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ABSTRACT

The final report of the Garden Grove unified school district project for 1969 through 1972 (funded through Title III), involving six multiply handicapped, legally blind children, 7- to 10-years-old, who were previously excluded from special education (SE) classes is presented. Described as the main procedural objective is development of a self-contained classroom situation with low pupil-teacher ratio in a public school for children whose handicaps limit integration. Other objectives cited involve individual programs in physical education and mobility instruction, parental attitudinal changes toward their children's handicaps, teacher training and observation programs, and regular historical background, program scope, personnel, activities or services (in such areas as instructional materials used, budgetary considerations (average pupil cost is listed as \$1,453 for the 3 year period), and parent involvement (four teacher conferences yearly, and parent meetings). Suggested are steps for adapting a program for multihandicapped children. Given for each child are case histories, (with reports from the nurse, speech therapist, teacher, and psychologist) evaluation data concerning improvements, test results, and parent attitude assessment. Reported also are student volunteer activities and evaluations. The project is said to have met all objectives and will be locally funded the next year. (MC)

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E.S.E.A. TITLE III
PROJECT 0141
MULTIHANDICAPPED BLIND
GARDEN GROVE UNIFIED SCHOOL DISTRICT

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ESEA, Title III

ESEA TITLE III

PROJECT #0141

GARDEN GROVE UNIFIED SCHOOL DISTRICT

FINAL PROJECT REPORT

COMPONENTS I, II, AND III FOR FISCAL YEARS 1969-70, 1970-71, 1971-72

JUNE 30, 1972

FINAL PROJECT REPORT

ESEA, TITLE III

COMPONENT II

DATA FOR U.S. OFFICE OF EDUCATION

The report should describe project staff development activities that took place during the period July 1, 1971, through June 30, 1972. If no project staff development activities occurred, write NONE in the first column. Staff development activities are those inservice efforts designed to improve competencies of the staff working full or part-time on the project. Enter the figures in columns two and three.

STAFF DEVELOPMENT ACTIVITIES OF ONE OR MORE DAYS DURATION 1971-72					
(1) Definition of Staff: (Staff includes all personnel assigned to work on the project full or part time, whether paid by the district or the project.)	(2) Total No. of participants (Unduplicated) in all activities.	(3) No. of workshops, conferences and seminars held by type of training			
		Dissemination to spread information about project	Evaluation to appraise progress	Combination of dissemination & evaluation	Other, such as in-service education. Specify (Use back of this page.)
NONE →					

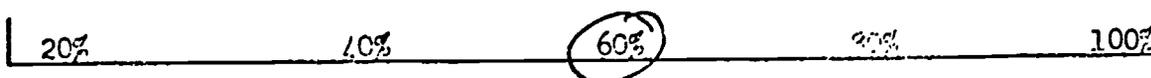
PART II - EXTENT OF ADOPTION/ADAPTION

1971-1972

The purpose of this section is to find out how many projects are being continued to some extent by the grantee or by other school districts after federal funds have expired.

The report should be limited to projects for which federal funds expired during the period July 1, 1971 through June 30, 1972. If the grantee district expects to continue the project to some extent during the next fiscal year, this should be reported by marking the box. The estimated extent of adoption or adaption by the grantee district should be shown by circling the appropriate percentage figure in the five point scale.

1. The project is being continued by the grantee in some form after federal funds expired. Yes No
2. If the answer is YES, draw a circle around the figure which represents your estimate of the degree of adoption/adaption of the project in your school district.



3. Is the project being adopted or adapted by other school districts?

Yes

No

4. If the answer is YES, list the school districts by name and address:

4.1 _____

4.11 _____

4.2 _____

4.12 _____

4.3 _____

4.13 _____

4.4 _____

4.14 _____

4.5 _____

4.15 _____

4.6 _____

4.16 _____

4.7 _____

4.17 _____

4.8 _____

4.18 _____

4.9 _____

4.19 _____

4.10 _____

4.20 _____

---PART III - EXTENT OF PARTICIPATION

1971-1972

The purpose of this part of the report is to find out the actual direct or indirect participation of public and private school pupils and adults in the project during the 1971-72 operational period.

Any participation should be reported only once. The count should be based on actual participation during the 1971-72 school year. The numbers are almost certain to be different from those anticipated in the project application.

The United States Office of Education definitions should be applied:

Direct Participation - Enter the number of different persons participating in activities involving face-to-face interaction of pupils and teachers (in case of in-service training, teachers and instructors) designed to produce learning, in a classroom, a center or mobile unit; or receiving other special services.

Indirect Participation - Enter the number of different persons visiting or viewing exhibits, demonstrations, museum displays; using materials or equipment developed or purchased by the project; attending performances of plays, symphonies, etc.; viewing television instruction in a school, a center, or home; or participating in other similar activities. Carefully prepared estimates are acceptable.

Elementary - For reporting purposes only, consider elementary as being Pre-Kindergarten through Grade 6.

Secondary - For reporting purposes only, consider secondary as being Grades 7 through 12.

Please supply the information requested for the project.

Item I

G. NUMBER OF PUBLIC AND NONPUBLIC SCHOOL STUDENTS, TEACHERS, AND COUNSELORS PARTICIPATING

SCHOOLS	DIRECT PARTICIPATION						INDIRECT PARTICIPATION					
	STUDENTS		TEACHERS		COUNSELORS		STUDENTS		TEACHERS		COUNSELORS	
	ELEMEN- TARY (a)	SECON- DARY (c)	ELEMEN- TARY (d)	SECON- DARY (e)	ELEMEN- TARY (f)	SECON- DARY (g)	ELEMEN- TARY (h)	SECON- DARY (i)	ELEMEN- TARY (j)	SECON- DARY (k)	ELEMEN- TARY (l)	SECON- DARY (m)
Public	0		6									
Nonpublic												

Item II Indicate how many of the above students are from rural/urban areas. Totals should equal the figures above.

Rural areas _____
(Farm or cities under 2,500 pop.)

Urban areas 8
(Cities over 2,500 pop.)

The total of these must equal b, elementary, c, secondary, from Item I above.

Provide number of non-professional staff directly involved in project.

Project for...	Less than half-time	Full time
Handicapped children		1
Regular elementary and secondary students		

Provide number of teachers who had training as a result of project and cost of training—count can be duplicated.

	Number	Cost of activity
Workshops (training meetings)		
Orientations		

For the above number, indicate how many participated in workshops lasting more than four weeks. _____.

Provide number of schools in project.

Elementary _____ 1 _____
Secondary _____

Provide number of non-certificated personnel who received training from the project and cost of training.

Number: _____ Cost of Training: \$ _____

Provide number of students participating in project activities in summer school in 1972 at the levels indicated.

Pre-kindergarten: _____
Kindergarten: _____ 1 _____
Other Elementary: _____ 4 _____
Secondary: _____

PART VI - PRODUCTS OF PROJECT

I Product(s) Developed	II Date mailed to Title III	III Annotations
<p>Curriculum guides</p> <p>Teacher guides</p> <p>Handbooks of materials, techniques, and procedures</p> <p>Monograph</p> <p>Bibliography</p> <p>Questionnaires - locally developed</p> <p>Evaluation tests</p> <p>Audio tape cassettes</p> <p>Brochures, newsletters and information sheets</p> <p>16 mm Films</p> <p>8 mm Films</p> <p>Filmstrips</p> <p>Instructional workbooks, materials, tests - locally developed</p> <p>Kits</p> <p>Models</p> <p>Microcards</p> <p>Microfilm</p> <p>Maps</p> <p>Pictures</p> <p>Posters</p> <p>Records</p> <p>Set</p> <p>Slides/tape</p> <p>Viewmasters</p> <p>Video Tape</p> <p>(Other)</p>	<p>7-10-72</p>	<p>Included in project</p> <p>Included in project</p>

FINAL PROJECT REPORT

ESEA, TITLE III

COMPONENT III

Program Narrative Report

CONTENTS

The Locale

1. What is the locale of the program?
2. What is the density of the population?
3. What are the population trends?
4. What are the major occupations of people in the locale?
5. What is the unemployment rate or trend?
6. What proportion of families in the locale are receiving welfare assistance?

THE LOCALE

1. The locale of the program is the Garden Grove Unified School District, in Orange County, California.
2. The density of the population within the twenty-seven square miles of the district is approximately 225,000.
3. The population trend has been a slowing of growth within the last few years, due to the economic cycle. However, several hundred new homes have been under construction since January, 1972.
4. Major occupations in the area are business, professional, skilled labor, construction and areo space.
5. The unemployment rate is 7.2%
6. The proportion of families in the locale who are receiving welfare assistance is approximately 6.8%.

The School System

1. What grade levels do the schools serve?
2. How many pupils are there in the school system? How many schools?
3. Are there any significant trends in the school system in enrollment, withdrawal, or transfer?
4. What is the per pupil cost of education in the school system?
5. What is the recent financial history of the school system?

THE SCHOOL SYSTEM

1. The school system serves grade levels from kindergarten through the twelfth grade, and adult education.
2. There are 51,500 day school students in seventy schools.
3. In the last four years, the enrollment has decreased 5,000 to its present level. However the current construction and sales of several hundred new homes within district boundaries indicates a forthcoming enrollment increase. Projected maximum enrollment is 65,000.
4. The per pupil cost of education is \$650.
5. The school district is a very low-wealth district. It is the eighth largest district in the state but ranks among the lowest of the twenty largest California districts in assessed valuation and in per pupil expenditure. The tax rate is \$4.78 and the 1971-72 budget is \$40,460,356.00. The district is heavily dependent upon federal and state funding to operate special programs and projects.

Needs Assessment

1. What was the starting point for needs assessment?
2. How were the specific needs of the pupils identified?
3. What were these specific needs? Which were selected for the program?

NEEDS ASSESSMENT

Records of medical, psychological, and educational examinations were obtained from the district of residence whenever possible. Students who had been enrolled in educational placements were observed by personnel of the Garden Grove Unified School District; additional information was obtained by discussions with former teachers, administrators, and parents. In some instances, it was impossible to acquire data from formal testing situations due to the severity of the handicaps involved and it was necessary to rely on the information obtained through interviews with those persons in direct contact with the children.

Seven (7) students were selected for the program and exhibited the following common needs:

- (a) Gross and fine motor coordination
- (b) Activities of Daily Living
- (c) Perception: Auditory, Visual, and Tactual
- (d) Language experiences
- (e) Development of academic skills
- (f) Orientation and mobility
- (g) Reduction of unacceptable behavioral mannerisms
- (h) Exposure to, and integration with, sighted peers

These students had either been refused entrance into any existing special education program in the area or had been enrolled in classes that were not designed to accomodate the variety of needs. The greatest need, therefore, was placement - placement in an educational setting.

Historical Background

1. Did the program exist prior to the time period covered in the present report?
2. Is the program a modification of a previously existing program?
3. How did the program originate?
4. If special problems were encountered in gaining acceptance of the program by parents and the community, how were these solved so that the program could be introduced?
5. Provide a brief history of planning. Indicate which planning efforts were successful or were not successful. Describe how non-profit private schools and other agencies were involved in the planning.

HISTORICAL BACKGROUND

Prior to the three (3) year period of funding by E.S.E.A., Title III, no public school program existed in Orange County which would permit enrollment of multi-handicapped blind children. Although many districts operated special education classes, none were suitable for visually handicapped individuals who possessed additional defects.

The program has been developed through the combination of elements of a resource room and of a self-contained class for the visually impaired. It became evident that certain students enrolled in resource programs were unable to function successfully without an increase in instructional time in the resource setting and a decrease in time involved in the regular classroom situation. However, these students were capable of minimal integration in regular classroom activities such as recess, lunch, music, art, stories, and so on. In the program for multi-handicapped blind, children have received all academic instruction in the self-contained setting and have been scheduled to be included in non-academic activities within the regular classrooms throughout the school. In some cases, no integration was possible due to the severe handicapping conditions and the need for constant supervision and direction.

During the two (2) years prior to the origination of this program, two (2) multi-handicapped blind students were enrolled in a resource room in the Garden Grove Unified School District. District personnel became aware of the need for a special program designed to meet the needs of these individuals rather than expecting them to become integrated with, and achieve at approximately the same rate as, their sighted peers. These students were not capable of receiving academic instruction in the large group environment of the regular classroom, but instead they required special individualized guidance.

No specific problems were encountered in gaining acceptance of this program by parents and the community. A resource room for the visually handicapped had been located in this school setting for several years prior to the multi-handicapped blind enrollment. The school population, parents, and surrounding community were most receptive to the new class and actively participated in donating new and used toys, games, and instructional materials.

Historical Background (continued)

The following efforts were made in order to plan for the initiation of a program for multi-handicapped blind students:

- (a) Two (2) students had been located in the program which was being operated on a resource basis.
- (b) District enrollment lists were reviewed for possible candidates.
- (c) Orange County Department of Education was contacted for possible candidates living within boundaries of other districts.
- (d) Basic physical, psychological, and educational data was reviewed by the teacher, Coordinator of Psychological Services, and the Administrator of Special Educational Services in the Garden Grove Unified School District.
- (e) Candidates were observed in their educational or clinical settings.
- (f) Parents of candidates were contacted and were interviewed with their children at a screening meeting attended by the Administrator of Special Educational Services, Coordinator of Psychological Services, Health Education Specialist, Principal of selected school, and the teacher.
- (g) Parents were notified of acceptance or rejection.
- (h) Parents were provided information regarding hours, school location, and the personnel involved.
- (i) Arrangements were made for transportation from home to school.
- (j) School commenced.

Parochial schools were invited to refer students for identification, screening and placement in the project, but sent letters indicating that they had no physically handicapped pupils to refer to the school district.

PROGRAM

Scope of the Program

1. What numbers and kinds of participants were served by the program?
2. What were the specified objectives of the program?

PROGRAM

Scope of the Program

A total of eight (8) students have participated in this program. Seven (7) entered in the fall of 1969, but at the completion of that school year the oldest student transferred to a Junior High School setting which provided her with instruction in a class for the educable mentally retarded as well as the services of a resource room for the visually handicapped. The remaining students have been enrolled in the program during the entire three (3) years, and one (1) additional child enrolled in the spring of 1972. The following chart indicates the handicaps which are functionally present at this time:

<u>Impairment</u>	<u>Quantity</u>
Legal Blindness	6
Partial Sightedness	1
Hearing	2
Mental Retardation	7
Emotional Disturbance	7
Language Disorders	7
Motor Deficiency	4

The "Project Objective" has been to provide, in a self-contained special classroom situation, a low pupil-teacher ratio in order to serve children whose primary handicap is vision and whose other impairments limit integration into the regular classroom. Additional specific objectives have been developed for each student enrolled in September, 1971 and are to be included in the section of the final report which pertains to Evaluation.

Personnel

1. What kinds and numbers of personnel were added by the program?
2. What were their most important duties and activities?
3. How much time did each type of personnel devote to these responsibilities?
4. What special qualifications suited personnel to the requirements of their jobs?
5. What special problems were dealt with in recruiting or maintaining staff?

PERSONNEL

An account is given below which indicates the kinds and numbers of personnel added by the program, their most important duties and activities, time devoted to these responsibilities, and qualifications which suited personnel to the requirements of their jobs.

Position	Number	Duties	Time	Qualifications
Consultants: EH teacher/ HH teacher MR teacher	3	1. Attend seminars 2. Consult with MH teacher	14 hrs/yr; 1st and 2nd yrs of project	1. Degrees and credentials as required by California State Department of Education 2. Employment in the GGUSD
Teacher Aide	1	1. Work with and supervise students 2. Prepare materials 3. File documents (All on direction of teacher)	Daily 6 hrs/day	1. Previous experience as a Teacher Aide 2. Attributes as may be specified for this position by the GGUSD Department of Classified Personnel
Evaluator	3	1. Collect data 2. Compile report 3. Attend seminars 4. Observe students	5 days per yr.	1. Expertise in education of exceptional children 2. Experience in evaluation of such programs
Psychologist	1	1. Test children 2. Observe children 3. Consult with children and parents 4. Attend seminars	1 day per wk	1. California credential in area of school psychology 2. Experience in working with and evaluating exceptional children

Personnel (continued)

No special problems were dealt with in recruiting or maintaining the consultants representing other exceptionalities or the teacher aide as all were, or had been, employed the the district prior to the initiation of the program for the multi-handicapped blind. It did become necessary to change evaluators, however, as problems of health, employment and scheduling interferred.

It should be noted that the following abbreviations have been used:

EH	Educationally Handicapped
HH	Hard of Hearing
MR	Mentally Retarded
GGUSD	Garden Grove Unified School District

Organizational Details

1. What is the period of time covered by your report?
2. How much of the entire program does this cover?
3. Where were program activities located?
4. What special physical arrangements were used in these locations?
5. What provisions, if any, were made for periodic review of the program?
6. What important decisions were made on the basis of such reviews?
7. What provisions, if any, were made for inservice training?

ORGANIZATIONAL DETAILS

The period of time covered by this report is from July 1 of 1969 to June 30 of 1972, a total of three (3) years, which covers the entire program. However, the majority of material pertains to the third, and final, year of the project.

All program activities have been located in the Garden Grove Unified School District in Garden Grove, California. The class for multi-handicapped blind children has been situated at the Agnes Ware Stanley Elementary School which houses regular classes from the kindergarten through the sixth grades. Arrangements were made so that the special class might be located in a kindergarten setting thus providing private toilet facilities, a private playground surrounded by fencing, and a small conference/work room. The school is relatively small in comparison to others in the district and thus enabled all of the faculty, staff, and students to know and better understand those enrolled in the special program.

-No provisions were made for periodic review of the program other than annual pupil progress reports with the exception of the yearly evaluation and application for continued funding. At these times the personnel involved reviewed the past years and recommended procedures for the future. Although minor revisions did result from these reviews, no major decisions were made.

One such revision involved the planning for the monthly seminars. At the onset of the project, and for the first two (2) years, the personnel attending the seminars included teachers representing other exceptionalities: educationally handicapped, hard of hearing, and the mentally retarded. These meetings would not be considered inservice training but did result in a sharing of ideas, methods, and materials as they related to each student. Following the two (2) year period, it was decided to eliminate the attendance of these special education teachers and to continue the seminars with the participation of persons directly involved with the students: the teacher, speech therapist, nurse, psychologist, adaptive physical education instructor, principal, special education administrator, and evaluator.

Activities or Services

1. What were the main activities (or services) in the program?
2. How were these activities (or services) related to specified program objectives?
3. What methods were used in carrying out each activity (or service)?
4. What was a typical day's or week's schedule of activities for the children (or others) who received the program?
5. How were pupils grouped for the various program activities?
6. What were teacher-pupil ratios (or aid-pupil, or adult-pupil, and so on) in each of these groupings?
7. How did pupils (or others) receive feedback on their individual daily progress?
8. How did parents receive feedback on their child's progress?
9. What amounts and kinds of practice, review, and quiz activities were provided for pupils (or others) in the program?
10. What special provisions were made for motivating pupils (or others)?
11. If a comparison group was used, what were important differences in the activities and methods used in this group and the activities and methods used with the program group?

ACTIVITIES OR SERVICES

The chart which follows provides information pertaining to the main activities, methods and materials, groupings, and adult-pupil ratios. The following abbreviations have been used: S = student, T = teacher, and A = aide.

