHirsch, Katrina, Jeanette Jansky & Wm. Langford, Predicting Reading Failure, Harper & Row, Evanston, Ill.: 1966, page 85.

BUDGET

Eppaport, Sheldon R. Public Education for Children with Brain Dysfunction, Syracuse University Press, New York: 1969, page 210.

DISSEMINATION

Kratoville, Betty Lou. "Six Annual 1969 ACLD Conference Special Report", ACADEMIC THERAPY, Vol. IV, No. 4, summer, 1969, page 274.

PHASING IN

McCarthy, Jeanne McRae. "You Can Help These Children...*", GRADE TEACHER, Vol. 87, No. 8: April, 1970, pages 68-69.

MAY, 1970, TESTING RESULTS

Kratoville, Betty Lou. "Six Annual 1969 ACLD Conference Special Report", ACADEMIC THERAPY, Vol. IV, No. 4: summer, 1969, page 275.

CONCLUSIONS

International Institute Newsletter, Detroit, Michigan, March, 1970, page 3.

PROJECT GENESIS
E.S.E.A. Title III
1967-1970

PERSONNEL

June 15, 1967 - June 14, 1968

Director	Mr. Ronald W. Cole
Child-er	Miss Sue Chojnacki
Secretary	Miss Barbara Charleston

Consultants	Walter J. Ambinder, Ph.D., Certified Consulting Psychologist Donald H. Lakin, O.D., Vision Consultant
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June 15, 1968 - June 14, 1969

Director	Mr. Ronald W. Cole
Child-er	Miss Sue Chojnacki
Child-er	Mrs. Sue Gravel

Perceptual-Motor Aide	Miss Marytherese Misico
--------------------------	-------------------------

Perceptual-Motor Aide	Mrs. Diane Wood
Secretary	Miss Barbara Charleston

Consultants	Walter J. Ambinder, Ph.D., Certified Consulting Psychologist Sandra Lyness, Ph.D., Certified Psychologist Fred L. Von Gunten, O.D., Vision Consultant
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June 15, 1969 - June 13, 1970

Coordinator	Mrs. Dorothy Jens (beginning 9/2/69)
Child-er	Mrs. Sue Gravel
Child-er	Mrs. Sue Lee

Perceptual-Motor Aide	Miss Marytherese Misico
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Perceptual-Motor Aide	Mrs. Diane Wood
Secretary	Miss Barbara Charleston (resigned 8/29/69)
Secretary	Mrs. Dolores Vogel (beginning 9/15/69)

Consultants	Fred L. Von Gunten, O.D., Vision Consultant William Hershiser, Lake Shore IM Director Dale Pegg, Photographer and Film Editor
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P R O J E C T G E N E S I S

P E R C E P T U A L - M O T O R S C R E E N I N G

W A L K B A L A N C E B E A M

1. Can he use both sides of body to balance? _____
2. Can he recover his balance? _____
3. Does he avoid the task? _____
4. Does he need to watch his feet when walking? _____

J U M P I N G A N D H O P P I N G

1. Can he stand up straight and close his eyes, with arms outstretched in front of him? _____
Does he waver at all? _____
2. Can he stand on one foot successfully? _____
Which foot? _____
3. Can he hop on that foot? _____
The other foot? _____
Both Feet? _____
4. Can he skip around you? _____
Is the skip smooth; more of a gallop; unsuccessful? _____

I D E N T I F I C A T I O N O F B O D Y P A R T S

1. Can he touch the body part called for in a prompt fashion? _____
2. Does he touch the described body part accurately as opposed to "feeling around" for it? _____
3. Does he touch both members of a pair (ears, knees, etc.)? _____
4. Can he identify the part being touched? _____
5. Is he aware of up-down directions? _____

T H R O W

1. Does he consistently throw with the same arm? _____
2. Does he keep his eyes on the object to which he throws? _____
3. Can he control his throws? _____

C A T C H

1. Does he back away from the ball when it is thrown? _____
2. Does he blink or close his eyes when attempting to catch the ball? _____
3. Does he use both hands in a coordinated fashion to catch the ball? _____
4. Does he hold his arms rigid? _____

ANGELS-IN-THE-SNOW

1. Can he visually identify the part to be moved or does he need to have the body part touched? _____
2. Does he move his limbs smoothly and decisively? _____
3. Is there overflow into other limbs? _____
4. Can he make necessary corrections with only one repetition of instructions? _____

DOES HE FOLLOW DIRECTIONS EASILY?

