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ABSTRACT

Described and evaluated are the 21 programs funded by Title VI for eight handicapping categories comprising 1,024 children at all educational levels in Oregon during 1972-1973. Explained are criteria such as adequacy of documented needs established by the state Board of Education for funding projects and training procedures for utilization of a Third Party Evaluation Model. The following are among results discussed: number of projects per category such as eight projects for the emotionally disturbed (ED), five projects for the speech and language impaired, and two projects each for the educable mentally retarded (EMR) and preschool children; costs; kinds of services such as a classroom utilizing behavior modification to offset undesirable behaviors learned at home; and conclusions stressing success of resource rooms for ED and EMR students, regular class placement, preschool programs, parent training programs, paraprofessionals for language remediation. Recommendations emphasized the need for further data on effects of integration, and encouragement of proposals featuring vocational educational skills. Given for each project are the title, location (a map is included), population served, funding allocation, dates, background information, objectives and evaluation plan, methodology, the Third Party Evaluator's comments, and pertinent tables or forms. (MC)

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IMPACT 7

of the

Title VI Programs

in the

STATE OF OREGON

September, 1972 -- August, 1973

This report was prepared under the auspices
of the Oregon Board of Education

by

The Teaching Research Division of the
Oregon State System of Higher Education

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Third Party Evaluation Report

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**The Impact in the State of Oregon of Title VI of the
Elementary and Secondary Education Act of 1965 as Amended
September, 1972 – August, 1973**

Introduction:

Title VI of the Elementary and Secondary Education Act of 1965, P.L. 89-750, as amended, authorizes that U.S. Commissioner of Education make grants for the purpose of assisting states in the initiation, expansion and improvement of programs and projects for the education of handicapped children at the preschool, elementary and secondary school levels. The term "handicapped children" includes the mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, crippled, or other health impaired children who because of their handicaps require special education and related services.

Foundation of the Title VI program within any state is the State Plan, the contract or agreement between the state and the U.S. Office of Education, for the operation of programs and projects for handicapped children at the preschool, elementary and secondary school levels. The plan submitted by the State of Oregon was approved by the State Board of Education on April 10, 1968 with an effective date of April 18, 1968. This plan was approved by the United States Office of Education on May 5, 1968.

The State Plan described the present statewide educational program for handicapped children. This description is excerpted and included as Annex A of the publication, *Impact of the Title VI Programs in the State of Oregon*. The State Plan described the procedures for the administration of Title VI within the state.

In order to determine which projects were funded under the Title VI program, the Oregon Board of Education, with the assistance of the Advisory Committee, defined and selected the following criteria for establishing priorities for funding projects and programs:

- 1) The extent to which the project will provide special education services to categories of handicapped children who are not being served or served adequately through the state reimbursed handicapped child program.
- 2) Adequacy of description and documentation of the need for the special education service desired in the project.

Highest priority to projects that stress unmet needs by documenting the number of handicapped children needing the special educational service proposed.
- 3) Extent to which the project stresses early identification of handicapped children and includes aspects of early treatment.

Highest priority to projects that provide preschool special education services to handicapped children.
- 4) Adequacy of the project procedures for identifying the handicapped children to be served.

Highest priority to projects that provide adequate diagnostic provisions for selecting children in need of the special education service.
- 5) Extent to which the project is of sufficient size, scope and quality to give

reasonable assurance of meeting the educational needs of the handicapped children to be served.

Highest priority to projects that provide special educational services focused on manageable numbers of handicapped children qualifying for the service and to projects that are designed to provide comprehensive service to these children.

- 6) Evidence of supplementation of the regular school program by the proposed project or program.

Highest priority to projects that make specific and realistic plans for integration into the regular school program of the handicapped children served by the project.

- 7) Extent to which other community and state resources are represented in the planning and operation of the project or program.

Highest priority to those projects that make full use of other community and state resources that are able to assist in the planning and operation of the project.

- 8) Provisions for evaluating the effectiveness of the special education services to be provided in the project.

Highest priority to projects that include specific evaluation procedures that are consistent with the objectives of the project appropriate for the services provided.

- 9) Provisions for participation of qualified, nonpublic school handicapped children in the project.

Highest priority to projects that make provision for participation of eligible handicapped children enrolled in private schools in the area to be served by the project.

- 10) Adequacy of the size and qualification of the staff.

Highest priority to the projects employing or purchasing the services of well qualified staff and with a high enough ratio of project staff to the number of handicapped children to be served by the project to ensure effective service.

- 11) Adequacy of the facilities, both existing and proposed, for conduct of the project or program.

Highest priority to school facilities that are already available to the district and considered appropriate for the needs of the project.

- 12) Economic efficiency of the proposed project.

Highest priority to those projects listing a detailed budget of estimated amounts of funds required for operation of the project and for cost-service ratios that are consistent with the special education services to be provided.

The policies and procedures under which Oregon initiated, approved, and conducted state programs and projects and local programs and projects were described completely in Impact of the Title VI Programs in the State of Oregon. Essentially, this procedure involved school districts submitting applications for Title VI monies. These applications were reviewed by the Advisory Committee who determined recommendations for funding of applications. These recommendations were approved by the Oregon Board of Education who then notified the applying districts.

Evaluation Plan

From the inception of the Title VI program within the State it was determined that Oregon should have, as part of its Title VI operation, a Third Party Evaluation. Consequently, the State Department of Education contracted with Teaching Research, a Division of the Oregon State System of Higher Education, for consulting services for the development of an evaluation program for Title VI in Oregon. The report of the evaluation of the Summer 1968 program is contained in *Impact of the Title VI Programs in the State of Oregon*. This evaluation model was considered so acceptable by not only the Oregon Board of Education but also by the United States Office of Education that it was continued for subsequent funding periods. The evaluation of Title VI programs for the school year 1968 to June 1969 was also conducted by Teaching Research, a Division of the Oregon State System of Higher Education. The report of that evaluation is contained in *Impact 3 of the Title VI Programs in the State of Oregon*. Projects for 1969 and 1970 were again evaluated by Teaching Research. *Impact 4 of the Title VI Programs in the State of Oregon*, September 1969 - August 1970, contains the report of that evaluation. Teaching Research, evaluating the projects for the period September 1970 to August 1971, reported those results in *Impact 5 of the Title VI Programs in the State of Oregon*, September 1970 - August 1971.

For those projects conducted during the 1971-72 school year, Teaching Research again acted as Third Party Evaluators. The results of these projects were reported in *Impact 6 of the Title VI Programs in the State of Oregon*.

The third party evaluation was conducted in Oregon using the following model: After the projects had been selected for funding by an Ad Hoc Advisory Committee, research consultants from the Teaching Research Division and the Coordinator of the Title VI programs within the state met with each of the project directors prior to the commencement of the project. The purpose of this meeting was to finalize an evaluation plan for the particular project. This final evaluation plan entailed the determination of which measurement instruments were to be used and the method of conducting the measurements with these instruments.

During the school year Teaching Research consultants visited each project twice to insure that the evaluation procedures were being provided as planned. Special Education consultants of the State Department of Education visited projects associated with their specialty, not only serving as advisors to project directors in the conduct of the project, but also concerning themselves with the progress of the evaluation. Finally, the Title VI Coordinator visited each of the projects as a further check to insure that their progress and evaluation procedures were proceeding in accordance with the plan.

After the final report of each project was prepared and submitted by the project director, the results were examined, treated statistically where necessary, and determination made as to how successfully the project achieved its stated purposes. The results of that determination are reported herein.

The cost to the State for this Third Party Evaluation by the Teaching Research Division was \$13,478 which included not only the initial planning with project directors and visits to project sites, but also the drafting of this report, including computer usage for statistical computations.

This evaluation plan which is utilized by the Oregon Board of Education to evaluate Title

VI Projects has been selected as an exemplary model by Bureau of Education for the Handicapped (BEH), U. S. Office of Education in Washington, D. C. Staff from BEH have repeatedly indicated to staff at the Oregon Board of Education that this evaluation plan and the resulting *Impact* reports are unique in the United States. BEH staff are particularly impressed because the Oregon Title VI Projects have objectives that are stated in precise behavioral terms, evaluation strategies that are applicable to the objectives and result in an ability to demonstrate behavioral changes in handicapped children.

These components allow staff from BEH to present data to the legislature to substantiate that monies spent for Title VI resulted in positive changes in handicapped children. The result of this is that federal money appropriated for services for handicapped children have been increased since the inception of Title VI in 1968.

In 1972, staff from BEH encouraged staff from Oregon Board of Education and Teaching Research to train other state departments to use this evaluation model. It is the feeling of the evaluation team that Mr. McAllister and others from OBE should be commended for their efforts to evaluate the expenditure of Oregon's Title monies. The following paragraphs describe the training conducted for twenty states last year.

Training for Utilization of the Oregon Third Party Evaluation Model

Staff from the Exceptional Child Research Program, Teaching Research, Monmouth, Oregon and the Director of Federal Programs for the Handicapped, Oregon State Department of Education conducted a series of three training workshops in the "Utilization of Third Party Evaluation Model". These workshops were funded by the Special Projects Program, Bureau of Education for the Handicapped, U. S. Office of Education.

The purpose of these workshops was to develop a core of trained personnel who could utilize a third party evaluation model similar to the one used in Oregon. This was achieved through the development of a manual of instruction and a Resource Planning Management Chart which described the activities involved in the model, the personnel required to carry out the activities and the outcomes or products of the activities. In addition, start and finish dates were provided for the activity as well as its duration. Combined with these materials were four oral presentations in which the evaluation activities were described to the entire group. Time was allocated for discussions in small groups, to complete probe questions and to fill in blank RPM charts. It was anticipated that the materials and presentations would allow each participant to:

- a. Demonstrate that he had information about the components of the third party evaluation model.
- b. Develop a plan to implement the third party evaluation plan in his own state.
- c. Initiate this plan and evaluate its effectiveness.

The following is a breakdown of conference sites, dates, states attending and the number of participants from each state who attended:

Conference I

Held in Portland, Oregon
January 30, 31 – February 1, 1973

States Attending	Number of Participants
Washington	2
Idaho	2
Louisiana	2
Utah	2
Nevada	2
TOTAL	<u>10</u>

Conference II

Held in Washington D.C.
March 20, 21, 1973

States Attending	Number of Participants
Texas	2
Arkansas	1
Alabama	2
Tennessee	2
Missouri	2
Kansas	2
Nebraska	2
TOTAL	<u>13</u>

Conference III

Held in Washington D.C.
March 22, 23, 1973

States Attending	Number of Participants
Massachusetts	2
Pennsylvania	2
Rhode Island	3
Connecticut	2
Minnesota	2
Wisconsin	2
Maryland	2
TOTAL	<u>15</u>

From each of these five states who attended Conference I a commitment to implement the model was received before the participants attended the conference. In addition, two days of follow-up will be provided by the Teaching Research staff to assist each state to implement the model.

For the participants who attended Conference II and III, objectives b and c were optional. There was no prior commitment to implement nor were any follow-up days provided by the Teaching Research staff.

Letters were directed to both the Director of Title VI and the Teaching Research staff which indicated that each of the conferences were felt to be beneficial toward assisting the participants to implement an evaluation model. Other information was acquired from evaluations filled out by each participant at the conclusion of each conference. The most positive feedback was directed toward the manual of activities and the RPM Network Chart. Participants felt that these materials combined with the oral presentations provided them with sufficient information to implement the model or parts of the model in their state.

Of the nineteen states who have attended these first three conferences, eighteen have given their verbal commitment to implement portions of the model. On-site follow-up and evaluation will be conducted with the states from Conference I and letter and telephone follow-up will be used with those states who attended Conferences II and III. Consequently, it will be eight months before specific implementation activities can be documented for each state. This information will be submitted to BEH in December 1973, in a final report.

Since the materials developed and the conferences have demonstrated themselves to be successful, staff from Teaching Research and Mr. McAllister are requesting that BEH extend their current contract so that similar training can be provided for other states who have not yet received the training. Five additional conferences will be conducted for two staff members from each state. Approximately thirty states and three territories will be served.

Results and Discussion of Title VI Projects in Oregon

Twenty-one projects were funded for the academic year September 1972 through June 1973. One project was funded for eight weeks as a summer project. Of the twenty-one projects, ten were located geographically in the Portland area and four in other areas of the Willamette Valley. The remaining seven projects were located in various parts of Central, Southern and Eastern Oregon. See Figure 1 for specific locations of all funded projects.

Of the twenty-one projects, eight were funded in the area of the emotionally disturbed, five for speech and language impaired, two for the educably mentally retarded, two in preschool, one for the learning disabled, one for multiply handicapped, one for visually handicapped and one for trainable mentally retarded. One thousand twenty-four children were served by the twenty-one projects. The total dollars expended for these services were \$253,909. The average cost per child for the academic year was \$247.96. It should be remembered, however, that many of these children were only being served for portions of the school day or portions of a week, while others were served in a total school program. For example in the area of speech and language, children were usually seen twice or three times per week for twenty to thirty minutes. Three hundred fifty children were served for approximately \$40,023 in five different projects. However, in the area of the emotionally disturbed, eight projects served 318 children for a cost of \$127,313. The bulk of this population were served on a full day basis. Table I provides a breakdown of the number and type of projects, number of children served and dollars expended by handicapping condition for this funding period.

Table I

Handicapping Condition	No. of Projects	No. of Children Served	% of Total	Dollars Funded	% of Total	Cost per Child	Remarks
Speech & Language Impairment	5	350*	34.18	\$ 40,023	15.76	\$119.35	*Children were part of a pre-school program
Emotionally Disturbed	8	318	31.05	127,313	50.14	400.36	
Learning Disabled	1	121	11.82	15,000	5.92	123.97	
Educable Mentally Retarded	2	118	11.52	18,901	7.44	160.18	
Preschool	2	91	8.89	33,000	13.00	362.64	
Multiply Handicapped	1	15	1.46	10,245	4.03	683.00	
Visually Handicapped	1	6	.59	8,325	3.28	1,387.50	
Trainable Mentally Retarded*	1	5	.49	1,102	.43	220.40	*Summer Program
TOTALS	21	1,024	100.00	\$253,909	100.00	\$ 247.96	

As can be seen in Table I eight projects were funded this year in the area of the emotionally disturbed. This has been designed as a priority area in the state by the Oregon Board of Education Staff. Consequently, recommendations were made to the Ad Hoc Committee to fund in that area. One hundred twenty-seven thousand three hundred thirteen dollars (\$127,313) were expended for projects for the emotionally disturbed.

This constitutes 50.14% of the total dollars available to school districts in the State of Oregon. The results of these eight projects indicate that the dollars spent were justified. One of the unique components of these projects for the emotionally disturbed is the delivery system utilized by the school districts to provide services to children. Of the eight projects servicing the emotionally disturbed population, four of them used the "resource room approach." This approach entails taking children from the regular classroom for varying periods of time depending on their needs. Tutorial assistance is provided in academic areas as well as structured programs for various behavior problems. The children are returned to the regular classroom for longer and longer durations of time during the school year as their behavior begins to reach criterion level of acceptable performance set by the regular teacher. The project in the Bethel School District served twelve emotionally disturbed children in this way. The Beaverton Project served fifteen children and the project from the Jackson County IED served twenty-two elementary age emotionally disturbed and/or educable mentally retarded children using the resource room concept.

Another approach for delivery of services was that of training classroom teachers to deal with emotionally disturbed children in the classrooms. This model was utilized in Portland for sixty-three children, in Lake Oswego for fifty-nine and in the Estacada Elementary School District for twenty-five emotionally disturbed children. This model was initiated by providing inservice training on a formal basis to classroom teachers and then providing a consultant to work with the classroom teacher on a one to one basis to assist the teacher to design intervention programs for various children who are experiencing behavior problems or academic deficiencies. Para-professionals were utilized to come into the classroom to assist the classroom teacher to take data on the occurrence of various problems the children were having.

Still another approach for serving the emotionally disturbed child was that utilized by the Eugene School District No. 4J. In this project, parents were trained to design and implement programs to accelerate academic behaviors and decelerate the occurrence of deviant behaviors. These were correlated to those programs provided in the regular classroom. The progress of parents and children was monitored by the staff.

The project at Edgefield Lodge included a classroom where structured behavior modification programs were utilized to decelerate undesirable behaviors in the home. Each of these projects is described in detail in the body of this report. All were extremely successful in accomplishing their objectives.

Many other projects had notable features which may have far reaching implications for special education in Oregon. In Baker County, six visually impaired children were served on an itinerant basis by a teacher of the visually impaired serving both Malheur and Baker Counties. These children attended classes in a regular public school setting and were provided extra help by the itinerant teacher as needed. If these children had not been served in this fashion, the alternative would have been residential placement at the School for the Blind in Salem. This would have required them to leave their families or have their families move to the Salem area. It is anticipated that the Baker County Title VI project will ultimately become the Eastern Oregon Regional Facility for the Blind.

Forest Grove Public Schools had a speech and language project for the second year. This project has two notable features: (1) the use of paraprofessionals to train children in the area of language and speech and, (2) an emphasis on language in lieu of articulation therapy for primary level children.

The project in Umatilla Intermediate Education District in LaGrande served severely developmentally handicapped preschoolers via parent training. The progress of the

children shows that it was a highly successful project.

In Wasco and Sherman counties, one hundred fifty-seven families of preschool children were provided training in the normal development of speech and language. Intervention procedures were specified that could be used to prevent speech and language problems in preschool children. It is anticipated that this project will decrease the size of caseloads of speech problems when these children enter public school.

In Lake County, eighty-one children were served on an itinerant basis by speech therapists covering a large geographic area and a very small number of school districts. In this project paraprofessionals were utilized to serve the children in the absence of the speech therapist. This was required because the therapist was unable to be in the school districts very often because of geographic and time constraints. While some problems were experienced getting school districts to accept the use of these paraprofessionals, great success was experienced by those who availed themselves of the procedure.

A careful examination of the twenty-one funded projects for this year would allow one to draw the following conclusions:

1. Resource rooms have demonstrated themselves to be an efficient way to serve both emotionally disturbed and EMR children.
2. Given appropriate training and technical assistance, the classroom teacher can cope with behavior problems and academic deficiencies in the classroom.
3. Preschool programs for the handicapped continue to demonstrate themselves to be useful.
4. Appropriate parent training can allow parents to cope with both behavior problems and remediation of academic deficiencies in the home.
5. Paraprofessionals (paid and volunteer) can be utilized successfully to remediate language and articulation problems.

In general, the Third Party Evaluation Team believes that the money spent on projects during this funding period was wisely expended. Significant behavioral change was shown by the handicapped children served and new teaching methods and delivery systems were tried and found to be successful. The dissemination of these data and procedures to other special education programs in Oregon should have significant impact on service to Oregon's handicapped children in the future.

Recommendations:

1. *That the Oregon Board of Education give priority to those projects in the future which examine the effects of the integration of multiply handicapped and/or developmentally disabled children with "normal" children in a regular classroom.*

Rationale: In the past five years, the concept of integrating severely handicapped and developmentally disabled children into the regular classroom has become a popular concept. The theory behind the concept is that if individualization is being used in a classroom that a classroom teacher can provide for the idiosyncratic needs of any child regardless of the severity of the handicap. A further purported advantage to integration is the elimination of categorization of children and the isolation of these children in separate classrooms. While these third party evaluators do not accept or reject these theories, they do feel that little data are available to support the advantages of integration. It would seem that the following areas need to be examined in more detail before acceptance or rejection can be given to the concepts of integration.

- A. Which types of handicapped children can successfully be integrated into a regular classroom?
- B. When compared with isolated settings, does integration provide for accelerated acquisition of academics and social behaviors for the handicapped child?
- C. Does integration have any detrimental effect on the "normal" child?
- D. Even if academic behaviors are accelerated for the handicapped child, is the social behavior of the child affected adversely?

It would appear that funding Title VI projects in the future to examine and gather information about the effects of integration would provide some positive information for other special education programs who are considering the use of this procedure.

2. *That the Oregon Board of Education give priority to those projects which examine procedures used to provide vocational education and work experience for handicapped children.*

Rationale: The reasoning underlying the education of handicapped children in public schools in Oregon is to develop ultimately young men and women who are able to take their place in society to be independent citizens. This requires skills to serve and maintain a job over a sustained period if independence is to be forthcoming. It has been the observation of the third party evaluation team that vocational education for the handicapped has not developed nor utilized procedures which will allow this to happen adequately. Many training procedures have evolved over the past ten years which have demonstrated themselves to be effective in training the handicapped in the areas of academic and social behaviors. Some of these are: the development and utilization of task analysis; utilization of data collection systems which allows teachers to make decisions regarding changes in programming for children, the utilization of consequences which provides immediate reinforcement for desirable behavior and feedback for undesirable behavior. All of these procedures have demonstrated themselves to be successful. It is the opinion of the third party evaluators that they would be equally successful in the areas of vocational education of the handicapped. Therefore, it would appear to be advisable that school districts in Oregon be encouraged to submit proposals which would examine the effectiveness of these procedures in the area of vocational education.

3. *That the coordinator of federal programs at the Oregon Board of Education develop a plan to increase the amount of technical assistance provided to school districts who wish to submit proposals to the Oregon Board for Title VI funds.*

Rationale: During the past six years there can be little doubt that the sophistication of school districts to develop and write proposals for funding under Title VI has increased immensely. This sophistication is particularly noted in the district's ability to specify objectives and to utilize effective evaluation strategies. Objectives are now stated in behavioral terms which are much less vague and ambiguous, and evaluation strategies are precise and specifically related to evaluate the effectiveness of the objectives. This is particularly true in those school districts who have been funded for a number of Title VI projects over the past six years. However, some districts in Oregon are submitting Title VI projects for the first time. They have very little experience in the development of proposals and therefore require additional technical assistance during that time when they are developing the proposal. There are staff and consultants at the Oregon Board of Education who have the expertise to provide this technical assistance to the local school districts who require it. Therefore, it is highly recommended that the coordinator formulate a plan whereby this assistance can be provided.

4. *That the Coordinator of Federal Programs for the Handicapped at Oregon Board of Education develop a plan which specifies what steps are to be taken when projects do not serve the number of children specified, or run for the duration specified in the project proposal.*

Rationale: Over the past six years there have been a number of projects that for a variety of extenuating circumstances have not served the number of children which they indicated they would serve, or they were unable to initiate the project at the beginning of the year. The circumstances and reasons given for these problems are in most instances justified and understandable. In some instances, the population, particularly when it is small to begin with, is somewhat itinerant or shifting and children move during the summer. In other instances classrooms are not available when it was purported that they would be available. Consequently, the project is unable to begin at the specified time. In other instances, appropriate staff cannot be employed simply because they are not available despite the best efforts of the administration of the school district to recruit such staff. While the third party evaluators certainly understand and agree that these are acceptable reasons why changes in the projects should be made, there are no provisions which control the reduction of funds for specific deficiencies. It is the opinion of the third party evaluators that a policy be drafted and stated in the RFP which is sent to school districts.

5. *That Oregon Board of Education continue the Third Party Evaluation model for not only Title VI Programs but extend it to Title I, and EMR programs. Mental Health Division already uses a modified TPE for TMR programs.*

Rationale: The third party evaluation model utilized by the Oregon Board of Education to monitor Title VI Programs has demonstrated itself to be an effective one. The major component of its success has been its ability to demonstrate that behavioral changes have been made in programs funded through Title VI. Since Title I and Oregon EMR Programs have earmarked funds for handicapped children, it would appear that these programs could be improved if this evaluation model was utilized to monitor the progress of funded projects.

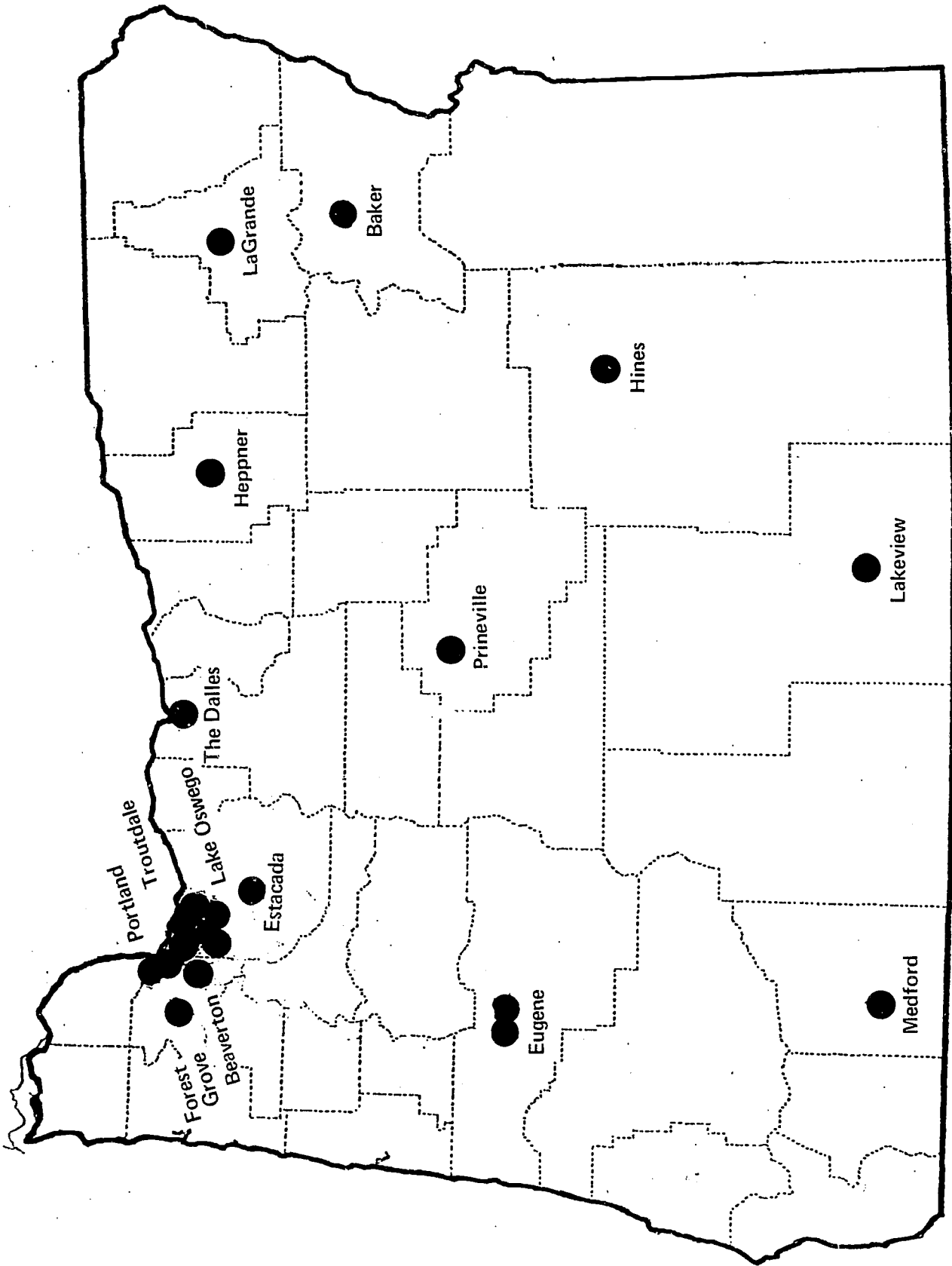


Figure 1 ● location of funded Title VI Projects

Title of Project: *Jackson County IED Educational Resource Center*

Location of Project: *Walker Elementary School
364 Walker Street
Ashland, Oregon 97520*

Type and Number of Children Served: *22 elementary school aged educable mentally retarded or emotionally handicapped children.*

Funding Allocated: *\$7,901*

Project Beginning Date: *August 28, 1972*

Project Ending Date: *June 8, 1973*

Background and Rationale:

The Jackson County Intermediate Education District is responsible for providing special education services either partially or wholly, to all school districts within its geographical boundaries. Up until the 1972-73 school year, the services for elementary aged educable mentally retarded consisted of two self-contained classes and there were no services for emotionally handicapped. This was seen as a serious gap in light of a potential 175 students (U.S. Office of Education incidence figures, January, 1969) who could be served.

Additionally, those educable mentally retarded children who were being served were involved in a traditional self-contained class model. This model was considered weak due to the following:

- A. Children enrolled in the program were labeled as retarded which resulted in (1) suspected social interaction problems for those enrolled, and (2) in the failure of many parents to enroll their children in the program at all.
- B. Children were removed from the mainstream of education during their school years. They then were expected to return to the mainstream of society as independent adults at the completion of school.
- C. There was no clear cut evidence that special class placement for handicapped children leads to higher academic achievement or social adjustment than does placement in the regular class with no special assistance.

Due to the above factors a new treatment model, based on one successfully employed by the Franklin Pierce School District, Tacoma, Washington, was initiated. The program was based on the resource room model where children spend at least a portion of their day in a regular class.

Objectives and Evaluation Plan:

Training for Resource Teachers

1. Presented with tasks in behavior management, the resource teacher will write corrective programs to include cue presentation, criterion levels of acceptable behavior, types of consequences, schedules of reinforcement, and methods of recording data.

Behavioral changes as specified by the programs will be measured.

2. Presented with tasks in the instructional areas of reading, mathematics, language and motor development, the resource teacher will define and establish a sequence of skills needed by a student in order to teach terminal objectives of those tasks.

Teachers will submit a list of published sequences used and/or teacher developed sequences used.

3. Presented with a student, the resource teacher will identify that student's skill competencies in the instructional areas of reading, mathematics, language and motor development, using appropriate diagnostic tools.

Teacher will submit results of diagnostic tests.

4. Presented with skills needed by a student in order to teach a task, the resource teacher will write behavioral objectives to include conditions of cue presentation, an observable behavior or product, and acceptable criterion levels.

Teacher will submit samples of objectives used in the program.

5. Presented with a behavioral objective to teach a skill, the resource teacher will write a prescriptive program to include procedures of instruction, criterion levels of acceptable behavior, types of consequences, schedules of reinforcement and methods of recording data.

Teacher will submit samples of prescriptive programs.

6. *Presented with appropriate materials in the instructional areas of reading, mathematics, language and motor development, the resource teacher will select for use those materials which will aid in teaching the necessary skills to master each step in the sequence of skills.*

Teacher will submit samples of materials used for specified programs.

7. *Presented with data on a student's performance in a prescriptive program, the resource teacher will base further instruction on the evaluation of the data.*

Teacher will submit samples of data from prescriptive programs and the resultant programs written.

8. *Presented with data specified by the consultants as indicating that a child is functioning at skill levels appropriate to placement in the regular classrooms, the resource teacher will assist the regular classroom teacher in that placement.*

Resource teacher will record the process developed to place handicapped children in the regular class.

9. *Presented with a regular class teacher who has integrated handicapped children into her classroom, the resource teacher will assist in training her in diagnosis, prescription, and evaluation of programs of those children.*

Resource teacher will submit a record of training which she conducts with regular class teachers.

In-Service Training for Regular Classroom Teachers

1. *Presented with the regular class teachers in in-service training, the resource teacher and staff members of Teaching Research will describe the functioning of the resource room and the resource teacher.*

Trainers will submit a written description of the function of the resource room and the role of the resource teacher.

2. *Presented with regular class teachers in in-service training, the resource teacher and staff members of Teaching Research will provide instruction to include: (a) a background in the learning principles of operant technology; (b) techniques of behavior management, both group programs and individual programs; (c) diagnosis of individual skill deficiencies; (d) selection and use of materials for the implementation of prescriptive programs; and (e) gathering data, recording data, and evaluating data as a basis for instruction.*

Trainers will submit copies of in-service programs.

3. *Given the instruction on implementation of the above stated objectives is delivered, each classroom teacher in the project school will implement a minimum of one behavior management program and one prescriptive instructional program in her classroom in*

the first year of the project.

Copies of programs developed will be submitted.

Methodology:

The Educational Resource Center (ERC) was located in two classrooms at Walker Elementary School, Ashland. One room served as the Resource Classroom and one room as office, materials preparation and tutoring center.

The center was limited to serving 15 students on a full-time basis at any one time. These students were referred to the center from two primary sources: (1) two pre-existing self-contained EMR classes which were disbanded when the ERC opened, and (2) referrals from public schools and a regional treatment center for severely disturbed children (Southern Oregon Child Study and Treatment Center) for children with behavior problems. The children came from four school districts and the majority were bussed to the ERC.

When the Educational Resource Center opened in the Fall, the original 15 students were enrolled with the center for a full day (generally only five hours due to bus scheduling). The students were initially assessed on the pretest instruments plus other diagnostic tests. They were then placed into individualized programs in their skill deficient areas. Over the year these areas included reading, math, spelling, handwriting, timetelling, and music. Criterion levels were set for each academic program on a daily basis. The next day's program was based on the most recent data taken.

Due to a variety of inappropriate classroom behaviors, all students in the ERC were initially placed on a standardized token economy. Points were given to all students for appropriate behaviors. The points could be exchanged at the ERC store for a variety of small items and privileges. Points were exchanged on a daily basis for a short period of time. This was gradually extended to a weekly exchange (see Figure 1).

In March a change-over was made so that completed work earned free time rather than tangible items for two-thirds of the students. By June all students were earning free time rather than points for items. In addition to the standard token economy, behavior programs were written and initiated on an individual basis when necessary.

Students were integrated into regular classes on an individual basis when they were judged ready. In general, integration was initially undertaken first for non-academic subjects and later for academic ones.

In addition to the primary service of integrating children into regular classes, the ERC also provided the following:

1. *Consultation to schools and agencies on request. This most often was for behavior programming, diagnostic testing, speaking to groups, and providing resource*

information. The ERC spent approximately 100 hours engaging in 150 consultations.

2. Development of a reading skills file at Walker School. This included inservice training to teachers and principals and supervision and training of five parent volunteers who ran the skills file.