Activity	Methods Materials	Grouping	Ratio
Motor Coordination	Adaptive P.E. & Classroom tasks: calisthenics, balance beam, skipping rope, body awareness, ball skills, running, jumping, hopping, etc.	by ability	1T or 1A/1-3S
Activities of Daily Living	Analyze process, record and consistently follow procedure: hand washing, toileting, combing, buttoning, etc.	Individual	1T or 1A1S
Perception: Auditory	----- Herr	----- according to hearing	1T/1-3S

Activities or Services (continued)

Activity	Methods Materials	Grouping	Ratio
Visual Tactual	Frostig "Touch and Tell" available from the American Printing House for the Blind	according to vision primarily for those who are totally blind	1T/1-4S 1T or 1A/1S
Language	Speech Therapy & Classroom activities: experience stories, sharing, verbalizing activities, building of vocabulary, puppetry, etc.	by ability	1T/1-2S (Speech Therapy on individual basis only)
Academics: Math Reading	SRA Greater Cleveland - Peabody Reading Rebus Ginn & Co. Series Open Court Various supplementary	by ability by ability	1T/1S 1T1-2S
Orientation and Mobility	Adaptive P.E. & Classroom activities: balance beam, body awareness, trailing, following auditory cues, walking with sighted guide, protective techniques, etc.	primarily for those who are totally blind on an individual basis	1T or 1A/1S

(Groupings and Ratios noted above are estimated and have varied throughout the program.)

Activities or Services (continued)

With few exceptions, all children received instruction in each of the areas noted under "Activities" although the amount and degree of difficulty varied according to abilities. The more pertinent needs of each student were selected as objectives to be measured and included in the evaluation of the project. Information pertaining to these is presented in the pages which follow.

A typical schedule, on a daily basis, would be as follows:

8:30	Flag Salute, Sharing
8:40	Reading, Spelling, Language, Visual Perception Manipulative activities, Tactual Perception
10:00	Adaptive Physical Education
10:40	Recess
10:50	Math
11:30	Lunch (Three (3) lunch periods were
11:45	Lunch maintained so that the MHB
12:10	Lunch students could participate with (Followed by Recess) those is regular classroom.
12:30	Music
1:00	Auditory Perception
1:30	Story, Art, Enrichment
2:00	Dismissal

Students were rewarded each time a task was successfully completed and were often alerted to the fact that growth had been made in various areas. Lessons were especially designed to be completed with success, new material was closely supervised, and little opportunity for error was allowed. Monthly teacher-made tests and "checks" were administered in order to determine areas of growth and weaknesses. Written, phone, and personal communication was maintained (in some cases on a daily basis) so that parents might be informed as to the development of their child and as to ways in which they might assist. Quarterly conferences provided an opportunity to discuss the children's development in depth, although conferences could be scheduled at any time during the year.

Special provisions for motivating students were based on a system of rewards. Toys, food, stars, happy faces, etc. were all employed and selected interests and level of functioning of each student.

Instructional Equipment and Materials

1. Were special materials developed or adapted for the program? How and by whom?
2. What other major items of equipment and materials did the program require? In what amounts?
3. How were key aids and materials used in connection with the various program activities?
4. If a comparison is being made between program and nonprogram persons, were there important differences between these groups in kinds and amounts of materials provided, or in methods of use?

INSTRUCTIONAL EQUIPMENT AND MATERIALS

All persons involved in the education of the visually handicapped are aware of the multitude of special materials that must be developed in order to accommodate the variety of needs. Many special materials have resulted during the three (3) years of this project and primarily fall into the categories of a) visual or tactual aids and b) paper/pencil tasks serving as follow-up assignments. The majority of the special materials have been prepared by the teacher aide upon the direction and guidance of the teacher.

Since several of the students were not capable of academic learning it was necessary to obtain a variety of materials which would provide opportunities for the development of motor coordination, encourage verbalization and the development of language, serve as positive reinforcers, and provide for the opportunity to experience the world through the remaining senses. Other students required a variety of materials, relating to specific academic skills, which ranged from textbooks to visual or tactual instructional aides. Through the Title III funding it was possible to purchase:

- 1 Electric Typewriter
- 1 Tape Recorder
- 1 Filmstrip Viewer
- 1 Auditory Trainer
- 1 Tumbling Mat

Miscellaneous Instructional Materials: the Frostig visual perception materials, the Peabody Rebus-Reading Program, a Pupil Record of Educational Behavior, a program for the development of auditory perception, and a variety of additional workbooks and supplies.

The visually handicapped students all received individualized programs designed to meet their specific needs. Students who were more capable received instruction in typing, those with hearing losses used the auditory trainer, all children used the tumbling mat daily during the physical education period, and those with vision enjoyed stories for enrichment and language experiences provided on the filmstrip viewer. The Peabody Rebus-Reading Program enabled two (2) students to become exposed to the reading process and to

Instructional Equipment and Materials (continued)

develop the primary skills involved in reading by use of the rebus form in a series of books which were prepared in large print, all students with remaining vision were tested in the area of visual perception and received instruction and completed tasks related to this, and records of education behavior were compiled.

The remaining materials, combined with the acquisition of ideas and supplies from other sources, enabled the teacher to choose the activities best suited to each student's needs and to adapt them as was deemed necessary. Changes, additions and deletions, were constantly being made in an effort to continually supply the student with the best possible learning materials.

No comparison was made between program and nonprogram persons.

Budget

1. From what sources were program funds obtained?
2. What was the total cost of the program?
3. What period of time was covered by these funds?
4. What is the per pupil cost of the program? What was the formula for computing this figure?
5. How does the per pupil cost of the program compare with the normal per pupil cost of the schools in the program?
6. Where can the reader get more detailed budget information?
7. Of the total cost of the program, give rough dollar estimates of developmental costs, implementation costs and operational costs.
8. Give the costs for the entire project period by budget categories (i.e., professional salaries, contracted services, etc.).

BUDGET

1. The project funds were obtained from ESEA, Title III.
2. The total cost of the three year project in Title III funds was \$ 29,069.00.
3. The project covered fiscal years 1969-70, 1970-71, and 1971-72.
4.

a. 1969-70 - per pupil cost -	\$ 1,279.00	(7 pupils)
b. 1970-71 - per pupil cost -	\$ 1,608.00	(6 pupils)
c. 1971-72 - per pupil cost -	\$ 1,468.00	(7 pupils)

The per pupil cost was computed by dividing the number of pupils enrolled annually into the annual budget figure. The average per pupil cost over the life of the project was \$ 1,453.00. This figure is based on project activities and services only, and does not include expenditures for the teacher's salary and related indirect costs.

5. The normal per pupil cost of students in the district program for Visually Handicapped is \$ 2,590.00. Since the Title III provided additional personnel, services, equipment and materials, the project per pupil cost would be in addition to the VH program per pupil cost.
6. More detailed budget information can be obtained from Lloyd Jones, Administrator, Special Educational Services, Garden Grove Unified School District, 10331 Stanford Avenue, Garden Grove, California 92640.
7. It is extremely difficult to give rough dollar estimates of developmental, implementation, and operational costs. When staff members are developing a project such as this, there is no effort made to keep a record of the time spent in actually writing the project, and it is especially unrealistic to expect that people will account for all of the formal and informal contacts, questions, conferences, telephone calls and myriad other details involved over the four years it takes to develop and implement a three year project. If an estimate must be given, the following figures are submitted with no attempt to verify their accuracy:

BUDGET (continued)

Development costs	\$ 1,500.00
Implementation costs	\$ 1,500.00
Operational costs	\$ 1,500.00

8. Total project costs for the three year period by category.

200 - Instruction

Professional salaries -	\$ 1,650.00
Non-professional salaries -	\$ 9,953.00
Contracted Services	\$ 1,500.00
Materials and supplies -	\$ 884.00
Travel -	\$ 886.00

400 - Health Services

Professional salaries -	\$ 9,735.00
Contracted services	\$ 1,574.50

800 - Fixed charges

Professional salaries	\$ 670.00
Non-professional salaries	\$ 1,293.00

1230 - Capital outlay

Equipment -	\$ 1,053.68
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Eight different pupils were involved in the project over the three year period, but no more than seven in any one year.

Parent-Community Involvement

1. What role, if any, did parents have in the program?
2. Were meetings held with parents? Why? How often?
3. What role, if any, did various community groups have in the program?
4. How was the community kept informed?
5. If problems with parents or the community affected the program, what steps, if any, were taken to remedy the situation?

PARENT-COMMUNITY INVOLVEMENT

Parents were constantly encouraged to communicate with the school in written form, via the telephone, or in person. Quarterly conferences were conducted with the parents at which time each was provided with a written summary regarding the development of their child. Two (2) of these conferences were held at the school, while the remaining meetings involved the teacher traveling to the home in order to confer with the parents. A parent group meeting was scheduled in the fall and in the spring during the second and third year of the project; the original plans were to schedule monthly group meetings, but this idea was modified after the first year. These meetings enabled the school personnel to become better acquainted with the parents and for the students to demonstrate some of the learning that had transpired; the video-tape, 8mm movie, and the students themselves provided some of the programs.

The Garden Grove Lions Club, Future Teachers of America, and the Parent-Teachers Association are examples of the various community groups has been included, however.

Residents within the attendance area of the school were invited to a viewing of the video-tape which had been prepared, the local newspaper covered (quite extensively) the class and its activities on two (2) separate occasions, and the district bulletins provided some coverage of the special class. Several community organizations invited personnel to attend their meetings at which time the 8mm movie and accompanying lecture were presented.

Special Factors

For use of potential adopters of the program:

1. What modifications of the program are possible?
2. What are the suggested steps in adopting this program?
3. What are some things others should avoid in adopting this program?
4. Can the program be phased in, beginning on a small scale? How?
5. Can parts of the program be adopted without taking the whole program?
What parts?

SPECIAL FACTORS

Although less than ideal, it would be possible to operate a similar program without the additional aspects noted below:

(a) Seminar:

Any existing program of this nature should include provisions for scheduled meetings of personnel who are directly involved with the students in order to insure consistent and sound communication. A seminar of special education teachers, representing the various fields, would be wise, although not a necessity provided the teacher has a broad background in the various exceptionalities.

(b) Psychologist:

It is imperative that a psychologist be available for testing and counseling, but it would not be necessary to schedule this individual for one (1) full day per week.

(c) Medical Consultant:

There is no absolute need for a medical consultant provided that a school nurse is available.

(d) Evaluator:

An evaluator would not be necessary if the program is not to be formally reviewed on a periodic basis for the purpose of special funding or renewal.

The following are the suggested basic steps in adopting a program for multi-handicapped children:

- (a) Obtain sufficient funding
- (b) Contract professional and non-professional services;
arrange schedules
- (c) Determine location of class, preferably in a regular school setting
- (d) Obtain all available medical, psychological, and educational data

Special Factors (continued)

- (e) Screen applicants
- (f) Select students; notify all parents of results
- (g) Obtain special materials and equipment
- (h) Arrange for transportation
- (i) Schedule in-service workshops for teachers who will participate in integration of handicapped students in regular classes
- (j) Enrolls students
- (k) Commence instruction
- (l) Arrange for the special teacher to speak with the regular classroom students regarding the new program and the need for such a class
- (m) Schedule parent conferences and meetings

It is assumed that, prior to initiating a program such as this, the need for the class has been established. It should be noted that items "i" and "l" are necessary if the teachers and students have never been involved with handicapped children.

In adopting a program such as this, it would be advisable to avoid the following:

- (a) Purchasing the limit of equipment and materials before working with and observing the children
- (b) Enrolling all students on the same day; it is suggested that enrollment be staggered in order to allow a few students at a time to become settled in the established routine
- (c) Allowing numbers of visitor to attend during the first few weeks of operation
- (d) Attempting to accommodate a wide range of ages and abilities

Whether or not this program can be phased in on a smaller scale would depend on state requirements for special education programs and the finances available. Some districts might wish to consider the following possibilities for phasing in a program of this nature, or for adopting parts of it:

- (a) Enroll a minimum of multi-handicapped students in a resource setting while allowing enough teacher time for the individual instruction and attention which will be necessary

Special Factors (continued)

- (b) Operate a self-contained class for visually handicapped and provide for the additional aspects noted above in order to provide for the multi-handicapped individual
- (c) Enroll multi-handicapped students, who are chronologically older but functionally at a pre-school level, in a nursery school setting for visually handicapped children

It is difficult to suggest further ways in which to begin a program on a smaller scale due to the fact that the Garden Grove program, itself, has been relatively small. It is hoped that others might expand on these ideas rather than to modify them.

Dissemination

Discuss how project information was disseminated during the past budget period.

1. Provide an estimate of the number of unsolicited requests for information from both within and outside the project area.
2. List the number of visitors from outside the project area.
3. Provide the cost of dissemination during the last budget period.
4. Provide the total cost of dissemination including prior budget periods (if possible).

DISSEMINATION

1. It is estimated that at least fifty unsolicited requests for information have been received from inside and outside the project area.
2. At least seventy-five individuals from outside the project area have visited the project.
3. Cost of dissemination during the last budget period was \$ 56.00.
4. Estimated total cost of dissemination of information regarding the project over the three year period was \$ 300.00. Most of this expense was absorbed by the school district, with only a few dollars in costs being charged to the project materials budget.

EVALUATIONChoosing Participants

1. How were the children and the adults in the program chosen?
2. How was a comparison group (if any) chosen?
3. Were participants in the program involved in other programs?
4. How many participants left the program?
5. Which participants left?
6. Were participants added to the program to replace dropouts?
7. Were there many participants who did not receive the program often because of poor attendance?
8. Did participants attend voluntarily?
9. Was the evaluation group only a portion of the program group?

Choosing Participants

1. Teacher Interest
2. No comparison group was chosen or used due to the very individual nature of the participants. These students were used as their own control group.
3. These participants were not involved in other programs than this one in the school.
4. One participant left the program
5. One girl left because of her age.
6. Yes
7. Not applicable
8. These students are far too handicapped to make many choices. However their morale was high and most now seem to enjoy attending school.
9. No

Describing Participants

1. Which participants received the program?
2. How many participants received the program?
3. What are the ages or grade levels of pupils in the program?
4. Did the program serve many more boys than girls, or vice versa?
5. What achievement scores were available before the program with which to describe the program group?
6. Are there other special characteristics you should mention in describing the program group?

Describing Participants

The children who have participated in this program are six multi-handicapped, legally blind children, ranging in ages from 7 to 10 years. These children have learning and learning disabilities that are overwhelming to contemplate. Because of their special characteristics they cannot be described as a group and due to the fact that they are of such small number each project participant is described separately as they were when they entered the program. Some of that description involves formalized test data. However, due to the severe handicaps involved it has been necessary to describe these children mainly in terms of their gross disfunctions. Some statistical data will be presented which represent positive change in each of these children. However, most of the changes must be described in narrative form. The changes described in narrative form represent the most significant data because the narrative has been prepared by the professional personnel who have supervised these children's learnings during the duration of the project. The facts being that most significant behavioral changes which have taken place in these children do not lend themselves to statistical analysis.

Essentially this evaluation will attempt to describe each of these children as they entered the program. Indicate what objectives were developed for each and changes that have taken place. Each student will be described before and after treatment, and most of that description must be in the form of various expert narratives rather than in numbers.

The Participants

CHRIS

(Nurse's Report)

Chris was refusing to cooperate with his teacher the morning the investigator first saw him. Although he has a severe hearing loss and poor communicative language, his actions clearly showed he wanted his own way. Chris wears dual hearing aids and corrective lenses. The slim, blond boy is easily distracted if a toy, crayon, or other object is nearby while he is doing his assignments.

Physical aspects: Chris was born on February 5, 1959. There was no health and development history given. His eye measurements, dated August 21, 1969 were:

Distant Vision, without correction

Right eye No vision

Left eye Counts fingers at ten feet

Distant Vision, with correction

Right eye No vision

Left eye 20/200

Near vision, with correction

Right and left eye had no report given

Near vision, corrected

Right eye No vision

Left eye Jaeger 5 at 14 inches

His eye diagnoses were reported as: right eye, thysis bulbae; left eye aphakia; both eyes, congenital cataract, at birth, rubella syndrome, A cataract was removed in 1950. The report did not list which eye had the surgery.

A hearing examination was done at John Tracy Clinic on January 7, 1963 when Chris was four years of age. He was classified as severely deaf in both ears. Unaided, his voice awareness threshold was 80 dB (decibels). Aided with a Zenigh Super-Extended Range, volume D-4 mold in the right ear, his voice awareness threshold was 50 dB. At age eight, the San Francisco Hearing and Speech Center saw him. The report gave his speech discrimination threshold at 55 dB for the right ear, and 65 dB for the left ear.

The latest hearing report recommending bilateral hearing aids which Chris now wears, was not on file. According to his foster mother, he is currently under care for his hearing problem at Children's Hospital Los Angeles. He has private speech therapy once a week at home.

Social aspects: Chris lives with foster parents who have renamed him and given him their last name. Mr. Girard operates a nursery school. His foster mother is a registered nurse. Both parents attended college; the combined income for the family averages from ten to sixteen thou-

17 dollars
sand, annually. Chris lives with seven other handicapped children. He is able to care for his personal hygiene and grooming, and has no feeding problems. Cars are his favorite toy, but he bicycles and plays on the trampoline for outdoor exercise.

Major handicaps: Chris is legally blind, is severely deaf, has distractibility, and problems of speech, language, and communication.

C
CHRIS (Speech Therapist statement)

9/69 No spontaneous speech, very few (0-5) intelligible words.

11/69 Receptial language as measured by the Peabody Vocabulary Test.

M.A. 2-1

5/70 ITPA CA 11-4 PLA 4-6

CHRIS (Teacher statement)

Chris has always been basically a pleasant child but has been subject to periods during which he would become obviously angered and disturbed. When situations were not to his liking, or on occasions when he did not understand how or why things occurred he would nearly reach the stage of a tantrum. Chris was considerably distractible and would be unable to attend to an academic task for more than a minute or two without playing with some little object nearby. He would insist on having little bits of clay, several pencils, or a small toy on his desk and would stop work periodically to rearrange them.

Chris exhibited virtually no ability or desire, to communicate by verbal means. Rather, he resorted to pantomime in order to express himself. He appeared to read but close observation revealed that there was little, if any word recognition and nearly zero comprehension. He was unable to match words with pictures which had been listed in "The Little Red Storybook," the first in a series of three pre-primers published by Ginn and company. Chris was able to count to 10 and select the appropriate numeral signifying the quantity and was able to complete the most basic and simplest of addition tasks.

CHRIS (Psychologist statement)

11/68 Can count to ten in sequence. Is at the pre *first* reading level

He can write his name.

LARRY (Nurse statement)

Larry, a Spanish-American boy, was first seen in the program trying to concentrate on a coloring paper. His actions displayed a short attention span. With each introduction of directions on the part of his teacher, he made an excuse to go to the bathroom. He clapped his hands and ran about the room. The statement he used time and again was, "I can't." This seven-year-old felt he could not do anything successfully.

Physical aspects: Born on March 18, 1962, Larry was of a full-term pregnancy. He weighed six pounds, three-fourths ounce. His eye condition (symptoms not given) was noted at six weeks of age. Eye surgery (type not reported) was done on the right eye. His eye measurements dated September 10, 1969, were: right eye with correction, 20/400; left eye with correction, light perception; both eyes, 20/400. The field of vision was impossible to evaluate.

His eye diagnoses were: right eye, secondary cataracts from birth, nystagmus; left eye, secondary cataracts from birth, nystagmus.

Larry has been under private medical care in addition to care at Orange County Medical Center. There was no record of a health and development history.