CAN HE FOCUS HIS ATTENTION ON THE ACTIVITY AT HAND?

IS HE DISTRACTED EASILY?

IS HE APPREHENSIVE IN PERFORMING ACTIVITIES?

P R O J E C T G E N E S I S
V I S U A L S C R E E N I N G R E P O R T F O R M

NAME _____ DATE _____

PROCEDURE - with or without corrective lenses			MATURATION LEVEL	
V. A. Dist	Refer	Low	Expected	High
	Lower Than			
R.	20/40	20/30-	20/30 +	20/20
L.	20/40	20/30-	20/30 +	20/20
Both	20/40	20/30-	20/20	20/20
V. A. Near (+ Lens at Distance)				
R.	20/20	20/30	20/40	Lower
L.	20/20	20/30	20/40	Lower
Both	20/20	20/30	20/40	Lower
Rotations				
R.	No	All	Eye	Smooth on
L.	Movement		Movement	target.
Both			Only	Eyes only
Binocularity				
Dog & Pig	Only One	Must explain	Dog & Pig	Dog jumping over pig
Balls	2 only	4 then 3	3 balls	3 balls in row. R.W.E
Clown & Balloon	No Depth	5 or 2	5 out 2 in	All
Stereo Fly	Must Touch	Fly Only	Passes Line ABC	Passes Stereo Box No. _____

PROJECT GENESIS
SPEECH AND HEARING EVALUATION

ORAL STRUCTURE _____ RETEST _____

VOICE _____

STUTTERING _____

LANGUAGE _____

PREDICTIVE TESTING _____

ARTICULATION TEST

RETEST _____

SOUND	I	M	F	Iso	SOUND	I	M	F	Iso	SOUND	I	M	F	Iso	SOUND	I	M	F	Iso
p					k					s					r				
b					g					z					l				
m					n					sh					h				
t					th					ch					w				
d					th					zh					wh				
n					f					j					y				
					v														

COMMENTS:

HEARING TEST

RETEST _____

0	125	250	500	750	1000	1500	2000	3000	4000	6000	8000
10											
20											
30											
40											
50											

COMMENTS:

PROJECT GENESIS
PRE-SCHOOL SCREENING
PSYCHOLOGICAL EVALUATION

(FACE SHEET)

FORM B

Child's Name: _____ Date: _____ Year _____ Month _____ Day _____
 Psychologist: _____ Born: _____
 School: _____ C.A.: _____
 Grade: _____ Session: _____ Teacher: _____ Room: _____

Scores on Form A: (circle) Passed 1 2 3 4 5
 Failed 1 2 3 4 5

Comments:

	DAP	Aud. Per.	Concept.	PPVT	Designs
PASS					
FAIL					

TESTS USED FOR PSYCHOLOGICAL SCREENING

ABC Inventory, by Norman Adair and George Blesch; 1965
Research Concepts
36176 Parkdale
Livonia, Michigan, 48150

Cognitive Abilities Test, Primary 1, Form 1, by Robert L. Thorndike, Elizabeth P. Hagen, and Irving Lorge; 1954
Houghton-Mifflin Company
53 West 43rd Street
New York, New York, 10036

Developmental Test of Visual-Motor Integration, by Keith E. Beery and Norman Buktenica; 1967
Follett Educational Corporation
1010 West Washington Boulevard
Chicago, Illinois, 60607

Goodenough, Florence L. "Measurement of Intelligence by Drawings"; 1926
World Book Company
New York, New York

Illinois Test of Psycholinguistic Abilities, experimental and revised forms, by Samuel A. Kirk, James F. McCarthy, and Winifred D. Kirk; 1968 (revised)
University of Illinois Press
Urbana, Illinois, 61801

Koppitz, Elizabeth M. "Psychological Evaluation of Children's Human Figure Drawings"; 1968
Grune and Stratton
New York, New York

Peabody Picture Vocabulary Test, Form A, by Lloyd M. Dunn; 1959
American Guidance Service, Inc.
Publishers' Building
Circle Pines, Minnesota, 55014

Stanford-Binet Intelligence Scale, (Form L-M) by Lewis M. Terman and Maud A. Merrill; 1960
Houghton-Mifflin Company
Boston, Massachusetts

Wechsler Preschool and Primary Scale of Intelligence
by David Wechsler; 1963
Psychological Corporation
304 East 45th Street
New York, New York, 10017

GENESIS PROGRAM

St. Clair Shores, Mich.