Figure 1

POINT CHART

POINTS

I. Academic	
A. Completes Assignment	3
B. Scores at or above criterion level	2
C. Scores 100%	2
II. Behavior	
A. Uses Flag	1
B. Looks at Work	1
C. Works Quietly	1
D. (D, E, F. are filled in based on each student's program)	-
E. _____	-
F. _____	-

Results:

Training for Resource Teachers

1. Presented with tasks in behavior management, the resource teacher will write corrective programs to include cue presentation, criterion levels of acceptable behavior, types of consequences, schedules of reinforcement, and methods of recording data.

Examples of programs prepared follow:

Behavior Modification Program

Behavior Modifier ERC - SOCSTC Date 2/6/73

Student Wally M

Method

I. Definition of Behavior(s):

A. Current Behavior

Wally engages in 4 inappropriate playground behaviors between 12:30 -- 1:00 p.m. daily. Wally engages in 4 appropriate playground behaviors between 12:30 -- 1:00 p.m. daily.

B. Terminal Behavior

Wally engages in 0 inappropriate playground behaviors between 12:30 -- 1:00 p.m. daily. Wally verbally gives one evaluation statement on his playground behavior, daily, that agrees with the observer's evaluations. Wally engages in 1 more appropriate behavior each day than the previous high number.

Appropriate behavior is defined as being on the blacktop, and (1) Verbal, being quiet or talking in a normal tone; (2) Physical: playing alone or with others such that he is not noticed negatively by the playground aide.

Inappropriate behavior is defined as: (1) being off the blacktop; (2) swearing and talking loudly; (3) being on the ground; (4) pushing or hitting so that he is noticed by playground aide.

II. Methods of Recording:

A. Frequency of Observations

Daily from 12:30 -- 12:55 for 15 seconds at 2 minute intervals.

B. Plotting and Graphing Data

Graph number of appropriate and inappropriate behaviors.

Education Prescription

III. SD or cue changes

Treatment 1: Verbal

Explain program to Wally. Suggest appropriate play daily on playground (ex. basketball, 4 square)

Treatment 2: Explain program to Wally

IV. Consequences:

Treatment 1

(1) Type

One point daily for each of the following:

- (a) appropriate evaluation of morning recess
- (b) appropriate evaluation of lunch recess
- (c) one more appropriate playground behavior than the previous high
- (d) each appropriate playground behavior over the required total

(2) Method and frequency of delivery --

Delivered at 10:00 and 1:00 daily by ERC playground supervisor, both verbally to Wally and in writing to SOCSTC.

Treatment 2

(1) Type

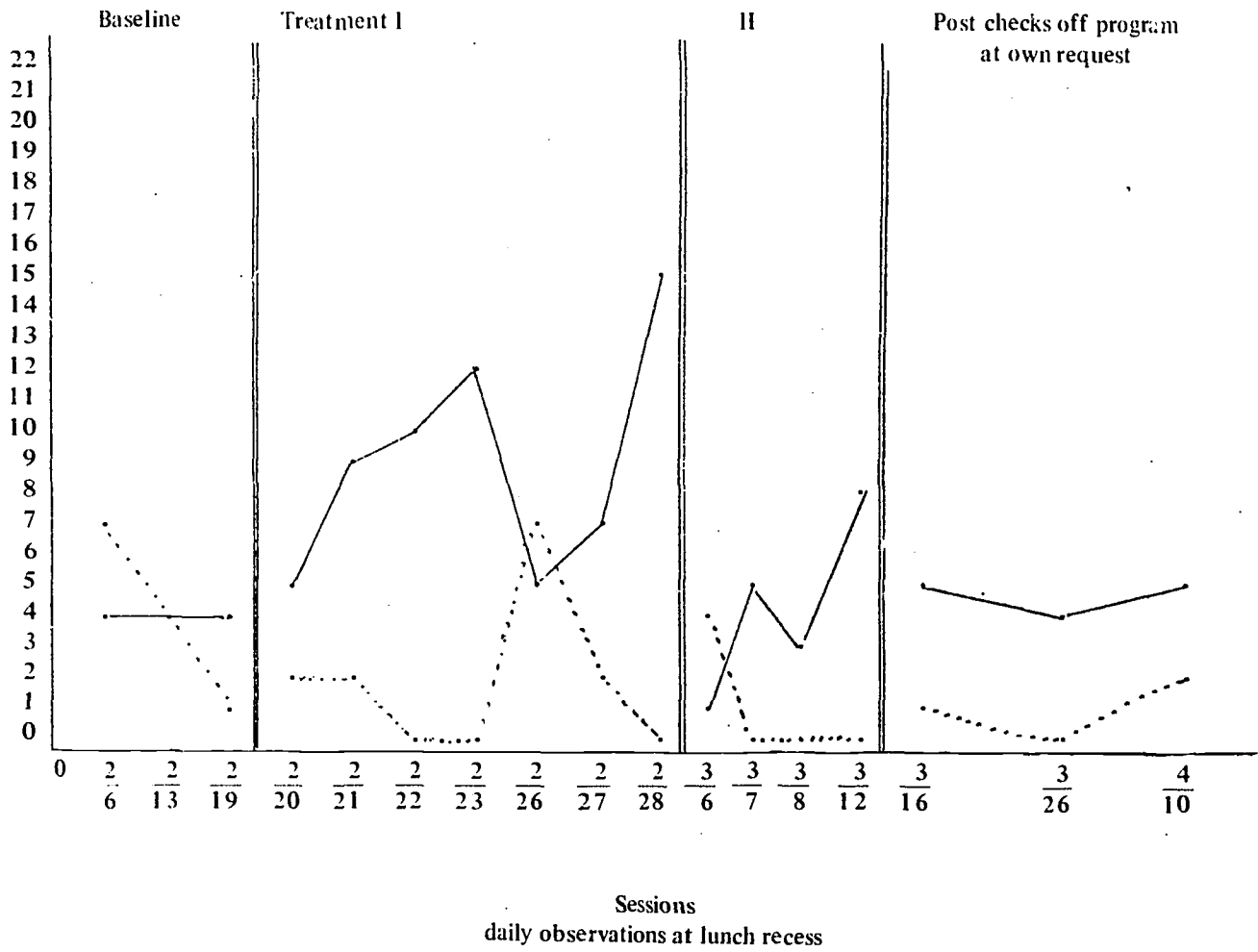
One point daily for each of the following:

- (a) appropriate evaluation of lunch recess
- (b) each observed interaction with student outside our class (this is now the definition of appropriate playground behavior)

(2) Method of frequency of delivery --

Delivered at 1:00 daily by ERC playground supervisor, both verbally to Wally and in writing to SOCSTC.

Behavior Modification Data Sheet



Behavior Modifier ERC - S.H.

Student Wally M.

- appropriate behavior
- inappropriate behavior

Behavior Modification Program

Behavior Modifier D.W., D.G. Date 11/2/72

Student Linda A.

Method

I. Definition of Behavior(s):

A. Current Behavior

- (1) Linda does not follow 8% of group directions within 30 seconds.
- (2) Linda does not follow 45% of individually given directions within 30 seconds.

B. Terminal Behavior

- (1) Linda responds to all directions daily during the PE period within 30 seconds.

II. Methods of Recording:

A. Frequency of Observations

- (1) Daily frequency count of group directions given and followed and individual directions given and followed in PE class.
- (2) Plotting and Graphing Data
Percent of individual and group directions followed daily will be graphed.

Education Prescription

III. SD or cue changes (instructions, etc.):

A. Verbal

Explain program to Linda and remind her of it on gym days

B. Nonverbal

None

IV. Consequences:

A. Type

Ten minutes of free-time with student teacher immediately after PE class by student teacher if 100% of individually given are followed.

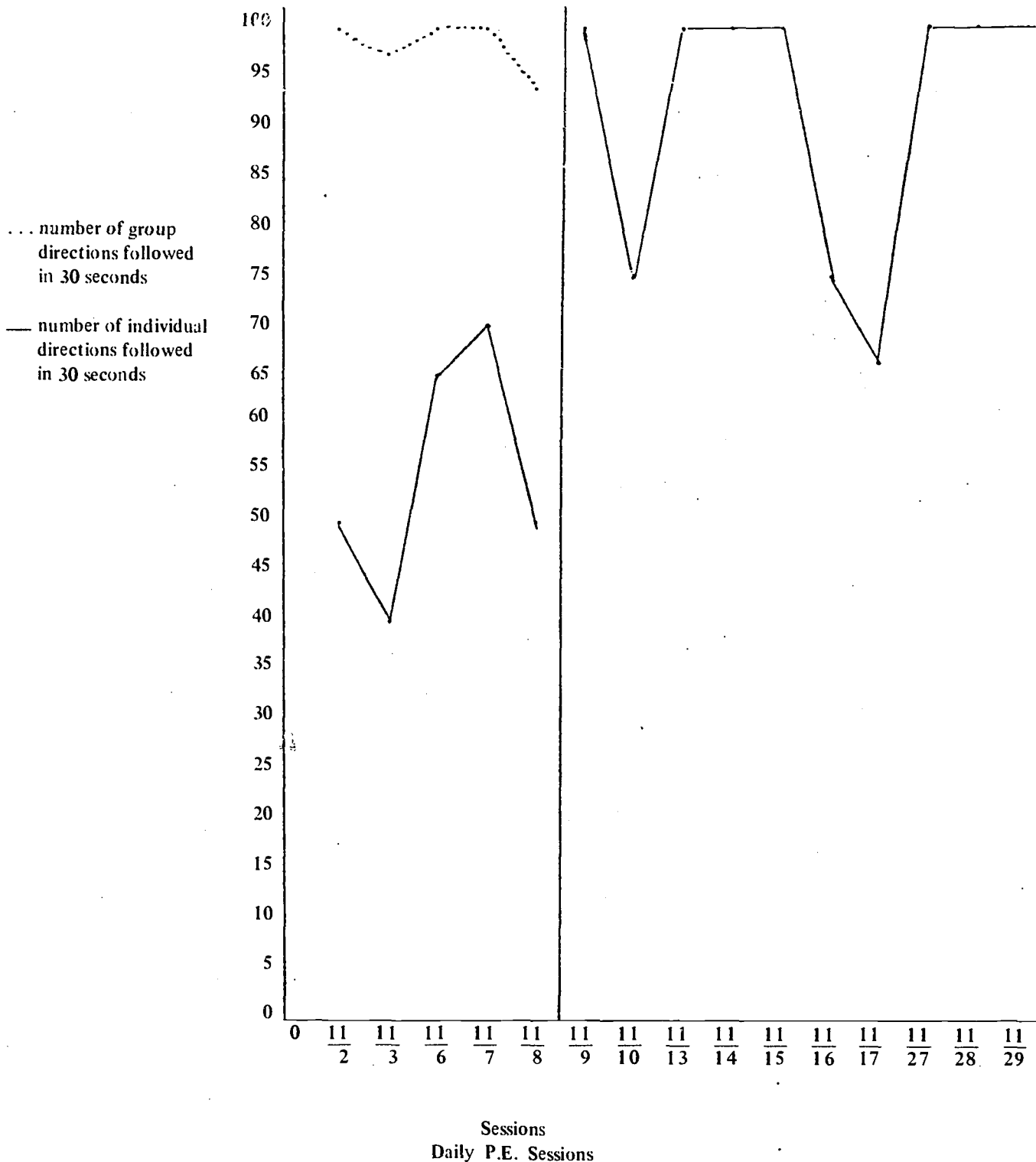
B. Method and frequency of delivery

Linda is to be told immediately after PE class by student teacher whether or not she has earned free time. If she has, she is to have free time immediately.

V. Comments concerning program and/or student's behavior:

11/8/72 A. Program on group directions was not run due to Linda's high correct rate.

Behavior Modification Data Sheet



Behavior Modifier D.G.

Student Linda A.

Behavior Modification Program

Behavior Modifier J.R. - S.C. Date 3/1/73

Student Jon R.

Method

I. Definition of Behavior(s):

A. Current

Jon attends to his work 15% of the time in an observed half hour.

B. Terminal

Jon attends to his work 90% of the time in an observed half hour. Attending is defined as looking at his work or the teacher and not being engaged in inappropriate activity.

II. Methods of Recording

A. Frequency of observations

1. daily at 2 minute intervals by teacher for one-half hour
2. weekly at two minute intervals for one-half hour by ERC observer

B. Plotting and Graphing Data

Percent of attending will be graphed weekly by ERC observer.

Education Prescription

III. SD or cue Changes

A. Verbal

Explain program to Jon. Remind Jon of program in morning for first week.

B. Non Verbal

None

IV. Consequences:

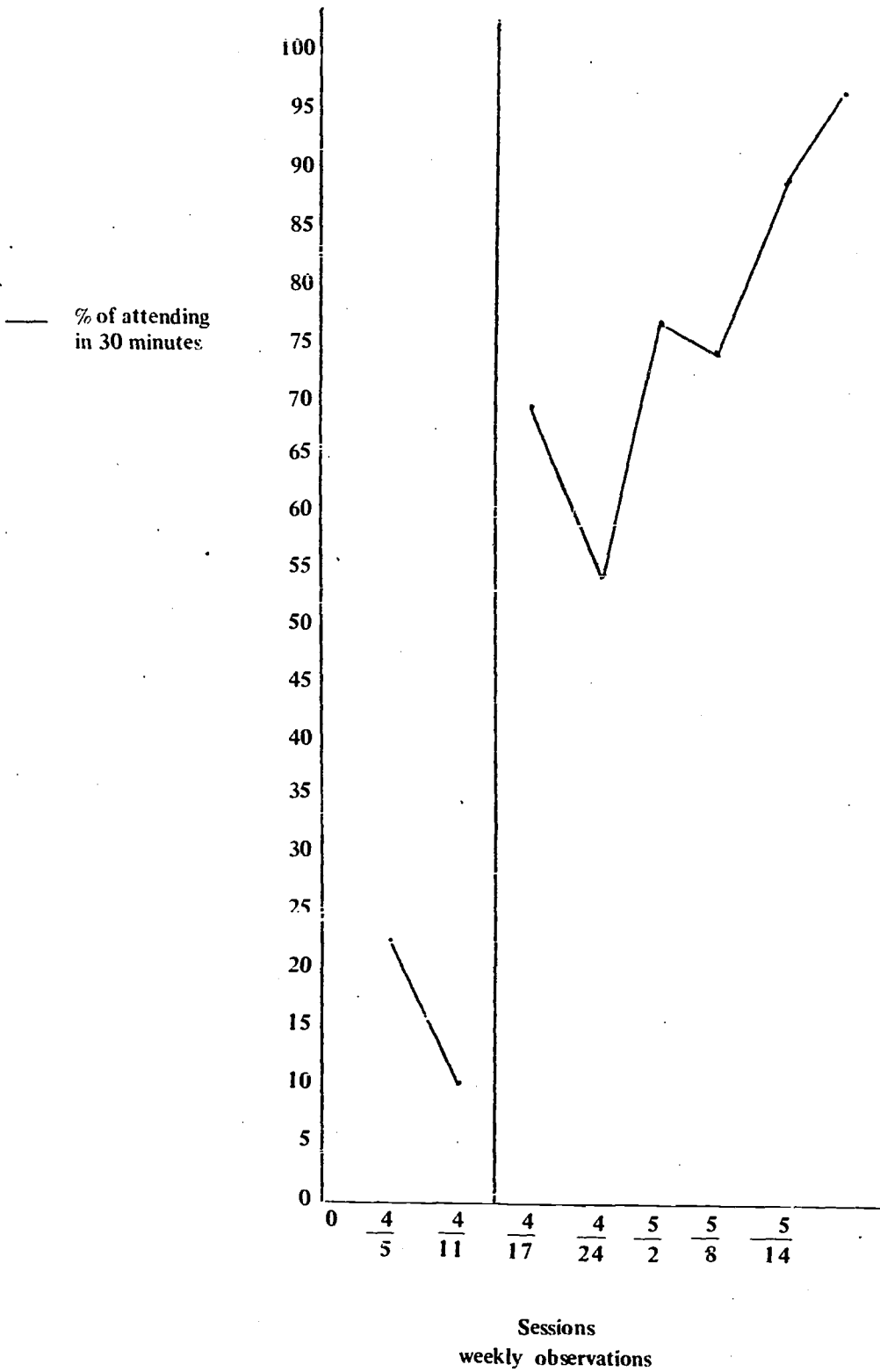
A. Type

Points on desk card to earn 10 minutes of free time. He will need 10 points initially to earn free time. This will go up 1 point every 3 consecutive earned days.

B. Method and frequency of delivery

To be delivered by student teacher every two minutes that Jon is attending. Every point will be accompanied by verbal praise.

Behavior Modification Data Sheet



Behavior Modifier

J.R. - S.C.

Student

Jon R.

2. Presented with tasks in the instructional areas of reading, mathematics, language and motor development, the resource teacher will define and establish a sequence of skills needed by a student in order to teach terminal objectives of those tasks.

The programs utilized were as follows and were then individualized for each student. Records for each student are available for examination.

A. Language

1. Distar Language I
2. Peabody Language Development Kit III

B. Mathematics

1. Continental Press Step-by-Step Math Kit B.
2. Teacher-made worksheets

C. Motor Development

1. Skills sequences were developed as part of the regular school curriculum by physical education specialists based on the recommendations of the

American Association of Health, Physical Education and Recreation.

D. Reading

1. Distar Reading Kit I
2. BRL Sullivan Programmed Reading
3. SRA Reading Labs -- 1a and 1c
4. Readers' Digest Skill Builders
5. Manzanita Reading Skills Program, Manzanita Elementary School, Grants Pass, Oregon
6. Reading Skills File, Teacher-made
7. Reading Conference Program, Teacher-made
8. Dolch Cards
9. Continuous Progress in Spelling, Economy Company

3. Presented with a student, the resource teacher will identify that student's skill competencies in the instructional areas of reading, mathematics, language and motor development, using appropriate diagnostic tools.

Jackson County
Intermediate Education District

Table I

1133 South Riverside
Medford, Oregon 97501

Educational Resource Center

Pre- and Posttest Results
Metropolitan Reading Test

Scores are in grade level for Primary I, Primary II, and Elementary Tests;
in percentages for Primer Test
Ages 7 - 14

Student	Months In Program	Sounds		Word Knowledge		Word Analysis		Reading		Total Reading	
		Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	9	58%	70%	*	*	*	*	*	*	32%	99%
2	5	1.2	---	*	*	*	*	*	*	1.2	---
3	9	*	*	2.1	2.5	1.8	2.5	1.9	2.0	1.9	2.1
4	.3	---	---	---	---	---	---	---	---	---	---
5	.1	---	---	---	---	---	---	---	---	---	---
6	2	*	*	2.2	3.0	2.0	2.1	4.9	2.7	2.7	2.7
7	4	*	*	2.5	2.5	2.1	2.0	2.0	1.5	2.2	1.9
8	5	40%	48%	*	*	*	*	*	*	54%	99%
9	7	*	*	2.5	3.0	2.0	2.7	2.3	2.4	2.3	2.5
10	1	*	*	4.8	4.8	*	*	3.3	4.3	3.9	4.5
11	9	*	*	2.4	2.7	*	*	1.5	2.3	2.0	2.4
12	9	44%	23%	*	*	*	*	*	*	42%	28%
13	1	20%	28%	*	*	*	*	*	*	12%	58%
14	9	58%	99%	*	*	*	*	*	*	72%	99%
15	9	82%	48%	*	*	*	*	*	*	44%	84%
16	6	*	*	5.0	6.1	*	*	5.9	5.9	5.3	6.0
17	9	70%	94%	*	*	*	*	*	*	42%	82%
18	9	23%	40%	*	*	*	*	*	*	18%	77%
19	9	*	*	1.6	2.3	1.8	2.2	1.9	1.8	1.8	2.0
20	9	*	*	3.7	3.9	*	*	3.5	4.4	3.5	4.1
21	4	*	*	3.0	---	2.3	---	2.2	---	2.3	---
22	9	58%	94%	*	*	*	*	*	*	58%	96%

* Indicates that test did not apply

--- Indicates student was not available for test.

Table II

Pre- and Posttest Results
Stanford Diagnostic Arithmetic Test

Student	Months In Program	TEST I - CONCEPTS				TEST II - COMPUTATION			
		Pre		Post		Pre		Post	
		Raw Score	G.E.	Raw Score	G.E.	Raw Score	G.E.	Raw Score	G.E.
1	9	14	below 1.5	13	below 1.5	13	2.5	14	2.5
2	5	7	below 1.5	--	--	2	below 1.6	--	--
3	9	8	below 1.5	15	below 1.5	6	below 1.6	12	2.3
4	3	15	below 1.5	--	--	7	2.1	--	--
5	1	--	--	--	--	--	--	--	--
6	2	30	2.1	40	2.6	23	3.1	23	3.1
7	4	26	1.9	39	2.5	15	2.6	26	3.3
8	5	--	below 1.5	--	2.1	--	1.8	--	2.7
9	7	11	below 1.5	16	below 1.5	0	below 1.6	15	2.6
10	1	42	2.6	43	2.7	32	3.3	37	3.6
11	9	16	below 1.5	58	4.2	19	2.8	31	3.6
12	9	5	below 1.5	13	below 1.5	0	0	8	1.9
13	1	--	--	--	--	--	--	--	--
14	9	14	below 1.5	22	1.6	0	0	14	2.5
15	9	5	below 1.5	8	below 1.5	2	below 1.5	4	below 1.6
16	6	59	4.0	60	4.3	43	3.8	33	3.4
17	9	14	below 1.5	25	1.9	1	below 1.6	21	2.8
18	9	7	below 1.5	10	below 1.5	0	0	0	0
19	9	18	below 1.5	40	2.6	15	2.6	24	2.9
20	9	20	below 1.5	33	2.3	11	2.4	19	2.8
21	4	16	below 1.5	--	--	7	2.1	--	--
22	9	12	below 1.5	11	below 1.5	0	0	22	3.0

-- Indicates that student was not available for test.

Table III

Pre- and Posttest Scores for the Britton Phonic Inventory

Scores are in Percentage Correct

Student	Months In Program	A Letter Symbols		B Initial Sounds		C Blends		D Consonant Diagraphs		E Vowels In Context		F Vowels In Isolation	
		Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	9	100%	100%	84%	92%	50%	73%	17%	33%	0%	80%	90%	100%
2	5	96%	--	96%	--	34%	--	0%	--	80%	100%	100%	--
3	9	84%	96%	80%	100%	27%	27%	11%	0	80%	90%	90%	100%
4	.3	96%	--	92%	--	34%	--	0	--	80%	--	60%	--
5	.1	--	--	--	--	--	--	--	--	--	--	--	--
6	2	84%	92%	88%	92%	50%	69%	0	77%	70%	90%	60%	70%
7	4	100%	92%	92%	96%	50%	57%	88%	94%	90%	90%	100%	100%
8	5	80%	88%	61%	88%	0%	38%	0	72%	0	10%	70%	80%
9	7	100%	100%	50%	100%	0%	61%	38%	61%	70%	100%	90%	100%
10	1	100%	100%	96%	86%	92%	100%	100%	100%	100%	100%	100%	100%
11	9	57%	D	73%	D	50%	D	3%	D	60%	D	60%	D
12	9	96%	100%	73%	88%	3%	0	0	16%	20%	10%	80%	80%
13	1	11%	26%	0	3%	6%	0	0	0	0	0	0	40%
14	9	100%	100%	88%	96%	3%	73%	6%	94%	20%	100%	90%	100%
15	9	19%	76%	38%	75%	0	0	0	0	65%	10%	0	90%
16	6	100%	100%	100%	100%	61%	100%	80%	80%	90%	80%	90%	100%
17	9	76%	100%	73%	80%	0	88%	6%	76%	0	70%	70%	100%
18	9	84%	100%	34%	84%	0	11%	0	50%	30%	50%	100%	100%
19	9	100%	100%	88%	100%	30%	38%	72%	77%	70%	90%	90%	100%
20	9	100%	100%	100%	96%	46%	40%	94%	61%	80%	100%	90%	100%
21	4	100%	--	96%	--	65%	--	61%	--	90%	--	90%	--
22	9	96%	100%	84%	84%	0	11%	23%	0	0	80%	0	90%

D Indicates not given because student is deaf and did not have his hearing aid
 -- Indicates student was not available for test

Table IV

Pre- and Posttest results for the Northwestern Syntax

Scores are in number correct out of 40 possible

Student	Months In Program	Receptive		Experience	
		Pre	Post	Pre	Post
1	9	33	30	36	30
2	5	32	--	35	--
3	9	33	28	36	29
4	.3	35	--	37	--
5	.1	--	--	--	--
6	2	33	37	34	39
7	4	36	30	40	40
8	5	33	31	25	34
9	7	35	39	37	34
10	1	38	38	9	37
11	9	18	22	7	30
12	9	27	32	28	33
13	1	10	20	10	8
14	9	26	31	31	27
15	9	30	31	36	33
16	6	37	38	37	37
17	9	32	38	37	35
18	9	18	23	8	12
19	9	35	40	30	40
20	9	32	38	33	27
21	4	35	--	32	--
22	9	33	30	30	26

-- Indicates that the student was not available for testing

Table V

Pre- and Posttest Results for the
Basic Concept Inventory

Scores are In Number Wrong Out of a Total of 144 Items

Student	Months In Program	Part I Concepts		Part II Statement Repetition		Part II Questions		Part III Sequencing – Say It Fast		Total	
		Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	9	-23	-11	-7	-7	-5	-14	-7	-6	-39	-38
2	5	-6	-	-1	-	-1	-	-2	-	-10	-
3	9	-14	-2	-1	-0	-5	-3	-9	-7	-29	-12
4	.3	-	-	-	-	-	-	-	-	-	-
5	.1	-	-	-	-	-	-	-	-	-	-
6	2	-4	-2	-1	-1	-4	-0	-4	-0	-17	-3
7	4	-	-	-	-	-	-	-	-	-22	-12
8	5	10	-8	-0	-1	-2	-0	-2	-4	-14	-13
9	7	-12	-10	-2	-0	-4	-1	-0	-2	-18	-13
10	1	-10	-8	-0	-0	-0	-3	-4	-2	-14	-13
11	9	-30	-19	-32	-0	-10	-6	-12	-6	-84	-31
12	9	-12	-8	-0	-2	-7	-3	-2	-1	-21	-14
13	1	-31	-20	-6	-15	-8	-7	-11	-8	-56	-50
14	9	-9	-11	-1	-0	-1	-1	-0	-2	-11	-14
15	9	-12	-9	-0	-0	-6	-3	-2	-0	-20	-12
16	6	-13	-8	-2	-0	-4	-2	-2	-0	-21	-10
17	9	-8	-9	-0	-0	-2	-1	-0	-0	-10	-10
18	9	-41	-20	-21	-29	-12	-5	-11	-8	-85	-62
19	9	-14	-8	-2	-0	-0	-1	-0	-0	-16	-9
20	9	-7	-4	-0	-0	-1	-2	-6	-2	-14	-8
21	4	-6	-	-0	-	-0	-	-3	-	-9	-
22	9	-8	-10	-0	-12	-2	-1	-1	-1	-11	-24

- Indicates student was not available for test

Table VI

Pre- and Posttests for AAHPHR

Student	Months In Program	Soft Ball Throw		50 Yd. Dash		Sit Ups		Pull Ups		Shuttle Run		600 Yd. Dash		Standing Long Jump	
		Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	9	38'	60'	12"	12.1"	4	50	0	4	16"	14"	4:5'	3:25'	2'3"	3'
2	5	34'	--	10:2"	--	10	--	0	--	16"	--	4:19'	--	3'8"	--
3	9	45'	53'	9:2"	8.5"	15	60	6	3	11"	11:5	4:17'	2:49	4'5"	4'10"
4	.3	--	--	--	--	--	--	--	--	--	--	--	--	--	--
5	.1	--	--	--	--	--	--	--	--	--	--	--	--	--	--
6	2	80'	--	10"	--	20	--	1	--	17"	--	1:30'	--	4'8"	--
7	4	46'	--	9"	--	7	--	0	--	10"	--	3:20'	--	4'3"	--
8	5	*	*	*	*	*	*	*	*	*	*	*	*	*	*
9	7	18'	--	14"	--	0	--	0	--	17"	--	4:19'	--	2'11"	--
10	1	*	*	*	*	*	*	*	*	*	*	*	*	*	*
11	9	80'	--	8:7"	--	37	--	0	--	14"	--	2:41"	--	4'2"	--
12	9	30'	35'	9"	8:8"	19	50	8	8	13:9"	11:9"	2:9'	2:26'	2'5"	4'9"
13	1	15'	--	14"	--	0	--	0	--	23"	--	2:10'	--	2'3"	--
14	9	52'	--	10:1"	--	59	--	1	--	17"	--	2:53'	--	3'11"	--
15	9	42'	68'	10:3"	9:1"	7	17	0	0	15"	--	3:08'	3:56'	4'0"	4'10"
16	6	38'	80'	12"	10:4"	20	60	1	1	12"	14.6"	3:30'	3:25'	4'0"	4'0"
17	9	68'	85'	8:2"	8:9"	20	14	0	1	13:2"	11:3"	2:26'	2:30'	4'0"	5'6"
18	9	40'	--	10"	--	20	--	5	--	15"	--	4:7'	--	3'4"	--
19	9	32'	36'	10:4"	10:3"	12	21	0	0	18"	13"	3:33'	4:02'	3'6"	4'6"
20	9	42'	55'	9:2"	8:3"	30	50	15	20	14:5"	11:6"	2:51'	2:24'	5'2"	5'4"
21	4	72'	--	8:8"	--	50	--	--	--	14"	--	2:32'	--	4'2"	--
22	9	72'	73'	7:2"	8:2"	17	33	2	3	16"	11:4"	3:12'	3:11'	4'1"	5'3"

-- Indicates that student was not available for testing.
 * Indicates that student was not tested due to physical handicaps.

4. *Presented with skills needed by a student in order to teach a task, the resource teacher will write behavioral objectives to include conditions of cue presentation, an observable behavior or product, and acceptable criterion levels.*

See behavioral objectives written for Objectives No. 1 and No. 5.

With the exception of the objectives written for prescriptive and behavior programs the majority of the ERC's objectives were taken from the commercial programs listed in Objective No. 2. These were supplemented with the following criterion levels.

A. Language Criterion Level

- 1. Distar Language I 100%
- 2. Peabody Language Development Kit III 80%

B. Mathematics

- 1. Continental Press Step-by-Step Math Kit B 80%
- 2. Teacher-made worksheets 80%

C. Motor Development

- 1. Skills sequences were developed as part of the regular school curriculum by physical education specialists based on the recommendations of the American Association of Health, Physical Education and Recreation.

D. Reading

- 1. Distar Reading Kit I 100%
- 2. BRL Sullivan Programmed Reading I error per page
- 3. SRA Rading Labs -- 1a and 1c 80%
- 4. Readers' Digest Skill Builders 80%
- 5. Manzanita Reading Skills Program 100%
Manzanita Elementary School
Grants Pass, Oregon
- 6. Reading Skills File, Teacher-made 100%
- 7. Reading Conference Program, Teacher-made 90%
- 8. Doleh Cards 100%
- 9. Continuous Progress in Spelling Economy Co. 100%

5. *Presented with a behavioral objective to teach a skill, the resource teacher will write a prescriptive program to include procedures of instruction, criterion level of acceptable behavior, types of consequences, schedules of reinforcement and methods of recording data.*

The following is an example of the prescriptive programming conducted.

Prescriptive Programming

BEHAVIORAL OBJECTIVE:

C1, R, and C will orally spell at least one word per week of their choice correctly and say a grammatically correct sentence of their choice.

MATERIALS:

3 x 5 cards, felt tip pen and teachers record keeping sheet

BASELINE:

Record initial spelling of chosen word

CRITERIA:

Student spells word correctly and uses it in a sentence before end of each week. Two tests will be allowed -- Wednesday and Friday.

SEQUENCE:

1. Student chooses word (**Monday**)
2. Record initial spelling as student gives it.
3. Write word correctly on 3 x 5 card using felt tip pen and spelling aloud as student watches.
4. Give card to student saying, "This is your word!"
5. Check student for spelling and sentence mid-week and again at end of week.

CUE:

What's your word for this week?

CONSEQUENCES:

+ 2 points and praise for each correct card
 - That's not quite right. Look at your card and spell it. We'll try it again Friday.

DATA RECORDING:

Record following information on Teacher's Record

1. Student's name
2. Chosen word
3. Mid-week test
4. End-of-week test

6. *Presented with appropriate materials in the instructional areas of reading, mathematics, language and motor development, the resource teacher will select for use those materials which will aid in teaching the necessary skills to master each step in the sequence of skills.*

Objective No. 2 shows the materials utilized.

7. *Presented with data on a student's performance in a prescriptive program, the resource teacher will base further instruction on the evaluation of that data.*

The purpose of prescriptive programs written in the ERC was to raise a student's skill level to a point where he/she could function in regular class curriculum materials. This goal was reached for every prescriptive program without a second program being written.

8. *Presented with data specified by the consultants as indicating that a child is functioning at skill levels appropriate to placement in the regular classrooms, the resource teacher will assist the regular classroom teacher in that placement.*

During the year, 33 requests were made by the ERC to regular classrooms for integration. All 33 were accepted. Of the 33 transfers to regular classes, only two students were later withdrawn, one at her own request and one due to out of class behavior (see Figure II).