Social aspects: According to the social data given, the parents of Larry are in good health. The family lives in a rented home where Larry shares a room. He has one elder sister, eight years old. The father did not go to high school. He is employed as a truck driver earning from five to eight thousand dollars annually. Mrs. Hurtado completed high school and remains home as a housewife.

At home, Larry has learned to do most of his general hygiene, but has difficulty dressing himself, especially tying his shoes. Cars, trucks, and bicycles are his special interests. He bicycles for outdoor exercise. Larry's eating and sleeping habits are adequate. One difficulty in Larry's learning is probably due to the fact that Spanish is the only language spoken in the home.

Major handicaps: Larry is legally blind, has questionable mental retardation, has mild hyperactivity, and displays a short attention span.

LARRY (Psychologist statement)

9/69 Mildly mentally defective level of mental functioning. Arithmetic at the beginning kindergarden level.

LARRY (Teacher statement)

Larry entered the program after having spent two years in a kindergarden class in the regular classroom program. He had no confidence in himself and reacted to each new task with the response, "I can't do it." He displayed great difficulty in orienting himself to a page and required close supervision and assistance. He exhibited a tendency to begin in the middle, jump to the upper right, then bottom left, for example. He was unable to print his name, to recognize the letters in it, recognize numerals, know the basic color words, or to identify all of the basic colors. Following directions appeared to be extremely difficult and he would often be distracted by anything which fell into his range of vision or to sounds which might occur. His fine motor coordination revealed a need for development although his gross was relatively good considering the visual impairment.

Larry played well with other children but was reluctant to become integrated into regular classroom activities. For several days it was necessary for the teacher to walk, with Larry, to his destination on the campus so that he might participate in a first grade class for an enrichment activity.

STEVE (Nurse statement)

Steve was first met lying on the rug. His response to "Hello" was a repetitious, television talk of "Roger Mudd, Walter Cronkite." Sometimes Steve said "Broccoli." When speaking with only the investigator, Steve always used the words "What's stocking gee?" as if they were a personal message. This five-year-old boy wandered around the room, but did not communicate with others. He would not play outside or roll the ball; he preferred the floor or the large, soft chair.

Physical aspects: Born on June 15, 1964, Steve had a normal birth weighing seven pounds, three and one-half ounces. He was seen at the University of California at Los Angeles Hospital at eight months of age because he did not seem to see, and one eye was crossed. His U.C.L.A. records dated from February 18, 1965 to June 15, 1965, showed him as a normal baby other than his blindness. There was some delay of respirations at birth, and a seizure on day two, but none since. His electroencephalogram was normal for his age. A diagnosis was made of congenital blindness, nerve blindness, and optic hypoplasia of unknown etiology.

Social aspects: At home, Steve has his own room in the home owned by parents. He has one sibling, a brother, three years old. Mr. Campbell works in a supervisory capacity earning from eight to fifteen thousand dollars annually; Mrs. Campbell is a housewife. Hand-

washing, eating habits, going to the bathroom, and dressing are areas of difficulty for Steve. He goes to bed at 7:30 P.M. Music is his special interest. During the winter, he gets little outdoor exercise, but in the summer, he enjoys his wading pool. He eats well.

Major handicaps: Steve is totally blind, withdrawn, and has not been tested to obtain intelligence scores. He displays echolalia along with other speech and language problems. His walk is wobbly.

23

STEVE (Teacher statement)

When Steven entered the program for multi-handicapped blind in the fall of 1969 it was impossible to communicate verbally with him. He was totally echolalic and would parrot speech that he had heard primarily on television and radio. His most common responses were: "Roger Mudd, Walter Cronkite, Secret Storm, and weather forecast." His repertoire increased to include such phrases as: "Andy Williams records, broccoli, creepy-creepy," and so on. When asked simple questions such as, "What is your name" his response was "What is your name." His words appeared to be mechanical in nature.

Steve's coordination, both fine and gross, was extremely poor. His walk was awkward giving the impression that he could topple easily. He often sat cross-legged, with his head in his lap to the extent that his hair had actually been trained upward in front. He was not independent in any self-care skills and required assistance at every step.

Steve avidly refused any form of physical exertion. He preferred to slouch in an easy chair in the room but soon progressed to intermittent periods of rolling about on a large rubber ball. He did not like to go outside and would rebel with great gusto. When practically bodily carried out he would sit cross-legged on the pavement with his head in his lap refusing to walk or play with any children who advanced toward him.

STEVE (Speech Therapist statement)

9/69 Echolalia--no spontaneous or meaningful speech. Only meaningless repetition of words and phrases.

<u>4/70</u> <u>ITPA</u> CA 5-10	<u>Language Age</u>
Auditory reception	2-2
Auditory association	3-11
Auditory memory	4-10
Verbal expression	3-8
Auditory closure	5-6

STEVE (Psychologist statement)

8/69 Because lack of meaningful speech no formal evaluation of intellectual potential was possible.

MIKE (Nurse statement)

When meeting Mike for the first time, he came immediately to the investigator, hugged her, and pulled her along with him to the book on the shelf. He knew everyone's name, and monopolized the attention. Mike could not concentrate more than fifteen seconds on one action except when he was reading from a book. Although he has had no formal training he excels in reading all varieties of books, magazines, and even the encyclopedia.

Being loud, disturbing, and hyperactive, he needed constant attention. Perseveration was prevalent in all areas. Often, he seemed to be day-dreaming, such as when he would take a small toy, sail it in the air, then pause. He then dropped the toy, and went on to another activity.

Physical aspects: Born on June 22, Mike was a premature twin after a gestation period of six, and one-half months. His twin died. Mike's birth weight at eight days was two pounds, two ounces. He had anoxia at birth, but there were no known signs of other damages.

His eye measurements dated July 7, 1967 were: without correction, both eyes were unmeasurable; with correction, his right eye was 10/200. He has a prosthesis (artificial eye) for a left eye. His left eye was removed surgically because of a tumor. His eye diagnosis for his right eye was extreme myopia, congenital.

Mike has had no neurological examination. According to the Orange County Training School's record dated September 25, 1968, his growth and development have been slow in all areas, and he has been susceptible to pneumonia. On October 14, 1969, Mellaris, 20 mgm., three times daily, was prescribed to help control his hyperactivity.

Social aspects Both of Mike's parents work. His father is employed with a telephone company; his mother works as legal secretary. Both parents have had one year of college. They own a large home where Mike shares a bedroom. Three other brothers are in the home. At home, Mike can care himself except he has some difficulty in remembering to handwash. He has a regular bedtime hour, and gets outdoor exercise consisting of running and playing ball. According to his mother, his eating habits are good, his favorite foods being hot dogs, biscuits, and candy. Books are his specialty which he enjoys. His grandmother usually cares for him.

Major aspects: Mike is legally blind, displays hyperactivity, and according to standard psychological tests, is mentally retarded.

MIKE (Teacher statement)

Mike was extremely hyperactive upon entrance into the class. During the first few days most everything within reach was investigated and carried off to another location. He presented a great disturbance in the class as he often called out, wandered constantly, whined, and cried. He would grab belongings of others which inevitably led to confrontation of the parties involved. Despite the interferences noted above, Mike came to us with a phenomenal ability to read words yet there was no observable comprehension. He read haphazardly, jumping from one location to another on a page, or within a book. Mike's speech was often unrealistic or irrelevant, often having little if any meaning to the listener. Mike often preferred to be alone and would run out onto the playground, sit alone on the slide or or situate himself dreamily on the bench and stare at an object while twisting and turning it in front of his field of vision. Both fine and gross motor coordination were poor; Mike was able to run and walk awkwardly. He was unable to hold a crayon properly and his coloring consisted of thin, scribbly lines. There rarely appeared to be thought or pattern in what he produced.

Mike would play with the kindergarten children but would often display aggressive behavior although apparently sometimes unintentionally. Due to his visual impairment, he would often run into children and would often reach out for them, misjudge distance, and hit or bump them. He would become easily frightened, and he would often display periods of near hysteria.

MIKE (Speech Therapist statement)

9/69 Poor meaningful communication. Speech related primarily to what he wanted, such as food, toys or the like. Reading is mechanical. Poor memory functions.

11/69 Receptive language as measured by the Peabody Vocabulary

Test: M.A. 3-11

11/22 ITPA CA 8-3 PLA 5-6

MIKE (Psychologist statement)

9/67 Moderate level of mental retardation. Mike is at the mid-first grade level sight vocabulary in reading. Extreme hyperactivity and distractability.

VERONICA (Nurse statement)

When first observed in class, Veronica was lying on her side on the large rug in the classroom. In trying to get her to interact, her only response were verbal sounds similar to those made by a lonely puppy. This girl rocked and rolled. Even when she sat, her head was bowed.

Physical aspects: Veronica was a premature baby, born on July 17, 1960, after a seven-month gestation. She was one of twin girls. The other twin was normal. Veronica's parents have had no difficulty with subsequent pregnancies even though her mother is RH negative and her father is RH positive.

Medical reports were scant on Veronica, but one report (untitled) dated April 1, 1969, gave her birth weight as two pounds, six ounces. She had anoxia (lack of oxygen) after birth, and because she was so weak, she could not suck, she had to be fed with a nasal tube. Veronica is totally blind due to retrolental fibroplasia.

Social aspects: Veronica shares a room in a rented, three-bedroom home. She has four other sisters, one is her normal twin sister. The other siblings are younger. Her father earns an adequate salary as an electrician, and her mother remains home. With help and encouragement, she can care for her hygiene needs, but requires

help with toothbrushing and dressing. An area of difficulty for Veronica has to do with her eating habits. Food is prepared for her in bits because she chews only with her front teeth. Spiced foods are her favorites, and her mother reported that Veronica does not respond to the introduction of new foods. Outdoor exercise at home consists of riding her tricycle and swinging. She has regular sleeping habits. In an interview with Mrs. Stewart, she stated Veronica was much more active at home than in school, and that some of the sounds made by Veronica were intelligible.

Major handicaps: Totally blind, withdrawn, poor speech and language, little communication, questionable hearing and mentality.

VERONICA (Teacher statement)

Veronica was a hostile child, pinching or pushing anyone who attempted to approach her. She appeared to be a sad child who lived totally in her own little world. Her expressive vocabulary consisted of, at the most, two or three words. She would sit by the hour, if allowed to do so, and pound wooden blocks or metal templates on the tile floor. Additionally, she would be subject to curling up into a fetal position and withdrawing or stretching out on the floor and continuing to roll from one side of the carpet to the other. On rare occasions she would timidly walk about in order to explore the environment nearby. She required constant supervision, assistance, and motivation to perform the simplest of task. She refused to attempt speech, but rather resorted to unintelligible sounds.

When she was requested to go outside or to the office for speech therapy, for example, she would commonly display her temper by screaming, kicking, or simply by refusing to walk and sitting on the pavement.

Veronica was able to toilet herself, but occasionally required some assistance as was typical in most all areas of self-care. She was unable to move from one destination to another with thought or pattern and showed little, if any, response to directions; there was little

reaction to auditory clues. Veronica refused to use any eating utensils and would only nibble at slices of bread, meat, or some cookies which had been carefully prepared by her mother.

VERONICA (Speech Therapist)

9/69 No intelligible speech. Would not produce any sounds on demand.

VERONICA (Psychologist statement)

11/68 Behavior was withdrawn, hostile; would pinch or hit anyone who attempted to approach her. No intelligible speech.

SANDRA (Nurse statement)

When first observed, Sandy was quietly reading her book. Although she looked up, she did not respond to the introduction of the investigator. Her shoulders were slumped, and she appeared sleepy and sad.

Physical aspects: Born on October 24, 1960, Sandy was a breach delivery after a six-month gestation. Weighing three pounds at birth, she was placed in an incubator for two months. At two weeks, she had pneumonia.

Her eye measurements dated September 18, 1969 were:

Distant vision

	Without correction	With correction
Right eye	No light perception	Hand movements at one foot?
Left eye	5/200?	10/200
Both eyes	5/200?	10/200

Near vision

	Without correction	With correction
Right eye	Hand movements	Hand movements
Left eye	14/224?	Less than 14/224
Both eyes	10/200	Less than 14/224

Her eye diagnoses were reported as: right eye, retrolental fibroplasia, glaucoma, nystagmus, and cataract; left eye, retrolental fibroplasia with nystagmus.

A prescription was given for her glaucoma. She is checked every four months; her latest examination was June, 1969. Her prognosis is guarded.

Sandy's motor development has been below average, and she is subject to kidney infections. Her posture is poor because she leans forward. This position may help her to see her work.

Social aspects: Sandy has been recently adopted by her step-father, who is middle-aged and works as an aircraft fueler, earning between eight and fifteen thousand dollars annually. Four other children live in the home. Both parents have attended high school, but have had no further schooling. The mother does not work outside the home.

For Sandy, eating presents some difficulties; dolls are her favorite toys. She enjoys playing a toy chord organ. She is able to exercise adequately out-of-doors by riding her bicycle. Her older sister often cares for her.

Major handicaps: Sandy is legally blind, quiet, and withdrawn. She has a low intelligence, and is dependent.

SANDRA (Teacher statement)

Sandy was a dependent, withdrawn child who spoke in barely audible tones at times. On some occasions there would be no response, neither verbal or gestural, when addressed; she had to be encouraged to react to many social situations. Sandy is subject to chronic kidney infections and additionally occasionally complains of eye pain accompanied by headache.

In September of 1969, Sandy was able to complete all addition and subtraction facts to 10 and appeared to be able to complete column addition to totals of 10. She continued to exhibit difficulty in the comprehension of reading material and had forgotten nearly 50% of the vocabulary she had studied the previous spring. It was often necessary to repeat verbal directions for this student; she would often misinterpret written directions and require assistance in knowing how to attack tasks. Sandy had poor self-confidence and would often verbalize, what in her opinion was, an inability to attempt a variety of activities.

Sandy had great difficulty relating to children her own age. She either was totally dependent on them and would hang on them as would a child to a mother's apron, or she would be observed standing alone hanging her head as though totally rejected by herself and others. Sandy's posture is extremely poor, partially as result of the lack of vision and the need to bow her head and slump in order to see more easily. However, it has become a habit and she now maintains this posture even when there is no need to use her vision.

SANDRA (Psychologist statement)

11/68 Ability--slow learner range.

Achievement level--reading at mid-first grade.

Arithmetic--late first grade.

Measuring Changes

1. What measures were applied to find out whether the program's aims were achieved?
2. How were the measures matched to the objectives?
3. How were the measures matched to the pupils' capabilities?
4. Were observers specially trained?
5. How much time elapsed between testings?

MEASURING CHANGES

1. Before and After (December and April)

Each person with continuing responsibility to the children (teacher, psychologist, speech therapist, nurse, and physical education teacher) will prepare a descriptive statement about each child in which the child's entrance behavior is described. This should be done now and be available for discussion at the December 14 seminar meeting.

In April another statement will be prepared by the same people indicating the child's present status and bringing attention to particular areas of growth or weakness. In preparing this evaluation it should be kept in mind that we wish to provide enough information about the program so that it could be replicated.

In April parents will be asked to describe changes in their children's behavior over the last three years and that will become part of the narrative statement.

2. The teacher will administer Burks behavioral rating scale in December and April.

3. The teacher will keep a record of all visitors and volunteers. Each volunteer will be asked to evaluate his experience by the teacher. This must be done in some written form. The teacher should ask for a sentence or two that could be quoted in the evaluation narrative.

4. Each person directly concerned with the children and their parents will be asked to prepare a short narrative statement concerned with significant changes in parent attitude. This will be done in the first week of May.
5. Seminars will also be evaluated by narrative statement by the participants and by the evaluator who will be an observer at the seminar sessions.
6. The teacher will maintain a visitors register and keep track of all outside activities connected with the project.

INDIVIDUAL OBJECTIVES AND MEASURES TO BE TAKEN

1. Chris ^(cars)

- 1.1 To obtain some increase in verbal skills as reflected in increased vocabulary.

Evaluation: Speech therapist will administer appropriate pre and post tests.

- 1.2 To increase arithmetic skills.

Evaluation: Psychologist will administer WRAT as post test sometime in April. Pre test was given last year.

1.3 To increase interest in physical exercise by learning new activities and skills. The physical education teacher will prepare a narrative in which this child's interest and physical performance is described.

1.4 Improved speech and language.
Evaluation: Speech therapist will chart progress in these areas with the help of the anecdotal record. Completion date should be May 1.

2. MICHAEL

2.1 To increase the length of time Michael spends in individual activity. In December the teacher will time Mike's actions for three twenty minute periods for three consecutive days. The longest period of individual activity will serve as a base line. The teacher will retest in April. Any positive discrepancy, however small, will signal success in this objective.

2.2 To demonstrate growth in basic arithmetic skills. The psychologist will administer the WRAT. It will be compared with last year's results. The WRAT will be administered in April.

2.3 To improve his ability to verbally transmit an idea; and to improve his ability to organize the language. The evaluation

will be the speech therapist's interpretation of Mike's anecdotal records insofar as they refer to this particular objective.

2.4 To improve his ability to make body movements according to direction. No tests exist for this objective. Its evaluation will be left to the judgment of the physical education teacher. This judgment to be rendered in April. Perusal of the anecdotal record is suggested.

2.5 To speed up his reaction time in given exercises. The physical education teacher will chart Mike's present reaction time in December and again in April for comparison. Any gain will be considered significant.

2.6 To obtain a neurological examination by June 1972. Evaluation yes or no in June, 1972.

2.7 To improve his visual perception and motor ability. Teacher to test in December and retest in April, using Frostig.

3. LARRY

3.1 To improve in reading and arithmetic. Psychologist will test in April and comparisons will be made with scores on the same tests taken last year.

3.2 To improve visual perception and motor ability. (Same as 2.7)

3.3 To improve his physical strength and ability through exercise

and other physical education activities. Evaluation will be by the physical education teacher's perception. He will provide a narrative statement covering the attainment of these objectives.

4. SANDRA

- 4.1 Improve basic academic skills. Evaluation will be by the WRAT. The psychologist will test in April. Tests from last year will serve as a baseline.
- 4.2 To improve ability to participate in regular classroom activities. The evaluation will be by the teacher and will be part of the narrative statement in regards to this child.
- 4.3 Same as 2.7
- 4.4 Increase participation in physical activities. Evaluation will be by the perception of the physical education teacher and part of his narrative statement in this child's regard.
- 4.5 To improve hand-eye and hand-eye-foot coordination activities. Evaluation will be by the physical education teacher on a test retest basis, the results to be available in April.
- 4.6 To increase energy level by getting proper prescription from the medical profession and having parents act on this information. The nurse will report the results of her efforts in April.

5. STEVE

- 5.1. To improve auditory and tactual discrimination
Evaluation will be by the teacher on anecdotal records.
These will be perused in April for pertinent information and a narrative completed.
- 5.2 To increase verbal communication. Evaluation will be by the speech therapist using ITPA.
- 5.3 To improve mobility skills in trailing and walking with sighted guides. The teacher will evaluate these skills on appropriate rating scales. It will be part of this student's narrative.
- 5.4 To improve his bowel normalcy. Nurse will provide this data in April.
- 5.5 To improve his ability to relate and organize auditory symbols and express himself verbally. The speech therapist will administer the ITPA and interpret anecdotal records for this evaluation.
- 5.6 To improve evenness of gait. Physical education teacher will provide evaluative narrative in April.
- 5.7 To increase his physical activity. Evaluation will be by collective perceptions of the adults working directly with the child and a perusal of his anecdotal records.