KINDERGARTEN PRE-SCHOOL DATA SHEET

CHILD'S NAME _____ BIRTH DATE _____
(last) (first) (middle)

SCHOOL _____ TEACHER _____ DATE _____

NAME AGE BIRTHDATE EDUCATION OCCUPATION

MOTHER

FATHER

OTHER
CHILDREN

1. Is your child looking forward to school? _____
2. Is this his first school experience? _____ or has he attended
nursery school? _____ church school? _____ other? _____
3. Is he able to: dress himself? _____ take care of personal needs? _____
feel comfortable about leaving mother or having her leave him? _____
4. Has he been away from parents for any length of time? _____
ie. travel, hospitalization, vacation, etc. _____
5. How is his general cooperation with members of the family? _____

6. Is there another person who cares for him part of the time? _____
How does your child react? _____
7. How does he get along with other children his age? _____
older than himself? _____ younger? _____
8. Does he play well by himself? _____
9. What special interests does he have? _____
10. What fears does he have? _____
ie. dogs, dark, thunder and lightning, bugs, crowds, etc.
11. What experiences has he had? Zoo _____ Farm _____ Library _____
Circus _____ Museum _____ Travel _____ To: _____
Other, ie. bakery, firehall, etc. _____
12. Does he visit away from home overnight? _____
13. Does he enjoy looking at books? _____ being read to? _____ Who reads
to him? _____
14. Does your child use crayons? _____ Paints? _____ Clay? _____
Scissors? _____ Blocks? _____ Other manipulative toys? _____
15. Has he shown any special interest in music? _____
16. What T.V. programs does he prefer? _____
17. Is there a foreign language spoken in the home? _____ by whom? _____
can the child speak the language? _____
18. Please check those of the following items which apply to your child
in order to help us better understand him and his needs.

Worries	_____	Self-conscious	_____	Easily discouraged	_____
Insecure	_____	Day Dreams	_____	Self confident	_____
Bold	_____	Generous	_____	Selfish	_____
Temper Outburst	_____	Enthusiastic	_____	Shy	_____
Easy going	_____	Indifferent	_____	Moody	_____
Care-free	_____	Careless	_____	Lazy	_____
Friendly	_____	Courteous	_____	Agressive	_____

19. What about your child is most pleasing to you? _____

20. What form of discipline do you find works best with your child?
 1e. spanking, isolation, denial of privileges, scolding, talking,
 rewards, encouraging, substituting another activity, avoiding
 over-fatigue, giving additional support or attention at
 different times.

22. Have you any questions about your child starting kindergarten at
 this time? _____

23. Is there any additional information you can give us about your child
 or his situation which will help us make his first year at school a
 pleasant and successful one? _____

DEVELOPMENTAL AND HEALTH HISTORY

1. During pregnancy: any bleeding? _____ Toxemia? _____ High Blood
 Pressure? _____
2. Birth: Full term? _____ Pre-mature? _____ Weight _____
3. Type of delivery (eg) forceps, caesarian, normal _____
4. Length of labor _____ hrs.
5. Oxygen at birth? _____ complications, if any _____
 (yes or no)
- _____
6. P.K.U. - Negative or Positive _____ Treatment _____
7. Adopted _____yes _____no; At what age _____ Does the child know of
 his adoption? _____

8. At what age did your child crawl? _____ walk? _____
9. At what age did your child use single words? _____ Sentences _____
10. At what age was he weaned? _____ Was weaning difficult? _____
11. Are there any current problems with regard to eating? Explain