Figure II

Integration Record

Percent of Time Spent in Regular Class

Student	November 1, 1973	February 1, 1973	May 1, 1973
1	41%	41%	41%
2	41%	*	*
3	29%	33%	41%
4	*	*	*
5	*	*	*
6	*	*	23%
7	*	50%	*
8	*	60%	63%
9	45%	63%	100%
10	*	*	*
11	29%	50%	29%
12	41%	41%	41%
13	*	*	*
14	29%	33%	41%
15	41%	41%	41%
16	*	40%	42%
17	37%	42%	70%
18	29%	29%	41%
19	41%	41%	41%
20	47%	58%	70%
21	*	*	*
22	50%	50%	41%

* Indicates student was not enrolled in ERC

The procedure for achieving the integration of the students was as follows:

I. Selection and Placement

- A. Suggestions for student integration can be brought up by ERC staff or volunteers at weekly staffings.
 - 1. Suggestions should be based on objective evidence as to student's academic and/or behavioral performance.
 - 2. Suggestions should take into account student's physical size, social skill level, and openings in regular classes.
- B. A staff member will be assigned to observe suggested classes. Data including necessary academic and/or behavioral skills for average classroom performance should be turned in to ERC Head Teacher.
- C. If student approximates skills required the ERC Head Teacher will request a staffing for transfer with regular class teacher and notify the principal of the request. If student does not demonstrate necessary skills, he will be discussed at next weekly staffing for further programming.
- D. The transfer staffing will result in

recommendations for accepted students to be carried out by class teacher and/or ERC. If the transfer results in a student attending the ERC less than one hour daily, he will be transferred from ERC rolls to regular class rolls.

II. Follow-up

- A. The transfer staffing will result in an ERC observation schedule for follow-up.
- B. Staff member assigned to follow-up observations will report to weekly staffing as to student's progress.

9. Presented with a regular class teacher who has integrated handicapped children into her classroom, the resource teacher will assist in training her in diagnosis, prescription, and evaluation of the programs for those children.

Regular class teachers received formal training in diagnosis, prescription and evaluation during the in-service programs described in Objective No. 2 – Inservice Training. This was supplemented by approximately 100 hours of consultation throughout the year. However, the large majority of this consultation was not directed to the above objective. Almost all consultation dealt with regular class students or curriculum. Therefore, the project did not meet the above objective as stated.

The role of the resource teacher in relation to integration of handicapped children into a regular classroom was seen by this project as primarily being preparation of students to meet regular class standards.

Requests for student integration were not made until the student had approximated regular class standards. Due to this approach there was little need for regular class teachers to provide individual prescriptive programs for ERC students. The students either worked within the teachers' regular assignments or their assignments were provided for them by the ERC. When this was the case the ERC provided programs until the student was working within normal classroom levels.

Though teachers were not specifically trained to program for ERC students, they did make several changes in their classes toward an individualized skill-based approach that benefited ERC students. ERC staff provided testing, materials and support for these changes. The changes included: 3 individualized reading programs, 1 individualized math program, 3 individualized spelling programs. Credit for these changes goes to the classroom teachers, who put a great deal of work into them; the ERC acted mainly as a catalyst and reinforcer.

In-Service Training for Regular Classroom Teachers

1. Presented with the regular class teachers in in-service training, the resource teacher and staff members of Teaching Research will describe the functioning of the resource room and the resource teacher.

See Methodology Section.

2. *Presented with regular class teachers in in-service training, the resource teacher and staff members of Teaching Research will provide instruction to include: (a) a background in the learning principles of operant technology; (b) techniques of behavior management, both group programs and individual programs; (c) diagnosis of individual skill deficiencies; (d) writing prescriptive programs based on the diagnosis of skill deficiencies; (e) selection and use of materials for the implementation of prescriptive programs; and (f) gathering data, recording data, and evaluating data as a basis for instruction.*

The information presented here was primarily informational in nature. A complete description of instructional programs of this nature are available upon request.

3. *Given the instruction on implementation of the above stated objectives is delivered, each classroom teacher in the project school will implement a minimum of one behavior management program and one prescriptive instructional program in her classroom the first year of the project.*

Though instruction was given on implementation of the above stated objectives, the project did not meet this objective.

Early in the year project staff agreed that this objective was unrealistic due to the project's lack of decision-making power over school staff. The project instituted what it felt was a more appropriate goal and measure of project success: that each classroom teacher in the project school will accept an ERC student into her program on project request.

During 1972-73 school year the project made 33 requests of 9 classroom teachers (75% of the teachers in the school). Thirty-two were immediately approved. One was approved after a time scheduling change was agreed to by the ERC.

Third Party Evaluator's Comments:

The major focus of the funding for this project was on the training to be conducted. That the training was successful can be adequately demonstrated by the products produced. The resource teacher, Mrs. Diane Warrick, who was already strong in many of the areas, demonstrated the ability to inaugurate the program, implement it and achieve satisfactory results with the children. (Gains made by the children are not reported here since objectives of the Title VI proposal did not focus on those gains; however, that information is available from the Jackson County Intermediate Education District.)

The samples of the programming accomplished by the resource teacher indicate a high degree of sophistication in the ERC.

The project did not succeed as well as was hoped with the regular classroom teachers. Although 33 children were integrated into the regular classrooms, follow-up programming by the regular classroom teacher was not accomplished. It was originally planned that trained regular classroom teachers would implement a minimum of one behavior management program and one prescriptive instructional program in the classroom during this first year of the project. This was not accomplished and was abandoned as an unrealistic objective. The mitigating reasons for this may provide a sufficient explanation:

When a school district moves to a resource center concept where a high rate of integration of handicapped students into regular classrooms is anticipated, there is a natural tendency on the part of the regular classroom teacher to be wary of or reject the idea of this integration, especially if that teacher has not had much exposure to the education of handicapped students. Therefore, to achieve eventual success with a resource center, the regular classroom teachers must have demonstrated to them that this educational model will not require a great deal of additional effort from them. Consequently during the initial stages of this operation, much attention must be paid to briefing regular classroom teachers and to integrating students into their classrooms who can function adequately in the academic areas for which they are integrated. Only after a period of time during which the regular classroom teacher is exposed to successfully partially integrated handicapped students should she be asked to assist in managing a student in a behavioral problem or a special academic task.

The staff on this project allowed the first year for this type of introduction. One might question whether such a long introductory period is necessary. However, if during the second year of the project, which has been picked up for Title III funding, regular classroom teachers in Walker School engage in behavioral management programs and individual academic prescriptions, resulting in a greater amount of integrated time for the handicapped students, one cannot fault this prolonged introduction to the resource center.

Note: In addition to acting as third party evaluator of this project, members of the Exceptional Child Research Program of Teaching Research also acted as technical consultants to the project staff. Therefore, Mr. James T. McAllister, Director of Federal Programs at the Oregon Board of Education deemed it necessary to have an additional auditor for the project. Mr. Gerry Brodsky, of the Department of Mental Health was selected as the auditor. The following comments were written by him relative to the Jackson County IED Title VI Project.

In accordance with our contract of March 1973, I visited the Title VI project in Jackson County IED prior to June 1, 1973. While there I examined the data that had been collected to determine its relation to the objectives specified in the agreement between the project staff and the third party evaluators.

I have examined the final reports submitted by the project director and the third party evaluator's comments. I judge these comments to be appropriate concerning whether the project accomplished its proposed objectives.

My evaluation as to whether the project objectives have been met is essentially the same as the third party evaluator's. There can be little doubt as to the behavioral progress evidenced by the students. Progress occurred both in the educational areas for the children and in marked improvement in their behavioral problems. The programs I saw at the Jackson County IED diagnostic resource center and those presented in this report represent highly sophisticated examples of well run and well measured prescriptive teaching programs. The only reservation is that mentioned by both the project director and the third party evaluator, concerning the difficulties of implementing behavioral programs in the receiving classrooms. Some difficulties in integrating these children into regular classes would seem evident from an examination of Figure 2 of this report. That chart indicates that for twelve students present both on November 1, 1972 and May 1, 1973 that only six showed an increase in the percent of time spent in regular class during that period; while six spent an equal or lesser amount of time in regular class. Of fourteen students present on February 1 and May 1 (including many of those previously mentioned twelve), eight show an increase in the percent of time spent in regular class; while six show an equal or lesser amount of time spent in class.

There are certainly many reasons that can be offered for the reluctance of teachers to fully integrate children into their classes and to carry out individual programs. The reason mentioned by the third party evaluator would seem to be valid. Another possibility may be that at least the

fifteen initial children in this project were placed directly into the resource center at the beginning of the year. They were assessed on their performance academically and behaviorally within that classroom and were then to be placed back into the regular classroom when their progress met the existing receiving class behavioral standards. This means in effect that each child did not enter the classroom with a stated educational or behavioral problem suggested by the receiving teacher which must be remediated in order to fit into the classroom. The problem may then be one of asking the receiving teacher to accept one of the special classroom children into her class rather than to accept the return of a child whose performance has met her own criterion. If so, then the operations of the project represent a slightly different slant from the philosophy expressed in the original proposal. That proposal stated "these special needs of the student will be met by the classroom teacher with the assistance provided by a resource teacher highly skilled in individualizing instruction, in selection and use of curriculum materials and in behavior modification techniques. A large number of children could profit from the special skills and materials of the resource teacher with the classroom teacher assuming the responsibility for the educational need of the children . . . the primary purpose of the resource teacher is to provide training for and assistance to the classroom teacher in assessing strength and weakness of each child in various curriculum areas, placing the child in appropriate material to provide skill development, and planning individual behavioral and academic programs for the child which can be carried out in a regular classroom, and then providing a system for monitoring the child's progress in the various areas of the classroom program."

Perhaps it is the case that the actual operations of the project shifted the initial responsibility for each child onto the resource teacher rather than the regular class teacher. Whatever the reasons for the difficulty in integrating the children and in carrying out the individual behavioral programs in the regular classroom I am sure these are being remedied during the second year of the project.

Title of Project: *Baker County IED Regional Program for the Visually Handicapped Children*

Location of Project: *Baker and Malheur Counties*

Type and Number of Children Served: *6 visually handicapped students*

Funding Allocated: *\$8,325*

Project Beginning Date: *September 23, 1972*

Project Ending Date: *July 25, 1973*

Background and Rationale:

Six visually handicapped students residing in Malheur and Baker Counties were identified. There is no special education program in this area designed to provide itinerant teacher services to visually handicapped students and their teachers. Parents do not wish to send their young children away from home to receive an education, with some parents enrolling their children in local schools even though special services were extremely limited. This program was initiated to provide individual instruction to assist these children, their parents, and their regular classroom teachers.

Objectives and Evaluation Plan:

1. Participants will receive supplementary individual instruction.

A copy of the itinerant teacher schedule and how faithfully it was followed will be submitted at the end of the school year. Achievement tests, an informal reading inventory, anecdotal records, and development checklists will be utilized to evaluate student programs.

2. Participants will have specifically prepared textbooks and learning materials.

The itinerant teacher will prepare a report indicating any problems encountered in obtaining material and the amount of time in turn over from the time the order was placed.

3. Participants will receive special education equipment and slides.

The itinerant teacher will prepare a brief report indicating any problems encountered in obtaining equipment.

4. The regular classroom teacher will receive assistance in methods and techniques of incorporating the visually handicapped child into the classroom setting.

The regular classroom teacher will be asked to prepare a brief report of the benefits and needs of the program.

5. Families of visually handicapped children will receive

assistance in the proper management and instruction of the handicapped child within the home.

The itinerant teacher will maintain a record of parent contacts and the information provided.

6. Other children suspected of having difficulty in school because of a visual defect will be evaluated.

A complete list of all additional children seen by the itinerant teacher and the nature of her evaluation will be made by the itinerant teacher.

Methodology:

This project employed one itinerant teacher. This teacher had a master's degree in the education of visually handicapped, had training in orientation and mobility, and had on-the-job training in living skills. Her work experience included regular classroom teaching, teaching in residential schools for the blind, home instruction to preschool visually impaired children, and counseling and instruction of parents of visually impaired students. Although no project funds were involved, also utilized were the services of the school's social worker in one district, a teacher's aide at one school, a high school senior who received work experience credit for her participation in the program, and a reader. All staff were given prior orientation by the itinerant teacher, with observations of instruction made by the itinerant teacher.

The itinerant teacher saw each child at his local school on a regular schedule. These students were located in Baker, Richland, Nyssa, Adrian, and Harper. After initial assessment of the needs and abilities of the students and consideration of the distances to be traveled, individual instruction was provided for each child in the program. Individual instruction was provided as follows:

Student A — age 6 years. This first grader was seen for a one hour period two days a week. Instruction was provided in braille, reading and writing, arithmetic, independent travel, and living skills.

Student B -- age 10 years. This fourth grader had some useful vision. Instruction was given in both print and braille. Primary emphasis was on learning braille. Tutoring was done in arithmetic when requested by the student or by the classroom teacher. Typing instruction and living skills training was also provided.

Student C -- age 8 years. This third grade student was provided with large print textbooks and materials to be used in the classroom. Tutoring was provided only at his request or that of the classroom teacher.

Student D -- age 3½ years. Home instruction emphasizing body movements, hand skills, body imagery, and auditory skills was given to this multiple handicapped preschooler. The mother of this child observed each session and assisted the teacher in manipulating the child through the desired movements. This child was seen twice a week for a thirty to forty-five minute period.

Student E -- age 10 years. This student was seen for a period of forty-five minutes to one hour one day a week. She was provided with large print materials, and instruction centered on learning to write and to recognize letters of the alphabet and basic vocabulary words. Hand skills and living skills instruction was also provided.

Student F -- age 6 years. This totally blind first grade boy was seen for one hour three days a week. Instruction was given in braille reading and writing, arithmetic, independent travel, hand skills, and living skills.

Student G -- age 8 years. This totally blind girl was only in the program for two weeks. Prior school experience was for two months at a residential school for the blind. She was seen for forty-five minute periods four times. Instruction was given in braille and independent travel techniques.

The great distances to be traveled severely limited the frequency of the itinerant teacher's visits. Due to concern about maintaining skills in children, auxiliary staff were solicited. The Adrian School had already assigned a teacher's aide to the classroom so this individual supervised the practice of assignments left by the itinerant teacher. A Baker High School guidance counselor was contacted to arrange the participation of a capable high school student to supervise the practice of the child in Baker. Both the Adrian school teacher's aide and the Baker High School student worked with visually handicapped students for one hour daily. The Pine Eagle District school social worker

assisted with the Richland students two days a week and was also involved in counseling the student's family. A reader was obtained for the braille student in Harper.

Following each instruction session a short conference was held with the classroom teacher to discuss the results of the session, the teacher's questions, and to plan work and materials to be made available for use in the regular classroom. Training sessions were held in the towns of Baker and Adrian to orient all staff members in the building to the implications of blindness and to instruct them in ways to relate to a visually impaired child. Only one meeting was held in Adrian. The Baker session involved four meetings with the school staff given experience and training in independent travel and concept development. Written progress reports were made to the parents and the classroom teachers at the end of the nine weeks period. In addition, there were frequent conferences with the parents to discuss their child's progress or to have them observe an instruction session. Much of the living skills instruction was done in the child's home to teach them to use the equipment available there and to demonstrate to the parents the appropriate methods for them to aid the child. A one-day workshop for family members was held in Ontario on April 28, 1973, including the parents, older siblings, aunts, grandparents and friends who have had contact with the visually impaired children. Families of the five students participated in the workshop. The participants, while wearing a sleep shade, received instruction in dining skills and orientation and mobility. The orientation and mobility specialist from the Oregon School for the Blind and the itinerant teacher presented these sessions.

Four students participated in the outdoor concepts workshop held June 10 through 22 in cooperation with the Oregon State School for the Blind. One week of the workshop was at the School for the Blind campus for pretraining in camping skills. During the second week the group camped in tents at Fort Stevens State Park on the Oregon coast. Besides the outdoor concept experience the children prepared most of their own meals.

Large print braille textbooks, braille writers, cassettes, recorders, talking book machines and other special equipment were obtained and used by the students during this project.

Results:

I. Participants will receive supplementary individual instruction.

Samples of the types of skills measured are given in Table I.

Table I

Braille Skills -- (5 steps)
Sample: Identifies Braille written parts
a. space bar
b. linespace
c. carriage
d. etc.
Living Skills -- (V units)
Sample: Folding T Shirt
a. folds T shirt in some manner
b. folds T shirt using a definite manner
c. folds T shirt neatly using a definite manner
d. etc.
Orientation and Mobility -- (10 steps)
Sample: Uses Trailing Appropriately
a. uses some manner of trailing to find designated location in room
b. uses some manner of trailing to locate another room
c. etc.
Concept Development
Sample: Concept of up and down and relationship
Concept of painful
Concept of noon
Concept of spoonful
Concept of more and most
Dining Skills
Sample: Explores Place Setting
a. holds arms horizontally above table setting
b. curves fingers slightly with finger tips touching plate
c. unobtrusively touches only edges of dishes and handles of silverware
d. etc.
Typing Skills
Sample: 1. Can load paper
2. Uses typewriter parts
a. space bar
b. carriage return
c. margin sets
d. back space
e. etc.
3. Uses correct hand position
4. Etc.

Results by each student follow:

Student A. Results of the Wide Range Achievement Tests were:

	Pretest (11-28-72)	Posttest (5-3-73)
Spelling	Pk5	2.7
Reading	Kg3	1.5
Arithmetic	Kg9	2.4

Table II shows the results of pre-posttesting in Braille Skills, Dolch Words, Reading Concept Development, Orientation and Mobility, and Living Skills.

Table II

Pre-posttest results for Student A.

	Pretest	Posttest
Braille Writing	10-4-72	6-7-73
Mechanics	7/13	11/13
Alphabet	3/26	26/26
Punctuation Marks	0	3/5
Braille Contraction	0	35/43
Braille Reading	10-5-72	7-2-73
Mechanics	1/5	4/4
Punctuation Marks	0	3/5
Braille Contraction	0	35/43
Dolch words		
preprimer	0	37/40
primer	0	34/52
Reading level on I.R.I.	0	3rd preprimer
Concept Development	10-19-72	
	93/112	104/112
Orientation & Mobility	10-10-72	7-5-73
	2/18	12/18
Living Skills	11-21-72	7-3-73
Folding wash cloths and towels	2/9	8/9
Folding underclothes	2/5	5/5
Folding blouse	0/11	5/11
Hanging coat on hanger	10-5-72	7-3-73
	0/3	2/3
Shoe tying	1/8	7/8
Setting a table	10-12-72	7-3-73
	3/15	5/15
Putting pillow case on pillow	3/15	15/15
Bedmaking without changing linen	0/7	6/7

This student also had practice in cutting with a knife and fork, spreading butter on bread and making a meat loaf but she needs considerable assistance in all of these tasks. She did learn to fill a glass from a water faucet and to pour from a pitcher into a glass.

Student B. Table III shows results obtained by Student B during pre- and posttesting on Braille Skills, Dolch Words, Reading, Typing, and Living Skills.

Table III

Pre- and posttest results for Student B.

	Pretest	Posttest
Braille Writing	10-24-72	7-12-73
Mechanics	1/15	15/15
Alphabet	0	26/26
Punctuation Marks	0	2/10
Braille Contractions	0	42/62
Braille Reading	10-24-72	7-12-73
Mechanics	3/4	4/4
Punctuation Marks	0	4/10
Braille Contractions	0	42/62
Dolch Words		
preprimer	0	37/42
primer	0	42/52
Reading level on I.R.I.	0	primer
Typing	10-10-72	5-17-73
	5/19	18/19
	0 wpm	10 wpm
Living Skills		
Folding wash cloths and towels	11-21-72	6-5-73
	9/9	9/9
Folding underclothes	10-12-72	6-5-73
	5/5	5/5
Folding blouses	11-28-72	6-7-73
	5/11	11/11
Safety Pin	11-16-72	6-5-73
	4/6	6/6
Basic Ironing	11-21-72	4-9-73
	2/10	10/10
Hanging coat on hanger	11-21-72	4-9-73
	3/3	3/3
Hanging slacks on hanger	11-21-72	4-9-73
	1/3	3/3
Setting a table	11-21-72	4-9-73
	5/15	15/15

The teacher reported that this student also learned to sweep a floor, sweep dirt into a dustpan and dispose of the dirt.

In sewing, the student learned to take simple stitches, to sew two edges of cloth together, to gather material, and to tie a knot in the end of the thread. She failed to learn to thread a needle.

In cooking, she could operate an electric mixer, an electric frying pan, and stove controls. She could also measure and prepare: tossed salad, hamburger patties, cakes from a cake mix, scrambled eggs, toast, bacon, coffee and spaghetti.

Results on the Metropolitan Achievement Test which was administered orally are as follows:

Pretest (11-28-72) Posttest (7-10-73)

Word Knowledge	5.2	6.1
Reading Comprehension	4.9	8.0
Total Reading	4.9	7.3
Spelling	2.9	3.4
Language	6.4	7.0
Math Computation	2.9	3.7
Math Concepts	3.5	4.4
Math Problem Solving	3.6	4.4
Total Math	3.3	4.0

Student C. The teacher reported that this student received almost no instruction from the itinerant teacher until about six weeks before school was out. At that time he made known his interest in learning to speak Spanish. The itinerant teacher met with him informally for 10 to 15 minutes twice a week to help him explore this interest. He learned about two dozen basic vocabulary words in Spanish and gained some knowledge of correct pronunciation.

Student D. At the beginning of the program this child did not sit, stand, roll, vocalize, grasp objects, or make any attempt at self-care. At the close of July, 1973 he could sit for periods of six minutes when placed in a sitting position. He could stand braced against an arm chair for two minutes. When in a crawling position he had begun to move his hands forward alternately and to move his right leg forward. He will roll on over when given a tug to start him. He will take walking steps with a minimum of support from the hands of the teacher. These movements result from physical clues rather than verbal directions.

A toileting schedule was planned with the mother but this attempt was not successful.

The child did begin to make an "nn" sound and would occasionally repeat the sound when the teacher imitated him. This was not consistent enough however to indicate a conditioned response.

The child did come to grasp the spoon while his mother held it to feed him. Bottle feedings were discontinued except as a reward for crawling.

Meaningful play with small toys was never accomplished but the child did begin to grasp objects for a few seconds.

There were a series of regressions and relearning in all activities as a series of illnesses plagued the child. The family maintained a positive attitude and are very accepting of the child.

Student E. As well as having lower visual acuity Student E has a perceptual problem in that everything is turned to the right on its side. Thus e appeared as o to her. At the beginning of the program she could not make a straight vertical line. By 6/29/73 she could use manuscript writing to consistently make 19 small letters and 15 capital letters. She could identify the letter names and their sounds. From identifying no words she went to consistent identification of thirteen basic vocabulary words. Her rate of retention is

very low and she must have continual exposure to maintain even these few words. Student E learned to write numbers from 1 to 35 and could fill in number sequence when given isolated numbers. She learned to figure simple addition and subtraction problems with sums to 10.

Student E learned to tell time to the hour and half-hour. She learned to dial familiar and emergency telephone numbers. Student E gained the ability to sort and identify pennies, nickels, dimes and quarters but did not learn their comparative value or how to make change.

Results demonstrated by this student in the areas of living skills and concept development are given in Table IV on a pre- and posttest basis.

Table IV
Pre- and posttest results for Student E.

	Pretest	Posttest
Living Skills		
Uses eating utensils properly	11-17-72 2/20	5-18-73 7/10
Folding washcloths and towels	11-10-72 4/9	5-11-73 9/9
Folding underclothes	11-20-72 2/5	5-18-73 5/5
Hanging coat on hanger	11-17-72 2/3	5-11-73 3/3
Safety Pin	0/6	2/6
Setting a table	11-20-72 4/14	5-18-73 14/14
Concept Development	10-6-72 12/15	5-18-73 84/85

*Limited use of her left hand made achievement in living skills an arduous task.

Table V

Pre- and posttest results for Student F

	Pretest	Posttest
Braille Writing	9-26-72	6-8-73
Mechanics	9/13	13/13
Alphabet	3/26	26/26
Punctuation Marks	0/4	1/4
Braille Contractions	0	27/40
Braille Reading	9-26-72	6-8-72
Mechanics	2/4	4/4
Alphabet	3/26	26/26
Punctuation Marks	0	4/4
Braille Contractions	0	29/40
Dolch words		
preprimer	0	37/40
primer	0	40/52
Reading level on I.R.I.	0	primer
Concept Development	10-20-72 93/112	5-23-72 103/112
Orientation & Mobility	9-29-72 4/18	6-6-73 18/18
Living Skills		
Folding wash coths and towels	11-20-72 9/9	7-2-73 9/9
Folding underclothes	12-6-72 2/5	7-2-73 5/5
Pairing socks	12-4-72 1/5	7-2-73 5/5
Folding shirts	12-6-72 2/11	5-23-73 11/11
Folding T-shirts	12-4-72 2/5	7-2-73 5/5
Shoe Tying	11-3-72 8/8	7-2-73 8/8
Hanging coat on hanger	11-20-72 1/3	7-6-73 3/3
Hanging slacks on hanger	12-6-72 1/3	7-6-73 3/3
Safety Pin	11-20-72 2/6	7-11-73 6/6
Setting a table	11-20-72 4/13	5-23-73 13/13
Making a bed	3-12-73 0/7	5-23-73 6/7
Dining Skills	9-26-72 11/19	5-23-73 17/19

Student F. Results of the Wide Range Achievement Test for this student were:

	Pretest (11-27-72)	Posttest (5-23-73)
Spelling	Pk3	2.0
Reading	Kg6	1.5
Arithmetic	1.8	2.8

The results for the skill areas Braille, Dolch Words, Reading, Concept Development, Orientation and Mobility; and Living Skills are shown in Table V.

Student G. This girl was only in the program two weeks. She did learn to use sighted guide technique, to locate a dropped object and to use trailing to find another room. She learned to braille four letters of the alphabet.

A schedule of the itinerant teacher's travel schedule follows, along with a discussion, submitted by her, about how closely it was followed:

Monday	Tuesday	Wednesday	Thursday	Friday
10-11 a.m. Churchill School Baker Student F	9-10 a.m. Adrian Student A 10-10:45 Nyssa Student D 1-2:30 p.m. Harper Student B	10-11 a.m. Churchill	9-10 a.m. Adrian 10-10:45 Nyssa 1-2:30 p.m. Harper	10-11 a.m. Churchill 1-2:00 p.m. Richland Student E

Baker and Malheur Counties encompass an area of about 15,000 square miles. The schedule required that the itinerant teacher drive approximately 800 miles per week. Eastern Oregon is prone to adverse winter driving conditions. Even with those obstacles the schedule was met faithfully.

2. Participants will have specifically prepared textbooks and learning materials.

Large print or braille textbooks were obtained for each student. The particular reading readiness book and math book used by the Baker School were not available in braille. When Student C transferred from Hereford to Harper some of the specific series used at Harper School were not available. Substitutions were made for Student C.

Material which could be obtained within the state arrived in three to seven days. Those which were ordered from the American Printing House for the Blind required six to eight weeks to be available.

Braille or sight-saving paper was supplied as needed.

3. Participants will receive special education equipment and supplies.

Braille writers for each student, a typewriter, cassette recorders, talking book machines, braille clocks, writing aids, math aids, and equipment for living skills instruction were available as needed.

4. Regular classroom teacher will receive assistance in methods and techniques of incorporating the visually handicapped child into the classroom setting.

The itinerant teacher program was not in operation until two to three weeks after the school year started. Consequently teachers had many questions and were particularly ready for suggestions on how to handle the visually impaired child.

Perhaps one of the greatest benefits of the program was not only the elimination of classroom teacher apprehension about having a visually impaired student in the class but the cooperation and confidence it inspired in the various communities. Many community members followed the program with interest and were pleased to see the growth in the students. When a standing box was suggested to aid students—a local carpenter volunteered to build the box at no cost for labor and a minimum charge of \$3.60 for

materials. Community organizations sponsored the tuition for student participation in the Outdoor Concepts Workshop.

All teachers remarked on how faithfully the instruction schedule was maintained. Materials for the student's classroom participation were routinely prepared. In addition the reading readiness workbook and math workbook for student F and the set of phonics worksheets for Student A were brailled by the itinerant teacher. The teacher of Student A commented, "I was surprised to see how rapidly Student A learned once the itinerant teacher program was in operation." Student F's teacher stated: "At first I was petrified about having a blind boy in the class. Then the itinerant teacher program started, I relaxed, and he became a full member of the class."

Other teacher comments included:

"The independent travel training was invaluable."

"Materials were prepared promptly."

"Suggestions from the itinerant teacher made the difference between the child's involvement as a regular class member and her sitting alone on the fringes."

"The guidance the child and I received definitely improved her peer relationships."

5. Families of visually handicapped children will receive assistance in the proper management and instruction of the handicapped child within the home.

Student A. Five conferences with family members were held at school and thirteen home visits were made. One school conference was to demonstrate tying shoes, bedmaking and locating a dropped object to an older sister who is responsible for much of the care of this child. One conference was with the grandmother. Other school conferences were with the mother to discuss the child's progress and to observe the instruction session.

Home visits were made to encourage the family to have the child exercise independence in dressing and in handling the lunch money. Other home visits were to demonstrate how to have the child hang a coat on a hanger, fold towels, fill a glass from a faucet, pour from a pitcher to a glass, set the table, cut with a knife and fork, spread butter on bread and make a meat loaf.

The mother also received some braille instruction. She learned to recognize and write the braille alphabet.

Student B. There were fifteen parent conferences at home or at school. School conferences were held to explain the child's need for braille instruction to gain a faster method of reading and to explain the reader service.

Home visits were made to demonstrate sweeping, basic ironing, and various cooking skills—(operation of stove, toaster, electric frying pan, frying bacon, scrambling eggs, fixing a tossed salad, baking cakes, fixing spaghetti, making hamburger patties, fixing toast and spreading butter on it).

The mother also learned to recognize and write about half of the braille alphabet.

Student C. Four home visits were made. These were to explain the services available, to encourage participation in the Parent Workshop and the Outdoor Concepts Workshop and to do some counseling regarding the mother's reaction to her child's vision impairment. The mother did make comments indicating slightly better acceptance of her child's vision impairment. There was no success however in involving the family in the workshops.

Student D. The mother observed and participated in every session two days a week during the entire program. The father was present for some of the visits. Demonstration was given in how to encourage the child to vocalize, sit, roll, crawl, stand, grasp objects, and develop self-feeding. A toileting schedule was encouraged. The toileting schedule was not successful however due in part to the child's successive illnesses.

Student E. The itinerant teacher had ten home or school parent conferences regarding this student. The first four visits were to attempt to modify the foster family's attitudes to accept more independence in the child. There was little success.

After the death of one foster parent the child was placed in another home where there were much better results with the child. Demonstrations were given in setting the table, dining skills, and activities to develop hand skills.

The itinerant teacher made arrangements to take the child for an evaluation by a physical therapist. Assistance was given to the foster mother in carrying out the physical therapist's recommendations to develop better use of the child's left hand.

Student F. Four parent conferences at school and fifteen home visits were made regarding this student. During the school visits the mother had the opportunity to observe the instruction sessions, discuss the child's attitudes and progress and learn about the impact of vision impairment on the child's school situation.

The mother was instrumental in eliminating unnecessary "hanging on and tactual exploration of other children" whenever the class was in line. Also she assisted in modifying his negative attitude so that he would cooperate with the student aide's directions.

Home visits were made to instruct the mother in learning braille. She has learned to write and recognize the braille alphabet and twelve special braille signs. Demonstrations were given in how to guide the child to make his bed, pour

liquids, fold towels, hang trousers and shirts on hangers, fold shirts, and in methods of independent travel and in dining skills.

The child had been coming to school with matter over his eyes. This caused a negative reaction from his classmates. A home visit was made to request that he remove his prostheses daily and clean them. He did so and this resulted in improvement in his peer relationships.

Other home contacts were made to encourage participation in the Parent Workshop, the Outdoor Concepts Workshop, and local summer recreation program.

Both parents were present for many of the visits.

Student G. This family was seen twice. Once was to explain the program and to get the child enrolled in school. The second visit was to demonstrate sighted-guide technique and trailing.

6. Other children suspected of having difficulty in school because of visual defect will be evaluated.

The following children were referred for evaluation:

1. Melissa G. – Brooklyn School – Baker
2. Timmy M. – Brooklyn School – Baker
3. Larry B. – Alameda School – Ontario
4. Troy M. – Sumpter School – Sumpter
5. Jerri Lynn O. – Adrian School – Adrian

Each student was given a near vision check and practical testing on vision functioning. Timmy M. was referred to an ophthalmologist for further testing. The ophthalmologist's evaluation placed this youngster outside the qualifications for inclusion in this program.

The other children were found to function very adequately visually.

Two of the other children were found to have other learning problems: short attention span, hyperactivity, and limited mental capacity – which were in no way related to vision.

Third Party Evaluator's Comments:

This project submitted data for all objectives as were requested. This evaluator wishes to compliment the itinerant teacher for submission of these data and for conducting a workshop project.

Excellent gains can be observed for each child at each level, indicative of excellent programming and maintaining of individual progress. Other potential blind education programs should be encouraged to examine closely the methodology employed by this project.

Title of Project: *A Pilot Program of Intervention for Emotionally Disturbed Junior High School Students*

Location of Project: *Mountain View High School
Beaverton, Oregon*

Type and Number of Children Served: *Junior High Class for the Emotionally Disturbed
Actual enrollment in class – 15
Offered services to staff and students at Mountain View,
coordinated programs for various students with cooperation
of regular classroom teachers and the counseling staff.*

Funding Allocated: *\$16,060*

Project Beginning Date: *August, 1972*

Project Ending Date: *June, 1973*

Background and Rationale:

Prior to the 1972-73 school year the Beaverton School District No. 48 provided two classes for emotionally disturbed children in the elementary schools. However, there was no provision for children with emotional disturbances at the junior high school level. In order to augment the existing intervention program for emotionally disturbed students at the elementary level, a similar intervention program was established at the junior high level in the fall of 1972. This program was designed to fill two needs: (1) the program was to provide for children moving from the elementary program to the junior high school level if these children were not yet considered to be stabilized in a normal classroom situation; and (2) it would provide a service to those children already in the junior high school who were currently having problems of an emotional nature.

Objectives and Evaluation Plan:

1. *To develop a resource room for students diagnosed as emotionally disturbed.*

Anecdotal records were to be maintained for each child and the number of children participating in the resource room were to be reported.