5.8 To increase his leg strength. Evaluation will be by the physical education teacher on a test retest basis. Final evaluation will be by physical education in April.

6. VERONICA

6.1 To reduce hostile behavior. Evaluation will be by the perceptions of the adults directly associated with this child. Anecdotal records will be kept and perused in April.

6.2 Same as 5.3

6.3 To improve language development. The teacher will make a subjective judgment as to this development in April. Anecdotal records should be kept.

6.4 To improve physical strength. Evaluation will be on a test retest of physical strength to be given by the physical education teacher.

6.5 To improve dependable voicing. Speech therapist will evaluate this by her perception and careful survey of the anecdotal records.

Presenting Data

1. What data were obtained from the measures applied?
2. What measures of central tendency were used?
3. What measures of dispersion were used?
4. Include graphs and/or tables which present data more clearly.

Presenting Data

The data for this evaluation is mostly aimed at the individual objectives developed for these students with such atypical needs. However, there were some program objectives. That data is presented below:

The project was visited by 69 persons during the year from various parts of the state. The visitors were often college students and there were some teachers from other districts. Of the sixty-nine (69) visitors, twenty-two (22) were teachers and forty-seven (47) were college students.

The project was served by four (4) student volunteers. Each of the volunteers were evaluated by the teacher. According to the evaluations all of the volunteers worked well with the students. The evaluations follow.

EVALUATION OF STUDENT VOLUNTEERS

Name _____ Date November 30, 1971Service from 9 / 24 / 71 to 11 / 24 / 71 Total number of hours. 1/day
mo day yr mo day yr

Performance	Excellent	Good	Fair
1. Relates comfortably to children	x		
2. Exercises firm, kind control	x		
3. Follows teacher's instructions	x		
4. Arrives promptly on scheduled days	x		
5. Shows interest in the children	x		
6. Shows vocational interest in the program	x		
7. Assists in preparation of materials	Rarely requested; at that time of day her energies were better spent with children.		
8. Makes observant remarks	x		
9. Accepts suggestions	x		
10. Works well with others	x		

To the student volunteer:

1. Please rate your performance on each of these ten tasks. You will also be rated on the same tasks by the Teacher.
2. In the space below, please answer this question: What has this experience meant to you as a person?

Kathy has been of more value to us than probably any other volunteer. She is definitely considering this field as a future and is extremely perceptive.

EVALUATION OF STUDENT VOLUNTEERS

Name _____ Date 3/23/72Service from 9/ /71 to 2/ /72 Total number of hours. 40 min/day
mo day yr mo day yr

Performance	Excellent	Good	Fair
1. Relates comfortably to children		x	
2. Exercises firm, kind control		x	
3. Follows teacher's instructions		x	
4. Arrives promptly on scheduled days	x		
5. Shows interest in the children	x		
6. Shows vocational interest in the program	x		
7. Assists in preparation of materials			x
8. Makes observant remarks		x	
9. Accepts suggestions		x	
10. Works well with others		x	

To the student volunteer:

1. Please rate your performance on each of these ten tasks. You will also be rated on the same tasks by the Teacher.
2. In the space below, please answer this question: What has this experience meant to you as a person?

EVALUATION OF STUDENT VOLUNTEERS

Name _____ Date 5-9-72Service from 2 / 1 / 72 to Present Total number of hours. 1/2 day
mo day yr mo day yr

Performance	Excellent	Good	Fair
1. Relates comfortably to children	x		
2. Exercises firm, kind control	x		
3. Follows teacher's instructions	x		
4. Arrives promptly on scheduled days			x
5. Shows interest in the children	x		
6. Shows vocational interest in the program		x	
7. Assists in preparation of materials	Does not participate.		
8. Makes observant remarks	x		
9. Accepts suggestions	x		
10. Works well with others	x		

To the student volunteer:

1. Please rate your performance on each of these ten tasks. You will also be rated on the same tasks by the Teacher.
2. In the space below, please answer this question: What has this experience meant to you as a person?

This has been an interesting experience for Alex. Blind himself, he has had an opportunity to work with children who are blind but who are different from any he's even known.

EVALUATION OF STUDENT VOLUNTEERS

Name _____ Date 5-9-72Service from 9 / 15 / 71 to Present Total number of hours. 1/2 day
mo day yr mo day yr

Performance	Excellent	Good	Fair
1. Relates comfortably to children	x		
2. Exercises firm, kind control	x		
3. Follows teacher's instructions	x		
4. Arrives promptly on scheduled days		x	
5. Shows interest in the children	x		
6. Shows vocational interest in the program	x		
7. Assists in preparation of materials			Does not participate.
8. Makes observant remarks		x	
9. Accepts suggestions	x		
10. Works well with others	x		

To the student volunteer:

1. Please rate your performance on each of these ten tasks. You will also be rated on the same tasks by the Teacher.
2. In the space below, please answer this question: What has this experience meant to you as a person?

Steve has been extremely helpful to us. He is a wonderful example for our children and particularly for the boys. He has not been as regular in attendance during this spring as he has become actively involved in student body work.

All students were administered the Burks behavioral rating scale in December and April. The pre and post ratings are presented below. The mean scores appear at the bottom of each sheet and behavioral improvement is indicated for each student.

PUPIL BEHAVIOR RATING SCALE

Name of Child CHRIS 4/28/72

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

1. Seemingly not affected by extremes of hot or cold.
2. Poor coordination in large muscle activities (games, etc.)
3. Confusion in spelling and writing (jumbled).
4. Inclined to become confused in number processes; gives illogical responses.
5. Reading is poor.
6. Hyperactive and restless.
7. Behavior goes in cycles.
8. Quality of work may vary from day to day.
9. Daydreaming alternating with hyperactivity.
10. Excessively meticulous, exacting, formalistic or pedantic.
11. Erratic, flighty or scattered behavior.
12. Lacks a variety of responses, repeats himself in many situations.
13. Easily distracted, lacks continuity of effort and perseverance.
14. Cries often and easily.
15. Explosive and unpredictable behavior.
16. Often more confused by punishment.
17. Upset by changes in routine.
18. Confused in following directions.
19. Tends to be destructive; especially of the work of others.
20. Demands much attention.
21. Many evidences of stubborn uncooperative behavior.
22. Often withdraws quickly from group activities; prefers to work by self.
23. Cannot seem to control self (will speak out or jump out of seat, etc.).
24. Constant difficulty with other children and/or adults (apparently purposeless).
25. Shallow feeling for others.
26. Seems generally unhappy.
27. Confused and apprehensive about rightness of response; indecisive.
28. Often tells bizarre stories.
29. Classroom comments are often off the track or peculiar.
30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
X					
		X			
		X			
		X			
			X		
X					
X					
		X			
X					
X					
X					
X					
X					
X					
		X			
X					
X					
X					
		X			
X					
X					
		X			
X					
X					
		X			
X					
X					
		X			

$$\bar{X} = 1.344$$

PUPIL BEHAVIOR RATING SCALE

Name of Child CHRIS 12/7/71

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

1. Seemingly not affected by extremes of hot or cold.
2. Poor coordination in large muscle activities (games, etc.)
3. Confusion in spelling and writing (jumbled).
4. Inclined to become confused in number processes; gives illogical responses.
5. Reading is poor.
6. Hyperactive and restless.
7. Behavior goes in cycles.
8. Quality of work may vary from day to day.
9. Daydreaming alternating with hyperactivity.
10. Excessively meticulous, exacting, formalistic or pedantic.
11. Erratic, flighty or scattered behavior.
12. Lacks a variety of responses, repeats himself in many situations.
13. Easily distracted, lacks continuity of effort and perseverance.
14. Cries often and easily.
15. Explosive and unpredictable behavior.
16. Often more confused by punishment.
17. Upset by changes in routine.
18. Confused in following directions.
19. Tends to be destructive; especially of the work of others.
20. Demands much attention. (Supervision - yes)
21. Many evidences of stubborn uncooperative behavior.
22. Often withdraws quickly from group activities; prefers to work by self.
23. Cannot seem to control self (will speak out or jump out of seat, etc.).
24. Constant difficulty with other children and/or adults (apparently purposeless).
25. Shallow feeling for others.
26. Seems generally unhappy.
27. Confused and apprehensive about rightness of response; indecisive.
28. Often tells bizarre stories.
29. Classroom comments are often off the track or peculiar.
30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
X					
			X		
			X		
			X		
				X	
	X				
	X				
			X		
X					
X					
X					
X					
		X			
X					
X					
X					
X					
			X		
X					
X					
			X		
X					
	X				

$$\bar{X} = 1.633$$

PUPIL BEHAVIOR RATING SCALE

Name of Child LARRY 4/28/72

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

- 1. Seemingly not affected by extremes of hot or cold.
- 2. Poor coordination in large muscle activities (games, etc.)
- 3. Confusion in spelling and writing (jumbled).
- 4. Inclined to become confused in number processes; gives illogical responses.
- 5. Reading is poor.
- 6. Hyperactive and restless.
- 7. Behavior goes in cycles.
- 8. Quality of work may vary from day to day.
- 9. Daydreaming alternating with hyperactivity.
- 10. Excessively meticulous, exacting, formalistic or pedantic.
- 11. Erratic, flighty or scattered behavior.
- 12. Lacks a variety of responses, repeats himself in many situations.
- 13. Easily distracted, lacks continuity of effort and perseverance.
- 14. Cries often and easily.
- 15. Explosive and unpredictable behavior.
- 16. Often more confused by punishment.
- 17. Upset by changes in routine.
- 18. Confused in following directions.
- 19. Tends to be destructive; especially of the work of others.
- 20. Demands much attention.
- 21. Many evidences of stubborn uncooperative behavior.
- 22. Often withdraws quickly from group activities; prefers to work by self.
- 23. Cannot seem to control self (will speak out or jump out of seat, etc.).
- 24. Constant difficulty with other children and/or adults (apparently purposeless).
- 25. Shallow feeling for others.
- 26. Seems generally unhappy.
- 27. Confused and apprehensive about rightness of response; indecisive.
- 28. Often tells bizarre stories.
- 29. Classroom comments are often off the track or peculiar.
- 30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
X					
X					
			X		
	X				
				X	
		X			
		X			
		X			
X					
X					
X					
X					
X					
X					
X					
X					
		X			
X					
X					
X					
		X			
		X			
X					
X					
X					

$\bar{X} = 1.413$

PUPIL BEHAVIOR RATING SCALE

Name of Child LARRY 12/7/71

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

1. Seemingly not affected by extremes of hot or cold.
2. Poor coordination in large muscle activities (games, etc.)
3. Confusion in spelling and writing (jumbled).
4. Inclined to become confused in number processes; gives illogical responses.
5. Reading is poor.
6. Hyperactive and restless.
7. Behavior goes in cycles.
8. Quality of work may vary from day to day.
9. Daydreaming alternating with hyperactivity.
10. Excessively meticulous, exacting, formalistic or pedantic.
11. Erratic, flighty or scattered behavior.
12. Lacks a variety of responses, repeats himself in many situations.
13. Easily distracted, lacks continuity of effort and perseverance.
14. Cries often and easily.
15. Explosive and unpredictable behavior.
16. Often more confused by punishment. (Rarely Necessary)
17. Upset by changes in routine.
18. Confused in following directions.
19. Tends to be destructive; especially of the work of others.
20. Demands much attention. (supervision - yes)
21. Many evidences of stubborn uncooperative behavior.
22. Often withdraws quickly from group activities; prefers to work by self.
23. Cannot seem to control self (will speak out or jump out of seat, etc.).
24. Constant difficulty with other children and/or adults (apparently purposeless).
25. Shallow feeling for others.
26. Seems generally unhappy.
27. Confused and apprehensive about rightness of response; indecisive.
28. Often tells bizarre stories.
29. Classroom comments are often off the track or peculiar.
30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
X					
X					
					X
			X		
					X
		X			
		X			
		X			
X					
X					
X					
		X			
X					
X					
			X		
X					
X					
			X		
		X			
X					
X					
		X			
			X		
X					
X					
		X			

$$\bar{X} = 1.7$$

PUPIL BEHAVIOR RATING SCALE

Name of Child STEVE 4/28/72

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

1. Seemingly not affected by extremes of hot or cold.
2. Poor coordination in large muscle activities (games, etc.)
3. Confusion in spelling and writing (jumbled).
4. Inclined to become confused in number processes; gives illogical responses.
5. Reading is poor.
6. Hyperactive and restless.
7. Behavior goes in cycles.
8. Quality of work may vary from day to day.
9. Daydreaming alternating with hyperactivity.
10. Excessively meticulous, exacting, formalistic or pedantic.
11. Erratic, flighty or scattered behavior.
12. Lacks a variety of responses, repeats himself in many situations.
13. Easily distracted, lacks continuity of effort and perseverance.
14. Cries often and easily.
15. Explosive and unpredictable behavior.
16. Often more confused by punishment.
17. Upset by changes in routine.
18. Confused in following directions.
19. Tends to be destructive; especially of the work of others.
20. Demands much attention.
21. Many evidences of stubborn uncooperative behavior.
22. Often withdraws quickly from group activities; prefers to work by self.
23. Cannot seem to control self (will speak out or jump out of seat, etc.).
24. Constant difficulty with other children and/or adults (apparently purposeless).
25. Shallow feeling for others.
26. Seems generally unhappy.
27. Confused and apprehensive about rightness of response; indecisive.
28. Often tells bizarre stories.
29. Classroom comments are often off the track or peculiar.
30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
		X			
				X	
			X		
X					
		X			
		X			
X					
X					
X					
			X		
				X	
		X			
		X			
		X			
		X			
				X	
X					
X					
			X		
				X	
		X			
			X		
					X

$\bar{X} = 2.296$

PUPIL BEHAVIOR RATING SCALE

Name of Child STEVE 12/7/71

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

1. Seemingly not affected by extremes of hot or cold. Little response.
2. Poor coordination in large muscle activities (games, etc.)
3. Confusion in spelling and writing (jumbled).
4. Inclined to become confused in number processes; gives illogical responses.
5. Reading is poor.
6. Hyperactive and restless. Withdrawn.
7. Behavior goes in cycles.
8. Quality of work may vary from day to day.
9. Daydreaming alternating with hyperactivity. (no hyperactivity)
10. Excessively meticulous, exacting, formalistic or pedantic.
11. Erratic, flighty or scattered behavior.
12. Lacks a variety of responses, repeats himself in many situations.
13. Easily distracted, lacks continuity of effort and perseverance.
14. Cries often and easily.
15. Explosive and unpredictable behavior.
16. Often more confused by punishment.
17. Upset by changes in routine.
18. Confused in following directions.
19. Tends to be destructive; especially of the work of others.
20. Demands much attention.
21. Many evidences of stubborn uncooperative behavior.
22. Often withdraws quickly from group activities; prefers to work by self.
23. Cannot seem to control self (will speak out or jump out of seat, etc.).
24. Constant difficulty with other children and/or adults (apparently purposeless).
25. Shallow feeling for others.
26. Seem generally unhappy.
27. Confused and apprehensive about rightness of response; indecisive.
28. Often tells bizarre stories. Difficulty relating.
29. Classroom comments are often off the track or peculiar.
30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
		X			
				X	
				X	
X					
		X			
		X			
X					
X					
X					
				X	
				X	
		X			
		X			
		X			
		X			
				X	
X					
X					
			X		
		X			
X					
				X	
				X	
					X

$\bar{X} = 2.428$

PUPIL BEHAVIOR RATING SCALE

Name of Child MIKE 4/28/72

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

- 1. Seemingly not affected by extremes of hot or cold.
- 2. Poor coordination in large muscle activities (games, etc.)
- 3. Confusion in spelling and writing (jumbled).
- 4. Inclined to become confused in number processes; gives illogical responses.
- 5. Reading is poor.
- 6. Hyperactive and restless.
- 7. Behavior goes in cycles.
- 8. Quality of work may vary from day to day. Fluctuates w/eye.
- 9. Daydreaming alternating with hyperactivity.
- 10. Excessively meticulous, exacting, formalistic or pedantic.
- 11. Erratic, flighty or scattered behavior.
- 12. Lacks a variety of responses, repeats himself in many situations.
- 13. Easily distracted, lacks continuity of effort and perseverance.
- 14. Cries often and easily.
- 15. Explosive and unpredictable behavior.
- 16. Often more confused by punishment.
- 17. Upset by changes in routine.
- 18. Confused in following directions.
- 19. Tends to be destructive; especially of the work of others.
- 20. Demands much attention.
- 21. Many evidences of stubborn, uncooperative behavior.
- 22. Often withdraws quickly from group activities; prefers to work by self.
- 23. Cannot seem to control self (will speak out or jump out of seat, etc.).
- 24. Constant difficulty with other children and/or adults (apparently purposeless).
- 25. Shallow feeling for others.
- 26. Seems generally unhappy.
- 27. Confused and apprehensive about rightness of response; indecisive.
- 28. Often tells bizarre stories.
- 29. Classroom comments are often off the track or peculiar.
- 30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
		X			
					X
		X			
		X			
X					
			X		
				X	
				X	
			X		
				X	
			X		
		X			
		X			
		X			
X					
			X		
		X			
X					
		X			
		X			
		X			
			X		
		X			
			X		
					X

$\bar{x} = 2.6$

PUPIL BEHAVIOR RATING SCALE

Name of Child MIKE 12/7/71

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

- 1. Seemingly not affected by extremes of hot or cold.
- 2. Poor coordination in large muscle activities (games, etc.)
- 3. Confusion in spelling and writing (jumbled).
- 4. Inclined to become confused in number processes; gives illogical responses.
- 5. Reading is poor.
- 6. Hyperactive and restless.
- 7. Behavior goes in cycles.
- 8. Quality of work may vary from day to day.
- 9. Daydreaming alternating with hyperactivity.
- 10. Excessively meticulous, exacting, formalistic or pedantic.
- 11. Erratic, flighty or scattered behavior.
- 12. Lacks a variety of responses, repeats himself in many situations.
- 13. Easily distracted, lacks continuity of effort and perseverance.
- 14. Cries often and easily.
- 15. Explosive and unpredictable behavior.
- 16. Often more confused by punishment.
- 17. Upset by changes in routine.
- 18. Confused in following directions.
- 19. Tends to be destructive; especially of the work of others.
- 20. Demands much attention.
- 21. Many evidences of stubborn uncooperative behavior. Teasing.
- 22. Often withdraws quickly from group activities; prefers to work by self.
- 23. Cannot seem to control self (will speak out or jump out of seat, etc.).
- 24. Constant difficulty with other children and/or adults (apparently purposeless).
- 25. Shallow feeling for others. Lack of understanding.
- 26. Seems generally unhappy.
- 27. Confused and apprehensive about rightness of response; indecisive.
- 28. Often tells bizarre stories.
- 29. Classroom comments are often off the track or peculiar.
- 30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
		X			
					X
		X			
			X		
X					
				X	
					X
			X		
					X
			X		
				X	
			X		
		X			
		X			
		X			
X					
				X	
		X			
X					
			X		
		X			
		X			
X					
				X	
		X			
		X			
					X