12. At what age was he toilet trained for daytime? _____ night? _____
 Was this difficult? _____ Is he a bed wetter? _____ Regularly? _____
 If infrequently, approximately how often? _____
13. How long does he sleep at night? _____ Does he take naps? _____
 Does he go to sleep easily? _____ Does he have frequent nightmares
 or bad dreams? _____
14. Is he under medication now? _____ What? _____
15. Are there any speech defects? _____ Describe _____

16. Are there any nervous habits? _____ What? _____

17. Has he ever been referred for special help such as a child's
 Clinic? _____ Reason? _____
18. Has your child ever had any eye examination in a doctor's office? _____
 When? _____ Why? _____
19. Does your child wear glasses? _____ Name of eye doctor _____
 Family Physician _____
20. Have you, at any time, noticed signs which you thought might indicate
 eye difficulty? _____
21. When your child is ill or tired, do his eyes appear crossed or does
 one eye wander when he looks at an object? _____
22. Is your child free from difficulties such as sties, red lids, and
 watery eyes? _____

23. Is your child free from difficulties such as frowning, squinting, etc? _____
24. Has your child ever experienced convulsions? _____ Was this during another illness? _____
25. Has your child ever had a very high temperature? _____ When? _____
26. Has your child ever injured his head seriously? _____ Explain the circumstances and treatment needed. _____
27. Is there anything else about your child's development or health which you feel we should know? _____

COMPANIES THAT PRODUCE TEACHING MATERIALS
USED BY PROJECT GENESIS

American Guidance Service
Publications Building
Circle Pines, Minnesota

Peabody Language Development Kits

Developmental Learning Materials
3505 N. Ashland Avenue
Chicago, Ill. 60657

Pegboards
Pegboard Designs
Lacing Cards
Clear Stencils
Body Concept Ditto Masters
Shapes Puzzles
Colored Inch Cubes and Design Cards
Parquetry Puzzles and Design Cards
People Puzzles
Animal Puzzles
Association Cards
Buzzer Board

Educational Activities, Inc.
Freeport
Long Island, N.Y. 11520

RECORDS

Daily Sensorimotor Training Activities Handbooks
Primary Physical Fitness #14 Coordination Exercises
Music for Basic Movement #12
Listening and Moving
Rhythms and Basic Movement

Educational Record Sales
157 Chambers St.
New York, N.Y. 10007

Classroom Rhythms
Listening Skills for Pre-Readers
Let's Imagine Sounds

Encyclopedia Britannica Educational Corp.
Chicago, Ill. 60611

Language Experiences in Early Childhood

Follett Educational Corp.
1010 W. Washington Blvd.
Chicago, Ill.

Frostig Move, Grow, and Learn Program
Frostig Program for Developmental Visual Perception

General Learning Corp.
Early Learning Division
250 Tomes Street
Morristown, N.J. 07960

See-quees Puzzles

Ideal
11000 S. Lavergne Avenue
Oaklawn, Ill. 60543

Beads for Stringing
Form
Pyramid Puzzles
Perceptual Development Cards
Kaleidoscope Puzzles
Perceptual Development Cards

Instructo
1635 N. 55th St.
Philadelphia, Penn

My Face and Body Flannel Board
Opposite Concepts Flannel Board
Pupil Pack - Numerals and Counting Shape
Puppet Playmates
Stepping Stones - Alphabet Numbers

Kimbro Education Records
P.O. Box 55
Deal, N.J. 07723

Rhythmic Parachute Play (parachute and album)

Mafex Associates
111 Barron Avenue
Box 519
Johnstown, Pa. 15907

Tooti Launcher
Tooti Toss
Tooties
Manual of Perceptual Motor Activities,
A Guide for Elementary Physical Educators and
Classroom Teachers

Michigan Products
1200 Keystone Avenue
Lansing, Michigan

Nifty TV Viewer

Teaching Resources
100 Boylston St.
Boston, Mass. 02116

Directional Spatial Pattern Board
Directional Spatial Pattern Board Exercises
Perceptual Card and Domino Games
Dubnoff School Program
Fairbanks - Robinson Program
Form Puzzles
Association Cards
See and Say Puzzles
Configuration Cards
Pathway School Program
Auditory Discrimination in Depth

Winter Haven Lions Research
Lions Research Foundation, Inc.
Box 1045
Winter Haven, Fla.