2. *To create a process by which problems are identified.*

The project was to specify the behaviors to be modified, state the re-entry criteria demanded for the child to re-enter the regular classroom, and to take baseline and treatment data.

3. *To establish a program for behavior change for each child served.*

Behaviors were to be specified, baseline was to be collected, treatment data was also to be collected, and

follow-up data was to be taken on the child after he left the program.

4. *To establish a program of crisis service for children.*

A cost analysis, the number of children served, the nature of service provided, and data on behavioral changes were to be reported.

Methodology:

The project staff included two certified teachers, both having a M.A. in special education and a background in precision teaching, behavior modification and in techniques for remediation of reading and other basic skills; also one assistant, a certified elementary teacher working on a half-day basis on data collection and clerical work. In addition, two high school students were utilized as teacher assistants. Their responsibilities included: data collection, observations, and assisting students with classroom work. The project staff worked in cooperation with the Tualatin Valley Guidance Clinic and the school psychologist in the identification of students for the program. Students placed in the intervention program continued to function within the scope and sequence of their regular classes, receiving assignments and material from their individual teachers. Assignments were pursued by the intervention staff as to their relevancy and degree of difficulty for the intervention students. All assignments, tests, etc. were to be completed by the intervention students in accordance with the program outline as designated through the cooperation of regular classroom teachers and the intervention teacher. Students needing remediation in reading and/or basic skills were tested by intervention teachers, and prescriptions were written to facilitate other staff members in working with these students.

Within District No. 48 a child could be referred for extra services by any certified employee, parent, or social agency. In the situation of this project, referrals came from teachers or counselors. A referral for extra services was routed through the teachers of the intervention classroom on its way to the Special Education Central Office, and provided a means for the staff to be kept aware of potential students for the program. This procedure also allowed the staff to observe potential students during regular classroom sessions. When a referral was received by the Special Education Central Office, a psychologist was assigned and a request for permission for special services was sent to the parents. When a signed parent release form was received, observation dates were determined. In addition, teacher conference times were scheduled regarding the student in question. Although a variety of observation forms were used during the year, all forms contained a systematic accounting of pinpointed measurable behaviors. Behaviors observed were considered, by the referring teacher, to be interfering with classroom activities and learning. Observations were taken on a continuous time basis, i.e., ten minutes at the beginning of each class one day, ten minutes mid-class the next, and ten minutes at the end of the class period on the third day. Observations were made by both intervention teachers and student assistants.

After the intervention teachers and the psychologist had observed the student and met with counselors and teachers, a meeting was set between the psychologist, the intervention teacher, and in most cases, the school counselor. At this time findings were compared, discussed and a tentative decision for further service was made. If a decision for intervention placement was reached, parents were contacted for a meeting to discuss placement and arrange for a state required physical exam. The meeting with parents was attended by the school psychologist, the school counselor, and the intervention teachers. At this time, the student's problems and probable programs were discussed. The parents were required to sign a release form before their child could participate in the program. A contract for parent participation was also utilized later in the year and was accepted as part of the current procedure. At this point, behaviors were specified for each child, with baseline data collected, and an intervention strategy developed, if necessary. Data were recorded on six cycle log paper and in many cases reported by observations made by the classroom teacher.

Throughout the course of the year the project had an occasion to utilize various services: (1) Tualatin Valley Guidance Clinic and Staff; (2) school psychologists; (3) school counselors; (4) State Wage and Hour advisors; (5) County Child Service's personnel; (6) State Welfare case workers; (7) Kids for Hire; (8) County Health Nurse; (9) speech pathologist. Services in some cases were utilized on a one time basis. Others, like the Tualatin Valley

Guidance Clinic, school counselors, and psychologists, were contacted on a regular basis. Tualatin Valley Guidance Clinic met with the project on a weekly basis for advisement and consultation services. School psychologists contacted the project staff during referral procedures and with each student they continued to make themselves available. They were able to provide advice in programming and problem handling for the duration of a student's involvement in the program. The Mountain View School Counseling Department was also closely involved with the program. They met with the project staff weekly to discuss students within the program as well as potential intervention strategies.

During these weekly sessions crisis situations were also discussed, and plans were made to deal with them. Every attempt was made to deal with crisis problems in the regular classroom through the counselors rather than working directly with the student as an addition to the class caseload.

State Wage and Hour people were consulted when the project placed two students in jobs outside the school. The County Child Service's Department was consulted on several occasions regarding home situations which the staff was not equipped to deal with. In each case they sent a case worker to investigate and feedback was received which proved helpful to the project staff. Public Welfare case workers were contacted on a few occasions; however, their services were limited. The local non-profit organization called "Kids for Hire" sent a representative to the class to talk to the students about job and work permits. The County Health Nurse was contacted about health problems that required home contacts, and excellent cooperation from the County Health Nurse was received. Lastly, a special education speech pathologist worked with one of the students who had a severe articulation problem.

Results:

1. To develop a resource room for students diagnosed as emotionally disturbed.

This objective was to be evaluated by submitting anecdotal records for each student participating in the intervention program. Records were kept for each student in the program which included target behaviors and consequences to be utilized, records of parent conferences and student conference records. These records were one or two word statements that were began on the children in January, four months after the start of the program. The statements were not maintained on the children with any consistency over time and therefore do not meet the requirements as specified by this objective and evaluation strategy. The number of children served were reported to be fourteen.

2. To create a process by which problems are identified.

For each student participating in the intervention program, behaviors to be modified were specified, with data

collected for that behavior change program. For the total of fourteen children, fifty-six behaviors were identified with the treatment strategies established. Forty-two of those behavioral programs had baseline data available. Of those forty-two, thirty-nine showed a deceleration of the inappropriate behavior. However, no programs could be found with re-entry criterion established. Examples of the types of behaviors pinpointed are: out of seat behavior, talk-outs, distracting peers, being in class on time, crying behavior, being able to handle stress situations, completing work on time, and following directions. These behaviors do not cover the entire scope of behaviors dealt with during this project year but serve only as an example of the type of behaviors modified.

3. To establish a program for behavior change for each child served.

Behavior change programs were established for each of thirteen students participating in the intervention program. One student had no behavioral change programs initiated. In most cases more than one behavior was pinpointed for each student with an average of 4 behavioral programs being run per child. The consequences were specified and treatment data were collected. See objective 2, above, for number of programs established, etc. In addition, maintenance probes were run on nine behavioral change programs.

4. To establish a program of crisis service for children.

The intervention team did not set up any crisis service programs with students or teachers; consequently no data on behavioral changes were available. Also, no cost analysis was supplied by the district as requested in this objective's evaluation strategy. Information submitted by this district in regards to this objective, which referred to the role of the intervention team in crisis situations, did not show any unique services over or above those which one would expect to find in a program which dealt with behavior problems in the classroom.

Third Party Evaluator's Comments:

This evaluator felt that the project did a fairly good job of conducting the program as agreed upon between the third party evaluator and the project staff in the letter of agreement established at the beginning of the year. This evaluator does question the failure of this project to submit data for objective 4. If the project staff had felt that the need for crisis services in this district was unnecessary then they should have contacted, in writing, the third party

evaluator responsible for their project and so requested that a change be made in the letter of agreement.

In reviewing the data submitted by this project the evaluator found several points that he felt were worth mentioning. These points were: (1) that a specific procedure should be established for the determination of criterion levels and that a terminal criterion level for program completion should be determined and stated at the beginning of each behavioral program established; (2) that the variability in some of the baseline data made the success of some programs questionable. Baseline data should have been collected until stability was reached; (3) that if baseline was collected on an inappropriate or an appropriate behavior then data should have continued to be collected in that regard. As an example, if one were concerned about off-task behavior and collected baseline in regards to the number of times the child was not on-task, then changing the data collection system to counting the number of times the child was on-task, does not show a deceleration of off-task behavior. One cannot assume that the increase of on-task increased as the year went on. When it was felt by the intervention team that one should take a more positive approach to behaviors, then new baseline should be collected and a new program established. (4) That baseline data should always be collected before the initiation of treatment strategies. Several programs were run in which treatment strategies were initiated without baseline data. This makes it impossible to determine whether behaviors have changed. (5) That the use of six-cycle log paper is confusing to parents and students. Six-cycle log paper is fine for professionals who understand the types of data and the particular peculiarities of that recording procedure. But for parents, students or paraprofessionals it is often times confusing and therefore misleading. (6) That some behaviors were not specified accurately enough resulting in confusion about what was being measured and what changes were being made.

In summary, the results of this project and the data that this evaluator examined showed a decrease of inappropriate behaviors on most of the behavior programs run. Although the degree of decrease may be questionable, it was apparent that behaviors were specified, baseline data in most cases were collected, treatment strategies were identified, and an ongoing data collection system was utilized. This, in essence, was the heart of the program and the project deserves to be complimented for performing these activities.

Title of Project: *Behavior Modification Project for Emotionally Disturbed Children*

Location of Project: *Estacada Elementary School District 108
Estacada, Oregon*

Type and Number of Children Served: *25 emotionally and socially maladjusted students*

Funding Allocated: *\$14,100*

Project Beginning Date: *August 29, 1972*

Project Ending Date: *July 5, 1973*

Background and Rationale:

It had been determined that as many as ten percent of the school population in the Estacada School District was in need of some special help in overcoming emotional problems. It also had been shown that emotional problems interfered with academic progress and achievement. If an educational program is to benefit the students, then these prerequisite needs must be met. This project was undertaken in order to assist parents and teachers to deal with their emotionally maladjusted children. As these two groups exert the most influence upon a child's development, it was felt that they should become more proficient in using techniques found successful for remediating behavior problems. It was assumed that the environment of a disturbed child significantly affects his behavior. Thus, a program with a strong behavioral orientation was developed. It was expected that as the environment was altered, so would the child's behavior.

This Title VI program followed the basic premise inherent in other special education programs in this district. That is, the child – regardless of his particular handicap – should be helped to remain in and to benefit from regular classroom instruction.

Objectives and Evaluation Plan:

1. *To establish a program for 15 children who have socially deviant behavior.*

The number of children and staff involved and a narrative of the problems experienced in establishing the program was to be provided.

2. *To change the behavior of the socially maladjusted, emotionally disturbed elementary child so that he can function adequately in the regular classroom.*

Pre- and posttests utilizing Hill Walker Behavioral Problems Checklist were to be used. Baseline data was to be taken on specified behaviors, periodic data was to be taken until criteria level was reached. Periodic checks were to be

taken on these behaviors to determine if they were maintaining in the child's repertoire.

3. *Change the behavior of the classroom teacher so that he can change the behavior of the socially maladjusted, emotionally disturbed child so that he can function adequately in the regular classroom.*

The number of programs developed and carried out by the teacher was to be stated. A teacher checklist was to be developed and behavioral data from each student's program was to be kept.

4. *Change the behavior of parents of the socially maladjusted, emotionally disturbed child so he can function adequately in society.*

The number of parents involved in the project was to be submitted. Data from each student's home was to be maintained and submitted, and the number of programs developed by each parent independently was to be submitted.

Methodology:

Staff consisted of one teacher-consultant and one aide. The teacher-consultant, with a masters degree in special education, was versed in behavior modification techniques. He had teaching experience at the elementary level and had experience both living and working with emotionally disturbed children.

The aide, a mother of four, was selected because her professional manner and ebullient personality would help to gain the teacher rapport so vitally necessary for a project of this nature.

The procedure for referral and intervention was as follows:

1. Teacher having a student who displayed behavior problems would meet with the teacher-consultant in order to specify the inappropriate behaviors which should be modified. The Hill Walker Behavior Problems Checklist would be filled out at this time.

2. The teacher-consultant or aide entered the classroom (or playground, depending on the behavior) to take baseline data on the observed behavior.
3. After a baseline was established, the teacher-consultant met with the classroom teacher to formulate a contingency behavior.
4. The teacher-consultant or aide (or the teacher) would again collect data to determine the effectiveness of the intervention.
5. Subsequent teacher conferences would be held to learn if the program was maintaining and to make necessary adjustments if warranted.

Eleven students were served during the year using these procedures.

Results:

1. *To establish a program for 15 children who have socially deviant behavior.*

Two staff served 12 children in this project. The following is a narrative discussion of some problems encountered by the project staff during the project:

"The teacher-consultant delivered an explanatory presentation during the orientation period prior to the formal opening of school. He was well-received; however, staff members were still confused about the goals of the program. Referrals, in the beginning, were made with the assumption that the teacher-consultant would either counsel the student regularly to resolve his maladjustment or withdraw him from the regular class. Teachers were surprised at the amount of data required by the program model. Several were hesitant to refer because observation of the teacher was an essential element of the program. Teacher defensiveness, while being eroded this past year, still remains an inherent obstacle to the ultimate success of this program.

The project staff felt that, as with students, teachers also had to be approached at their level and assisted them to new heights of professionalism. Particular program goals

were sacrificed in some instances in order to gain the rapport of the teaching staff. For example, teachers requested and were allowed to keep the data themselves rather than have an observer in the room. However, the follow-through by some teachers was minimal. While they reported significant progress, there was little data to substantiate their claims. The following outline will provide understanding of other problems encountered, several of which related to teacher attitudes:

1. Some teachers believed that children should not be treated differently; thus, rewarding one child for behavior expected from the others was unfair and discriminatory.
2. Once programs were started, some teachers terminated the intervention phase too quickly, expecting the child to maintain his new level of performance.
3. Though a course on behavior modification theory and techniques was offered locally through the University of Oregon, enrollment was not as high as expected. Many teachers lacked a background of behavior modification theory and practice.
4. In lower grades especially, a lack of teacher individualization of subject matter was noted as hindering student progress.
5. In conjunction with point three, there was no model for the teachers to follow in learning of behavioral management techniques.

Parent contact and cooperation, though present and helpful in many instances, was totally absent in others. Some parents assumed little or no responsibility for their children. They did not care how their children behaved in school, or even if they went. Several homes were located seven or eight miles from school. This distance coupled with the absence of phones prevented the communication necessary."

2. *To change the behavior of the socially maladjusted, emotionally disturbed elementary child so that he can function adequately in the regular classroom.*

Table I shows the results of the pre-posttests of the Hill Walker Behavior Problems Checklist.

Table I

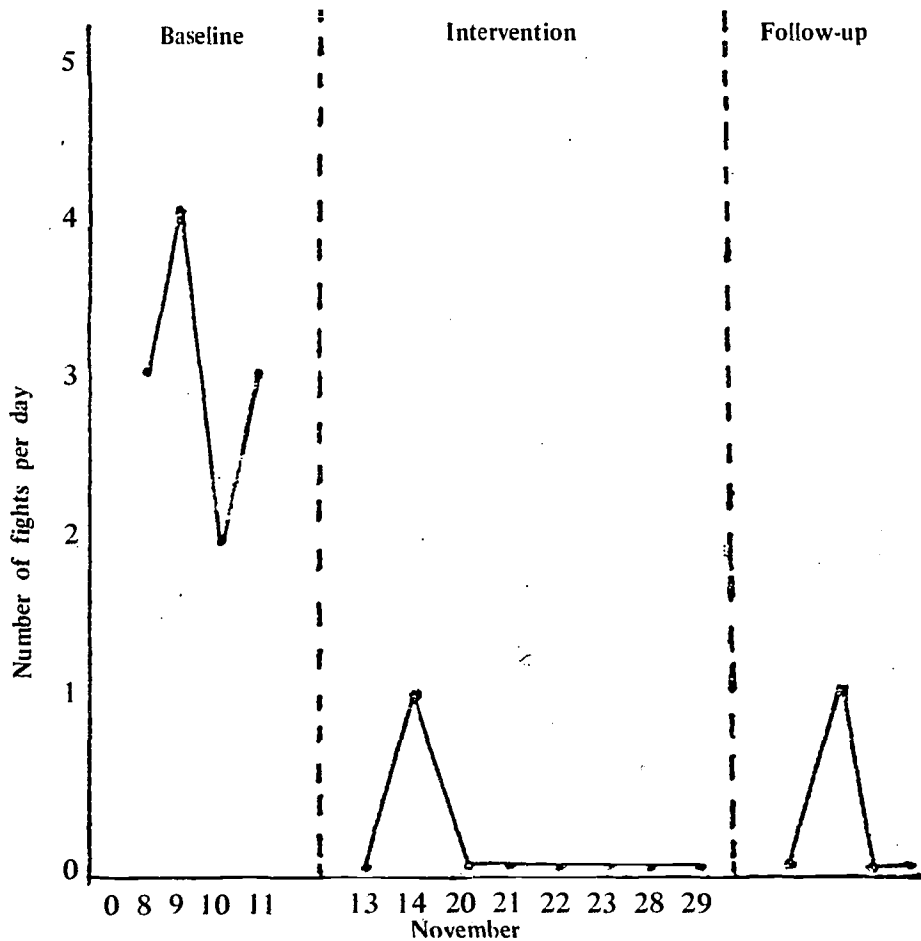
Hill Walker Behavioral Problem Checklists
Pre- and Posttest Scores

Student	Date		Acting Out		Withdrawal		Distractibility		Disturbed Peer Relations		Immaturity		Total	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	9/72	6/73	24	16	6	2	11	7	7	5	12	7	60	37
2	2/73	6/73	9	7	4	0	6	5	7	4	5	0	31	16
3	9/72	3/73	14	2	0	0	5	3	7	4	3	3	29	12
4	11/72	6/73	17	13	8	0	11	7	1	0	4	4	41	24
5	10/72	6/73	12	11	6	4	7	3	6	1	11	2	42	21
6	9/72	6/73	7	14	0	0	11	11	5	6	5	6	28	37
7	2/73	6/73	17	1	4	0	10	0	6	4	8	1	45	6
8	10/72	6/73	18	14	4	0	7	6	3	3	10	3	42	26
9	4/73	6/73	14	5	4	0	3	3	0	0	1	0	22	8
10	9/72	6/73	11	13	10	6	3	1	7	6	9	6	40	32
11	11/72	6/73	1	0	13	6	7	0	1	1	10	6	32	13

Figures 1, 2, 3, and 4 are samples of data taken on each child who was involved in the program. On Figures 1, 3 and

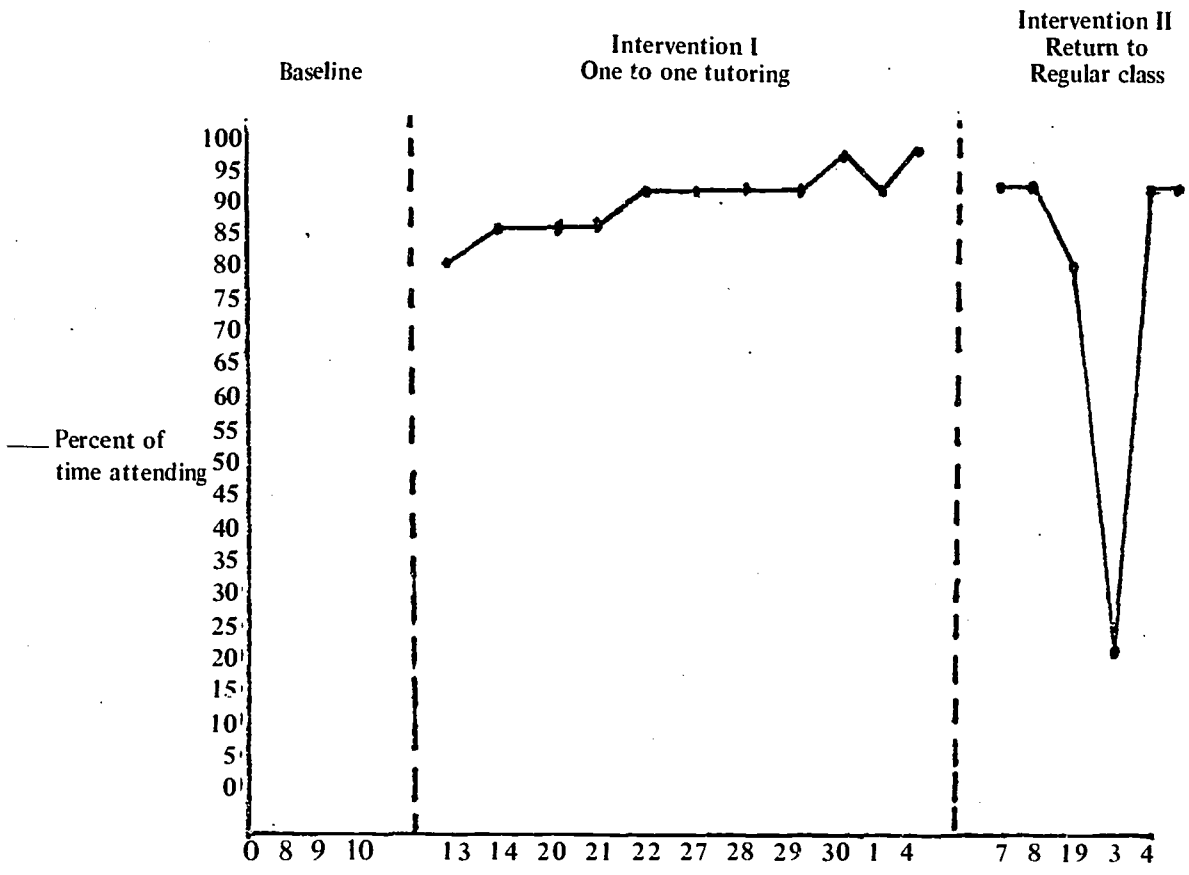
4 follow-up data was taken to determine whether the behaviors were maintaining in the child's repertoire.

Figure 1 - Behavior Modification Data Sheet



Fights with brothers at school - Student No. 4

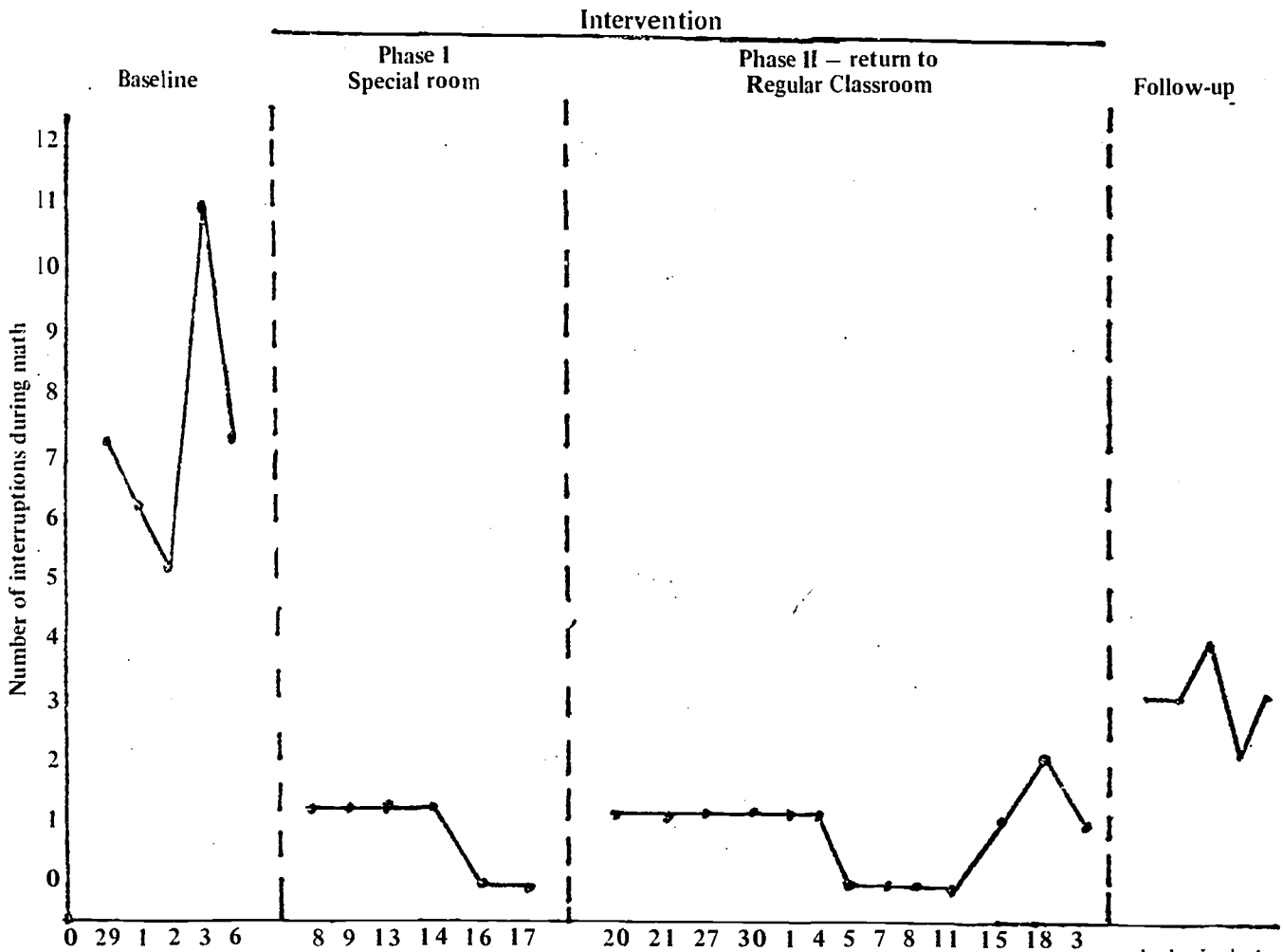
Behavior Modification Data Sheet



Attending to math activity-Student No. 4

Figure 2

Behavior Modification Data Sheet



Interruptions by Student No. 6

Figure 3

Behavior Modification Data Sheet

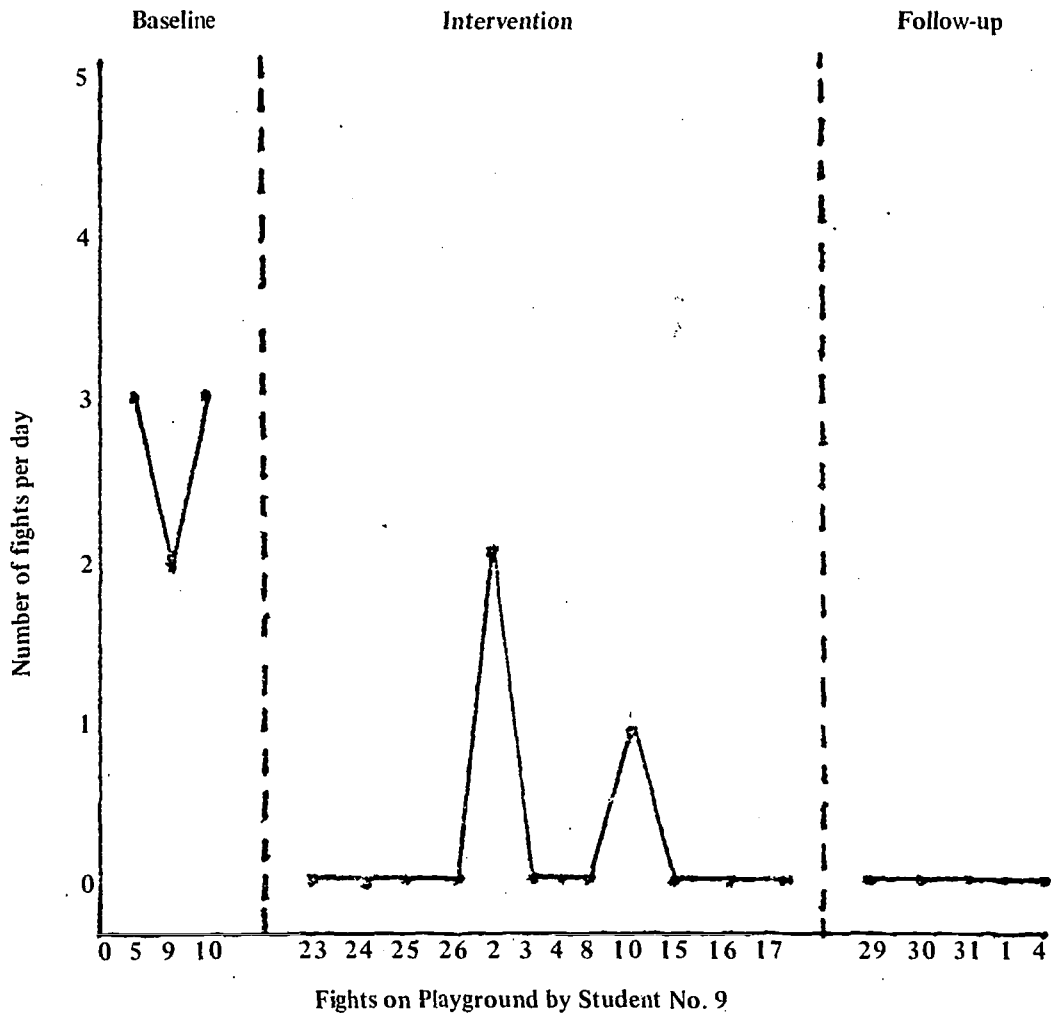


Figure 4

In addition to individual programs, the Title VI staff developed a contingency program which eventually involved over 200 students in nine classes. The Title VI office was transformed into an activity room where the children could engage in playful activities during their free time.

The purpose of this activity was threefold:

1. To provide a working model whereby teachers could learn and benefit from the effects of behavior modification;
2. To prevent the project staff from acquiring a stigma – a debilitating one it was felt – by associating only with “disturbed” children;
3. To provide the children in the program with positive

peer interaction in somewhat controlled yet free play surroundings.

The teacher-consultant gave a presentation to each participating class, explaining the purpose and procedure of the “game room” as it was to be called. The following outline provides a description of the basic program:

1. The children would first examine what they were already doing in terms of their academic work or behavior in school.
2. Each student would select an area of weakness in which they wanted to improve, for example, in spelling, or perhaps talking out in class at inappropriate times. The child would complete a

"contract" which specified what their previous performance was and the goal they had chosen. The teacher and student would confer in order to determine if the goal selected was too challenging or not enough so.

3. Upon achieving the goal established, the child would earn a ticket which gained him entry to the game room at the time allotted for his particular class.

The game room contained such activities as checkers, chess, a typewriter, skittle pool, table hockey, puzzles, bean bag toss, recorded stories, etc.

Such a program placed the responsibility for improving on the children themselves, leaving the teacher free to suggest, assist, and encourage, rather than to coerce, cajole, and scold. Such a program aimed at the very essence of education, namely, to teach children to learn and grow on their own. Examples of the contracts and evaluative comments by the participating pupils can be found in the project's final report.

The program served also to encourage teachers to design their own programs with a strong reinforcer already available. It also served to prevent, although to what extent can't be determined, some behavior problems from becoming worse or from arising at all.

Teachers began to borrow the activities for use in their own classrooms, in order to make better use of free time and to provide a more immediate reward for performance.

Due to the success experienced this year, this facet of the project will be continued.

3. *Change the behaviors of the classroom teacher so that he can change the behavior of the socially maladjusted, emotionally disturbed child so that he can function adequately in the regular classroom.*

Program data contained in the results section, Objective No. 2 are representative samples to satisfy this objective. Table II is indicative of positive and negative comments to children taken during the year.

Table II
Observation of Teacher's Positive
and Negative Comments to Children

Teacher	Baseline Rate/Minute		End of Observation Period Rate/Minute	
	Positive	Negative	Positive	Negative
1	.05	.03	.08	.02
2	.05	.1	.08	.03
3	.05	.2	.1	.3
4	.1	.2	1.0	.8
5	.05	.1	.2	.2
6	.2	.05	.7	.1
7	.2	.1	.7	.2
8	.05	.5	1.0	.02
9	.1	.2	.05	.2
10	.05	.01	.04	.1
11	.5	.7	.6	.1
12	.05	.5	.3	.01
13	.01	.5	.05	.02
14	.2	.05	.1	.05
15	.1	.2	.1	.2
16	.2	.1	.5	.2
17	.3	.2	.2	.1
18	1.0	.1	2.0	.001

4. Change the behavior of parents of the socially maladjusted, emotionally disturbed child so he can function adequately in society.

The project staff sought to accomplish this objective by conducting both individual and group conferences with parents.

During the course of the year, 93 individual conferences were held with parents, most in their homes. In each conference the importance of positive reinforcement was emphasized and contingency management was explained. In order to assist parents in keeping very elementary data, the staff coordinated a home-school program. The child would receive smiley face tokens in class as a reward for his performance. He was instructed to take them home and show them to his parents. This was a cue for them to compliment and praise the child for his accomplishment. Four families participated in this program. It was learned that three of the four implemented similar programs of their own. The changes cannot be documented because data were not kept, but for many parents emphasizing the positive behavior of their children was a completely new orientation. The majority were predisposed to aversive disciplining in response to deviant behavior.

It must be understood that the parents of the children were in some cases barely literate who had many problems of their own. Opening up to school personnel in itself was a challenge for many. Furthermore, the conferences, in numerous instances, concerned parental responsibility in providing the child with a basic, fundamental need such as breakfast, a pair of shoes, or a bath. Parents, also, must be approached and assisted at their specific level of needs.

Attempts to form a parent group in order to discuss children's needs and positive ways of attending to those needs met with initial failure. Invitations were sent to nine sets of parents explaining the nature of the group meetings. Though various channels for responding were made available, not a single parent replied. The majority of parents with whom contact was maintained were of low

socio-economic circumstances. Some felt defensive and uneasy in unfamiliar surroundings. Others did not want to admit their child had a problem. A variety of other factors such as distance, transportation problems, single parent families, etc., accounted for the failure in this venture. The teacher-consultant addressed small groups of parents late this spring while their children were taking registration tests. This gave the program greater exposure and also brought new requests for assistance by the parents who attended. The staff look to next year as a more propitious time for developing parent involvement in data collection.