$\bar{x} = 3.814$

PUPIL BEHAVIOR RATING SCALE

Name of Child VERONICA 4/28/72

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

- 1. Seemingly not affected by extremes of hot or cold.
- 2. Poor coordination in large muscle activities (games, etc.)
- 3. Confusion in spelling and writing (jumbled).
- 4. Inclined to become confused in number processes; gives illogical responses.
- 5. Reading is poor.
- 6. Hyperactive and restless.
- 7. Behavior goes in cycles.
- 8. Quality of work may vary from day to day.
- 9. Daydreaming alternating with hyperactivity.
- 10. Excessively meticulous, exacting, formalistic or pedantic.
- 11. Erratic, flighty or scattered behavior.
- 12. Lacks a variety of responses, repeats himself in many situations.
- 13. Easily distracted, lacks continuity of effort and perseverance.
- 14. Cries often and easily.
- 15. Explosive and unpredictable behavior.
- 16. Often more confused by punishment.
- 17. Upset by changes in routine.
- 18. Confused in following directions.
- 19. Tends to be destructive; especially of the work of others.
- 20. Demands much attention.
- 21. Many evidences of stubborn uncooperative behavior.
- 22. Often withdraws quickly from group activities; prefers to work by self.
- 23. Cannot seem to control self (will speak out or jump out of seat, etc.).
- 24. Constant difficulty with other children and/or adults (apparently purposeless).
- 25. Shallow feeling for others.
- 26. Seems generally unhappy.
- 27. Confused and apprehensive about rightness of response; indecisive.
- 28. Often tells bizarre stories.
- 29. Classroom comments are often off the track or peculiar.
- 30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
				X	
				X	
					X
		X			
			X		
				X	
	X				
	X				
		X			
		X			
		X			
				X	
		X			
X					
		X			
					X
				X	
X					
			X		
		X			

$\bar{X} = 2.666$

PUPIL BEHAVIOR RATING SCALE

Name of Child VERONICA 12/7/71

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

1. Seemingly not affected by extremes of hot or cold.
2. Poor coordination in large muscle activities (games, etc.)
3. Confusion in spelling and writing (jumbled).
4. Inclined to become confused in number processes; gives illogical responses.
5. Reading is poor.
6. Hyperactive and restless. Many nervous mannerisms.
7. Behavior goes in cycles.
8. Quantity of work may vary from day to day.
9. Daydreaming alternating with hyperactivity.
10. Excessively meticulous, exacting, formalistic or pedantic.
11. Erratic, flighty or scattered behavior.
12. Lacks a variety of responses, repeats himself in many situations.
13. Easily distracted, lacks continuity of effort and perseverance.
14. Cries often and easily.
15. Explosive and unpredictable behavior.
16. Often more confused by punishment.
17. Upset by changes in routine.
18. Confused in following directions.
19. Tends to be destructive; especially of the work of others.
20. Demands much attention.
21. Many evidences of stubborn uncooperative behavior.
22. Often withdraws quickly from group activities; prefers to work by self.
23. Cannot seem to control self (will speak out or jump out of seat, etc.). Chatters.
24. Constant difficulty with other children and/or adults (apparently purposeless). Pinching/Reaching out.
25. Shallow feeling for others.
26. Seems generally unhappy.
27. Confused and apprehensive about rightness of response; indecisive.
28. Often tells bizarre stories.
29. Classroom comments are often off the track or peculiar.
30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
				X	
			X		
					X
		X			
			X		
			X		
	X				
		X			
					X
X					
X					
	X				
	X				
	X				
					X
					X
	X				
			X		
			X		
					X

Learning how to touch gently.

$\bar{X} = 3.12$

PUPIL BEHAVIOR RATING SCALE

Name of Child SANDY 4/28/72

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

1. Seemingly not affected by extremes of hot or cold.
2. Poor coordination in large muscle activities (games, etc.)
3. Confusion in spelling and writing (jumbled).
4. Inclined to become confused in number processes; gives illogical responses.
5. Reading is poor.
6. Hyperactive and restless.
7. Behavior goes in cycles.
8. Quality of work may vary from day to day.
9. Daydreaming alternating with hyperactivity.
10. Excessively meticulous, exacting, formalistic or pedantic.
11. Erratic, flighty or scattered behavior.
12. Lacks a variety of responses, repeats himself in many situations.
13. Easily distracted, lacks continuity of effort and perseverance.
14. Cries often and easily.
15. Explosive and unpredictable behavior.
16. Often more confused by punishment.
17. Upset by changes in routine.
18. Confused in following directions.
19. Tends to be destructive; especially of the work of others.
20. Demands much attention.
21. Many evidences of stubborn uncooperative behavior.
22. Often withdraws quickly from group activities; prefers to work by self.
23. Cannot seem to control self (will speak out or jump out of seat, etc.).
24. Constant difficulty with other children and/or adults (apparently purposeless).
25. Shallow feeling for others.
26. Seems generally unhappy.
27. Confused and apprehensive about rightness of response; indecisive.
28. Often tells bizarre stories.
29. Classroom comments are often off the track or peculiar.
30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
X					
			X		
	X				
	X				
		X			
	X				
	X				
X					
X					
X					
X					
		X			
X					
X					
X					
X					
			X		
X					
		X			
		X			
			X		
				X	
X					
		X			
			X		
				X	
X					
		X			
				X	

$$\bar{X} = 1.866$$

PUPIL BEHAVIOR RATING SCALE

Name of Child 'SANDY 12/7/71

Please rate each statement by putting an X in the appropriate square after the statement. The squares are numbered from 1 to 5 and represent the degree to which you have noticed the described behavior. The bases for making a judgment are given below:

- (1) You have not noticed this behavior at all.
- (2) You have noticed the behavior to a slight degree.
- (3) You have noticed the behavior to a considerable degree.
- (4) You have noticed the behavior to an uncomfortable degree.
- (5) You have noticed the behavior to a very large degree.

- 1. Seemingly not affected by extremes of hot or cold.
- 2. Poor coordination in large muscle activities (games, etc.)
- 3. Confusion in spelling and writing (jumbled).
- 4. Inclined to become confused in number processes; gives illogical responses.
- 5. Reading is poor.
- 6. Hyperactive and restless. Not Hyperactive. Restless - yes.
- 7. Behavior goes in cycles.
- 8. Quality of work may vary from day to day.
- 9. Daydreaming alternating with hyperactivity.
- 10. Excessively meticulous, exacting, formalistic or pedantic.
- 11. Erratic, flighty or scattered behavior.
- 12. Lacks a variety of responses, repeats himself in many situations.
- 13. Easily distracted, lacks continuity of effort and perseverance.
- 14. Cries often and easily.
- 15. Explosive and unpredictable behavior. Withdrawn.
- 16. Often more confused by punishment.
- 17. Upset by changes in routine.
- 18. Confused in following directions.
- 19. Tends to be destructive; especially of the work of others.
- 20. Demands much attention.
- 21. Many evidences of stubborn uncooperative behavior.
- 22. Often withdraws quickly from group activities; prefers to work by self.
- 23. Cannot seem to control self (will speak out or jump out of seat, etc.).
- 24. Constant difficulty with other children and/or adults (apparently purposeless).
- 25. Shallow feeling for others.
- 26. Seems generally unhappy.
- 27. Confused and apprehensive about rightness of response; indecisive.
- 28. Often tells bizarre stories.
- 29. Classroom comments are often off the track or peculiar.
- 30. Difficulty reasoning things out logically with others.

	1	2	3	4	5
		X			
				X	
			X		
		X			
			X		
		X			
			X		
		X			
X					
		X			
		X			
X					
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		X			
		X			
X					
				X	
X					
		X			
		X			
				X	
				X	
X					
		X			
				X	
				X	
X					
		X			
					X

$\bar{X} = 2.310$

Monthly Seminars

Seminar meetings were held on a monthly basis for all those in the project with assigned responsibilities. At these meetings the children's problems were discussed and strategies were devised for handling health problems, instructional problems, behavioral problems, and parent counseling. These seminar meetings appear to be a necessary ingredient for the replication of this project. All professional participants attest to this necessity.

Outside Activities

1. A video tape of the class in process is regularly shown at the California College at Los Angeles as part of the Special Educational Survey Course.
2. A video tape of the class in process was shown at the conference for the educators of the usually handicapped at Palo Alto.
3. The project had a student teacher from California State College at Los Angeles for three weeks.

Physical Education Data

Adaptive physical education has been an integral part of this project. Physical performance was measured on 11/1/71 and again on 5/2/72. The charts are self explanatory. The relationship of this data to the individual program objectives will be discussed later in this narrative.

ADAPTIVE PHYSICAL EDUCATION

cannot accomplish feat

can accomplish feat

YES	YES
-----	-----

step

NO	NO
----	----

toe touch

NO	NO
----	----

balance beam (forward walk)

NO	NO
----	----

balance beam (backward walk)

YES	YES
-----	-----

monkey bars (travel across)

YES	YES
-----	-----

catch bouncing ball

YES	YES
-----	-----

bounce ball to self

COMMENTS:

- Grade -
- Age -
- Height -
- Weight -

NAME CHRIS

ADAPTIVE PHYSICAL EDUCATION

--

cannot accomplish feat

--

can accomplish feat

NO	YES

skip

NO	YES

toe touch

NO	YES

balance beam
(forward walk)

NO	YES

balance beam
(backward walk)

YES	YES

monkey bars
(travel across)

YES	YES

catch bouncing ball

YES	YES

bounce ball to self

COMMENTS:

Grade -
Age -
Height -
Weight -

NAME: LARRY

ADAPTIVE PHYSICAL EDUCATION

--

cannot accomplish feat

--

can accomplish feat

NO	NO

skip

YES	YES

toe touch

NO	NO

balance beam

(forward walk)

NO	NO

balance beam

(backward walk)

NO	NO

monkey bars

(travel across)

NO	NO

catch

bouncing ball

NO	NO

bounce ball

to self

COMMENTS:

Grade -
Age -
Height -
Weight -

NAME: STEVE

ADAPTIVE PHYSICAL EDUCATION

NO	NO
----	----

cannot accomplish feat

NO	NO
----	----

can accomplish feat

NO	NO
----	----

skip

NO	NO
----	----

toe touch

NO	NO
----	----

balance beam (forward walk)

NO	NO
----	----

balance beam (backward walk)

NO	NO
----	----

monkey bars (travel across)

NO	NO
----	----

catch bouncing ball

NO	YES
----	-----

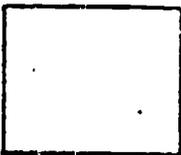
bounce ball to self

COMMENTS:

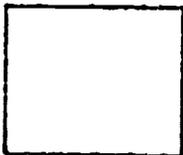
- Grade -
- Age -
- Height -
- Weight -

NAME: MICHAEL

ADAPTIVE PHYSICAL EDUCATION



cannot accomplish feat



can accomplish feat

no	skip
----	------

no	toe touch
----	-----------

no	balance beam (forward walk)
----	-----------------------------

no	balance beam (backward walk)
----	------------------------------

no	monkey bars (travel across)
----	-----------------------------

no	catch bouncing ball
----	---------------------

no	bounce ball to self
----	---------------------

COMMENTS:

Grade -
Age -
Height -
Weight -

NAME: VERONICA

ADAPTIVE PHYSICAL EDUCATION

--

can accomplish feat

--

cannot accomplish feat

NO	YES

skip

NO	NO

toe touch

NO	NO

balance beam (forward walk)

NO	NO

balance beam (backward walk)

NO	NO

monkey bars (travel across)

YES	YES

catch bouncing ball

YES	YES

bounce ball to self

COMMENTS:

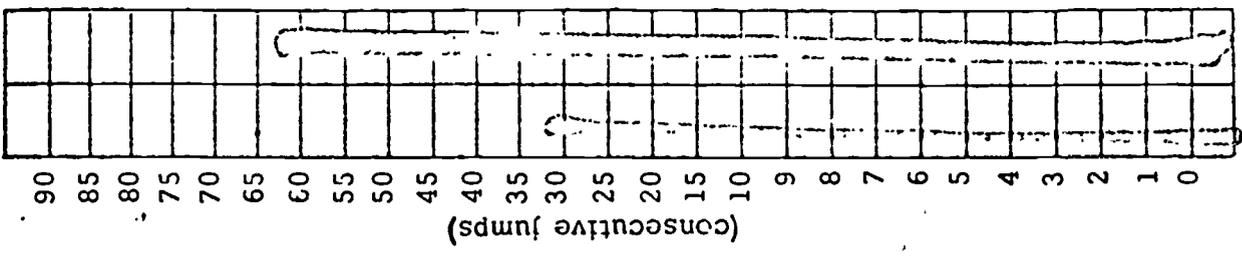
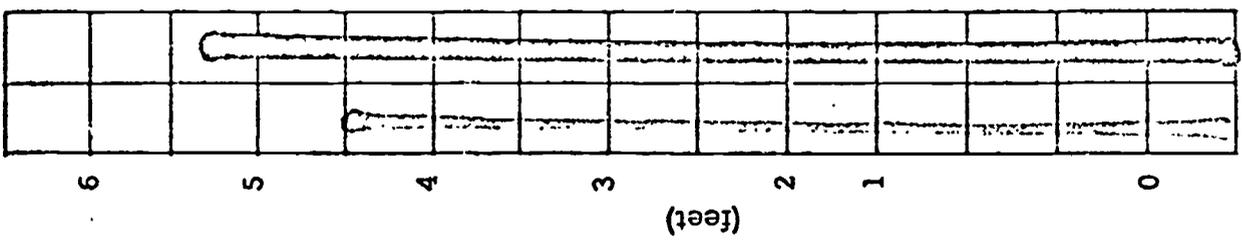
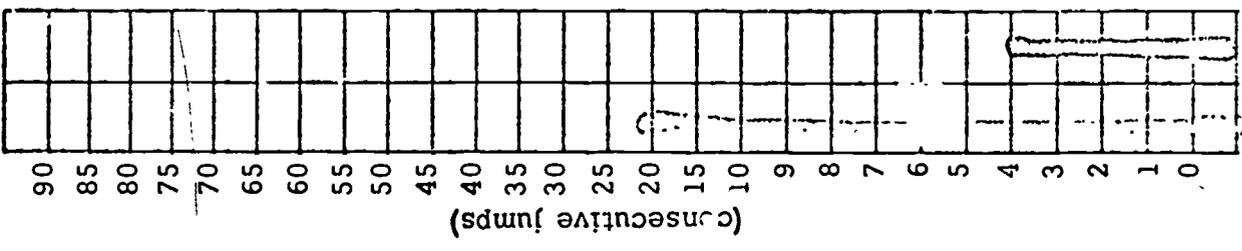
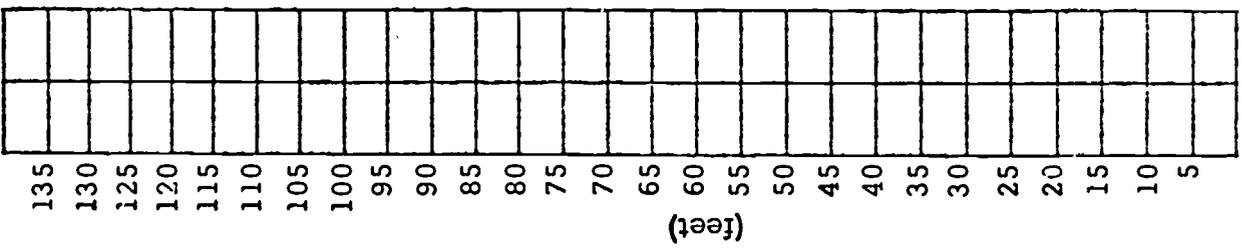
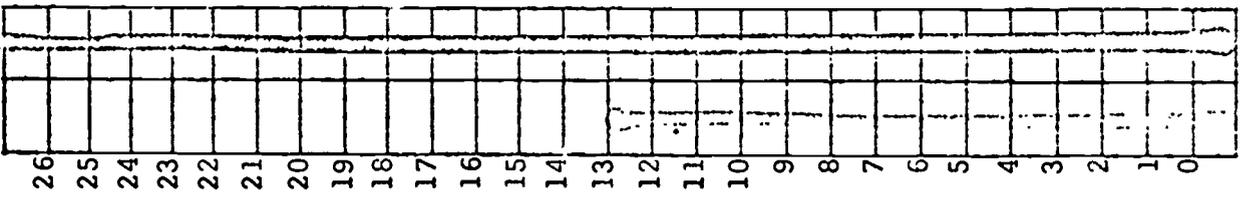
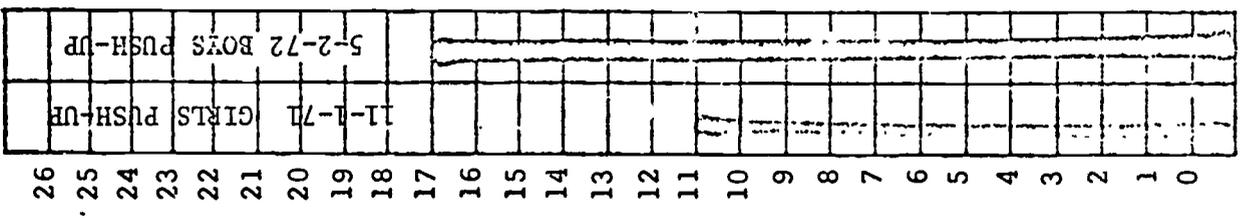
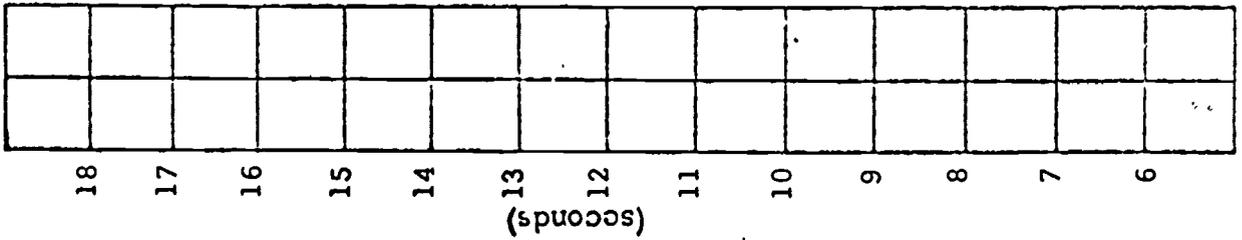
- Grade -
- Age -
- Height -
- Weight -