Winter Haven Perceptual Program

GROUP TESTS USED FOR FINAL EVALUATION

- (CTMM) CALIFORNIA SHORT FORM OF MENTAL MATURITY
by Elizabeth T. Sullivan, Willis W. Clark,
and Ernest W. Tiegs (60 minutes)
California Test Bureau, McGraw-Hill Book Co.
Del Norte Research Park, Monterey, California
1963 S-Form Level 1 (1964 Norms)
- (MTR) METROPOLITAN READINESS TESTS
by Gertrude H. Hildreth, Nellie L. Griffiths,
and Mary E. McGauvran (60 minutes)
Harcourt, Brace and World, Inc.
757 Third Avenue, New York, New York 10017
Form A (1965 Revision)
- (STAP) SCREENING TEST FOR AUDITORY PERCEPTION
by Geraldine M. Himmel and Jack Wahl (45 minutes)
DeWitt Reading Clinic, Inc., Academic Therapy
Publications, San Rafael, California (1969)
- (VMI) DEVELOPMENTAL TEST OF VISUAL-MOTOR INTEGRATION
by Keith E. Beery and Norman Buktenica (15 minutes)
Pollett Publishing Co., Chicago, Illinois (1967)

NAME _____ AGE _____ YEARS _____ MONTHS

GRADE _____ TEACHER _____

PROJECT GENESIS
St. Clair Shores, Michigan

VISUAL SCREENING

PROCEDURE - with or without corrective lenses

V.A. Distance

	Refer Lower than	Low	Expected	High
R.	20/40	20/30-	20/30+	20/20
L.	20/40	20/30-	20/30+	20/20
Both	20/40	20/30-	20/30	20/20

V.A. Near (+ Lens at Distance)

R.	20/20	20/30	20/40	Lower
L.	20/20	20/30	20/40	Lower
Both	20/20	20/30	20/40	Lower

Rotations

R.	No	All	Eye	Smooth.
L.	Movement	Head	Movement	target,
Both		Involved	Only	Eyes onl

GROSS STATIC RETNOSCOPY:

O.D. _____

O.S. _____

Binocularity

Gross Peripheral Stereopsis (Stereo Tests)

Must touch fly	Fly Only	Passes ABC	Passes Stereo No. _____
----------------------	-------------	---------------	-------------------------------

NAME _____

Central Stereopsis

1. Gross Stereopsis (clown and balloon)

5 out 2 in Pass _____
Fail _____

2. Third degree fusion test #7 - Visual Survey Series

Refer Low Expected High

+ O ~~☆~~ O □ □ ♡ + ☆ + ♡ O

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BIBLIOGRAPHY

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Motor and Haptic Learning	Conceptual Learning
Auditory Learning	Memory
Visual Learning	Creativity
Verbal Learning	Aesthetics
Temporal Learning	Citizenship
Reading	Humanity

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Academic Therapy, dedicated to the interdisciplinary study and remediation of learning disabilities;
1543 Fifth Avenue
San Rafael, California, 94901
4 issues a year, \$4.00

Journal of Learning Disabilities, a multi-disciplinary journal focusing on all aspects of the learning disabled child;
5 N. Wabash Avenue
Chicago, Illinois, 60602
Monthly, \$7.00 a year

ASSOCIATIONS PRODUCING PUBLICATIONS DEALING WITH THE LEARNING DISABLED CHILD

Association for Children with Learning Disabilities (ACLD)
2200 Brownsville Road
Pittsburgh, Pennsylvania, 15210

California Association for Neurologically Handicapped Children (CANHC)
Literature Distribution Center
P. O. Box 790
Lamita, California, 90717

Council for Exceptional Children (CEC)
Division for Children with Learning Disabilities (DCLD)
1499 Jefferson Davis Highway
Jefferson Plaza, Suite 900
Arlington, Virginia, 22202

National Society for Crippled Children & Adults, Inc. (NSCCA)
2023 W. Ogden Avenue
Chicago, Illinois, 60612

New Jersey Association for Brain-Injured Children
Central New Jersey Station
61 Lincoln Street
East Orange, New Jersey

New York Association for Brain-Injured Children
305 Broadway
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