Change in parent behavior, while difficult for an outsider to document, was noticed. For example, one parent who complained to the teacher-consultant, at least weekly, that her family was the victim of a "community conspiracy" changed dramatically. In the beginning of the year she was convinced the school and her neighbors were "out to get me." Furthermore, she was defensive of her son's behavior and provided more protection than assistance. After a few individual conferences, she learned the school truly was interested in her child's success. She subsequently apologized to certain school officials about previous behaviors. Her defensive posture changed to a very cooperative one, and, consequently, helped to effect greater growth on the part of her son. Other examples could be cited.

Third Party Evaluator's Comments:

It appears that basically all objectives have been met in this Title VI Project. Data collected for Objectives 1, 2 and 3 were accurate and well documented. While there was no data submitted for children by parents on Objective 4, the project director cannot be chastised. His subjective comments indicating the steps taken to initiate parent training justify that probably everything was done that possibly could have been done to initiate this phase of the program.

This project has filled well documented needs in the Estacada School District and as a first year program, they are to be commended.

Title of Project: *Home Services: Parent Consultant*

Location of Project: *Eugene School District 4J*

Type and Number of Children Served: *250+ educable mentally retarded, emotionally, disturbed, learning disabled*

Funding Allocated: *\$15,000*

Project Beginning Date: *August 15, 1972*

Project Ending Date: *June 30, 1973*

Background and Rationale:

This project was proposed as a means of providing parents of handicapped children with professional training and experiences to aid them to overcome some of the deficiencies that have prevented their children from succeeding in school. Parents of handicapped children were taught skills in behavioral management so that they could assist their children in academic and social home programs.

Objectives and Evaluation Plan:

1. *Given an eight week workshop the parents were to be able to:*
 - a. *observe and pinpoint academic and social behaviors of their children*
 - b. *Chart academic and social behaviors*
 - c. *Construct programs for the children to promote academic and social change*
 - d. *Demonstrate skills necessary to teach their children in academic and socially acceptable performance*

The project was to provide the following data:

- a. Number of parent behavioral programs run
 - b. How many programs resulted in a decrease below baseline
 - c. How many programs went to "o"
 - d. Report list of behaviors wished decreased
 - e. Report list of behaviors wished increased
 - f. Two or three examples of classic parent conducted behavioral programs.
2. *After a working relationship between school and home is established, classroom teacher will be able to assist the parent in setting up academic programs corresponding to the school programs.*

The project was to provide the following data:

- a. Number of teacher programs conducted
- b. How many programs resulted in improvement
- c. How many programs reached terminal objective
- d. Types of programs run

- e. Two examples of teacher-parent conducted programs
3. a. *After being in this program for one year, the academic performance of the EMR students will show improvement on the Sullivan series based on oral words read per minute using baseline data as the measure.*

Charts will be provided to indicate the improvement on oral words per minute using baseline data as the measure.

- b. *After being in this program for one year, the academic performance of the Learning Disabled students will show improvement on the posttest of the Gates-MacGinitie Reading Tests ranging from 4 to 8 grade level.*

Each grade level and average scores of the Gates MacGinitie pre- and posttest will be reported.

4. *At the end of this year in the program the child will demonstrate a significant improvement in social behaviors.*

Results will be reported in group results according to the list of behaviors.

Methodology:

This project was initiated on August 15, 1972 and continued through June 30, 1973. The home consultant set up the project, organized the parent groups, trained the parents, incorporated the assistance of the school district staff, and monitored the operation of the project and its evaluation phase.

Additional staff provided by the School District were the Coordinator of the Educable Mentally Retarded on a part time basis. Others working directly or indirectly with the parents and the children included: (1) an 8-hour a week parent aide and secretary, (2) elementary counselors, (3) elementary principals, (4) elementary teachers, (5) supporting staff (nurses, reading clinicians, psychologists).

and social workers), (6) auxiliary staff -- 2 doctoral students from the University of Oregon and two escape students.

This project was carried out in a series of three separate workshops, corresponding to the school academic year (fall term, winter term, spring term).

Before school began in September, the home consultant visited each of the ten target schools in the district and outlined the proposal and objectives of the project to each principal. During the next two weeks similar explanations were given to the counselors, the teachers, the social workers, nurses, psychologists, and reading clinicians of each school so that referrals of the specific handicapping conditions of the children could be centralized.

Two weeks after school began, three schools were selected for the project. The staff of each school set up the referral system and the home consultant then followed this sequence of events:

- a. Made home visitations during the day and night.
- b. Telephoned the parents.
- c. Left brochure "Teaching Begins at Home" explanation of the project.
- d. Set up the time of the workshop.
- e. Organized babysitting services.
- f. Organized parent volunteer services.

The fall workshop started in October and ended in mid-December. There were four separate workshops in operation at this phase, three in the evening (Tues., Wed., Thurs., from 7-8 p.m.) at three different schools: An afternoon workshop was in operation in a motel converted into apartments where six mothers attended.

These parents after the workshop was completed were given follow-up services each month by the teachers and the parent consultant. Teachers became involved in the program after the fourth session of the eight week workshop and they entered into verbal contracts with the parents in setting up the follow-up of each academic and social program at home and in the school.

The winter term workshop began in January and ended with Spring break in March. Four new schools were contacted and over 200 referrals were forthcoming. The EMR parents were also contacted and a special group was formed of these parents. This workshop was organized and set up by the home consultant of this group. Four evening workshops were set up (Mon., Tues., Wed., Thurs., at four different sites, 7-8 p.m.). Three afternoon sessions were also

set up at these sites.

Two new techniques were added to the format in recruiting parents for the workshop. An individual personal letter was sent to each referred parent and the graduated parents from the fall workshop and parent volunteers were utilized in making home visitation and phone calls.

The Spring term workshop began the week after Spring break and ended the last week of May. Since many of the parents from the fall workshop who were contacted for the winter workshop were unable to attend that session and were still interested, the home consultant continued the workshops at these four schools and added only one new school to the project. Two evening workshops were organized and ran on Monday and Thursday from 7-8 p.m. Three afternoon sessions were set up on Tuesday, Wednesday and Thursday, at these sites.

One new technique was added to the existing format of recruiting parents. This technique was not planned but just happened. Parents came flocking to the groups from different schools in the district and outside the school district. These parents came because of the recruitment of the graduated parents who conveyed the existence and the success of the workshops.

A complete syllabus of the content of the parent training workshop is available from the project.

Results:

1. *Given an eight week workshop the parents were to be able to: (a) observe and pinpoint academic and social behaviors of their children; (b) chart academic and social behaviors; (c) construct programs for the children to promote academic and social change; (d) demonstrate skills necessary to teach their children in academic and socially acceptable performance.*

Fall 1972

- Three schools
- 100 referrals -- 100 home visitations
- 29 parents responded (4 groups started)
- 15 (5 fathers) parents had perfect attendance (8 sessions)
- 6 dropped from class
- 7 attended (3-5 sessions)
- Projects: 10 reading -- 8 behavioral projects

Winter 1973

Four schools

275 referrals – made 100 home calls – 100 phone calls – letters sent

116 responded (5 groups started)

Twin Oaks – morn.	13 started	7 perfect attendance 3 dropped 3 attended (4-6 sessions)	9 reading projects 6 behavior projects 2 math 1 spelling
Twin Oaks – Eve. –	30 started (8 couples) (9 men)	21 perfect attendance 1 dropped 8 attended (3-5 sessions)	16 reading projects 15 behavioral projects 6 math 6 spelling
Bailey Hill –	29 started (6 couples) (8 men)	13 perfect attendance 4 moved (3-5 sessions) 2 dropped 8 attended (4-6 sessions)	17 reading projects 20 behavioral projects 5 math 3 spelling
Santa Clara –	27 started (6 couples) (6 men)	15 perfect attendance 3 dropped 9 attended (3-6 sessions)	11 reading projects 15 behavioral projects 5 math
Whiteaker –	10 started	5 perfect attendance 2 dropped 3 attended (4-6 sessions)	5 readiness skills 5 behavioral projects 5 reading projects
EMR Parents –	7 started	5 perfect attendance 2 attended (4-6 sessions)	5 behavioral projects 2 reading projects

Spring 1973

Five schools

125 referrals – 75 home calls – 75 phone calls – letters sent

(5 groups started)

Silver Lea – Eve. –	27 started	15 perfect attendance 5 dropped 7 attended (4-6 sessions)	10 reading projects 7 behavioral projects 2 math
Silver Lea – Morn. –	10 started	8 perfect attendance 2 attended (4-6 sessions)	6 reading projects 5 behavioral projects
Twin Oaks – Morn. –	9 started	8 perfect attendance 1 attended (4-6 sessions)	7 reading projects 6 behavioral projects 2 math projects

NB. one mother trained 6 other mothers in her home.

Whiteaker – Morn. –	11 started	8 perfect attendance 3 attended (4-6 sessions)	5 reading projects 5 behavioral projects 6 readiness projects
Bailey Hill – Eve. –	12 started	5 perfect attendance 2 dropped 5 attended (4-6 sessions)	6 reading projects 3 behavioral projects 2 math projects

Summary

- 204 started the project
 - 35 of these were couples
 - 38 men attended the sessions
 - 24 parents dropped after first session
 - 7 moved from location
- 138 had perfect attendance
- 50 attended at least (3-6 sessions)

- 97 reading projects
- 11 readiness projects
- 95 behavioral projects
- 24 math projects
- 13 spelling projects

Of the 204 parents who indicated an interest to participate in this project, 188 participated of which 138 attended regularly. This participation included attendance at weekly sessions, maintenance of daily records, carrying out individual programs with their children, returning data to the project director and teacher and meeting criteria for each session. Most of the participants were mothers; however at least 38 fathers also participated both in the evening meeting and the teaching of their child at home.

It was the opinion of the parent consultant based on the results of the parents' projects at home that most parents did not acquire basic knowledge of the principles and techniques of behavior management. Parents also reported that they were utilizing these techniques with other children who initially were not referrals.

A summary of the results of the program evaluation that was given to the parents at the end of the workshop indicated a general satisfaction with the program. Parents felt that utilizing a structured format in programs using differential reinforcement was a successful approach and that the general model of parent training was a successful one. Their ratings on a 1 (poor), 2, 3, 4, 5 (excellent) scale of their attitude toward their child before and after the workshop increased from 3 to 4 and 5.

There was limited success with involving EMR parents in the group sessions. These parents were contacted in December and only 12 attended the sessions during the Winter Session. Some of the reasons for this limited involvement are:

- a. These parents are located throughout the city and the picking of a site convenient for them was extremely difficult.
- b. There seems to be no existing bond between these parents since their other children attend the local neighborhood school and their EMR children are transported to three specialized schools. Moreover, there is very limited opportunity for social contact among this group of parents.

- c. It was found that this group needed more counseling sessions concerning their attitudes toward their children and the school programs before the training sessions could begin.
- d. A good deal of individual attention was given these families by home visitations and teacher-parent contacts, but little has been done in working with these families as a group during the past year in this school district. It is hoped by the parent counselor that the number of these parents can be utilized in setting up a more constructive organization in the near future.

The following is a report on group analysis of the parent program and a few samples of the types of records and performances that were maintained on each child. The actual number of records is voluminous. To include all of them in this report would be inappropriate; however, this data is available through the Eugene School System.

Number of parent behavioral programs run – 95

Number of programs that resulted in decrease below baseline – 90

Number of programs that resulted in decrease to 0 – 65

List of behavior parents wished decreased and increased in order of importance.

Decreased	Increased
Quarrelling in the home	Reading
Fighting in the school	Math
Hyperactivity	Cooperation
Laziness	Responsible
Bickering	Attentiveness
Teasing	Completing Projects
Whining	Sharing
Temper Tantrums	Confidence
Thumbsucking	Work Habits
Bed Wetting	Following Instructions
Lying	Dependable
Tattling	Obedience
Sybl Rivalry	Motivation
Distraction	Interest in School
Shyness	Table Manners
Selfishness	Patience
Rebellious	
Wasting Time	
Self Pity	
Interrupting	
Talking Back	

Student 1. Fighting with younger brother – baseline data indicated an average of 7X per day.

2/12/73 to 2/19/73 Hits and fights with brother. Mother initiated Peace Contract: Children allowed one fight per day lasting no more than 5 minutes in duration. Reward: ½ hr. extra T.V. per night. Punishment ½ hr. less T.V. per night.

2/20/73 - 3/15/75 no fights at all
3/15/75 - 6/7/73 three fights took place

Student 2. 8 yr. old drools; baseline data indicates constant drooling.

2/4/73 - 2/21/73 constant drools

Mother initiated program - no drools for 5 minute duration = drawing of star on calendar.

2/22/73 - 3/2/73 5 stars per day
3/3/73 - 3/10/73 Lengthened duration to 15 minutes, averaged 5 stars per day
3/11/73 - 3/18/73 Lengthened duration to 30 minutes, averaged 4 stars per day
3/19/73 - 4/7/73 Lengthened duration to 1 hour, averaged 3 stars per day
4/7/73 - 6/7/73 no time - drooling occurs about once a week

Most of the parents were interested in home management programs such as:

Getting up on time for school	No fighting before supper
Getting dressed	Eating supper peacefully
Making their beds	Cleaning the table
Cleaning their room	Washing dishes
Brushing teeth	Doing their homework
Eating breakfast	Cleaning up before bed
Getting off to school	Toilet activities
Getting home from school	Going to bed
Performing daily chores	

These parents would set up charts usually for all the children in the home and would allow so many points for the difficulty of the task. Each task was spelled out so that the child had specific input on the task he had to perform and the time allowed for each task. The points then were tabulated daily or weekly and the payoff was a reward agreed on by both the parent and the child.

The majority of the parents indicated throughout the sessions and in their post evaluation of the program that their behaviors changed and therefore so did the behaviors of their child.

2. *After a working relationship between school and home is established, classroom teacher will be able to assist the parent in setting up academic programs corresponding to the school programs.*

Number of teacher and parent behavioral programs run - 30
Number of teacher and parent programs resulted in decrease below baseline - 24
Number of programs that reached terminal objective - 20

Types of programs run
urinating in the wastepaper basket
fighting in school
talking back to the teacher
sassing the teacher
not completing tasks assigned
deviant playground behavior
deviant lunchroom behavior
hitting other children
no response to teacher questions

Two examples of teacher-parent conducted programs follow:

Student 1. Sassing his teacher

2/12/73 - 2/19/73 Baseline data 7X per school day
2/20/73 - 2/27/73 Program - Teacher sends note home each day that he does not sass her in class stating that the child performed well in class at which time he is rewarded at home - getting extra privileges. If he does not behave, he gets no note nor does he get the extra privileges.

2/28/73 - 3/6/73 Received three notes of good behavior
3/7/73 - 6/7/73 7 days when the student received no note. Teacher reports that in addition to the decrease of sassing behavior, his classroom manners have improved.

Student 2. Urinating in wastepaper basket

2/12/73 2/19/73 Baseline data 3X per week, school had threatened to expel student.

2/20/73 - 3/30/73 Child did not urinate once, child rewarded for good behavior at home. Other deviant behaviors were initiated in program. All behaviors decreased to 0.

Parents and teachers were generally interested in management of behaviors rather than one specific pinpointed deviant behavior. These tasks proved highly successful since the deviant social behavior decreased social behavior increased and most important the academic improvement showed significant gain.

The parent-teacher home and school programs evolved around such management as:

Getting to school on time
Getting tasks finished on time
Fighting in school
Control on the playground
Control in the lunchroom

Responding to teacher's questions

Sassing the teacher

3. a. After being in this program for one year, the academic performance of the EMR students will show improvement on the Sullivan series based on oral words read per minute using baseline data as the measure.

b. After being in this program for one year, the academic performance of the Learning Disabled students will show improvement on the posttest of the Gates-MacGinitie Reading Tests ranging from 4 to 8 grade level.

Ninety-seven reading projects were initiated at home. Each child's reading program was individualized. Each child in the second, third, fourth and fifth grade were pretested on the district's Diagnostic Reading Test.

Parents of the pre-school (10), kindergarten (8), and first grade (14) children worked on home programs with specific academic pinpoints such as:

2/18/73 - 2/28/73 Alphabet recognition, writing, saying in sequence and out of sequence

3/1/73 - 3/15/73 Short and long vowels - recognition, writing, sounding

3/15/73 - 4/30/73 Consonants - recognition, writing, sounding

5/18/73 - 6/7/73 Consonant digraphs, writing and sounding

5/1/73 - 5/10/73 Worked on Sullivan Reading materials

5/11/73 - 5/20/73 Learned to name numerals 1 through 20

5/20/73 - 5/25/73 Learned to name numerals out of sequence

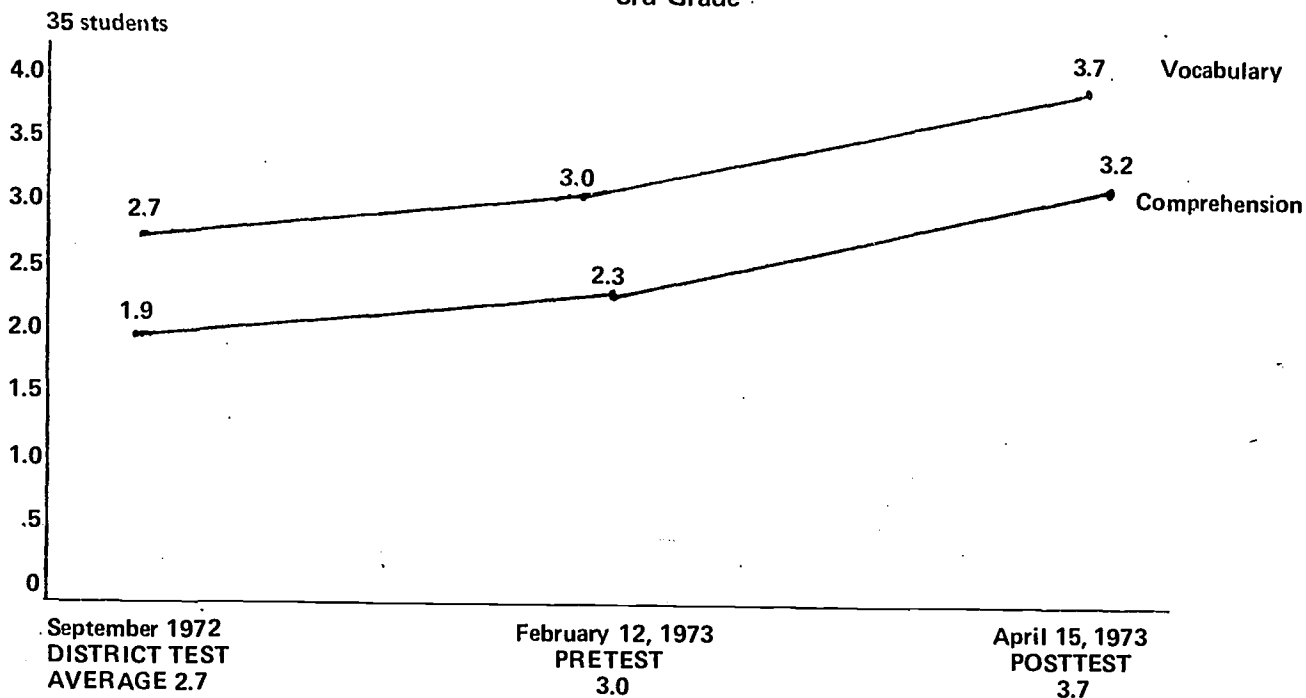
2/20/73 - 6/7/73 Sight vocabulary (Dolch List)

Each child in the first grade had not completed reading one book in the Sullivan series by March. From March to June each child read at least one book while others progressed as high as 4 books with criterion being set at 60 words per minute to pass on to the next book.

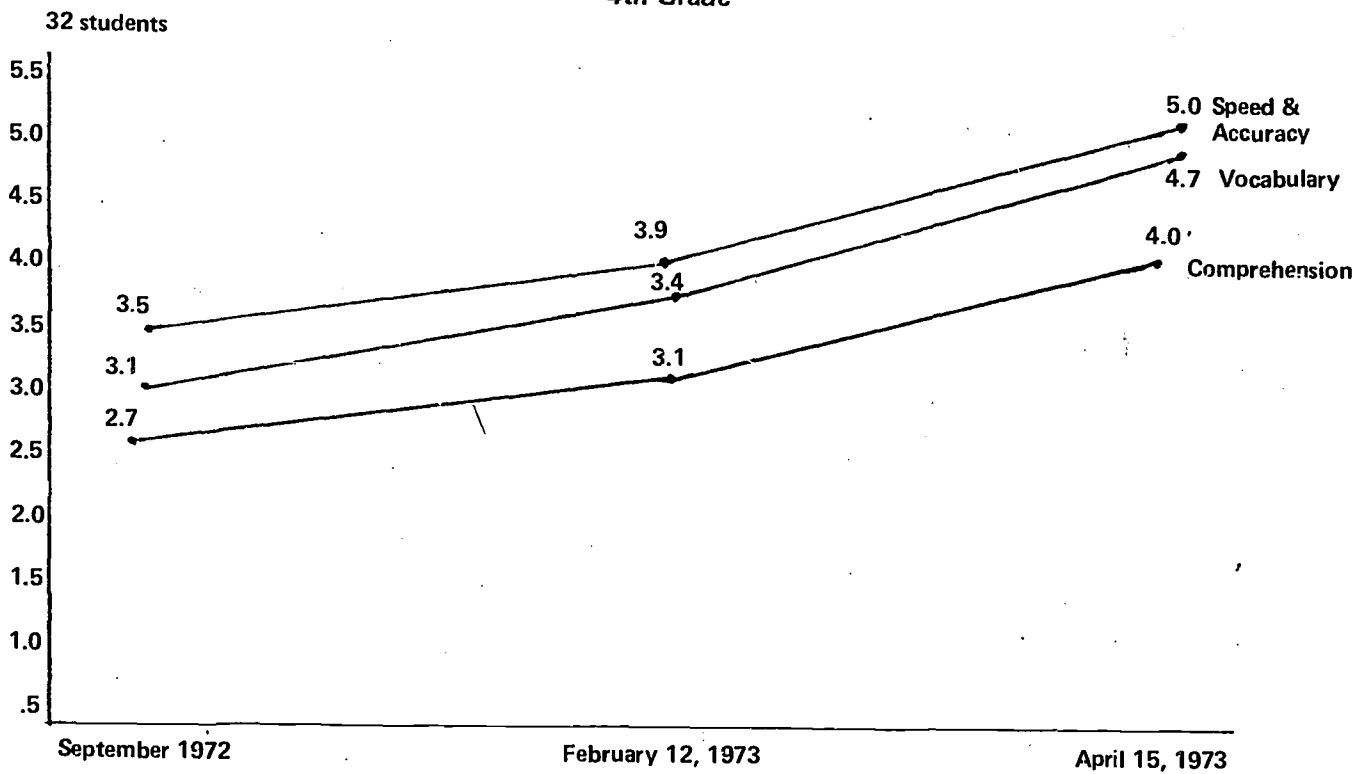
Second grade students were not tested by the school district in September 1972. These children were pretested in February and posttested in April.

Student	Pretest February 1972		Posttest April 1973		Gain	
	vocabulary	comprehension	vocabulary	comprehension	vocabulary	comprehension
1	2.5	1.6	3.1	1.8	+ .6	+ .4
2	2.5	2.3	3.1	2.4	+ .6	+ .1
3	2.6	2.6	2.8	3.7	+ .2	+1.2
4	1.3	0	2.5	1.2	+1.2	+1.2
5	2.8	1.6	3.1	2.2	+ .3	+ .6
6	2.5	1.2	4.1	3.6	+1.6	+2.4
7	1.3	1.3	1.9	1.6	+ .6	+ .3
8	1.3	0	1.5	1.3	+ .2	+1.3
9	1.3	1.3	1.7	1.5	+ .4	+ .2
10	0	0	1.2	0	+1.2	0
11	2.5	1.7	3.5	1.9	+1	+ .2
12	1.5	1.6	2.3	1.8	+ .8	+ .2
13	2.3	2.5	2.8	2.7	+ .5	+ .2
14	1.3	1.2	2.3	1.8	+1	+ .6
15	2.5	2.5	2.9	2.6	+ .4	+ .1
16	0	0	1.5	0	+1.5	0
17	1.5	1.6	1.9	1.5	+ .4	- .1
18	2.6	1.2	2.6	1.7	0	+ .5
19	2.0	1.4	2.7	2.3	+ .7	+ .9
20	2.5	0	3.5	1.3	+1	+1.3

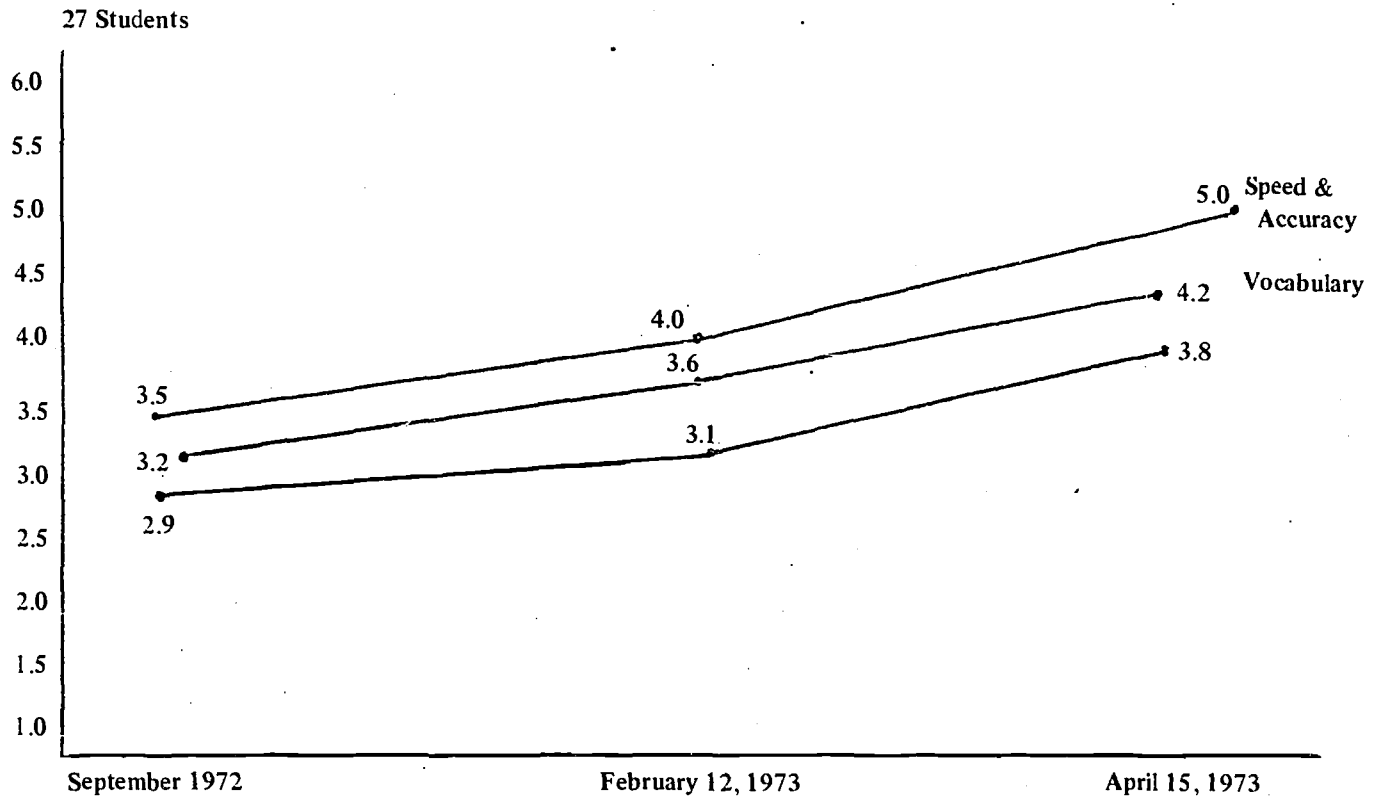
3rd Grade



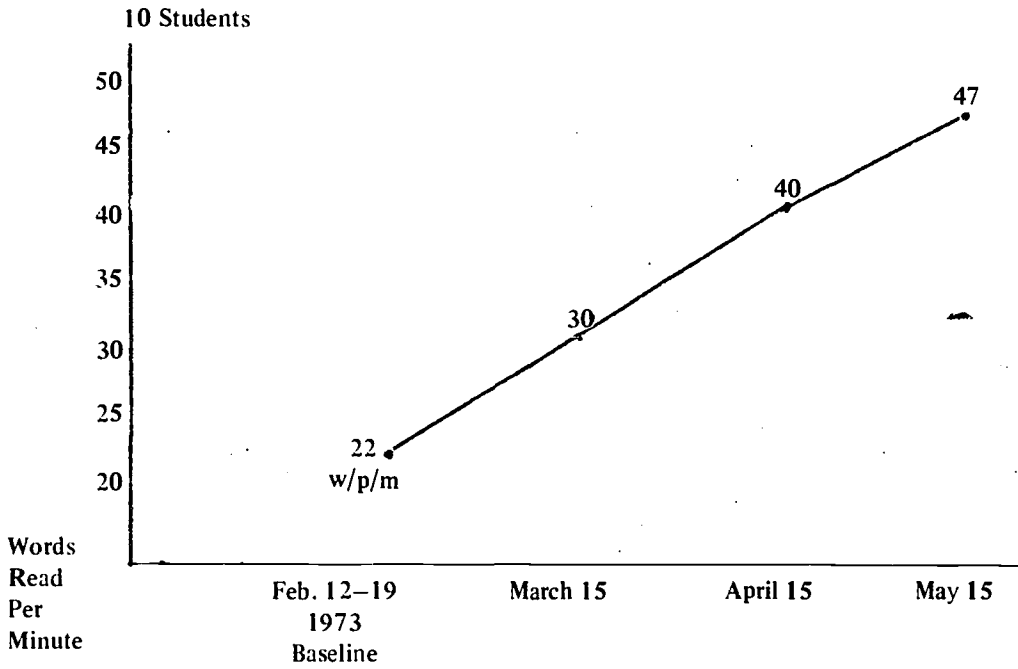
4th Grade



5th Grade



EMR Students



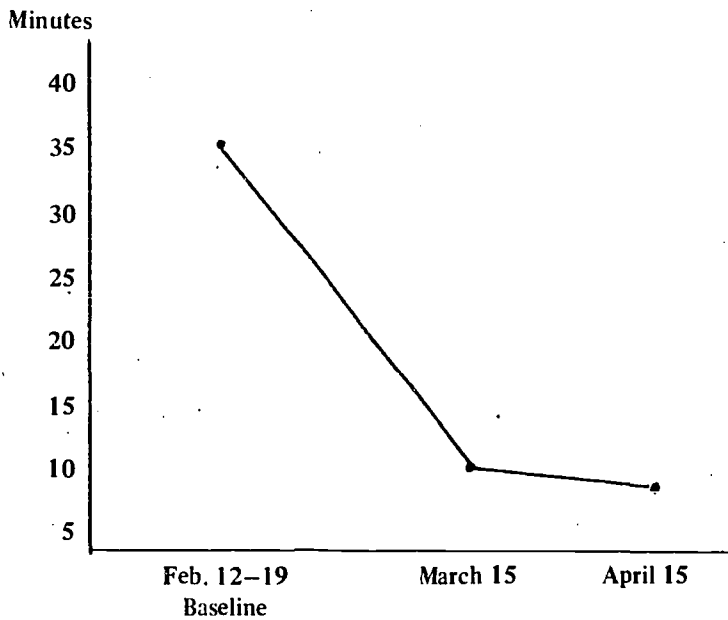
4. At the end of this year in the program the child will demonstrate a significant improvement in social behaviors.

As was indicated before most parents worked on home

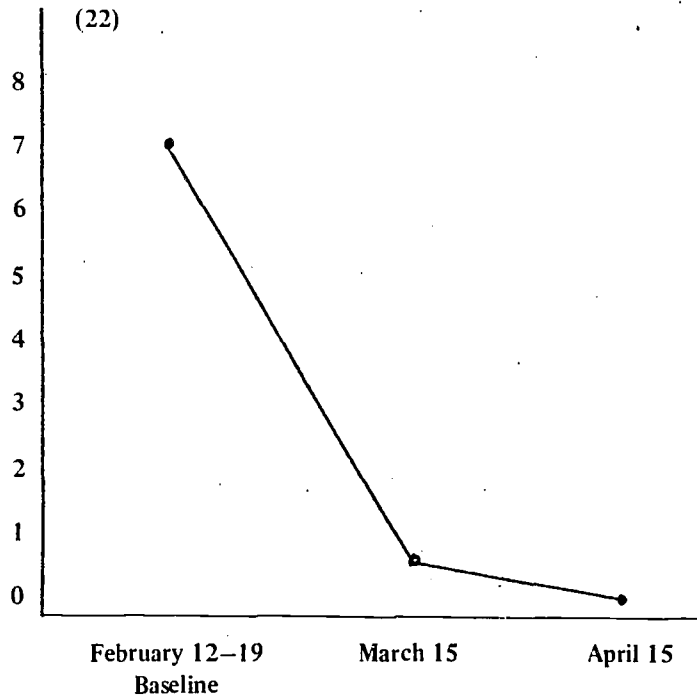
management programs as well as single specific pinpointed behaviors. Here are some group examples of single behavior in the home management programs.