NAME SANDY

ADAPTIVE PHYSICAL EDUCATION

11-1-71

Dates



30 yd dash
50 yd dash

Push-ups

Sit-ups

Softball throw

Jump rope

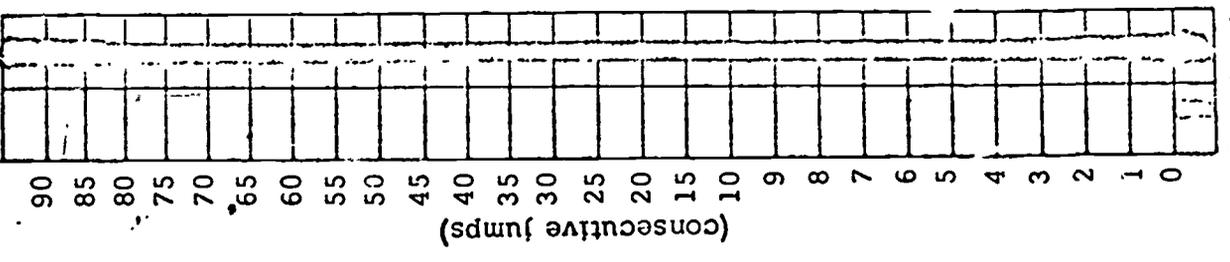
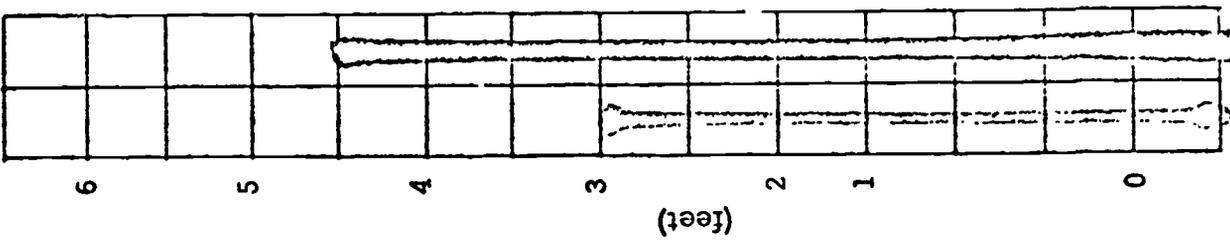
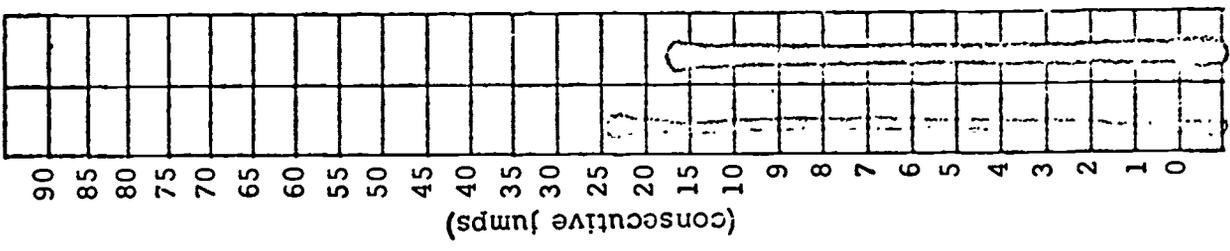
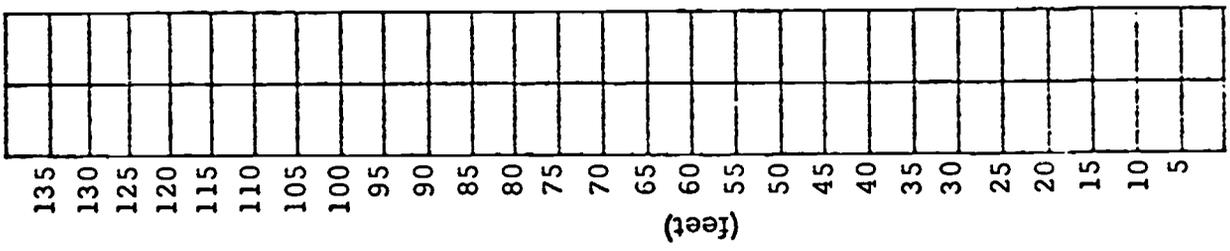
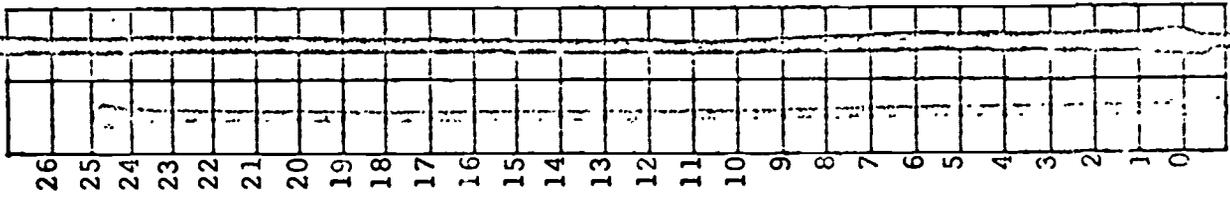
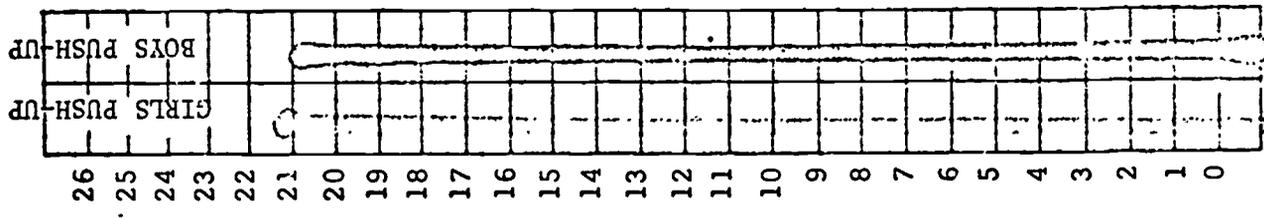
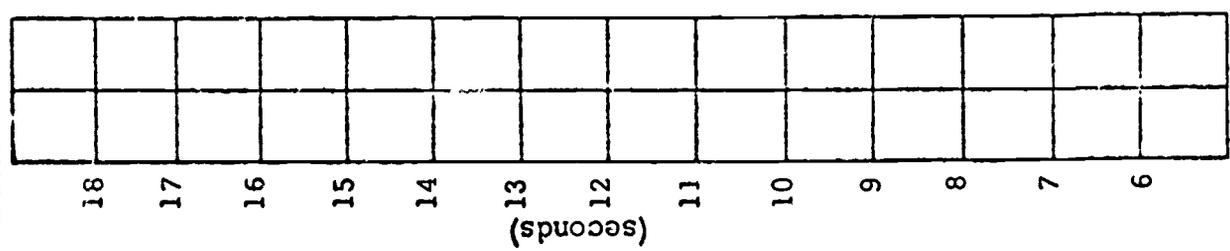
Standing broad jump

Jumping jacks

NAME CHRIS

ADAPTIVE PHYSICAL EDUCATION

Dates 11-1-71
5-2-72



30 yd dash
50 yd dash

Push-ups

Sit-ups

Softball throw

Jump rope

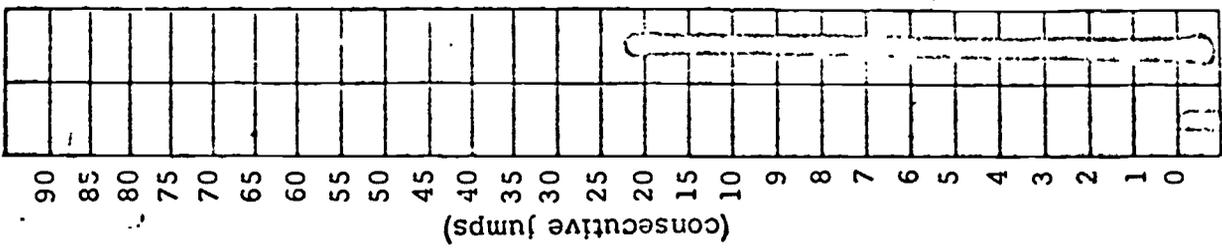
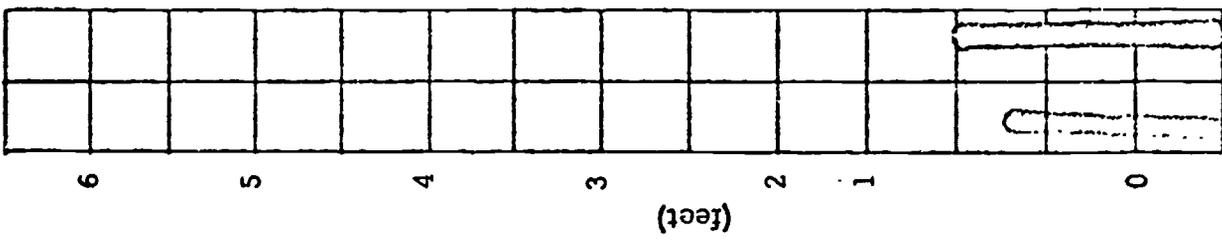
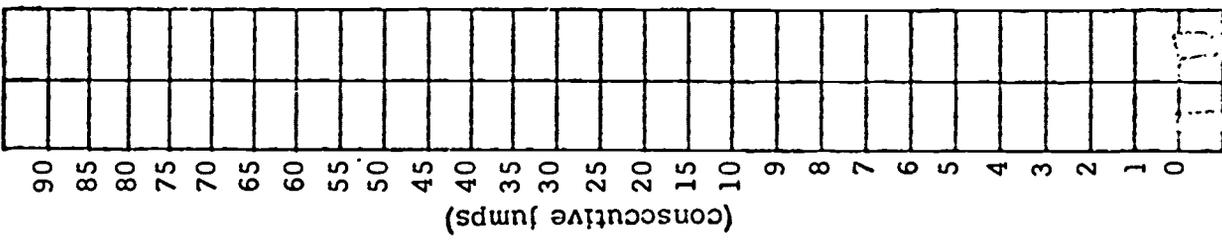
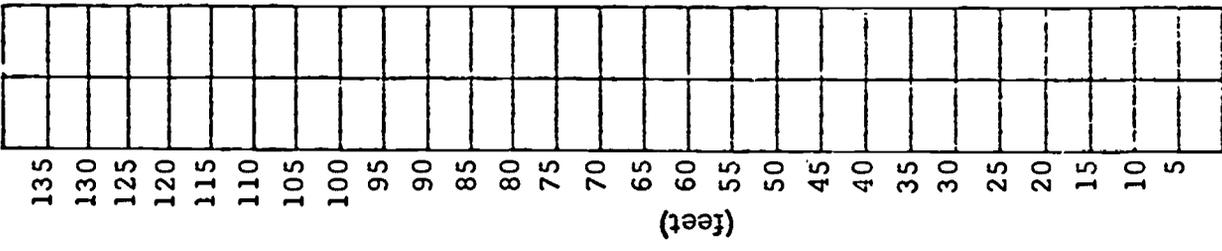
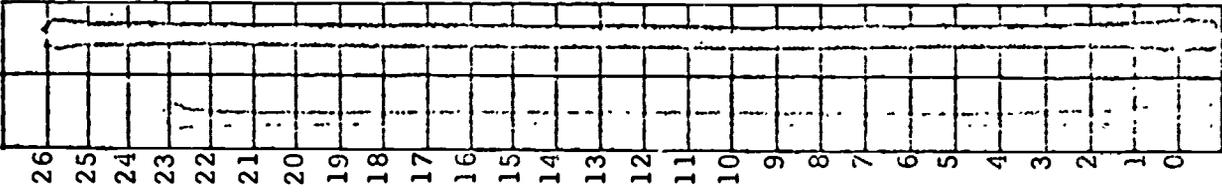
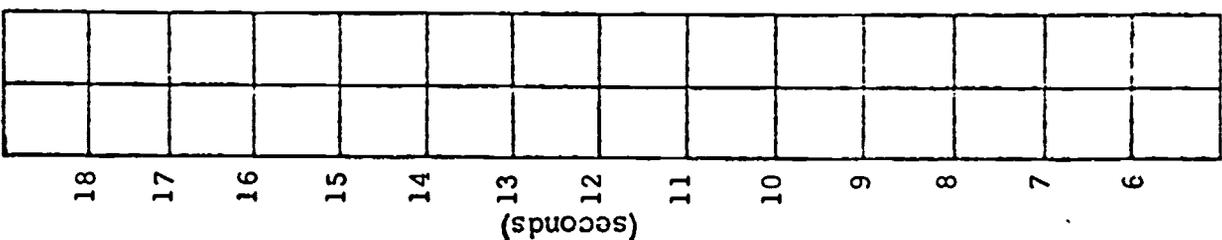
Standing broad jump

Jumping jacks

NAME LARRY

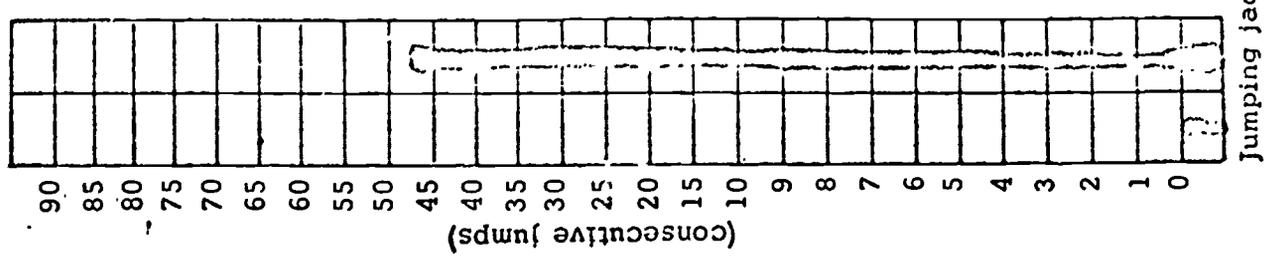
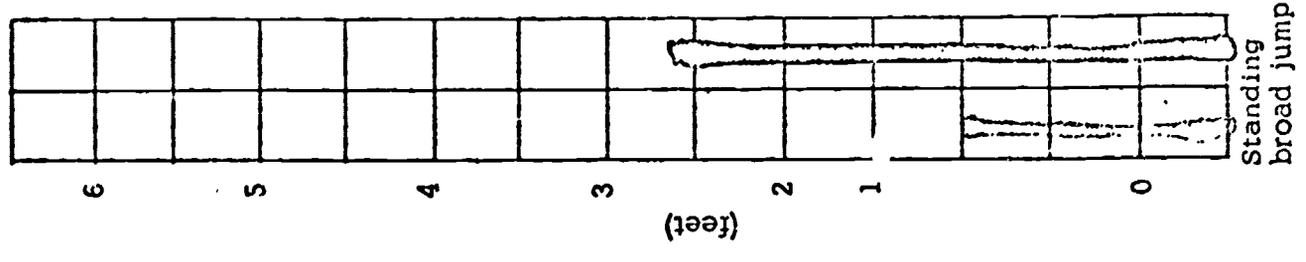
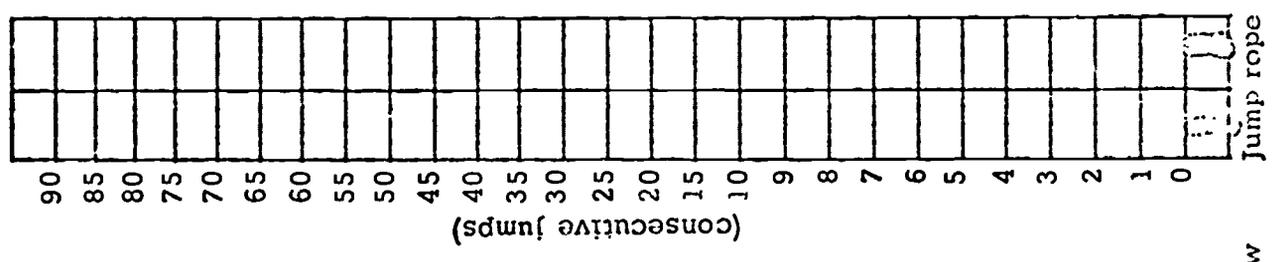
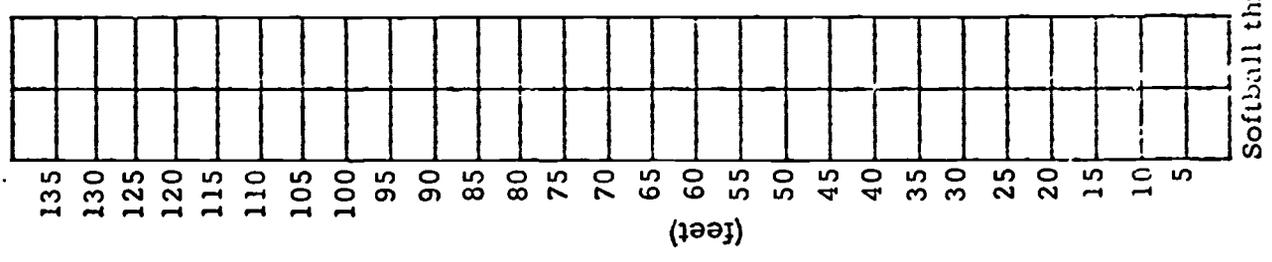
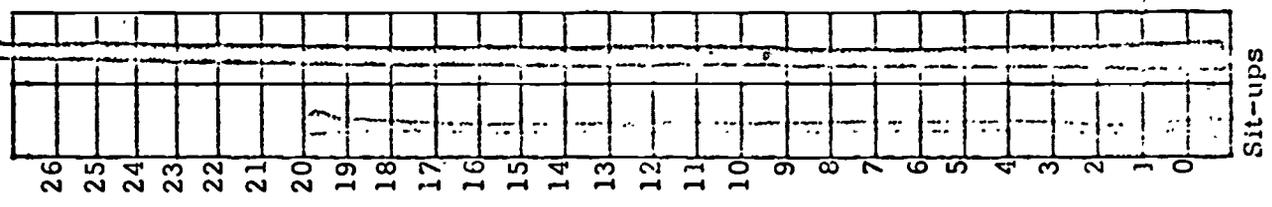
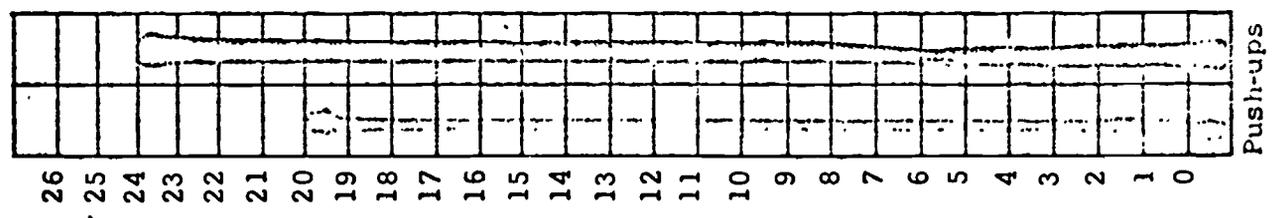
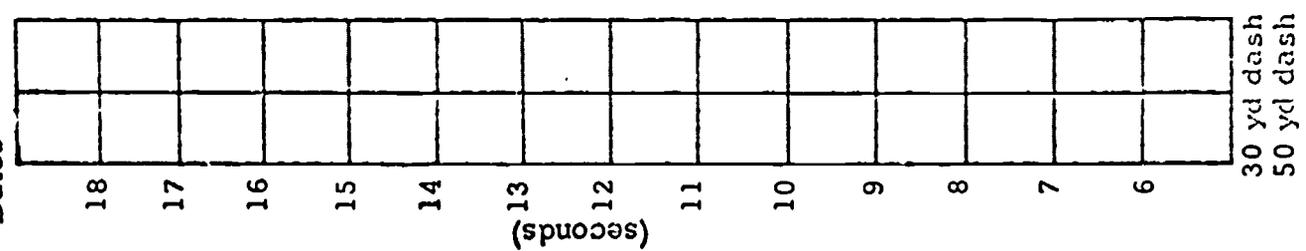
11-1-71