1. Getting Dressed in the Morning

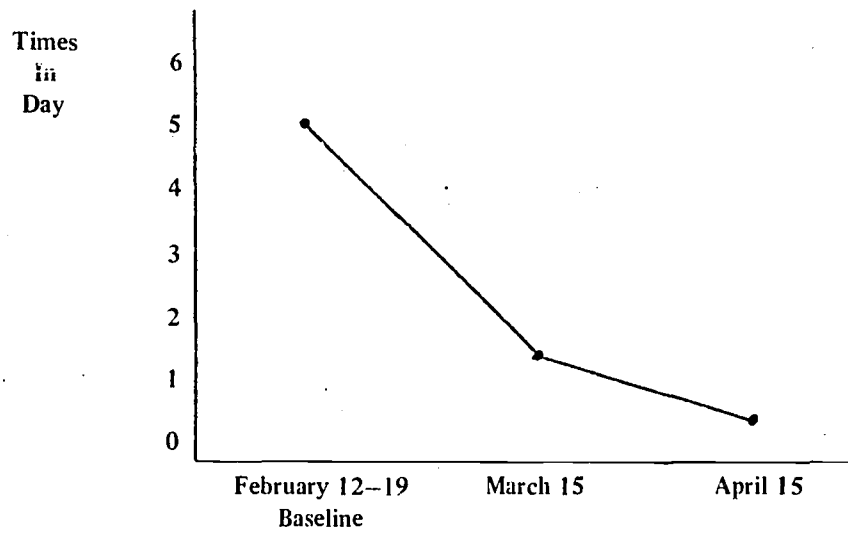
12 Students



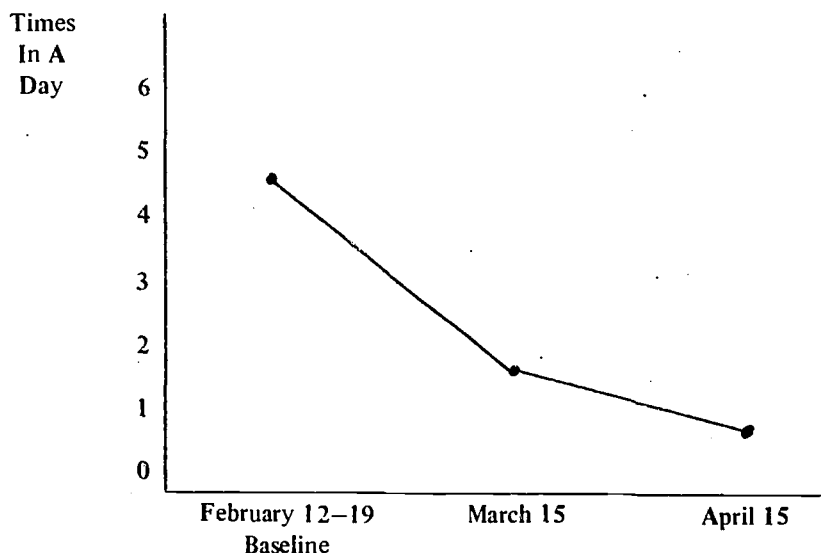
2. Mother's Commands to Child to Perform Household Chores



3. 7 Teachers – Child Sasses Teacher



4. 22 Children Fighting



There were children who were involved in the spring term whose data is incomplete since many of the academic and social programs were not initiated till the middle of May and school ended in June. This time seemed very difficult for parents and teachers to become involved in gathering data. However the parents who were involved in the spring term are now carrying out these programs during the summer. These children will be tested in September to see if any gain has occurred in their programs.

Third Party Evaluator's Comments:

One can find little to fault in this project. It exceeded

the expectations of the Third Party Evaluation Team. Only one reason can be discerned for this excellent performance – the parent counselor, Mr. Manny Lotito, and his enthusiastic approach to the task.

The fact that there was not great success with the parents of EMR children, that some parents dropped out of the program and few fathers participated are not unusual events in parent training programs for handicapped children. However, this project provided service to many other parents who exhibited success with their children. This success should be attributed to the parent training counselor

Title of Project: *Class for Emotionally Disturbed*

Location of Project: *Irving School, Bethel School District No. 52*

Type and Number of Children Served: *A total of 12 emotionally disturbed students during the year*

Funding Allocated: *\$10,500*

Project Beginning Date: *August 29, 1973*

Project Ending Date: *June 8, 1973*

Background and Rationale:

During the past several years the socio-economic make-up of this school district has changed. Industrial development took place in two sections which were at one time established residential suburbs. The homes in these areas have become rentals which have attracted a somewhat migratory population. While socially and emotionally maladjusted children are not peculiar to any one socio-economic group, the lack of family stability appears to have accounted for a higher percentage of social and emotionally maladjusted children in this district. It was proposed that a class with fewer distractions and individualized teaching methods might be beneficial for these children. A teacher with a much lighter classload with the use of specialized materials and procedures, should find it possible to assist these children and enable them, after a reasonable length of time, to function in a regular classroom.

Objectives and Evaluation Plan:

1. *To change the behavior of the child so that he can function adequately in the classroom.*

Evaluation will be done by pinpointing social behaviors that are required for the child to re-enter the classroom. Baseline data will be taken on each of these behaviors, treatment will be initiated and a second baseline taken to determine what changes in the child's behavior have occurred. In addition, the Informal Reading Inventory and Math Inventory developed in the Bethel School District will be given on a pre-posttest basis.

2. *The classroom teacher will fill all the requirements listed in the contractual agreement.*

To evaluate this objective a checklist of behaviors listed in the teacher contract will serve as the evaluation.

3. *Change the behavior of parents so that the child can function in society.*

A checklist of behaviors listed in the parental contract will be utilized as the evaluation.

Methodology:

The classroom was staffed with a teacher and a full time aide. With only a total of twelve students and no more than seven any one time, it was possible to give individual attention and to follow through in behavior modification of inappropriate classroom behaviors.

Initially, the students are seated at one child per two student desks in the room and the program was structured in such a way as to avoid excessive stimulation. Expectations were defined and each student had attainable goals established when he began work. Failure to produce acceptable classroom behavior was dealt with in a consistent manner. Success was awarded with earned time — time that the student could use in certain activities mutually agreed upon by the student and the teacher. The reward was made contingent upon successful completion of a given task and was written down at that time. If the student's behavior became unacceptable, he was given an opportunity to modify his actions. If this was not done, the child was assigned to a response cost area so he would not interfere with the actions of the rest of the class.

Group activities were held to a minimum during the first part of the year. This was done in an effort to decrease the possibility of undesirable interaction. Activities were curtailed in all areas until the teacher felt that the student could deal with a certain activity.

Because of the child's earlier behavior, his basic skills areas are often weak. Efforts were made to provide individual instruction in reading, mathematics and spelling using individualized learning packages of learning laboratories.

Group instruction was instituted only after the children had displayed the ability to cope with this type of activity. Group instruction included work in social studies using "World of Work" and/or "Developing Understanding of Self and Others."

Results:

1. *To change the behavior of the child so that he can function adequately in the classroom.*

Table I shows results of the Hill-Walker Behavior Problems Checklist on a pre- and posttest basis.

Anecdotal data for each individual student follows:

Student 1. Student 1, a second grader, entered the program in September, 1972 and his behavior did improve during the time he was in the program. Looking at the Hill-Walker Behavior Checklist we have a decrease in

inappropriate behaviors. A low score on the Hill-Walker Behavior Checklist indicates fewer behavior problems than a high score. Figure 1 shows a record of the number of times this child bothered other children. Baseline data are reported from September 21 through October 6 and then Student 1 was placed on a program which effectively deleted the target behavior.

Results of the administration of the Open Court Informal Oral Reading Inventory, Bethel School District's version, are reported in Table II.

Table I
Hill-Walker Behavior Problems Checklist Scores

Student		Acting Out		Withdrawal		Distractability		Disturbed Peer Relation		Immaturity		Total Score	
1	Month	9/72	5/73	9	5	9	5	9	5	9	5	9	5
	Score	6	3	0	0	5	3	1	5	3	0	15	11
2	Month	9/72	5/73	9	5	9	5	9	5	9	5	9	5
	Score	6	6	9	11	1	7	8	8	8	10	32	42
3	Month	4/73	6/73	4	6	4	6	4	6	4	6	4	6
	Score	12	3	2	5	5	3	0	0	2	2	21	13
4	Month	9/72	6/73	9	6	9	6	9	6	9	6	9	6
	Score	1	0	3	0	4	4	0	0	0	0	8	4
5	Month	10/72	6/73	10	6	10	6	10	6	10	6	10	6
	Score	0	5	0	0	1	1	3	0	1	1	5	7
6	Month	5/73	6/73	5	6	5	6	5	6	5	6	5	6
	Score	25	4	0	0	9	3	5	0	8	2	47	10
7	Month	3/73	6/73	3	6	3	6	3	6	3	6	3	6
	Score	9	3	3	0	6	1	4	0	2	2	24	6
8	Month	2/73	6/73	2	6	2	6	2	6	2	6	2	6
	Score	14	9	0	0	2	3	0	0	2	0	18	12

Figure 1

Student 1 – Record of Number of Times He Bothered Other Students

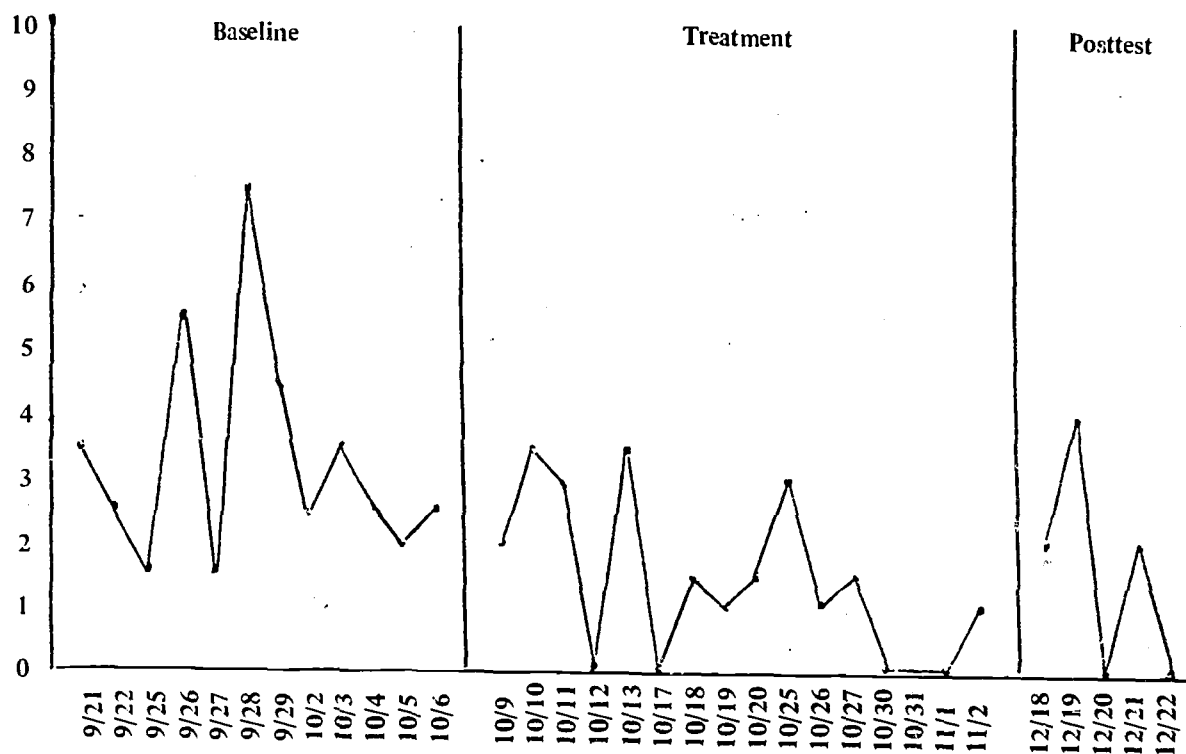


TABLE II

Open Court Informal Oral Reading Inventory Scores for Student 1

Reader	Pretest – 5/11/72			Posttest – 5/24/73	
	Reading Level	Word Recognition	Comprehension	Word Recognition	Comprehension
Blue Book (Middle)	1.5	97%	67%	98%	71%
Blue Book (End)	1.8	95%	14%	94%	84%
Gold Book (Middle)	2.0	96%	71%	99%	86%
Gold Book (End)	2.5	98%	43%	95%	71%
Reading is Fun – 1:2	2.9	34%	33%	91%	71%
A Trip Through Wonderland – 2:1	3.2			98%	86%
Our Country – 2:2	4.2			83%	57%

Baseline data are taken on 5/11/72 followed by posttest data on 5/24/73. These scores show a change in reading behavior from 3.9 years to 4.2 years.

The Addison-Wesley Math Series, Elementary School Mathematics, was used to obtain math improvement with this child during the year. Scores are reported in Table III and show completion of Book 1 and most of Book 2 with good percentage points being achieved on all tests given.

In reading, this student's progress was slow. Open Court IRI results show that on 6/1/72 he scored 91% and 33% at 1.5 reading level in word recognition and comprehension. The test was again administered on 2/15/73, and results were up to 2.5 reading level with scores of 89% and 71% respectively. During a third evaluation using the same test a decrease in progress was reported. Scores obtained on 5/29/73 show that the reading level attained dropped to a 2.0 level.

In math, improvement can be noted by looking at the progress made on the second book of the Elementary School Mathematics series. The student completed the first six tests and the first review scores were: Test 1 - 90%; Test 2 - 90%; Test 3 - 40% and 60%; Test 4 - 60%; Test 5 - 70%; and Test 6 - 80% for the review. No other math data were reported for this student.

Table III

Elementary School Mathematic Test Scores for Student 1

	Book 1	Book 2
Test 1	100%	100%
Test 2	100%	100%
Test 3	100%	90%
Test 4	100%	90%
Test 5	100%	80%
Test 6	80%	80%
Review	100%	90%
Test 7	100%	100%
Test 8	90%	100%
Test 9	100%	100%
Test 10	90%	80%
Test 11	80%	80%
Test 12	100%	
Review	80%	

Student 2. This child, a fourth grader, started in the program in September, and his behavior is reported as being very erratic during the school year. No programs were evidently successful in dealing with this child's inappropriate behaviors, since the Hill-Walker Checklist scores show a significant increase in the occurrence of inappropriate behaviors. Contributing to this increase were high scores in the areas of withdrawal, distractability and immaturity.

Student 3. Student 3 was a first grader and did not come into the program until April, 1973. He is reported to have responded well to the behavioral controls imposed by the program, and an examination of the Hill-Walker Checklist supports this statement. The teacher reports that this student would gradually be phased into the second grade next year.

In reading, it was reported that this student was able to complete by 5/21/73 the first reader (1.5 reading level) in the Open Court IRI with scores of 83% on word recognition and 100% on comprehension. He was not able to do this upon entering the program. The only other data that were beneficial for evaluative purposes, were his progress on the Elementary School Mathematics Series. This student worked through eight tests and one review in the first book of the series. Scores were Test 1 - 100%; Test 2 - 100%; Test 3 - 90%; Test 4 - 80%; Test 5 - 90%; Test 6 - 80%; 60% on the review; Test 7 - 90%; and Test 8 - 80%. These test scores indicate that he could complete the math skills required by book one of this series.

Student 4. Student 4 entered the program in September as a first grader. Upon entering the program he was unable to begin and/or complete an assignment by himself, unable to relate to his peers, and experienced difficulty controlling his temper. These areas improved during the year and the Hill-Walker Checklist shows improvement at all areas excepting distractability. In addition, two inappropriate classroom behaviors, out-of-seat and talk-outs, were dealt with through the construction of individual programs. Figures 2 and 3 show the successful results of the programs.

Figure 2
Student 4 – Increasing Handraising Behavior

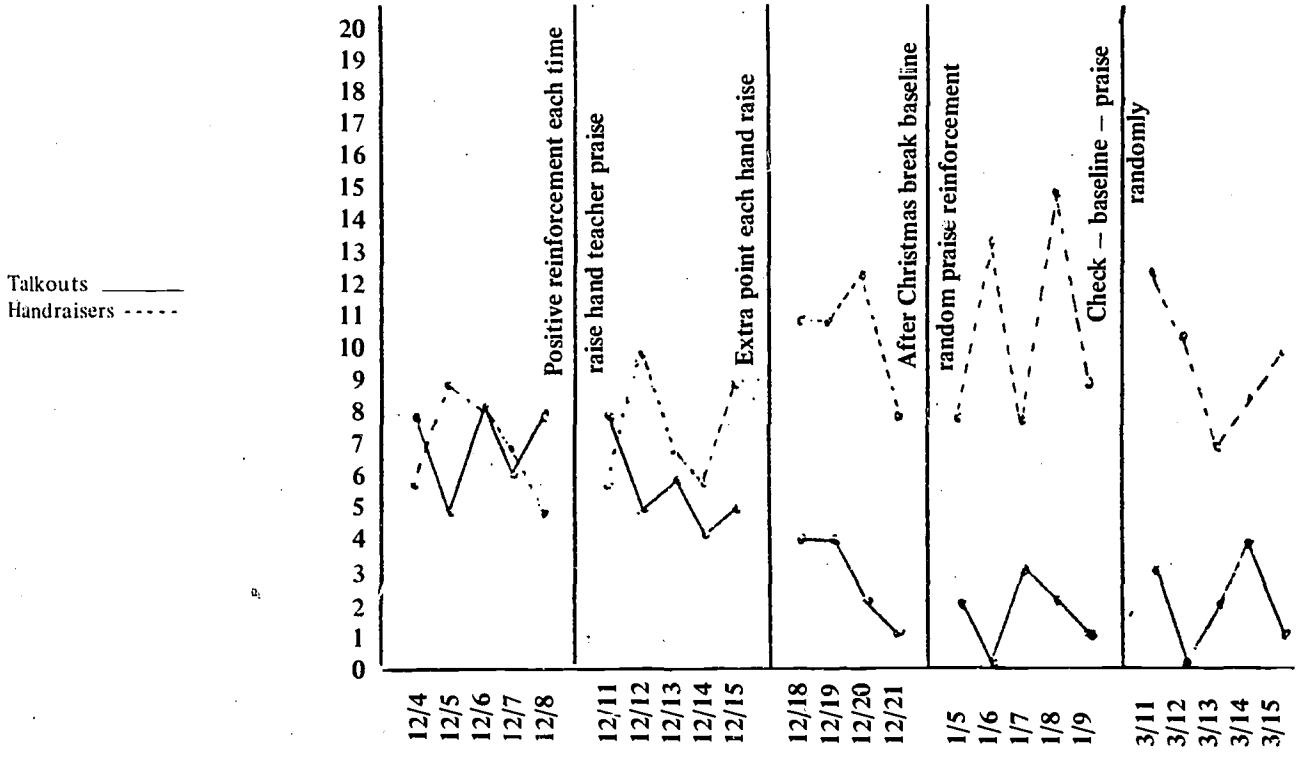
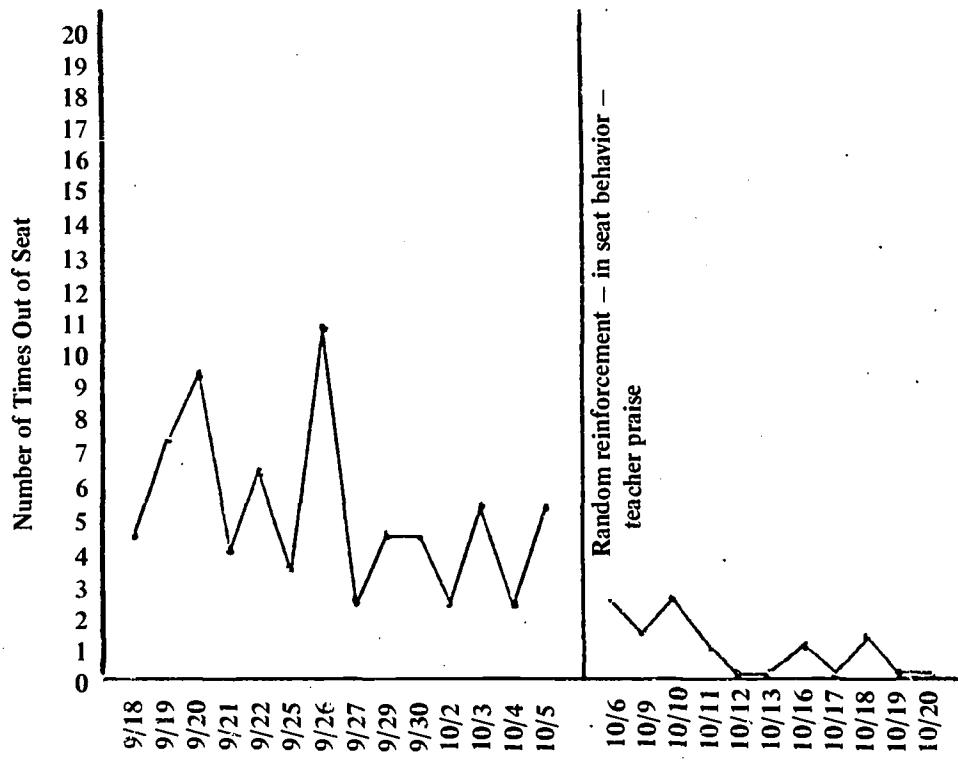


Figure 3
Student 4 – Out of Seat Behavior



In reading, this student was considered a nonreader. The teacher reported that by May this boy had acquired the following skills: (a) sight read 100 words; (b) identify letters of the alphabet and their sounds; (c) tell initial and final sounds in words.

In math he progressed by learning to count, perform basic addition and subtraction skills, tell time, count money (with assistance), fill in addends, count to 20 with no assistance, and count to 100 with assistance. The Elementary School Mathematics Series, Book I data show he completed twelve tests and two reviews. Results are reported in Table IV.

Table IV

Elementary School Mathematics Book I
Scores For Student 4

Test 1	100%
Test 2	90%
Test 3	70%; 85%
Test 4	60%; 80%
Test 5	100%
Test 6	100%
First Review	80%
Test 7	70%
Test 8	60%
Test 9	30%
Test 10	50%
Test 11	90%
Test 12	90%
Second Review	50%

Materials not covered

Student 5. This ten year old student entered the program in September. However, he did not show progress with the behavioral program administered by this program. An examination of the Hill-Walker Checklist shows an increase in the number of inappropriate behaviors measured.

In reading, the Sullivan reading series was utilized with the student progressing through the first four reading programs in the text. His scores were as follows: Prereader - 85%; Book I - 94%; Book II - 82%; Book III - 7 incorrect.

In math, Student 5 completed Book 2 of the Elementary School Mathematics Series. Table V shows these results.

Table V

Elementary School Mathematics
Book I Scores For Student 5

Test 1	70%; 100%
Test 2	60%; 90%
Test 3	80%; 90%
Test 4	20%; 80%
Test 5	20%; 70%
Test 6	90%; 90%
First Review	50%; 70%
Test 7	80%
Test 8	80%
Test 9	70%
Test 10	60%
Test 11	70%
Test 12	70%
Test 13	90%
Test 14	80%
Second Review	70%

Student 6. This boy came into the program in April as a first grader. In the short time that he was in the program drastic behavioral changes were reported. An examination of the Hill-Walker Checklist shows these results.

In reading, this student was considered a nonreader in April. Results of the Open Court IRI given on 5/23/73 show an increase to a 1.8 year reading level. Scores were 85% on word recognition and 67% on comprehension at the 1.5 reading level, and 81% on word recognition and 30% on comprehension at the 1.8 reading level.

In math, the Elementary School Mathematics Series was again used. Results show progress in Book I through test 9. The following scores are reported for each test: Test 1 - 100%; Test 2 - 100%; Test 3 - 90%; Test 4 - 90%; Test 5 - 100%; Test 6 - 90%; First review - 80%; Test 7 - 70%; Test 8 - 90%; and Test 9 - 80%.

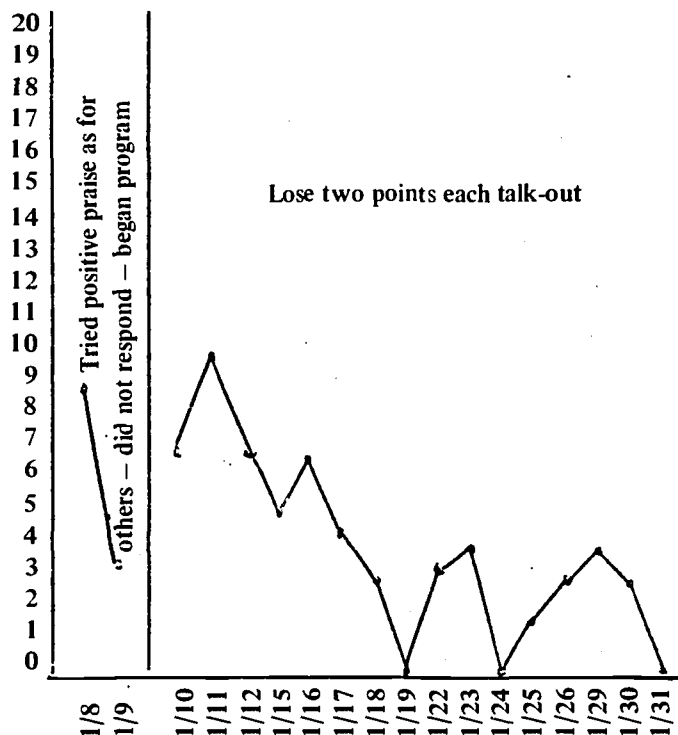
Student 7. Student 7 came into the program in March of 1973 as a first grader. An examination of the results of the Hill-Walker Behavior Problems Checklist indicates that this student made good gains with the behavior controls established by the Basic Education Program.

Academically, this student progressed through two readers of the Open Court Informal Reading Inventory. Pretest data show word recognition of 35% and comprehension at 50% for the first reader. Posttest scores were 97% and 100% respectfully on the first reader and 89% and 86% respectfully for the second reader. Reading level equivalents show gains from nonreader at the beginning of the year to a level of 1.8 at the end of the year.

in math, this student moved through test 6 on Book 1 of the Addison-Wesley Elementary School Mathematics series. Scores were: Test 1 – 100%; Test 2 – 80%; Test 3 – 90%; Test 4 – 30% and 80%; Test 5 – 60% and 70%; Test 6 – 90% and review – 90%.

Student 8. Student 8 entered this program in January as a fourth grader. As is apparent from the Hill-Walker Behavior Checklist, this student progressed in all areas. However, the teacher reported some problems with acting out and this was, in fact, supported by the checklist. Figure 4 shows a graph of the results of a program designed to reduce talk-outs in class and the program was apparently effective in accomplishing its objective.

Figure 4
Student 8 – Decreasing Talk-outs



The Open Court Reading Inventory shows gain from a nonreader level to 2.0 reading level.

In math, progress was made and is represented by looking at this student's progress on the Elementary School Mathematics Series. Table VI illustrates the test scores achieved by this student on Book 2 and Book 3 of this series. No other math data were available for analysis.

Table VI

**Elementary School Mathematics Book 2 and 3
Scores for Student 8**

	Book 2	Book 3
Test 1	100%	70%
Test 2	100%	90%
Test 3	100%	80%
Test 4	100%	90%
Test 5	50%; 80%	80%
Test 6	90%	70%
First Review	80%	Mid-year Test
Test 7	60%	
Test 8	100%	
Test 9	100%	
Test 10	20%; 90%	
Test 11	50%; 70%	
Test 12	70%	
Test 13	90%	
Test 14	100%	
Second Review	70%	

2. The classroom teacher will fill all the requirements listed in contractual agreements.

Contractual agreements were drawn up and signed by each classroom teacher who had children participating in the program. Anecdotal information was presented for each child who returned to the regular classroom. This information generally was favorable concerning the child's ability to function appropriately. However, no data were available to substantiate whether the components of the contract were carried out by the classroom teacher.

3. Change the behavior of parents so that the child can function in society.

Contracts were also signed by the parents relating to specific tasks in which they would be involved relative to the class for the emotionally disturbed. Anecdotal data was submitted by the teacher which indicated that many of the parents participated in the program. However, no data were submitted which would substantiate whether various components of the contract were accomplished by the parents.

Third Party Evaluator's Comments:

It is apparent that the major portion of the project was completed as agreed upon. Data submitted for Objective 1 included the significant aspects of this project. The Hill-Walker Behavior Problems Checklist was very systematically given on a pre- posttest basis as was the use of the Open Court Informal Reading Inventory tool for the evaluating reading progress. In math, the use of the Elementary School

Mathematics book allowed us to chart continuing acquisition of math skills. In addition, the charting of student progress on individual behavioral problems was well done, and the project deserves to be commended for the collection of these data.

However, the data collected and submitted for objectives 2 and 3 were not those that were specified in the letter of agreement with the Third Party Evaluators and approved by the Oregon Board of Education. The anecdotal information that was presented was not sufficient to allow these evaluators to determine whether these objectives had been achieved or not.

In addition, the district proposed to serve fifteen children during the school year. Progress data was submitted for eight children. Of these eight children four were served for nine months, 1 child for four months, one child for three months, one child for two months and one

child for one month. The project director indicates that seven other children were served for varying short durations, but left the district without notice and therefore no posttest data were gathered. Pretest data were not submitted in the final report. The third party evaluators would not expect more than eight to ten children to be served concurrently. However, since these children were supposed to be served on a short-term basis, either more should have been served during the year or data should have been collected on all children who were served.

Despite these two concerns, the results do show that some students did make good gains during the year. It was not the intention of these comments to minimize their successes and certainly the project staff should be complimented for helping these children acquire behavioral and academic gains.

Title of Project: *Speech Instruction and Clinic*

Location of Project: *Forest Grove Public Elementary Schools*

Type and Number of Children Served: *25 speech correction; 50 language development
A total of 75 received direct therapy.*

Funding Allocated: *\$7,328*

Project Beginning Date: *August 28, 1972*

Project Ending Date: *June 8, 1973*

Background and Rationale:

Prior to September 1971 the Forest Grove School District did not employ a speech clinician or have a planned speech therapy program in their elementary schools. In the spring of 1971, referrals from elementary teachers indicated a possibility of 174 students having some degree of language, articulation, voice and fluency problems. Federal assistance for the education of the handicapped, Title VI-A, was applied for and received by the school district for the school year 1971-72.

The 1971-72 Title VI-A Speech Instruction and Clinic project enabled the district to serve one hundred and eleven children needing speech correction and language development. It also enabled the district to start the education of teachers, administrators, and parents and community to the rationale, background and operation of this new speech service.

Evaluations at the close of the 1971-72 Title VI-A project indicated it had been very successful. It was felt the continuation of such a project would be most beneficial to the students needing additional help and to those students who were unable to receive help last year. Continuation and expansion of the project would also help to close the gap in the speech and language area of the district's special education programs.

Objectives and Evaluation Plan:

1. *Given two to five hours of consultative inservice in general language and speech instruction, staff members will be able to identify, refer and obtain instructional procedures for pupils in the program.*

A log of referrals and the validity of the referrals will be kept by the speech clinician.

2. *Given test results and other background information, the speech clinician will diagnose specific speech problems and screen pupils in areas of language development, speech improvement, phonation and prosody with 75% accuracy and refer to Pacific*

University Speech Clinic those who require in-depth diagnosis.

The Northwestern Syntax Screening Test, the Basic Concept Inventory, the Templin-Darley Articulation Tests, and modified Ryan's Program will be administered.

3. *Given one and one-half hours of small group language development instruction, 10% of the pupils will work out their identified problems and 90% of the pupils will make significant gain between pre- and posttesting.*

The Northwestern Syntax Screening Test will be utilized to evaluate this objective.

4. *Given one hour speech therapy and instruction weekly for thirty weeks, 10% of the pupils will work out their identified speech problems and 70% of the pupils will show significant gain between pre- and posttesting.*

The Ryan's Articulation Program will be utilized to evaluate this objective.

Methodology:

The staff included one special education teacher with a major in speech correction. One general aide was also hired to work under the supervision of the speech clinician in preparation of materials, clerical work and individual or small group instruction of a reinforcement nature. The coordination and supervision of the personnel and the project was the responsibility of the District Coordinator for Special Programs. In addition to the previous listed staff, use was made of some sixth grade student speech aides who had worked through the speech program last year. These student aides elicited and recorded responses from younger children working with the modified Ryan's Program. One instructional aide working in a remedial reading program, volunteered to monitor carryover activities with students who were currently in both the speech program and in the remedial reading program.

The Pacific University Speech Clinic was used for identification and diagnostic work for special students when referred by the speech clinician. Information from the Clinic at Pacific was furnished for any pupils who were attending the public schools in Forest Grove.

The district also cooperated with the Washington County I.E.D. Special Education Program in Speech and Hearing. All of our hearing referrals were made to the W.C.I.E.D. and a joint therapy program was initiated when needed.

At the end of the school year 1972, a list of all youngsters referred by their teachers as needing additional language and/or speech services was compiled. Starting September 1, 1972 the teachers were asked to refer any additional students whom they wished to be tested for speech and/or language.

Speech and language screening took place from September 13-22 at six different schools. Templin Darley's Articulation Test was used as a screening device for those students referred with possible articulation problems. After the child was diagnosed as having an articulation problem, a modified Ryan's Articulation Criterion Test was used for the pretest. Screening for those children needing services in the area of phonation and stuttering were also started at this time. Observation, an oral exam and a tape recording of the child's voice and speech were used as part of the diagnostic examination. The Northwestern Syntax Screening Test was used to evaluate those kindergarten, first, and second graders who had been referred for language development.

After the screening pretests were completed, the speech therapy cases were chosen on the basis of the following criteria:

1. Severity was not the sole factor in determining the cases chosen.
2. The total child, his environment, prognosis and etiology were considered in the selection.
3. Concentration of effort was placed on kindergarten and grades 1 and 2 with approximately 50% of the time spent by project personnel in this area.
4. Pupils with speech problems in grades 3-6 received approximately 30% of the instructional time.

Selection of language development cases was based on the following criteria:

1. Only kindergarten and grades 1 and 2 students were included.
2. Those K-2 pupils who scored below the 10th percentile in either receptive or expressive skills of the Northwestern Syntax Screening Test were considered.
3. Groups were limited to 10 students.
4. Scheduling and physical space available were also factors.

A separate schedule was made for the language

development and for the speech therapy cases with some students included in both schedules. A block schedule of half-hour classes on Monday, Wednesday and Friday was used for the language development program. It was planned that two neighboring schools be used for the initial first and third block sessions of eight to nine weeks with another group of schools having the second and fourth blocks. Language development was taught with the use of the Distar Language I and II kits.

Speech therapy cases were scheduled independently and were seen throughout the entire year in all schools. Each child was seen twice a week (Tuesdays and Thursdays) for a 15-20 minute session. A modified Ryan's Articulation Program was used extensively for the articulation cases. Those children needing further diagnosis were referred to other services.

Parents of children who were selected for the initial case load were notified. A conference with the speech clinician and/or the student's home room teacher was scheduled with the parent to explain each individual program.

The teachers and principals of each school were given notebooks that contained the current caseload from his school and room, those students placed on a waiting list for therapy, students who were referred to other special services and names of students who were found to have unsatisfactory speech. Also included were language and speech referral forms and several information sheets. These notebooks were revised by the speech clinician throughout the year.

The consultative services to the teachers centered on individual meetings with the speech clinician throughout the year. These meetings provided background information to teachers (especially the new ones) so that they understood the basic speech and language program and referral procedures for screening and diagnosis. Specific building hours of the speech clinician were given to all teachers and principals. However, the speech clinician made herself available to "on the spot" consultation whenever needed.

The physical facilities in the various elementary schools in the District did not meet the standards anticipated due to an unanticipated enrollment in the elementary schools last year. The Title IV-A Speech project was submitted as a cooperative project with Title I ESEA which was used to purchase a mobile van to be used for speech instruction. The 24 foot mobile van arrived in November 1972 and was used as a speech classroom traveling to all the schools for the remainder of the school year.

Upon teacher request the consultative services centered around meetings with individual teachers and grade level staff meetings in each building. Six of these many meetings were planned and directed by the speech clinician. These six meetings provided the teachers with individual speech

notebooks containing referrals, schedules, and specific information about their students. Teachers were also given referral procedures and the basis for these referrals was discussed. The basic speech and language program was reviewed and questions were answered. Primary teachers were given special instruction in the rationale behind the Distar Language Program. They were also given ways to strengthen carryover of the language program into the classroom. All teachers were given specific techniques which would strengthen the carryover of correct articulation into the classroom. In addition to the planned meetings many hours were spent in consultation with individuals or small groups.

Results:

- 1. Given two to five hours of consultative inservice in general language and speech instruction, teachers will be able to identify, refer and obtain instructional procedures for pupils in the program.*

A log of teacher referrals and the validity of those referrals was kept by the speech clinician (Table I). Out of a total of 79 language referrals received, 71 were judged valid. Thus 89% of the language referrals were appropriate. Sixty-six out of 73 speech referrals were valid, therefore, 90% of the speech referrals were deemed appropriate. A total of 152 speech and language referrals were received and 137 were appropriate. On the whole, the teachers averaged 83% effectiveness in their referrals.

Table I
Log of Teachers Referrals

Teacher	Number of Language Referrals	Number of Appropriate Referrals	Number of Speech Referrals	Number of Appropriate Referrals	Total Appropriate Speech & Language	
School 1						
Kindergarten	8	8	5	3	13	11
Kindergarten	5	3	1	1	6	4
Kindergarten	3	3	1	1	4	4
Kindergarten	1	1	2	2	3	3
					<u>26</u>	<u>22</u>
School 2						
Kindergarten	0		2	2	2	2
Kindergarten	5	4	2	2	7	6
First	0		3	3	3	3
First	5	4	2	2	7	6
First	4	3	1	0	5	3
Second	2	2	2	2	4	4
Second	1	1	2	2	3	3
Second	2	2	3	3	5	5
Third	—	—	1	1	1	1
Third	—	—	3	3	3	3
Third	—	—	3	2	3	2
					<u>43</u>	<u>38</u>
School 3						
First	1	1	3	3	4	4
First	2	2	0		2	2
First	Uses Language Distar in class		0			
Second	0		2	2	2	2
Second	6	6	1	1	7	7
Second	4	4	4	3	8	7
Third	—	—	0			
Third	—	—	0			
Third	—	—	2	2	2	2
Fourth	—	—	0			
Fourth	—	—	0			
Fifth	—	—	0			
Fifth	—	—	0			
Sixth	—	—	0	2	2	2
Sixth	—	—	0	0		
					<u>27</u>	<u>26</u>
School 4						
First	5	4	6	6	11	10
First	5	5	4	4	9	9
Second	5	5	2	2	7	7
Second	7	7	2	2	9	9
Third	4	3	1	1	5	4
Third	2	2	3	3	4	5
					<u>45</u>	<u>5</u>
					<u>46</u>	<u>44</u>
School 5						
First	0	0	1	1	1	1
First	2	1	3	3	5	4
Second	0		4	2	4	2
					<u>10</u>	<u>7</u>
Totals	79	71	73	66	152	137
Percent of Appropriate Referrals	Language — 89%		Speech — 90%		83%	

2. Given test results and other background information, the speech clinician will diagnose specific speech problems and screen pupils in areas of language development, speech improvement, phonation, and prosody with 75% accuracy and refer to Pacific University Speech Clinic those who required in-depth diagnosis.

In September 1972, 166 students were screened either on teacher referral or follow-up from last year. Test results and background information were used to determine the

status of each child. Five students were referred to the Pacific University Speech and Hearing Clinic for further diagnosis or upon request of the parent (Table II). In two cases a coordinated therapy program was initiated and close communication was kept between the Public School Clinician and Pacific's Student Clinician. Two articulation cases were referred because of the need for parent reassurance. One fluency case was referred because of the student's previous contact with Pacific.

Table II
REFERRED TO PACIFIC UNIVERSITY SPEECH AND HEARING CLINIC

Student	Why Referred	Pacific University Diagnosis	Therapy Procedures	Comments
1	Delayed speech and Language	Severe delayed speech and Language	Seen by both P.U. and Public School Clinician	This student received therapy 3 days a week from the Public School Clinician and 2 days from the P.U. Clinic coordinated effort.
2	Delayed speech and Language	Severe delayed speech and Language	Seen by both P.U. and Public School Clinician	Seen previously by P.U. The case was discussed and a coordinated effort was begun
3	Articulation - Parent concern	Lateral lisp	Seen by Public School Clinician	This was primarily a parent overconcern
4	Fluency	Phase I Stuttering	Public School Clinician, Parent counseling	This boy had been seen previously at Pacific & due to parent decision was no longer being seen. Problem handled through counseling.
5	Articulation - Parent concern	Lateral lisp	Referred late in year and was not able to begin therapy in either place.	

3. Given one and one-half hours of small group language development instruction weekly, 10% of the pupils will work out their identified problems and 90% of the pupils will make significant gain between pre- and posttesting.

Results of the children involved in the Distar Language Program are reported in Tables III, IV, and V. Table VI, gives the total number of youngsters who participated in the program and shows that 56% of those youngsters

worked out their identified problems. This was based on a gain of one or more percentiles on both the expressive and receptive parts of the Northwestern Syntax Screening Test. It is also shown that 90% of the students made a significant gain between pre- and posttests. This figure includes those students who worked out their problems, those who gained one or more percentiles between the pre- and posttest in either their expressive or receptive abilities and those who gained at least eight points between pre- and posttests on both their expressive and receptive scores.

Table III
NORTHWESTERN SYNTAX SCREENING TEST
Language Development Blocks I and III

Child	Pretest (9-72)		Posttest (4-73)		Difference	
	Receptive	Expressive	Receptive	Expressive	Receptive	Expressive
Kindergarten						
Holly L.	9	16	28	22	+19	+ 6
Kristina F.	18	19	33	34	+15	+14
Doila S.	20	22	27	28	+ 7	+ 6
Missy R.	20	25	34	25	+14	+ 0
Tracy D.	28	24	34	31	+ 6	+ 7
Lance J.	15	25	22	30	+ 6	+ 5
Philip J.	19	11	31	25	+12	+14
Tamara W.	25	27	34	33	+ 9	+ 6
First						
Brian R.	26	23	38	38	+12	+15
Jimmy S.	29	32	34	33	+ 5	+ 1
Craig D.	23	29	37	33	+14	+ 4
Brian M.	29	36	36	38	+ 7	+ 2
Danny K.	20	23	31	35	+11	+ 8
Robert L.	26	30	37	36	+11	+ 6
Ovalie M.	16	0	25	18	+ 9	+18
Second						
Larry H.	35	32	38	36	+ 3	+ 4
Mike H.	31	27	32	34	+ 1	+ 7
Steven S.	26	22	35	31	+ 9	+ 9
Lisa H.	28	25	33	34	+ 5	+ 9
Olga P.	33	21	35	33	+ 2	+12
Mike K.	30	36	35	36	+ 6	0

Table IV
NORTHWESTERN SYNTAX SCREENING TEST
Language Development Blocks I and III

Child	Pretest (9-72)		Posttest (4-73)		Difference	
	Receptive	Expressive	Receptive	Expressive	Receptive	Expressive
Second						
Cliff H.	31	30	36	36	+ 5	+ 6
Paulo G.	21	21	34	32	+13	+11
Susan L.	26	27	35	29	+ 9	+ 2
Kurtis B.	28	31	37	34	+ 9	+ 3
Mark C.	35	34	35	40	0	+ 5
Todd F.	31	30	39	36	+ 8	+ 6

Table V
NORTHWESTERN SYNTAX SCREENING TEST
Language Development Blocks II and IV

Child	Pretest (9-73)		Posttest (5-73)		Difference	
	Receptive	Expressive	Receptive	Expressive	Receptive	Expressive
Kindergarten						
Darren C.	29	17	31	26	+ 2	+ 9
Brian M.	14	13	24	24	+10	+11
Tom L.	28	22	33	32	+ 5	+10
Gary V.	23	3	31	30	+ 8	+27
John P.	27	18	35	31	+ 8	+13
Brad H.	20	0	31	8	+11	+ 8
Wendy H.	29	29	31	32	+ 2	+ 3
Carl S.	0	0	29	30	+29	+30
Tonya W.	29	30	33	31	+ 4	+ 1
First						
Rodney R.	19	33	39	37	+20	+ 4
Jesse M.	29	29	25	24	+ 6	+ 5
Matt M.	23	20	33	35	+10	+15
Eric V.	24	23	38	35	+14	+12
Linda T.	27	25	38	38	+11	+13
Celeste V.	25	29	32	31	+ 7	+ 2
Second						
Lidia M.	31	34	40	38	+ 9	+ 4
Armando M.	33	33	37	39	+ 4	+ 6
Joey M.	31	30	38	33	+ 7	+ 3
Robert S.	32	33	40	36	+ 8	+ 3
Dora B.	33	34	36	40	+ 3	+ 6
Ricky M.	26	26	34	33	+ 8	+ 7
Julie F.	28	30	37	36	+ 9	+ 6
Richard S.	29	32	39	33	+10	+ 1

Table VI

Language Development Small Group Instruction

	Block I & II	Block II & IV	Total In Program	Percent
Total Number In Program	27	23	50	
Worked Out Identified Problems	13	15	28	56%
Made Significant Gain Between Pre and Posttest	13 09 04 26	Worked Out Problem Yes/No* Yes* 15 02 02 19	45	90%
No Significant Gain Made	01	04	05	10%

*Yes/No – Each of these students gained one or more percentiles between the pre- and posttest in either their expressive or receptive abilities.

*Yes – Each of these students gained at least eight points between pre- and posttest on both their expressive and receptive scores.

Table VII

Speech Therapy 1972-73 Case Load

Student	Dismissed Speech Satisfactory	Satisfactory Progress	Additional Help Needed
1		X	Follow-up
2		X	Follow-up
3		X	Follow-up
4		X	Follow-up
5	X		Follow-up
6	X		
7		X	X
8		X	Follow-up
9	X		Follow-up
10		X	X
11		X	X
12	X		Follow-up
13		X	Follow-up
14	X		Follow-up
15	X		Follow-up
16		X	X
17		X	Follow-up
18	X		
19		X	X
20	X		Follow-up
21	X		
22			X
23			X
24	X		Follow-up
25			X
	10 – 40%	12 – 48%	3 – 12%

4. Given one hour speech therapy and instruction weekly for thirty weeks, 10% of the pupils will work out their identified speech problems and 70% of the pupils will show significant gain between pre- and posttesting.

The data found in the charts are representative of the results of articulation training with twenty-five students. The percentage figures were derived from the modified Ryan's Articulation Criterion pre- and posttest. Of the 25 students receiving direct articulation therapy, (no cases of phonation or prosody were given direct therapy), ten were dismissed with satisfactory speech, twelve made satisfactory progress and three made no significant gain (Table VII). Combining those students who were dismissed having obtained satisfactory speech, with those obtaining satisfactory progress, 88% of the speech students made significant progress.

Third Party Evaluator's Comments:

The data from this project indicates that all objectives were met as they were specified. Several components of this project are worthy of special comment: (1) Individualized instruction and programming were used on a consistent basis; (2) Data were taken continuously so that appropriate changes could be made in instructional programs; (3) Paraprofessionals were used in the instructional process

resulting in more time being made available for each child; and (4) Local resources such as Pacific University Speech and Hearing Staff and the Washington County I.E.D. speech and hearing staff were both utilized by this project director. It is the opinion of the third party evaluator that each of these components are requisites to providing a successful educational program for handicapped children.

Title of Project: *New Model: A Cooperative Speech Therapy-Public Address Course for Secondary Students*

Location of Project: *Heppner High School*

Type and Number of Children Served: *One (1) speech-impaired youngster*

Funding Allocated: *\$3,890*

Project Beginning Date: *August 28, 1972*

Project Ending Date: *January 19, 1973*

Background and Rationale:

Although the current focus of speech and language training is with early childhood development, the problem remains that there are a large number of youngsters who exhibit less than adequate communicative skills in the high schools, thereby requiring speech therapy services.

Traditionally, secondary students having needs for speech therapy services have been separated from the classroom and treated in much the same manner as elementary students. This practice has proven to be much less than satisfactory for two main reasons:

1. *Secondary students frequently resist leaving the classroom to attend speech therapy.*
2. *New communicative skills learned in the clinical setting are not integrated into the classroom.*

It would appear to be more productive to develop a model that integrates the secondary speech therapy program with the existing secondary curriculum. By demonstrating the effectiveness of integrating a secondary public address course and speech therapy, future development of integrated models in other high school curricula and programs may be encouraged.

Objectives and Evaluation Plan:

1. *To integrate the instruction of the speech impaired with the regular classroom public address course.*
- Submit the number of speech-impaired students who took part in the regular classroom speech program.
2. *To provide high school credit for achieving instructional goals for speech.*
 3. *To improve the speech of those identified as being handicapped.*

Pre and post teacher-made tests will be utilized.

4. *To measure the impact of speech and language portion of the regular educational public address course.*

To use audio tape analysis and measure deviant communication behaviors by testing with appropriate test.

Methodology:

This project was conducted by a speech therapist and an oral communication instructor. It included a student population composed of sixteen high school students who were enrolled in an oral communications class in Heppner High School.

The oral communication class was divided into three sections of instruction. The first section, which was assigned 50% of the final grade, included instruction in speech, hearing and language. Information in these areas was given, via lecture, during the course of the semester. An interim and final test was administered to all sixteen students to evaluate the degree of improvement in this area. Both interim and final tests were identical, except that items were arranged randomly for each test. Out of the 100 questions, fifteen (15) questions dealt with attitudes. Since attitudinal questions did not figure in the final grade, 85 questions with 108 possible correct responses were used for grade determination. Scores were established by subtracting the number of incorrect responses from 108.

The second section included instruction in public address and composed 25% of the final grade. Instruction in this area was in the form of lecture and students were given opportunities to present speeches in class. Finally, 25% of the final grade involved instruction to students with speech defects. Those students who did not require speech therapy automatically passed this final section.

Of the sixteen students, one was identified as having a speech defect. The type of speech defect was analyzed and a shaping procedure was instituted to help the speech defective student generalize the appropriate speech sound in conversational situations. This shaping procedure began with obtaining the appropriate use of the defective sound in the medial position in words, then to the use of the defective sound in sound loaded sentences, and after meeting criteria at the sentence level, she began using the defective sound in class speeches. In order to increase the frequency of correct responses in class speeches, it was

necessary to institute a treatment program which increased the number of opportunities to produce the sound and allowed the incorporation of a signal system which allowed an observer to reinforce correct productions of the defective sound. A home program was utilized with the mother as the observer. Two response modes were used, reading and conversation, with the mother providing feedback through reinforcement of correct productions of the defective sound. In addition, an intake and final probe were administered at the start and end of the semester respectively. These probes were designed to measure the number of times the defective sound was used appropriately versus the number of times the defective sound appeared during a personal experience speech presented to the oral communications class. These probes were utilized to determine whether the rate of correct productions of the defective sound had in fact increased during the semester.

Results:

1. *To integrate the instruction of the speech impaired with the regular classroom public address course.*

One out of the sixteen students was identified as having a speech defect. An analysis of the defect was made and a prescriptive program was developed to deal with the defect. (See Objective 3.)

2. *To provide high school credit for achieving instructional goals for speech.*

Sixteen students had grade ranges from A to D, with three students receiving A's, 6 students receiving B's, 6 students receiving C's, and one student receiving D. The speech defect student obtained a grade of B. The list of students and grades can be seen in Table I.

Table I

These grades are reported as follows:

Student No.	Semester Grade
1	C+
2	B
3	A
4	A
5	B-
6	C
*7	B+
8	B
9	B
10	B+
11	C-
12	C+
13	A-
14	C
15	D+
16	C-

*Speech Impaired

3. *To improve the speech of those identified as being handicapped.*

Initially, a speech analysis was done which included an articulation inventory and an audio and video tape analysis. This analysis showed that the student substituted (o) for (s)

in conversational speech. A number of probes were administered at this time and these probes revealed adequate maintenance of the sound in the initial and final positions with picture stimulation and 0% reinforcement. However, the student distorted the sound in the medial position with the same level of stimulation and reinforcement. For this reason, her speech therapy program began with teaching her to generalize (s) in the medial position of words.

The student had no difficulty in generalizing the medial (s). In fact, the response records revealed all correct responses through all of the sequenced stimulus conditions. This means she had the minimal amount of required experience at each stimulus condition.

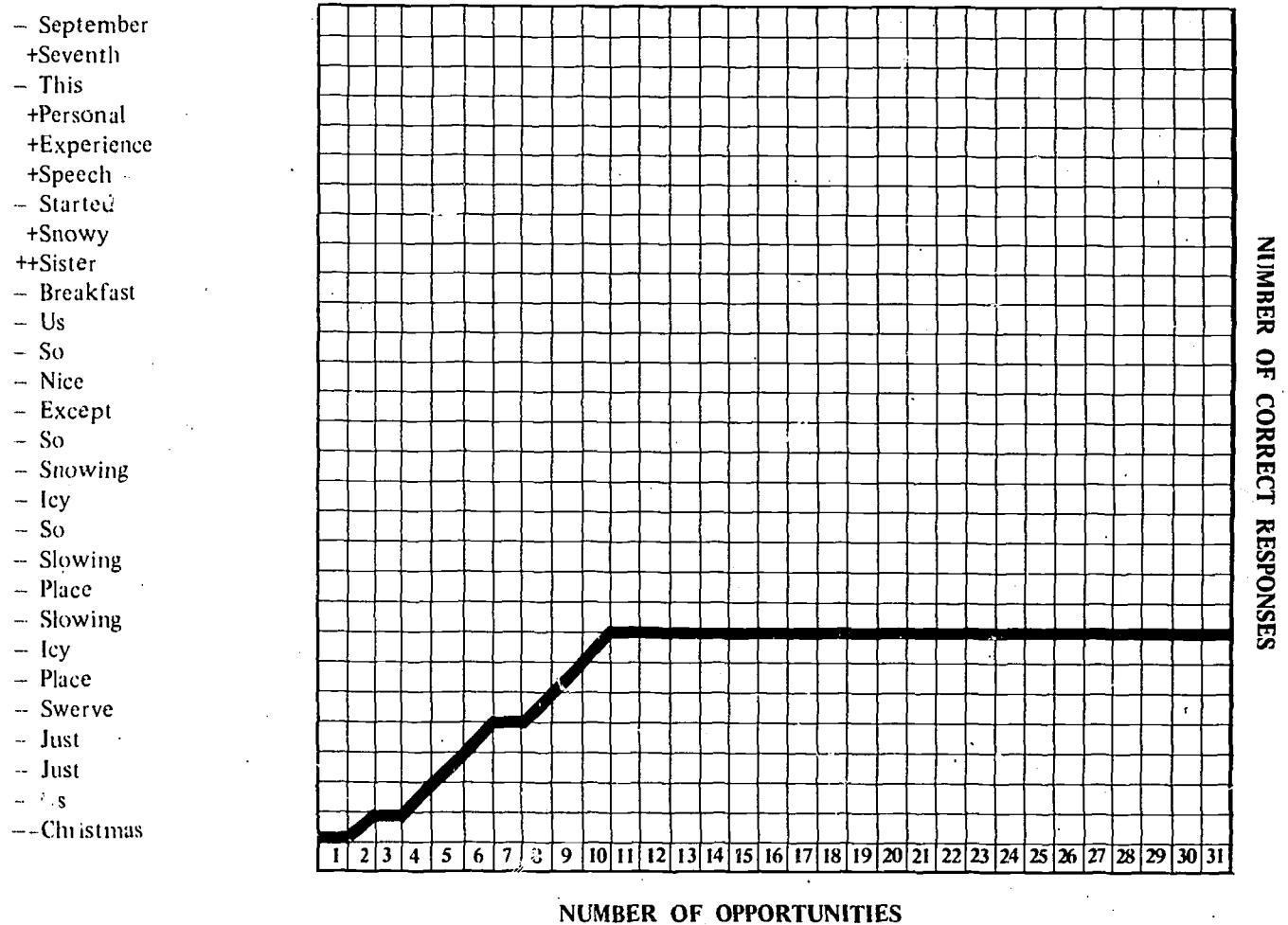
After completing the medial (s) program, she began

using the sound in "sound-loaded" sentences. She met criteria at the sentence-level and then began using the new response in class speeches. She consistently used the new response 65% of the time in thirteen different speeches.

Upon successful completion of generalization to class speeches, a program was initiated to get appropriate use of the (s) sound in conversational speech. An intake probe was administered on September 14, 1972 while the student presented a personal experience speech. Results of this probe are shown in Figure 1 and revealed seven correct (s) sound productions in 28 opportunities for a correct response rate of 28%. On January 17, 1973 the final probe was administered during a group discussion session and the student achieved 37 correct (s) sound productions out of 37 attempts for a 100% correct response rate (see Figure II).

Figure 1

INTAKE PROBE, SEPTEMBER 14, 1972



- September
- +Seventh
- This
- +Personal
- +Experience
- +Speech
- Started
- +Snowy
- ++Sister
- Breakfast
- Us
- So
- Nice
- Except
- So
- Snowing
- Icy
- So
- Slowing
- Place
- Slowing
- Icy
- Place
- Swerve
- Just
- Just
- s
- Christmas

4. To measure the impact of speech, hearing, and language portion of the regular educational public address course.

Intake and final probe scores are reported in Table II. Percent of gain for the two tests had a range of 8% to 62% with a mean percent gain of 43%.

TABLE 2

Student No.	Intake Probe (Total Score)	Final Probe (Total Score)	Final Probe (Speech & Hearing Score)	Final Probe (Public Address Score)
% Correct	% Correct	% Correct	% Correct	% Correct
1	23	62	67	58
2	44	92	96	91
3	53	98	96	100
4	66	100	100	100
5	10	65	60	71
6	16	73	76	71
*7	17	97	96	98
8	62	81	73	91
9	58	79	69	90
10	60	95	91	100
11	51	59	55	65
12	44	69	65	73
13	59	95	93	97
14	13	75	67	84
15	8	39	34	45
16	27	49	40	60

*Speech Impaired

Third Party Evaluator's Comments:

The concept of developing a model which integrates the speech defective student in a secondary public address course with the intent of utilizing this opportunity to (a) give secondary students information in speech, language, and hearing defects, and (b) integrate a therapeutic speech program within the curriculum of the public address course, is a realistic way of helping to eliminate the stigma felt by the secondary speech defective student when he is interacting with his peers or having to leave the classroom for speech therapy, and also provides for a generalization of a correct behavior outside of the controlled therapeutic setting. An additional advantage is found within this model by providing a means of testing generalization of a speech defect into a speaking situation.

At the same time, it must be pointed out that the use of

only one subject to test this model has to be a major weakness of the project. One subject does not make a representative sample and the impact of this model, i.e., the degree to which this model eliminates the problem, has not been established. In order to determine this model's effectiveness, a representative sample of speech defective secondary students should be exposed to this type of programming, including a wide range of speech problems, and measured accordingly. These students should then be presented with periodic probes to determine behavioral maintenance over time.

We feel that the model developed by these investigators has some merit, and would encourage the testing of this model by the incorporation of a larger speech defective population either by another school district or by Heppner School District.

Title of Project: *Summer Recreation Program for TMR and Certain EMR Children*

Location of Project: *161 N. Roanoke Hines, Oregon*

Type and Number of Children Served: *5 mentally handicapped children*

Funding Allocated: *\$1,102*

Project Beginning Date: *June 18, 1973*

Project Ending Date: *July 18, 1973*

Background and Rationale:

There was no summer program presently available which was appropriate for TMR or EMR children. Because of inclement weather, a number of recreational skills which would improve the adaptive behavior of retarded children are impossible to practice during the academic year program. This project was designed to provide a summer program for speech impaired, trainable mentally retarded children for whom there was no current program. The program provided practice in recreational skills and activities which were only available during the summer months. In many cases, this project also acted as a carry-over from the academic year to prevent regression of some skills.

Objectives and Evaluation Plan:

- 1. To provide a recreational outlet to children for whom these activities are not presently available.*

Anecdotal records on each child and lists of the activities in which they engaged will be kept.

- 2. To improve on appropriate behaviors for various recreational activities and settings, including observation of safety rules, development of language, and development of motor and social skills appropriate to the activities so that the child can participate appropriately and inconspicuously in family recreational activities.*

Appropriate sections of the Student Progress Record will be utilized and the Red Cross Checklist of Swimming Skills. Develop a checklist for bowling.

Methodology:

The project staff consisted of the following: one TMR teacher from the academic school year; one paid aide who worked in the Hines District and had constant contact with the children; and nine children from the community who volunteered to help in the program, these children came on

alternate days. Each child in the project received the same amount of training. Swimming, parachute play, arts and crafts, and the Peabody Language Development Kits were conducted each day. Games for coordination included Twister, Time Bomb, Posey Toss, catching and tossing balls, rope climbing and swinging were presented on alternate days. One day each week a field trip was scheduled, followed by a picnic lunch in which child helped participate in preparing and serving part of the lunch. Field trips included a day to a ranch where they came into physical contact with many different farm animals, a trip to the airport where the children inspected several different types of airplanes, and a visit to Zeezo the clown, in the downtown area, where he talked to each child, gave them various toys, and gave them a ride in a dunebuggy if they so desired. On several occasions the children were taken to various stores in the community to buy materials for various projects and picnics. On the fourth of July, the children made a flag of the United States and then celebrated with sparklers, etc. Certain picnics included a going-away party for one of the students and a closing day party with a watermelon feed. Foods of various kinds were served at each party to see how the children reacted to the different flavors, textures, and colors. Bowling facilities were closed for the summer and were not available.

Results:

- 1. To provide a recreational outlet to children for whom these recreational activities are not presently available.*

Gary, age 15, returned from Fairview to participate in this program and be home with his family for the summer months. The teacher reports that Gary enjoyed the pool immediately and showed very little fear of the water. Gary progressed from sitting and splashing in the bathing pool to a large pool where he would walk and hang on to the side and kick his feet. At the end of the program Gary could

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Methodology:

The project staff consisted of the following: one TMR teacher from the academic school year; one paid aide who worked in the Hines District and had constant contact with the children; and nine children from the community who volunteered to help in the program, these children came on

alternate days. Each child in the project received the same amount of training. Swimming, parachute play, arts and crafts, and the Peabody Language Development Kits were conducted each day. Games for coordination included Twister, Time Bomb, Posey Toss, catching and tossing balls, rope climbing and swinging were presented on alternate days. One day each week a field trip was scheduled, followed by a picnic lunch in which child helped participate in preparing and serving part of the lunch. Field trips included a day to a ranch where they came into physical contact with many different farm animals, a trip to the airport where the children inspected several different types of airplanes, and a visit to Zeezo the clown, in the downtown area, where he talked to each child, gave them various toys, and gave them a ride in a dunebuggy if they so desired. On several occasions the children were taken to various stores in the community to buy materials for various projects and picnics. On the fourth of July, the children made a flag of the United States and then celebrated with sparklers, etc. Certain picnics included a going-away party for one of the students and a closing day party with a watermelon feed. Foods of various kinds were served at each party to see how the children reacted to the different flavors, textures, and colors. Bowling facilities were closed for the summer and were not available.

Results:

1. *To provide a recreational outlet to children for whom these recreational activities are not presently available.*

Gary, age 15, returned from Fairview to participate in this program and be home with his family for the summer months. The teacher reports that Gary enjoyed the pool immediately and showed very little fear of the water. Gary progressed from sitting and splashing in the bathing pool to a large pool where he would walk and hang on to the side and kick his feet. At the end of the program Gary could

also swim the length of the bathing pool under water. Gary also participated in arts and crafts, learned to glue with good judgment, learned to cut out different objects, and learned to create with finger paints, sudsy foams, clay, etc. Gary made friends with the entire group of children who were at the pool each morning for swimming lessons. He knew none of these children at the beginning of the swimming sessions but they all greeted him by name at the close. Gary used the Peabody Language Development Kit mainly to learn safety rules for swimming and in learning good eating habits.

Jim, age 4, blind. Jim participated only in the swimming program. He was very unhappy the first time he entered the pool but with assistance and talking he became more willing to venture into the water. His mother accompanied him each day to the pool to swim.

Alice, age 15. The teacher reports that Alice refused to put on her swimming suit or get close to the water the first day. She finally consented to place her feet into the pool while sitting on the side of the pool. Each day she managed to progress further into the pool until she would sit, splash, kick and enjoy the water. At the end of the program she did not mind being in the water or being splashed by the other children. She also participated in the Peabody Language Development program each day learning the various safety rules for swimming and the various manners for eating habits. Alice also enjoyed using the Peabody puppets to demonstrate the various lessons. Alice learned arts and crafts, glueing, cutting, finger painting, etc. She became progressively neater as the class continued, being able to use glue in the right amounts.

Scott, age 7. The teacher reports that Scott enjoyed the bathing pool from the first day. As the season progressed,

Scott was willing to learn to lay on his stomach and back to float. Scott also participated in the Peabody Language Development program, arts and crafts, the coordinating work with the parachute, tossing the time bomb, Posey Toss, picnics, and field trips.

Doris, age 24. Doris had no formal training before this summer recreation program began. The teacher reports that she was reluctant to associate with the other participants in the program and was not willing to ride in the car or interact in any of the projects. She could not follow simple commands and had to be assisted with everything she did. As the season progressed, Doris could come from her house and enter the car unassisted. She learned to wade in the pool, pick up and bounce a ball on command, and follow simple directions for the parachute play. She was also able to glue objects on paper with assistance and her eating habits improved.

2. To improve an appropriate behaviors for various recreational activities in settings including observation of safety rules, development of language and the development of motor and social skills appropriate to the activities so that the child can participate appropriately and inconspicuously in family recreational activities.

Tables I through III show the taxonomy of skills used to maintain the three major categories of parachute play, arts and crafts, and swimming. Four of the five children were given pre-posttesting on all three categories, with the fifth child receiving pre-posttesting in swimming. One child also received pre-posttesting on the Student Progress Record. Pretesting was completed on June 18-20, with posttest information being completed on July 12.

Table I
Parachute Play Skills for the
Summer Recreation Program at Harney County

	Date	With Assistance	Without Assistance
1. Grasping parachute with left hand.			
2. Grasping parachute with right hand.			
3. Grasping parachute with both hands.			
4. Moving parachute up and down on command.			
5. Learning to keep ball from rolling out of parachute while grasping edge.			
6. Popping ball out of parachute at count of three with upward and downward motions.			
7. On the count of three, all sit under the parachute.			
8. Pull parachute tight, with arms straight out and walk left in circle.			
9. Reverse movement and walk right in circle.			

Table II

Arts and Crafts Skills for the
Summer Recreation Program at Harney County

	Date	With Assistance	Without Assistance
1. Able to hold scissors.			
2. Able to cut with scissors.			
3. Able to cut objects with scissors.			
4. Able to glue.			
5. Able to glue with small amounts.			
6. Follows commands concerning art projects			

Table III

Swimming Skills for the
Summer Recreation Program at Harney County

	Date	With Assistance	Without Assistance
1. Walking in vicinity of pool without being frightened.			
2. Sitting on side of pool and placing feet in water.			
3. Standing in water.			
4. Walking in water.			
5. Moving up and down in water.			
6. Sitting in water.			
7. Laying in water on back.			
8. Laying in water on stomach.			
9. Kicking feet in water.			
10. Moving arms in water.			
11. Kicking feet and moving arms in water.			
12. Splashing water in face.			
13. Holding breath under water.			
14. Progressing to large pool with assistance.			

The results for each child follow:

Student 1, age 15 years. Alice successfully performed items five, six, and seven of the parachute play with assistance on June 20, 1973. Posttesting results on July 12, 1973 showed that Alice could complete all nine skills without assistance.

For the arts and crafts category, Alice was able to complete only items four and five with assistance on June 18, 1973. By July 17, Alice was able to perform all six skills without assistance.

For the category of swimming, Alice could complete none of the skills listed on June 20, 1973. On July 18, Alice demonstrated that she could successfully perform

skills one through nine and skill number twelve without assistance. Skill numbers ten, eleven, thirteen and fourteen were not achieved.