Dates 5-2-72



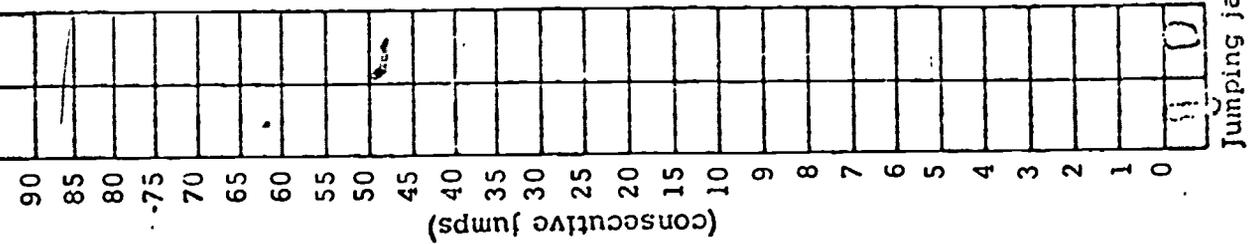
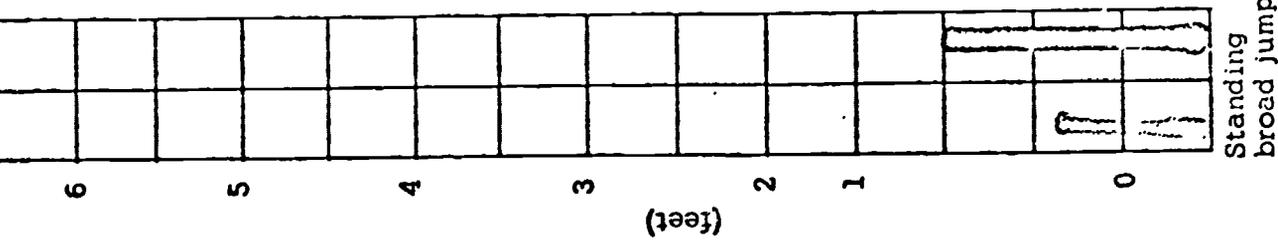
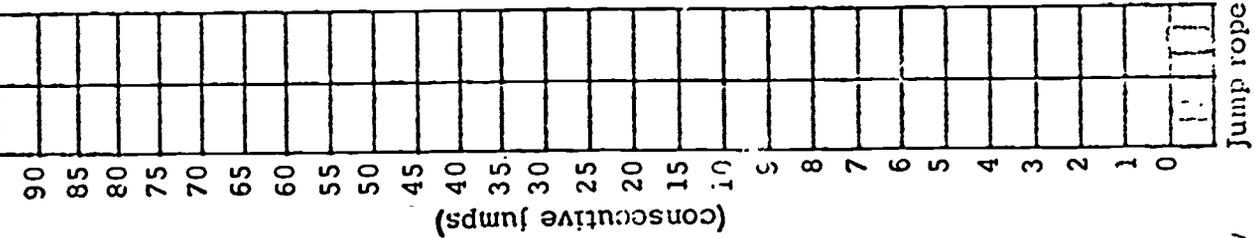
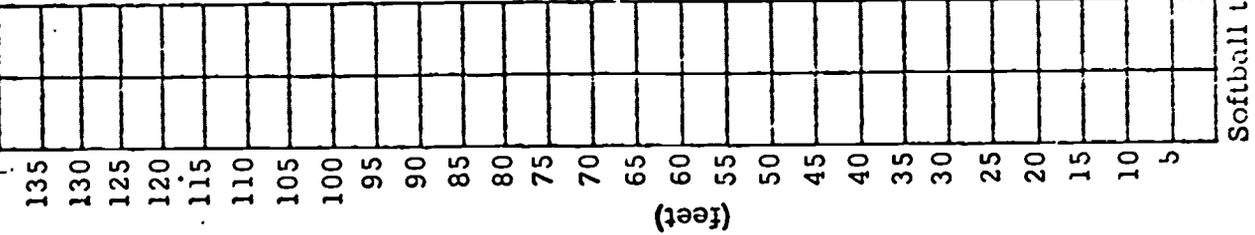
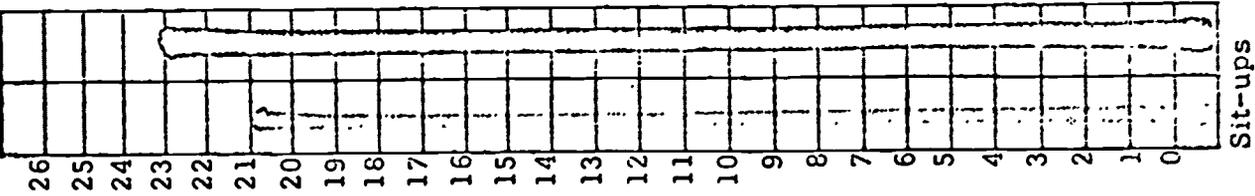
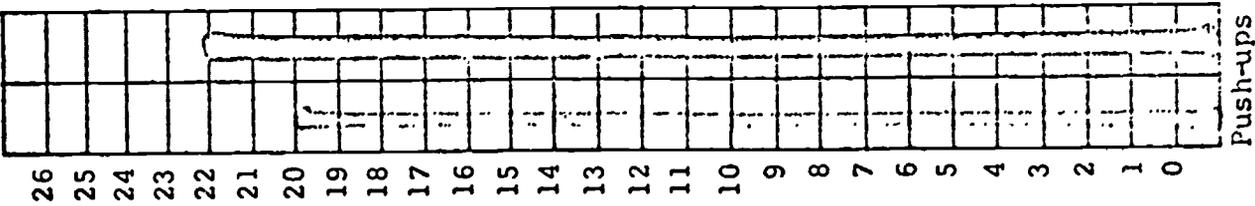
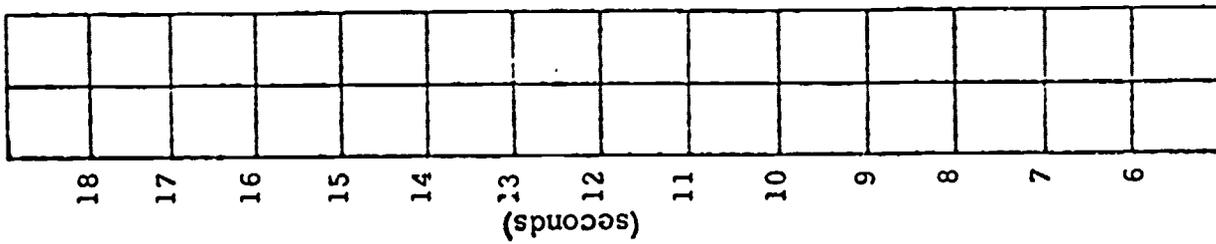
11-1-71
5-2-72

ADAPTIVE PHYSICAL EDUCATION



11-1-71
5-2-72

Dates

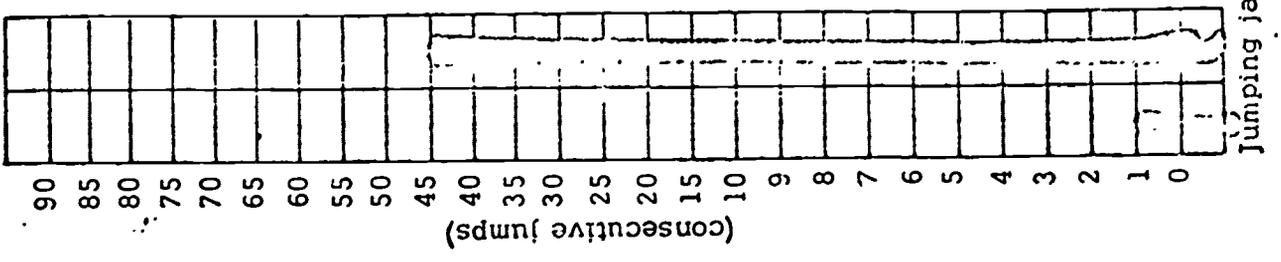
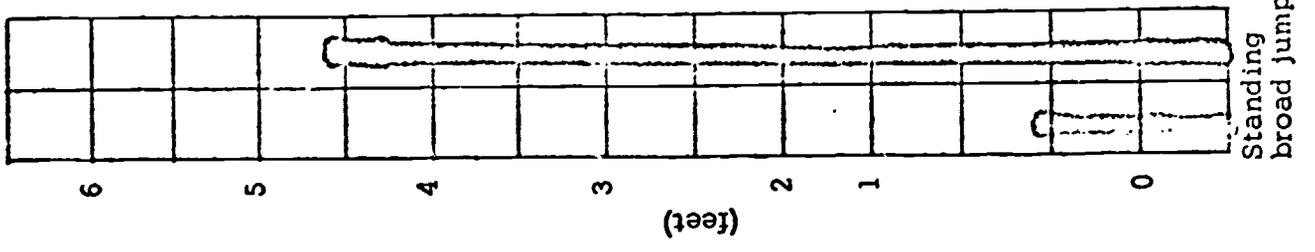
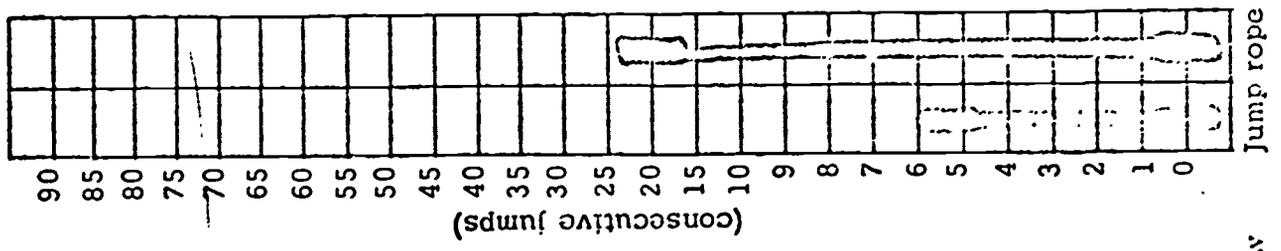
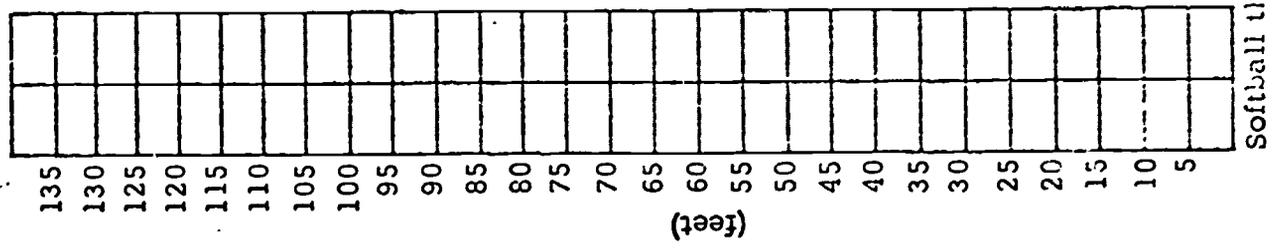
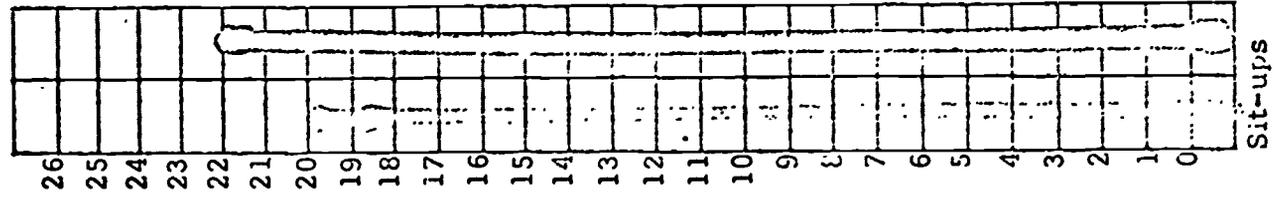
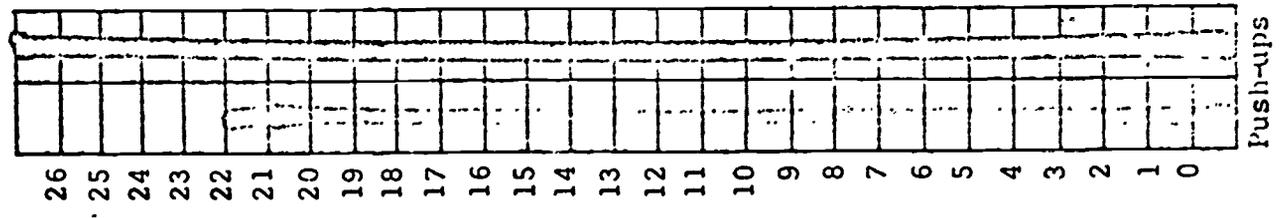
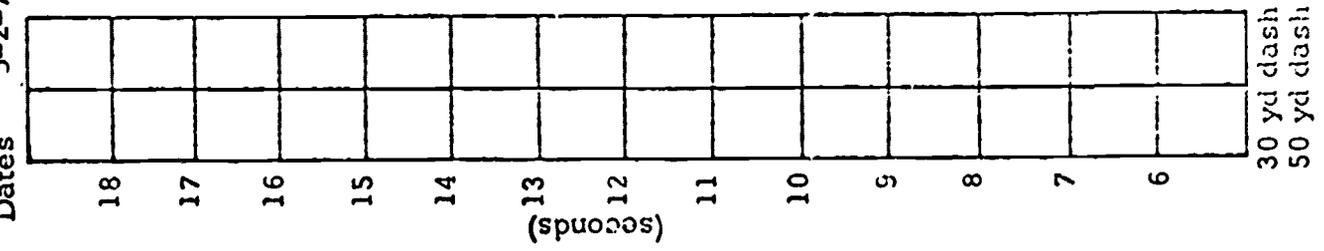


ADAPTIVE PHYSICAL EDUCATION



Dates 11-1-71
5-2-72

ADAPTIVE PHYSICAL EDUCATION



Procedural Objectives and Findings

1. What were the procedural objectives of the program?
2. State the findings in ordinary language for each objective.
3. Indicate clearly success or failure for each objective.
4. Can the findings be generalized, or are they applicable only to the group served by the program?
5. What were the causative factors for unmet objectives?
6. What are the other important findings which were not anticipated?

Procedural Objectives and Findings

1. The number one procedural objective was to provide, in a public school, self-contained classroom situation, a low pupil-teacher ratio program in order to serve children whose primary handicap is vision and whose other impairments limit integration.

This project has operated exactly as stated above at the Stanley Elementary School in Garden Grove Unified District for three years. This program will be continued after federal funding stops. The first procedural objective has been met most successfully.

2. To provide a program of individual participation in physical education and mobility instruction.

The procedural objective has been met. Both physical education and mobility instruction have been offered during the duration of the project. The degree of success in meeting this objective will be noted later in this narrative as it treats with each student's individual objectives.

3. To change parental attitudes toward multi-handicapped visually impaired children by promoting acceptance. This objective has been met. As these parents saw their children becoming better integrated personalities their interest changed positively. The following narrative of the teacher's observations in regard to parental attitude indicates substantial improvement in this area of concern.

4. To provide a practicum in which prospective teachers from local colleges may be exposed to these children and to the techniques and methods which make their education possible.

This objective has been met. Each year of this project, over 50 prospective teachers of the handicapped have visited or worked in this program. It is felt as the program continues this will be a continuing benefit.

5. To provide a regular seminar situation with contributors from other special education programs so that experience and techniques gained from working with various handicaps can be shared with the project-teacher.

The objective has been met. The seminars are discussed and evaluated earlier in this narrative. There were no un-met procedural objectives.

111

NARRATIVE REGARDING PARENT ATTITUDE

1. Steve's Family

Steve's family are young parents; the father is now completing college work to enter coaching field. Appear interested and concerned; father is encouraging weight lifting exercises for Steve. Mother quite passive and permissive with both boys, although she has just recently agreed to place some expectations on Steve. Both have demonstrated growth in the recognition of a need for independence and have "backed off" in an attempt to foster this. Follow through in home is questionable; it appears as though Steve needs more direction. However, the parents have been cooperative and appreciative. They seem willing to try new ideas when presented with ways in which to carry them out. They, too, will continue to need guidance. Family has been conscientious about obtaining medical examinations, but again have required direction.

2. Sandra's Family

Child resides with mother and step-father. Mother appears to assume responsibility for child, although father has rarely missed a conference. Appear interested, but do not/can not give Sandy the time she needs. Large family and arrival of baby this year have curtailed Girl Scouting activities which had begun to show results. Family is considering Braille Institutes program but need constant prodding to pursue these types of offerings. Student is greatly in need of social contacts with others her age. Parents have become aware of this and have accepted her limited ability; have consented to enroll her in class for EMR. They appear conscientious regarding visits

with the ophthalmologist, but it has been necessary to continually encourage evaluations by the family doctor. Prescription was filled but never administered due to family attitude toward "drugs".

3. Chris's family

Chris does not reside with natural parents. Foster/adoptive parents (Garards) care for numerous children in their home (multi-handicapped). Prior to enrolling in the class, the family had tried a variety of program with no satisfaction. Chris is now in third year of placement, and they have expressed pleasure with the situation and gratitude for the personnel involved. Their contacts during the first year appeared to be more out of duty, but attitudes have changed to apparent pleasure. They admit a lack of time limits their follow-up with Chris in the home, but are supportive of programs developed for him at school. they have been cooperative in obtaining the medical data requested, although their busy schedule usually necessitates brevity. In general, the family appears to have placed their trust in the school personnel, although they remain quite protective of the child. It seems evident they have also developed a more realistic outlook as it relates to the potential of this student.

4. Larry's Family

Due to several factors, one of which is a slight language barrier, this family has required close guidance in understanding Larry's

potential, in following through in the home, and in obtaining medical evaluations. They have always been cooperative and interested, but it has seemingly been apparent that they are often "lost" in knowing what to do. They have accepted suggestions, but they need continued contacts in order to pursue the courses outlined for them. However, they appear to be supportive of the school program and have attended the individual conferences as scheduled; the mother had driven Larry to school on several occasions when he has missed the bus, thereby demonstrating a definite responsibility to the child and the school.

5. Mike's Family

Contacts during first year of program were entirely with mother until Spring. Separation in home resulted in father caring for Mike and his older brother; personal problems in the home for the next several months made it difficult to establish constructive lines of communication. By mid-way through the second year of enrollment, the father became able to discuss Mike more freely and to share some of his opinions regarding the child. Written communication with the home was running smoothly, and Mike was demonstrating growth. The third (and present) year has revealed a broken ankle and has resulted in long term absence from employment for the father. Lines of communication remain open, but the father does not appear to have the strength to follow-through with the suggestions from school personnel. A neurological examination has never been obtained during the three years that Mike has been enrolled, but the father has made initial contact with Children's Hospital of Orange County.

6. Veronica's Family

A large family, and limited strength on the part of the mother, has been the key factor in the lack of concentrated follow-up in this home. However, the family has attended conference and has readily accepted suggestions regarding the development of this child. They have maintained excellent communication with the school and have obtained all necessary reports. The poor health of this child (and of other family members) has been responsible for numerous absences during the first two years of the project; attendance during the third and present year has improved greatly. Most contacts have been with the mother, and she has become able to easily discuss difficulties involved in the development of this child. Parents appear interested and concerned and have even maintained contact with the teacher during the summer months. They have expressed appreciation to the school personnel and have seemingly followed through in the home as their time and strength have permitted.

Project Objectives and Findings

1. What were the project objectives of the program?
2. State the findings in ordinary language for each objective.
3. Indicate clearly success or failure for each objective.
4. Can the findings be generalized, or are they applicable only to the group served by the program?
5. What were the causative factors for unmet objectives?
6. What are the other important findings which were not anticipated?

Project Objectives and Findings

The individual objectives of each student are stated below with the appropriate evaluation.

1. Chris (Teacher statement 4/72)

Chris has developed an attention span which allows him to work, interrupted, for periods of 20 to 30 minutes. He can continue to work for additional time provided with a change of task, a "stretch", etc. He continues to be a pleasant child, laughing easily; he rarely displays his temper in unacceptable ways.

Chris now communicates spontaneously, although often in only words or phrases. He is beginning to learn simple sentence structure and is encouraged to use it whenever a suitable situation arises. He has retained the ability to express himself by use of pantomime but is not allowed to do so at school when he does know the correct verbal responses. He can now read approximately 50 words and has the ability to obtain meaning from simple sentences in written form. Chris is now able to carry in addition, and to borrow in subtraction, in problems involving digits in the tens and ones places. He now completes these problems as well as simple addition and subtraction with ease and minimal error. Chris now attempts to use oral language with all communication, however, speech is practically 90% unintelligible.

- 1.2 To increase arithmetic skills. According to WRAT results Chris has made 3 years progress in arithmetic skills during his three years in the project. According to WRAT given 4/7/72 his achievement level is 3.0.

1.3 To decrease illness by prevention.

Doctors appointments have been kept as necessary for vision and hearing examinations. Source of data anecdotal records by nurse.

1.4 To increase interest in physical activity.

Chris's physical strength and endurance have been increased (see individual adaptive physical education charts). This criteria only vaguely fits the desired out-come of interest in physical activity. However, he has profitted by the adaptive physical education program.

1.5 Improved speech and language. (See 1.1)

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GARDEN GROVE UNIFIED SCHOOL DISTRICT
10331 Stanford Avenue
Garden Grove, California

PSYCHOMETRIC REPORT

Name: Christopher	Parents:	Date: 4-7-72 4-18-72
School: Stanley	Address:	Birthdate: 2-5-59
Grade: MH-B	Phone:	Age: 13.2
Teacher: M. Ferguson	Referred by: Reevaluation	Classification: MH-B

REASON FOR REFERRAL: Reevaluation of achievement; Perceptual testing.

RESULTS: Results on the WIDE RANGE ACHIEVEMENT TEST (4-7-72) were:

Reading	2.0
Arithmetic	3.0

Results on the Marianne Frostig Developmental Test of Visual Perception (4-18-72) were:

	<u>Perceptual Age</u>
I. Eye Motor	6-9
II. Figure Ground	5-6
III. Form Constancy	9-0
IV. Position-in-Space	7-0
V. Spatial Relations	6-6

Compared with an approximate mental age level of 8-6 at the present time, this indicates a lag in areas I, II, IV, V; adequate functioning in area III.

Dora Smith
Psychologist

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Revised 3/65

2. Mike (Teacher statement)

Other than occasional whining, Mike presents no great disturbance in the classroom at this time. He appears to be concerned about other children, and now seems to understand how to function with them. He continues to exhibit a reading ability beyond that which would be expected of a child his age. His comprehension has increased considerably as evidenced by testing results submitted. His speech is usually meaningful, although there remains a tendency to jumble the words and to distort meaning. Mike's coordination, both fine and gross, continues to be a weakness although considerable growth has been observed.

There appears to be more thought involved in the things that Mike does and says. His entire self appears to have been slowed greatly within a highly structured environment.

- 2.1 To increase the length of time Michael spends in individual activity Mike was timed on 12-3-71 during his Independent Activities. Given four tasks, he completed them in the following times: 2'4", 1'6" 40", and 1'10". He worked consistently with minimal distraction. Length of task determined time involvement.

Poor visual prognosis and an apparent decrease in visual acuity has necessitated enlarged print. The print size has limited the amount of work assigned to Mike at any one time; due to the fact that his vision does fluctuate during the day it is possible to use smaller

print at some times. The visual condition and the resulting emotion-ality have, in large part, possibly prevented the growth that was once expected.

During the Independent Activities on 4-28-72 Mike completed two papers in a total time of 4'59", one in 2'55", and two additional papers in 3'57". It should be noted that Mike also completed all math papers independently in the following times: two papers in 2'45", one paper in 2'49", and two others in 5'55". Further, he will now read independently for periods ranging from 5 to 20 minutes. *Considering the total time involved in independent completion of tasks, it is evident that Mike has demonstrated growth in this area.

2.2 To demonstrate growth in basic arithmetic skills see attached psychological report. Michael has improved and now functions at grade 1.8 in arithmetic according to results of WRAT given 4/72.

2.3 To increase verbal skill.

April 4, 1972 CA: 9-9 Peabody Vocabulary Test: MA 8-9

April 25, 1972 CA: 9-10 ITPA - Language Age 6-11

Child's present behavior.

Mike's receptive language as measured by the Peabody has made a substantial increase of 4 years and 10 months.

His psycholinguistic age has increased by 1 year and 5 months, as measured by the ITPA.

His scaled scores on the sub-tests auditory reception, verbal expression, visual association, and grammatic closure have remained approximately the same or increased slightly showing a strong, steady growth on these functions.

On auditory association, manual expression, auditory memory and visual memory, the scaled scores have increased and substantially indicating greater degrees of growth.

Only one function showed a substantial decrease - visual closure.

This is due to progressive deterioration of what little vision he originally had in his right eye. This loss of vision was a factor in depressing his score in the visual modalities thus in his overall language age.

Mike is now able to attend to tasks and communicate with more meaning. He is able to focus and sustain attention for considerably longer periods of time. Memory functions show improvement.

2.4 To improve his ability to make body movements.

The evaluation of this objective is left to the perception of the adaptive physical education teacher. He has indicated improvement according to the adaptive physical education data presented earlier in this narrative Michael has increased in physical speed, strength, and endurance.

2.5 To increase his reaction time in given exercises.

As can be seen by data and adaptive physical education charts, Michael's speed has increased.

2.6 To obtain a neurological examination by June 1972.

The objective has not yet been met; further efforts are being made.

2.7 To improve visual perception and motor ability.

Some improvement noted. (See attached psychological report data.)

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GARDEN GROVE UNIFIED SCHOOL DISTRICT
10331 Stanford Avenue
Garden Grove, California

PSYCHOMETRIC REPORT

Name: Michael	Parents:	Date: 4-7-72 4-18-72
School: Stanley	Address:	Birthdate: 6-22-62
Grade: MH-B	Phone:	Age: 11.9
Teacher: M. Ferguson	Referred by: Reevaluation	Classification: MH-B

REASON FOR REFERRAL: Reevaluation of achievement; perceptual testing.

RESULTS: Results on the WIDE RANGE ACHIEVEMENT TEST (4-7-72) were:

Reau g	9.3	(word recognition level)
Arithmetic	1.8	

Results on the Marianne Frostig Developmental Test of Visual Percetion (4-18-72) were as follows:

	<u>Perceptual Age</u>
I. Eye-Motor	4.3
II. Figure-Ground	3.6
III. Form Constancy	5-6
IV. Position-in-Space	5-6
V. Spatial Relations	6-0

These may be compared to the present approximate mental age level of 5-3 showing some lag in areas I, and III, fairly adequate functioning in areas III, IV, and V.

Dora Smith
Psychologist

jd

3. LARRY (Teacher statement)

Larry is now able to concentrate on a task for periods of 10 to 15 minutes with no distraction. He is now able to complete simple addition and subtraction facts with ease and minimal error and has recently started instruction in place value. He is able to print his name with ease and to write letters and numerals with little difficulty.

Larry has demonstrated a great improvement in self-confidence. He now joins a third grade class for lunch and participates in regular /recesses with ease. He is still hesitant to venture into new experiences but is slightly more aggressive than noted earlier. Larry is a strong, healthy child who exhibits good gross motor coordination and who has demonstrated growth in the development of his fine motor coordination.

3.1 To improve in reading and arithmetic.

During the three years of the project Larry has advanced from beginning kindergarten level reading and arithmetic to grade 1.2 in reading and 1.4 in arithmetic. (See attached psychological report).

3.2 To improve visual perception and motor ability.

Some improvement noted. (See attached psychological report for Frostig test results).

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GARDEN GROVE UNIFIED SCHOOL DISTRICT
10331 Stanford Avenue
Garden Grove, California

PSYCHOMETRIC REPORT

Name: Larry	Parents:	Date: 4-7-72 4-18-72
School: Stanley	Address:	Birthdate: 3-19-62
Grade: MH-B	Phone:	Age: 10.0
Teacher: M. Ferguson	Referred by: Reevaluation	Classification: MH-B

REASON FOR REFERRAL: Reevaluation of achievement: perceptual testing.

RESULTS: Results on the WIDE RANGE ACHIEVEMENT TEST (4-7-72) were:

Reading	1.2	(word recognition level)
Arithmetic	1.4	

Results on the Marianne Frostig Developmental Test of Visual Perspion (4-18-72) were as follows:

	<u>Perception Age</u>
I. Eye-Motor	5-9
II. Figure-Ground	4-9
III. Form Constancy	9-0
IV. Position-in-Space	6-3
V. Spatial Relations	7-6

With an approximate mental age level of 7-2 at the present time, the above results indicate a lag in areas I, II, and IV, adequate functioning in areas III and V.

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Psychologist

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4. SANDRA (Teacher statement)

Sandy's attitude has improved greatly during the past few months. She is a tall young lady and appears rather awkward due to her size and the visual impairment, but she has participated with greater ease in the regular classroom activities in a fifth grade room. She has been included in special events from two to three times a month, has participated weekly in classroom music, and goes to lunch and recess with the other students on a daily basis. Her attitude at the start of this integration was of a shy, retiring nature but she now joins the group without hesitation. Communication with the classroom teacher and the students involved has enabled those involved to better understand this young lady's needs.

Sandy has memorized all multiplication facts through 9x9 and can calculate the corresponding division problems. She has started to learn the process of long division but continues to require close supervision and assistance. Sandy is experiencing more success in following written directions but continues to find it more difficult to follow those which are verbal.

Sandy's posture has improved slightly, and she is now capable of achieving good posture when reminded to do so. She continues to find it necessary to slump in order to use her vision, but has been encouraged to sit and stand straight at other times. Her parents have been provided with exercises for this purpose by the instructor in adaptive physical education and she performs these on a regular basis during the P.E. time as well.

4.1 To improve academic skills.

Sandra has improved in both reading and arithmetic. According to scores on WRAT test given 4/18/72, Sandra has made approximately two (2) years growth in both areas during the last three years. (See attached psychologist report).

4.2 To improve her integration.

This objective has been met. See narrative statement by teacher (4).

4.3 To improve her visual perception and motor ability.

Some improvement according to Frostig scores (See attached psychologist report).

4.4 Increase participation in physical activities.

Sandra has improved in all areas according to her test/retest data presented earlier in the narrative on the adaptive physical education charts.

4.5 Improve hand-eye, hand-eye-foot, coordination activities.

(Improvement noted same source as above 4.4).

4.6 To increase energy level by getting proper prescription from medical profession and having parents act on this information. Objective 4-6 was not met. Parents refused.

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GARDEN GROVE UNIFIED SCHOOL DISTRICT
10331 Stanford Avenue
Garden Grove, California

PSYCHOMETRIC REPORT

Name: Sandra	Parents:	Date: 4-7-72 4-18-72
School: Stanley	Address:	Birthdate: 10-24-60
Grade: MH-B	Phone:	Age: 11.5
Teacher: M. Ferguson	Referred by: Reevaluation	Classification: MH-B

REASON FOR REFERRAL: Reevaluation of achievement; perceptual testing.

Results: Results on the WIDE RANGE ACHIEVEMENT TEST(4-7-72) were:

Reading	3.5	(word recognition)
Arithmetic	4.2	

Results on the Marianne Frostig Developmental Test of Visual Perception (4-18-72) were:

	<u>Perceptual Age</u>
I. Eye-Motor	6.3
II. Figure-Ground	8.3
III. Form Constancy	9.0
IV. Position-in-Space	8.9
V. Spatial Relation	8.3

With an approximate mental age level of 8.8 at the present time, the oabove results indicate a lag in Area I, adequate functioning in Areas II, III, IV, V.

Dora Smith
Psychologist

jd

5. STEVE (Teacher statement)

Steve's echolalia has almost entirely been eliminated, being slightly evident during periods of frustration and pressure. It has been noted approximately five times during the past school year but has been evident in barely audible tones. Steve now converses with relatives⁵ ease in basic sentences and phrases and he can readily identify objects which are familiar to him as well as sounds in his environment.

Steve's coordination continues to be a weak area. His gait has improved and he has achieved an improved balance. He now travels independently within the classroom, on the playground, and to the adjoining classroom. He is capable of walking with a sighted guide throughout the school grounds, on a variety of terrains, at a natural pace. He should soon be ready for refinement of both trailing and sighted guide techniques if this pattern of development continues.

Steve now looks forward to the arrival of the P.E. instructor and appears to enjoy physical exertion. He maintains excellent posture in both a standing and a sitting position. He plays actively on the playground equipment, preferring the slide, swing, and jungle gym. He can now toilet, wash, and feed himself as well as remove and put on his coat and hang it up.

5.1 To improve auditory and tactual discrimination.

Steve is capable of identifying familiar sounds in his environment when requested to do so. He rarely, if ever, indicates this identification spontaneously. He demonstrates an acute hearing and is suc-

cessfully using auditory cues in his orientation to his environment; however, it remains necessary to bring these cues to his attention in most instances.

There continues to be a lack of meaning in the use of Steve's hands. He demonstrates poor fine-motor coordination although some improvement is evident. He does not freely explore objects tactually and gives the impression that he does not know how to and do so. He can identify textures as: rough, smooth, hard, soft, wet, cool, and warm. It appears that the language disorder is preventing evidence of growth in this area. It is extremely difficult to obtain verbal descriptions to tactual experiences, and limited comprehension of basic concepts prevents activities such as matching and sorting likes and differences.

5.2 To increase verbal communication.

April 15, 1972 CA: 7-10

ITPA

Language Age

Auditory Reception	4-5
Auditory Association	6-0
Auditory Memory	6-10
Verbal Expression	5-2
Grammatic Closure	4-10
Auditory Closure	7-10
Sound Blending	above cut-off of 8-7

Steve's scaled score for the sub-tests verbal expression, auditory memory and auditory closure have remained constant or increased slightly indicating a strong, steady growth on these particular functions.

The other measurable functions, auditory reception, auditory association, grammatic closure, and sound blending, show a substantial increase in the scaled scores indicating greater spurts of growth.

Child's present behavior.

Manifests no echolalia nor meaningless repetition of words and phrases. Spontaneous speech is still limited, however, Steve is able to respond with meaningful questions and answers. He now uses some language and makes an effort toward conversation.

5.3 To improve mobility skills in trailing and walking with sighted guides.

This objective has been met as can be noted on attached rating scales for mobility skills.

5.4 To improve his bowel normalcy.

Nurse reports this objective has been met.

5.5 To improve his ability to relate and organize auditory symbols and to express himself verbally.

This objective has been met. (See 5.2).

Name: STEVE

Date: 5-9-72

RATING SCALES

Orientation and Mobility

Trailing

Terrain
Familiar Unfamiliar

75-100%	75-100%
75-100%	75-100%
75-100%	75-100%
0-25%	0-25%
25-50%	25-50%
—	—

Maintains contact with object

Walks in forward path

Continues walking without pause

Uses proper hand position

Uses proper arm position

Uses protective techniques

Sighted Guide

Terrain
Familiar Unfamiliar

75-100%	
75-100%	
75-100%	
75-100%	S A M E
75-100%	S A M E
75-100%	
75-100%	
75-100%	

Grips elbow of guide

Maintains grip during travel

Does not lean on guide for support

Follows guide without hesitation

Walks slightly behind guide

Walks up and down step without additional support

Follows turns with relative ease

Stops with relative ease

Percent noted indicates accuracy at present time.

Rating scale has been developed by teacher; the items selected for rating are considered to be the more basic and important of skills involved.

5.6 To improve evenness of gate.

This objective has been met. (See 5.0).

5.7 To increase his physical activity.

During the regular school day, Steve spends the following times in physical activity:

- I. Travel to and from Kindergarten = 5 minutes
- 2. Adaptive P.E. = 15
- 3. Recesses = 40
- 4. Travel in room = 20

Steve spends slightly more time in physical activity this year as compared with last year; however, it is pertinent to note that while the time involved may be relatively equal, he exerts himself far more now than in the past. It should be noted that he is spending an increased amount of time in physical activity in the home evidenced by conferences with the parents. They report that he is outside more often and that father is pursuing a program of weight lifting with him.

5.8 To increase leg strength.

There are no indication that this objective has been met.

6. VERONICA (Teacher statement)

No hostile behavior has been observed for several months during the school day. Veronica now appears to desire human attention and to enjoy it. She is seemingly considerably more aware of her environment and will now pursue meaningful activities when presented with them. Her expressive vocabulary is greatly increased and she is now able to identify familiar objects, foods, and people. She sits in a chair and maintains good posture; her gait is slow, but relatively smooth with fair posture. She has responded favorable to rewards of cereal; the need for negative reinforcement has not been evident for several months.

Veronica is now able to toilet and wash herself but is slow in doing so. She continues to require assistance in hanging clothes and in putting them on and removing them systematically. Veronica now travels independently within the room (with close supervision) and on the playground. She travels easily with a sighted guide throughout the school grounds and appears to be ready for some exposure to refined techniques of trailing and walking with a sighted guide. Veronica now uses eating utensils, although there is a need for refinement of skills involved. She at least attempts all foods and has developed the basic skills involved in eating and drinking.

6.1 To reduce hostile behavior.

No hostile behavior has been noted since 10/28/72 at school. She now appears to be a much happier child exhibiting her joy with a

smile. She seems to want to have people near her, as compared to the fall of 1969 when she'd push them away. Pinching has not been noted, even in the slightest degree, since October of 1971.

6.2 To improve mobility and trailing with a sighted guide.

This objective has been reached. (See attached rating scale.)

6.3 To improve language development.

It is difficult to understand Veronica's speech due to the distortion involved, but she has come from a child who refused to speak (other than unintelligible chatter) to a child who now can identify approximately 15 to 20 different objects, familiar foods, and can count by rote to ten. She repeats much of what is said to her and to others, and she has been observed making spontaneous remarks such as: "all done" when completing a task, "swing" indicating which piece of playground equipment she chose, and "it won't go" when experiencing some difficulty in buttoning dress.

6.4 To improve physical strength.

This objective has been met. According to Veronica's individual adaptive physical education chart which appears earlier in this narrative.

Name: VERONICA

Date: 5-9-72

RATING SCALES

Orientation and Mobility

Trailing

Terrain
Familiar Unfamiliar

75-100%	75-100%
75-100%	75-100%
75-100%	50-100%
0-25%	0-25%
75-100%	25-50%
_____	_____

- Maintains contact with object
- Walks in forward path
- Continues walking without pause
- Uses proper hand position
- Uses proper arm position
- Uses protective techniques

Sighted Guide

Terrain
Familiar Unfamiliar

75-100%	
75-100%	
75-100%	
75-100%	E
75-100%	A
50-75%	
75-100%	
75-100%	

- Grips elbow of guide
- Maintains grip during travel
- Does not lean on guide for support
- Follows guide without hesitation
- Walks slightly behind guide
- Walks up and down step without additional support
- Follows turns with relative ease
- Stops with relative ease

Percent noted indicates accuracy at present time.

Rating scale has been developed by teacher; the items selected for rating are considered to be the more basic and important of skills involved.

6.5 To improve dependable voicing.

April, 1972 There are no measurable functions.

Child's present behavior.

Veronica has practically no spontaneous speech. She will now attempt approximation of most any word, phrase or sentence on demand. She is able to identify many objects verbally but needs a prompt about 90% of the time. She also follows simple directions.

General Statement

This project has been a spectacular success. It has met practically every objective. It will be continued now that federal funding has ended. It has provided in a public school setting an educational program for students whose learning disabilities are overwhelming.