Student 2, age 7 years. Scott demonstrated with assistance success on all items, except for item three for the parachute play category. Item three was performed successfully without assistance. By July 12, all items except for five and six could be achieved without assistance. Items five and six were completed with assistance during posttesting.

Scott was able to perform, without assistance, items one, two, four and six on the arts and crafts category during the pretest phase. Items three and five were completed with assistance on June 18. Maintenance but no gain in skill proficiency was shown during the posttest phase.

Scott had proficiency of swimming skills one through four on June 20. Swimming skills five through nine, and twelve were completed with assistance. The remaining swimming skills, ten, eleven, thirteen and fourteen were not present during pretesting. For July 12, all swimming skills except thirteen and fourteen were completed without assistance. These two items, thirteen and fourteen, were not acquired at any level during the summer projects.

Student 3, age 15 years. Gary showed proficiency in the parachute play category for skill numbers one through three, and eight on June 20. The remaining skills, four, five, six, seven, and nine, were completed with assistance during this pretest phase. By posttest time, all items were completed without assistance.

For arts and crafts, Gary showed acquisition of all skills, except number five, without assistance. During posttesting item number five was also achieved without assistance.

On June 20, Gary demonstrated performance of skills seven through ten with assistance in swimming. All remaining skills were achieved without assistance for this pretesting period. By July 18, all swimming skills were performed without assistance.

Student 4, age 24. Doris demonstrated that she could complete skills one through five with assistance for parachute play on June 20. No other skill items existed in her repertoire of behaviors at that time for parachute play. By posttest time, items one through four were achieved without assistance, and items five, eight and nine occurred with assistance. Items six and seven did not appear in the child's repertoire of behaviors during posttesting.

For arts and crafts, Doris was able to perform items one, two, and four with assistance during pretesting. Posttesting showed that item one was achieved without assistance, with all other items maintaining their pretest levels of proficiency. Items three, five, and six never appeared in Doris' repertoire of behaviors during the summer program.

An examination of swimming skills showed that item one appears without assistance during the pretest period.

Items two through four appeared with assistance and none of the remaining items, five through fourteen appeared at any level. Posttesting showed maintenance but no gain for these levels of proficiency.

Table IV shows results of the Student Progress Record for Doris. A gain of sixteen points was made by Doris for the summer program. These gains were made in dining-use of utensils, general mobility, social skills, and receptive language.

Table IV
Results of Student Progress Record on
a Pre-posttest Basis for Doris

		PR	PO
COMMUNICATION SKILLS	SOCIAL SKILLS	0	5
	RECEPTIVE	0	1
	EXPRESSIVE	0	0
	READING	0	0
	WRITING	0	0
QUANTITATIVE SKILLS	NUMBER CONCEPTS	0	0
	MONEY	0	0
	TIME	0	0
PRACTICAL SKILLS	DINING--USE OF UTENSILS	12	14
	DINING--FEEDING & SERVICE	0	0
	DRESSING--REMOVE OUTER CLOTHING	0	0
	DRESSING--PUT ON OUTER CLOTHING	0	0
	HANDWASHING	0	0
	TOILETING	0	0
	TOOTH BRUSHING	0	0
	HAIR CARE	0	0
	MOTOR SKILLS	GENERAL MOBILITY	12
GENERAL PHYSICAL FITNESS		0	0
DEXTERITY AND COORDINATION		0	0
	TOTAL	24	40
	GAIN	16	
	STUDENT NO.	4	

PR - Pretest
PO - Posttest

Student 5, age 4 years. Jimmy was tested using only the swimming category. Pretesting on July 4 shows item one achieved without assistance, and items two through six achieved with assistance. Posttesting revealed maintenance of the skills but no gain. Items seven through fourteen did not appear in his repertoire of behaviors for this program.

Third Party Evaluator's Comments:

This evaluator wishes to compliment this project on their submission of very tangible data. Reporting each category in terms of exact skills allows us to observe precise changes in student behaviors. This evaluator feels that this project accomplished the objectives with maximum proficiency.

During the visit to the project by this evaluator, it

became evident that the involvement of children in the community was an area of change produced but unmeasured by the project objectives. Briefly the involvement and obvious enthusiasm of children in the community was evident by the continued presence of many community children around the backyard setting and in the community pool. This provided a means of interaction between the children in the community and the handicapped children in the project which may have not previously occurred. This interaction was positive and perhaps beneficial to both groups of children.

In addition, this evaluator was impressed by the gain of sixteen points achieved by student four on the Student Progress Record. A gain of sixteen points, accomplished in four weeks, is a noteworthy achievement for the project staff and Doris.

Title of Project: *Title VI – Parent/Child Program for Handicapped Preschoolers*

Location of Project: *Union County Intermediate Education District
LaGrande, Oregon*

Type and Number of Children Served: *70 developmentally handicapped preschoolers*

Funding Allocated: *\$15,000*

Project Beginning Date: *September 1, 1972*

Project Ending Date: *June 1, 1973*

Background and Rationale:

In sparsely settled, rural Union County, services for handicapped children are limited. There was a need for a central agency to intervene when the child is very young to evaluate the handicapping condition, make referrals to proper agencies or institutions and provide an educationally sound preschool background so the child could enter school with a fair chance of success. Too often there was no diagnosis nor intervention prior to the handicapped child's school entry. The preschool years, when parents could and should have been helping the child overcome the handicap, went by without the parents having sufficient knowledge of the problem, and therefore, unable to help their child.

The Parent/Child Program for Handicapped Preschoolers was designed to coordinate early identification and intervention services to preschool handicapped children and their parents.

The project focused on the early intervention of children having learning disabilities in speech, language, cognitive, sensory motor, auditory discrimination, visual discrimination and gross motor developmental areas. Once identified, these children were placed in a prescriptive home instruction program.

It was the intent of the program to provide additional follow-up services for these children having developmental lags and recommending placement in other programs when appropriate. It is hoped that the results of this program will be of value to other sparsely populated areas in Oregon who are seeking the most effective way of serving these developmentally handicapped children.

Objectives and Evaluation Plan:

1. *To screen all Union County preschool children three years and older at differential diagnostic clinics and to prepare a developmental profile on each child so evaluated.*

A developmental profile will be prepared for each child based on data obtained in the clinic.

2. *To provide individually designed intervention services to fulfill the needs of the children who have been identified as having developmental handicaps.*

The Developmental Sequence Checklist will be used as a guide in planning the individual child's curriculum and will serve as a means of on-going evaluation of the child's progress.

3. *To determine which instructional method has been the most effective--home, small group or a combination of these.*

The difference in gains or losses will be computed in groups A, B, and C. Mean differences will be computed and tests of statistical significance will be designed to determine which instructional method was most effective.

4. *To train parents of handicapped children in methods of assisting their child toward optimal development.*

Attendance data and family participation will be utilized to evaluate this objective.

5. *To determine the attitudes of involved parents toward the home instruction project.*

An evaluation form will be given to the parents at the conclusion of the program to evaluate the effectiveness of

the home instruction.

6. *To disseminate the results of the project upon request after completion of two years of operation of the program.*

An evaluation form will accompany the publication asking for feedback as to its usefulness.

Methodology:

The project staff consisted of a project director, project coordinator, speech and language therapist, four home trainers, a practicum student and student volunteers.

The project director supervised the establishment and implementation of program policies; provided for and supervised evaluation procedures; directed the dissemination of program information; and served as a consultant in all areas of administration, coordination, statistical data collection and evaluation.

The speech therapist was directly responsible for conducting the individualized home program for those children with speech and/or language development problems. After the testing was completed and individuals chosen for the program, parents and children were met individually to carry out the objectives of the program through the prescribed instruction techniques.

All home trainers were paraprofessionals. Paraprofessionals were selected on the basis of their experience in working with young children; ability to relate well with others; ability to communicate easily — particularly with the low-income families; and their enthusiasm in observant and innovative ways to work with children. Strong consideration was given to personality; the home trainers were out-going, but non-threatening; low-keyed, but stimulating; realistic, but supportive and encouraging. All were mothers who varied in educational background and age. Home trainers assisted at the screening sessions, scored tests, recorded results on individual profile sheets, and were responsible for sending results to parents. Each home trainer was assigned a caseload of children found to have developmental lags and visited the home once per week, delivered prescriptive materials, trained the parents in the use of the materials, and assisted with and assessed the child's progress. Office responsibilities included the planning and preparation of the teaching packet materials, and the preparation of reports.

The main purpose of the project was to identify the three, four and five-year-old learning disabled children in the County and provide early intervention services which would help these children overcome their disabilities. The responsibility for instruction was upon the parents as they were provided with teaching techniques and materials which would enable them to not only teach their own child, but better understand and accept their child's learning difficulties.

A survey was conducted through the public schools to determine the three, four and five-year-old population. After names, addresses and ages were determined, invitations were sent to the children, accompanied by a letter of explanation to the parents, asking the children to attend a "Snoopy Party" screening session. Parties were held in church building, schools and private kindergarten classrooms.

The "party" setting provided a non-threatening atmosphere for the testing which involved a screening booklet assessing sensory-motor, visual discrimination, auditory discrimination and cognitive developmental areas; a screening for motor skill performance; and a speech-language check. The number of children attending parties was ideally kept to 15, but did number as many as 32 in a controlled kindergarten setting.

After testing was completed, the screening booklets were scored and the results converted to an individual developmental profile sheet which was sent to the parents, and where appropriate, to kindergarten teachers. The profile sheet graphically showed strengths and weaknesses and became the basis for the selection of children for the home instruction phase of the project. There were 460 four and five-year-old preschoolers who were screened, tests scored, individual profiles drawn and sent by the middle of January.

Criteria for selection of participants in the home training project was made according to age, severity of problem and parental willingness to participate in prescriptive services. Preference was given to those children who would be starting first grade the coming year and were not functioning at their chronological age expectations in developmental areas. Preference was given if a child performed poorly in at least four or more subtest areas. Children having articulation errors in their speech and language were selected for the speech phase of the home instruction program. It was required that parents accept the objectives of the project and indicate willingness to undertake its responsibilities.

Seventy children who met one or more of the selection criteria were selected for participation in the Parent/Child Preschool Program. Parents were contacted, results explained, and their willingness to participate in the program was secured.

The home trainers were assigned a geographical location and worked with project participants with that area. On the initial visit to the home, background developmental history was compiled for each child. The results of the screening were explained and developmental strengths and weaknesses discussed. Weekly appointments of one hour for home trainer visits were set up on the first home contact. The second week, the home trainer established baseline data on the children in each low subtest area and cooperatively worked out objectives with the parents. A

Readiness Skills Inventory was kept by the Project Coordinator on each child which also served as a basis for the planning and preparation of individual prescriptive learning activities. Weekly learning packets were developed from the Readiness Skills Inventory and from additional recommendations made by the home trainer as to what materials would best work with that individual.

To determine the effectiveness of (A) individual instruction versus group instruction, nine children and their parents were invited by letter to participate in a (B) combination small group – home instruction situation. Eight children and their parents were invited by letter to join a (C) small-group-only instruction situation. The response to a group situation was poor; five children and their parents concluded the (B) small group-home instruction phase while only three children and their parents participated in the (C) small-group-only phase of the program. There were forty children and their parents who received weekly individualized home instruction, and twenty children who were involved in the speech and language individualized program.

The combination small group-home instruction parents met once a week for two hours at the project office to receive teaching materials and techniques followed the next week by a visit to the home by the home trainer to assess progress. The parents in the small-group situation met once every two weeks for two hours at a local school to receive teaching techniques and materials. No home contacts were made for the small-group parents.

At the conclusion of the twelve week (A) home instruction program and the eight week (B) and (C) groups, the children were posttested in small groups using the same screening instrument that was used in the pretest.

Parents of the 20 children involved in the twelve week speech home instruction phase of the program met with the speech therapist four times. They received speech and language stimulation materials as well as shared in the evaluation process by completing speech and language checklists on each visit.

Special features of the project were:

1. A census list of in-coming first graders was made for all schools in Union County.
2. Recommendations were made for children who should go into the Headstart Program.
3. First grade teachers were surveyed to determine readiness skills wanted emphasized in the home instruction program. The results were also used to send to parents for use as guidelines for readiness skills assessment.
4. Counseling services were provided to parents regarding school readiness entry and referrals were made to the Mental Health Services, Grande Ronde Child Care Center and the I.E.D. Special Education Department.
5. A list was compiled for the LaGrande Summer School Readiness Program of children needing additional readiness activities prior to school entry.
6. "Make-up" screenings were scheduled and conducted for four and five-year-olds who did not attend the original screenings.
7. Curriculum materials were provided to kindergarten teachers.
8. Developmental profiles were provided on each five-year-old screened to principals and first grade teachers of Union County.
9. Teaching materials were provided to parents who were interested in working with their child who was not eligible for the home instruction.

Results:

1. *To screen all Union County preschool children three years and older at differential diagnostic clinics and to prepare a development profile on each child so evaluated.*

Figure I shows the results of this objective.

Figure 1

Five-Year-Old Data:

School District:	Cove	Elgin	North Powder	Union	Imbler	La Grande	Union Co. Totals
Total Pretested:	16	55	8	36	26	205	346
Total Posttested:	13	51	7	28	20	154	273
Profiles prepared:	29	106	15	64	46	359	619
No. of project participants:	7	8	0	5	3	26	49

Total Union County five-year-old census: 377
 Total Union County five-year-olds screened: 346

Four-Year-Old Data:

School District:	Cove	Elgin	North Powder	Union	Imbler	La Grande	Union Co. Totals
Total Pretested:	0	2	0	8	8	96	114
Total Posttested:	0	2	0	0	2	13	17
Profiles prepared:	0	4	0	8	10	109	131
No. of project participants:	0	4	0	0	3	14	21

Total Union County four-year-old census: 156
 Total Union County four-year-olds screened: 114

Three-Year-Old Data:

Total Union County three-year-old census: 187
 Total Union County three-year-olds screened: 29 (La Grande)
 Total profiles prepared: 29

2. To provide individually designed intervention services to fulfill the needs of the children who have been identified as having developmental handicaps.

The diagnostic tools used to identify children having developmental handicaps were adapted by the project staff. Of prime concern was finding an instrument which could be given in a group situation, was of a high interest level, was easy to administer and would yield a fairly accurate picture of the children's functioning level in the sensory-motor, visual discrimination, auditory discrimination and cognitive developmental areas. A speech and language check was needed as well as a survey of gross motor skills. Having used the Screening Test for Academic Readiness (STAR) the previous year in the pilot program, the staff felt several modifications and additional test items were needed. As a

result of this need, a screening booklet was constructed having twelve subtest areas and a total raw score of 88 possible. The subtest areas were:

- Cognitive Developmental Area – Vocabulary, Color Discrimination, Letter Recognition, Draw-A-Man, Relationships and Numbers.
 - Sensory-Motor Developmental Area – Copying shapes and Visual-Motor Coordination.
 - Visual Discrimination Developmental Area – Picture Completion, External Likenesses, Internal Likenesses.
 - Auditory Discrimination Developmental Area – Beginning, Medial and Ending Sounds.
- A motor screening was administered in balancing forward,

backward and sideward on a board, hopping, ball-bounce, ball catch, body image, mirroring movements and cutting activities.

The speech and language check was conducted through the use of pictures to be identified, color card identification and conversation stimulated by the therapist.

The screening could be concluded in 45 minutes with a five minute break. A total of 31 screenings were held throughout Union County with a total of 460 four and five-year-olds pretested and 290 posttested. Using age, severity of developmental handicaps and parental willingness for involvement, seventy children were diagnosed as eligible for the Parent/Child Preschool Program. Pre-posttest scores are shown in Table I for 49, 5

year old children.

Once the child was diagnosed low in a subtest area, baseline data was further obtained by the home trainer to pinpoint precisely which skills were lacking. A Readiness Skills Inventory was kept by the project coordinator to identify individual strengths and weaknesses which served as the basis for individualized prescriptive learning materials. A Readiness Skills Checklist was developed and used by the parents to assess progress as well as provide individual instructional information for the project coordinator. Anecdotal records and recommendations from the home trainer and parents were heavily utilized to provide individually designed intervention services for the home instruction participants.

Table I

5 Year Old Project Participants
 Screening Test for Academic Readiness (Modified)
 (88 Highest Possible Score)

GROUP A				GROUP B			
Student	Pre	Post	Difference	Student	Pre	Post	Difference
1	59	74	15	1	50	58	8
2	45	52	7	2	37	69	32
3	60	70	10	3	24	57	33
4	30	54	24	4	24	34	10
5	26	44	18	5	35	67	32
6	43	71	28				
7	48	83	35				X = 23.00
8	49	59	10				
9	38	69	31				
10	33	63	30				
11	60	75	15				
12	54	61	7				
13	41	69	28				
14	61	59	-2				
15	54	81	27				
16	39	44	5				
17	61	64	3				
18	62	62	0				
19	56	81	25				
20	55	73	18				
21	32	62	30				
22	44	54	10				
23	25	54	29				
24	57	70	13				
25	31	57	26				
26	71	79	8				
27	61	80	19				
28	39	55	16				
29	73	75	2				
30	46	76	30				
31	43	76	33				
32	55	73	18				
33	51	78	27				
34	49	76	27				
35	47	62	15				
36	54	60	6				
37	42	43	1				
38	50	71	21				
39	31	53	22				
40	62	52	-10				
41	34	55	21				
			X = 17.05				X = 17.33

- To determine which instructional method has been the most effective - (A) home, (B) combination of group and home instruction, or (C) small group.

Individual pretest and posttest raw scores were computed to show a gain or loss in total score. (See Table 1) Mean differences were computed for each of the three groups.

A two-tailed test of significance was used to test statistical significance. Null hypotheses were tested at the .025 confidence level. There was no significant difference between the means. This could be due to the small N of groups B and C. The following formula was used:

\bar{x} = mean

n = number in group

S = standard deviation

Group A N=41

Group B N=5

Group C N=3

$$t = \frac{\bar{x}_1 - \bar{x}_2}{\sqrt{\frac{(n_1 - 1) S_1^2 + (n_2 - 1) S_2^2}{n_1 + n_2 - 2} \left(\frac{1}{n_1} + \frac{1}{n_2} \right)}}$$

From comments made by the parents in the groups (B) and (C), it was apparent the group situation was beneficial. Although only five out of eight parents responded to an invitation to participate in the (B) group and three out of eight became involved in the (C) group, the families who did participate cited the following as reasons to continue this type of preschool program:

- Defining and establishing learning tasks gave the parents direction as well as teaching techniques and materials to carry out individualized objectives.
- Parents became more aware of their behavior and attitudes. As their attitudes changed, they noticed an improved change of attitude in their children. For example, ways of giving positive reinforcement were explored and produced favorable attitudinal changes in the children.
- Learning to establish realistic goals for a limited time period made the parents more aware of their children's abilities and interests.
- Parents were surprised to find their children eager to learn and able to learn more than expected.
- A feeling of "esprit de corps" was established as the parents started sharing ideas as well as problems they encountered with their children.

The fact that the home trainer visited the home and could check the child's progress seemed to give the (B) combination small group-home method an effectiveness the (C) small group method lacked. The (B) combination small group-home method could be effectively used in future programs to reach a greater number of children and could possibly be offered as an alternate to the weekly home

instruction if the parent preferred.

- To train parents of handicapped children in methods of assisting their child toward optimal development.

A. Home Instruction Group

The parents were involved in the determination of objectives based upon test information. Once goals were established, the home trainer modeled appropriate techniques and approaches for the parents to use when working with their children in the home. The approach was explained to the parents and then demonstrated by actually working with the child for a segment of the instruction.

Anecdotal records and weekly observations were kept by the home trainer. Parents were not allowed to miss sessions if at all possible. If for some reason a family could not meet the weekly appointed time, another appointment time was scheduled. In one case a child had to leave the area for a month. Teaching packets were made in advance, the mother was oriented in teaching techniques and instruction was continued.

(B) Combination Group and (C) Small Group

Prescriptive objectives and teaching methods for Groups (B) and (C) were structured around a prescriptive learning tasks program. The home trainer and parents listed target behaviors, worked jointly to devise "Do Together" instruction sheets which broke the task down as well as gave technique and materials employed, and kept a date and performance rating on each task. Writing objectives was difficult for the parents, but with supportive supervision from the home trainer, the involvement produced more commitment on the part of the parents. The prescriptive learning tasks structure will be used in all future home instruction modalities.

On the first visit to the speech therapist parents of children diagnosed as having articulation problems were consulted regarding the length of time they would be able to spend with their children, then appropriate activities and techniques were applied. The majority of the parents indicated they wanted a specific, individualized program rather than working in groups. The importance of the role of the parent in the child's communication development was emphasized. Over half of the participating parents stated they had not realized until they began to actively work with their children just how much influence they had upon the child's speech and language development. The majority of the parents either verbally or in writing indicated that their child's overall communication abilities had improved since their involvement in the home program. Apparently exposure and work with the various materials pertaining to particular sounds tended to create a new awareness in the children.

- To determine the attitudes of involved parents toward the home instruction project.

At the conclusion of home instruction, parents in

Groups A, B, and C were given an evaluation form to assess the effectiveness of (1) the preschool screenings, (2) the home trainer, (3) the learning materials and were asked to comment on (4) what they learned from the experience that was useful, (5) what was the most interesting part of the experience, (6) what was not liked about the program, and (7) how they would improve the program.

(A) Home Instruction Group:

I. Effectiveness of the preschool screening:

—85% of the respondents felt the screenings were an accurate indication of the child's readiness level at that time. (7.5% did not respond to this question.)

—100% of the respondents felt the screenings were valuable in helping them decide which areas their child showed strengths and which areas needed further readiness work.

—100% of the respondents felt the screenings should be continued next year because the earlier learning difficulties can be detected, the sooner the parent can start working with the child.

II. Effectiveness of the Home Instructor:

—100% of the respondents felt the Home Instructor was well organized.

—100% of the respondents felt the Home Instructor knew the lesson and had good lesson plans.

—100% of the respondents felt the Home Instructor showed them how to use the materials successfully.

—100% of the respondents felt the Home Instructor was able to keep the child's interest.

—100% of the respondents felt the Home Instructor established a good relationship with the child.

—91% of the respondents felt the Home Instructor helped them work out the child's goals for the home instruction. (9% did not respond to this question.)

—94% felt the Home Instructor worked with the child in a way that the child worked hard and enjoyed it.

III. Effectiveness of Learning Materials

—94% of the respondents felt the learning materials were well organized. (6% did not respond to this question.)

—82% of the respondents felt the learning materials were useful to their child. (18% did not respond to this question.)

—82% of the respondents felt the learning materials were varied and stimulating to their child. (18% did not respond to this question.)

—82% of the respondents felt the learning materials were appropriate to use in meeting the goals made for their child's learning.

IV. What was gained from the experience:

—Several parents responded that they learned interesting ways to present learning experiences to their children.

—A number commented on how working with their children in this program improved their relationship with their child because they become more patient and understanding of the learning problems.

V. What was the most interesting part of the experience:

—Many of the parents responded that they were most interested in seeing the improvement and discovering the new awareness of the fascination of learning that took place in their children. Another comment that the most interesting part was having the materials and the instructions to help the child given and explained in a way that enabled the parent to learn and pass the learning on to the child.

VI. What didn't you like about this program:

—The program was not long enough.

VII. How would you improve the program:

—The majority of the parents had no comments, but stated they liked the program as it was conducted. One parent felt the time for home instruction should be extended. Another parent suggested that the screening should be on an individual basis as the group situation was too distracting.

B. Combination Small Group-Home Instruction:

similar problems was the most interesting part of the experience.

I. Effectiveness of the Preschool screening:

- 80% felt the screening was an accurate indication of the child's readiness level at that time.
- 100% of the respondents felt the screenings were valuable in assessing strengths and weaknesses and screenings should be continued next year.

VI. What didn't you like about this program:

- Two parents responded that they were not able to attend all the meetings and felt this should have been made up.

II. Effectiveness of Home Trainer:

-100% of the respondents felt the Home Trainer was well organized, presented good lesson plans, explained learning materials successfully, kept child's interest, had a good relationship with the child, and helped set realistic home instruction goals.

VII. How would you improve the program:

- One parent suggested including more children in the program.

C. Small Group Instruction

I. Effectiveness of the Preschool screening:

- 100% of the respondents felt the screenings were an accurate indication of the child's readiness level, was valuable in assessing strong and weak areas, and screenings should be continued next year.

III. Effectiveness of Learning Materials:

-100% of the respondents felt the learning materials were well organized, were useful, were varied and stimulating, and were appropriate to meet the child's learning goals.

II. An evaluation on the effectiveness of the Home Trainer was not asked of the small group parents as the Home Trainer did not make home contacts.

III. Effectiveness of the Learning Materials:

-100% of the respondents felt the materials were well organized, were useful, were varied and stimulating, were appropriate, were presented at a rate the child could manage, and they enjoyed working with a mother's group.

-80% of the respondents felt the materials were presented at a rate the child could manage.

-60% of the respondents felt the learning materials should be brought once a week.

-60% of the respondents felt the materials should be presented once every two weeks.

-40% of the respondents felt the materials should be presented twice a week.

IV. What was gained from the experience:

-Some of the parents commented that they learned a great deal about learning abilities. Others commented that they learned they felt capable of teaching their own children readiness skills, but was apprehensive previously.

IV. What was gained from the experience:

-Several parents commented their child was capable and eager to learn far more than they realized was possible.

V. What was the most interesting part of the experience:

-One parent commented the interesting part was to see the excitement and knowledge of learning show in the child.

V. What was the most interesting part of the experience:

-90% commented that meeting with other mothers, discussing common problems, how to solve them, and realizing that other children have

VI. What didn't you like about the program:

—Several parents commented that they did not have enough time and the program did not last long enough.

VII. How would you improve the program:

—Several parents commented that the program should last longer.

6. *To disseminate the results of the project upon request after completion of two years of operation of the program.*

The project is responsible for evaluating this objective this year. However, newspaper articles have publicized the project as well as interested parents and paraprofessionals have been informed of the status of the project.

Third Party Evaluator's Comments:

The thoroughness of investigation, searching, and screening for preschool handicapped children by the project staff is to be commended. The geographical area covered was quite extensive. Preparing 779 profiles from which critical decisions were made regarding inclusion in the project was a monumental task. With a baseline established the project staff can now probe major behaviors for each child who was screened to determine on a regular basis those preschool children needing services prior to entering school. In addition the project staff will be able to provide invaluable information to the regular class teacher regarding placement of each child entering school.

A major concern of the third party evaluator is the analysis of the data to determine which training method was most effective. The third party evaluator ran two additional tests to determine which method (A, B, or C)

was most significant and concurs that the data are inconclusive. The disparity between each group (41, 5 and 3 respectively) as well as the total N of each group may be, as indicated by the project staff, the reason for being unable to determine which method was most successful.

The mean differences reported in Table 1 indicate that those children whose parent(s) received both home and group instruction fared slightly better than those receiving home instruction only or group instruction only. It is most difficult to make an accurate assessment as to which method was most effective. However, having training at home and group instruction as well may have been the reason for group B to show higher gains. Perhaps judging the accomplishments of each child could be direct reflection of how well the parents were taught and subsequently taught their children. In other words, the project staff appears to have done a good job of training in all three groups.

The gains made by each group of children are quite impressive given that the actual training time was considerably less than an academic year.

In addition the comments by parents indicate acceptance of the program methodologies, staff and materials.

In order to more discretely assess future gains made by each child the project may wish to report individual data (pre and post profiles) for children as well as group data indicating parent-run programs and staff-run programs. By doing this the project and parents are then able to present the regular classroom teacher with hard data reflecting the present level of functioning for each child.

In summary this preschool program has provided a valuable diagnostic/training program for handicapped preschool children in a rural setting. The project staff, parents and children are to be commended for the gains made during this first year of Title VI-B funding.

Title of Project: *Evaluation of Behavior Modification Techniques in Changing Behavior of Students and Teachers*

Location of Project: *Lake Oswego Public Schools*

Type and Number of Children Served: *59 Emotionally Disturbed*

Funding Allocated: *\$16,255*

Project Beginning Date: *September 1, 1972*

Project Ending Date: *June 20, 1973*

Background and Rationale:

Prior to 1971-72 no specific programs for the emotionally disturbed had been developed in the Lake Oswego School District. At that time a Title VI program was approved to initiate a program designed to serve the emotionally disturbed child within the regular classroom as well as to change the behavior of parents and teachers in dealing with the emotionally disturbed child. This project was a continuation of that effort designed to further meet the needs of these students, their parents and teachers.

Objectives and Evaluation Plan:

1. *To change the behavior of the socially maladjusted, emotionally disturbed elementary child so that he can function adequately in the regular classroom.*

A modified version of the Hill-Walker Behavioral Checklist was utilized on a pre- posttest basis. Following the pretest a behavior was specified that was to be modified for each child involved in the program. Baseline was taken on that behavior. A prescriptive program was developed and presented to the child. Data was taken on a weekly basis. At the conclusion of the program seven children were selected as a representative sample and were tested every six weeks for the remainder of the school year to determine whether maintenance of that behavior had occurred.

2. *Change the behavior of the classroom teacher so that she can change the behavior of the socially maladjusted, emotionally disturbed child so that he can function adequately in the regular classroom.*

A teacher observational data sheet was utilized to observe classroom teachers and their interaction with the children. In addition video tapes were used to assess teacher performance.

3. *Change the behavior of the parents of the socially maladjusted, emotionally disturbed child so that he can function adequately in society.*

A representative sample of children's behavioral change data was utilized as an evaluation.

Methodology:

Project staff consisted of a Behavioral Consultant trained in behavior modification techniques, a six-hour aide trained by the behavioral consultant to take data on behavior of both students and teachers, and a graduate student from a local college who volunteered services one day a week for six weeks.

The referral and treatment procedure was carried out in the following manner: (1) students were selected on the basis of their scores on the Problem Behavior Checklist and/or the Lake Oswego referral form; (2) Behavioral Consultant discussed the student's behavior with the teacher who selected a specific behavior to change; (3) the Behavioral Consultant video-taped or charted the student's and teacher's behavior in ten to twenty minute segments in order to establish a baseline of behavior for both student and teacher; (4) the Behavioral Consultant discussed possible teacher behavior in order to change the student's behavior by observing the tapes and discussing the charts and a specific program was established including consequences for appropriate behavior; (5) the classroom teacher tried out her "new" behavior for several days; (6) the aide either taped or charted teacher and student behavior on several occasions discussing the results with the Behavioral Consultant who made adaptations in the program when necessary, discussing the changes with the classroom teacher, or if the program appeared to be working, reinforced the teacher by showing her the student graphs and/or video-tapes; (7) spot checks were made by both the aide and the Behavioral Consultant to verify the teacher's and student's behavioral changes; (8) this process of observation, adaptation of program, reinforcement of the teacher's and student's behavior continued until the inappropriate behavior was eliminated and the case was dropped from the Behavioral Consultant's active case load; (9) parent classes were held from six to eight weeks. During these sessions parents were trained to take data on their children's behavior and through class discussion learn new

ways of dealing with them.

Results:

1. *Change the behavior of the socially maladjusted, emotionally disturbed elementary child so that he can function adequately in the regular classroom.*

An adapted version of the Hill-Walker Behavioral Problem Checklist was used as a pre-post measure. A frequency scale of 0-5 was established for each of the fifty questions. In this way an increase or decrease for each question was measured as well as an overall measure of behavioral attitude. Twenty-six behavioral checklists were administered. A review of this data showed that 20 individuals showed a reduction in frequency of inappropriate behavior. The mean reduction for these 20 individuals was 34.9 points. Six individuals showed an increase in frequency of inappropriate behavior. The mean increase for these six individuals was 8 points. It was noted by the Behavioral Consultant that quite often teachers referred children who scored high on the checklist yet when observed these children displayed few behavioral problems. At other times children who displayed a high frequency of inappropriate behavior scored low on the checklist. It also appeared that there was little reliability among different teachers as to what is considered appropriate and inappropriate classroom behavior. For these reasons the value of this particular instrument in identifying students with behavioral problems is questionable.

Behavioral programs were implemented for thirty-eight behaviors. These behaviors were specified by the classroom teacher with the Behavioral Consultant following completion of the behavior problem checklist. Data were taken at varying intervals of time from daily to once a week either by the Behavioral Consultant or the behavioral aide. An example of the type of results achieved is shown in Figures 1 and 2. Behavior improved in the desired direction in more than 80% of the cases. These behavior programs were carried out by the regular classroom teacher or by the playground aide on duty at the time that the program was in effect. Follow-up data were maintained on seven of the children involved in behavioral change programs. This data

indicated that for all seven children behavior changes maintained throughout the remainder of the school year. An example of a behavior change program with the follow-up data may be seen in Figure 3.

Twelve primary elementary students were involved at one elementary school in a prescriptive program using a token system of reinforcement. It was decided to implement this system in this particular school because of the differentiated staffing which allowed for a 10 to 1 teacher-child ratio. The behaviors to be modified ranged from fighting on the playground to math completion rate. Both academic and social behaviors were included. After baseline data was established, the token system was implemented. Reinforcement ratios were established for each child. Reinforcement tickets were given for the specified appropriate behavior either by the classroom aide or the classroom teacher. Each ticket was worth one punch on the card. After twenty-five punches, the child was allowed to choose from a variety of consumable items or select a special privilege. In fact, helping younger children with academic tasks proved to be a most popular privilege.

Eleven out of the twelve children involved in this program were reported by their teachers as having "fair to good successes" in reaching the terminal behaviors. The other child was rated as having "poor to fair success" in reaching his goal. In evaluating the variables in this last child's program, it was felt that either the long term reward was insufficient or the intervals of verbal and token reinforcement were not adequate to achieve the terminal goal. Teachers recommended that eleven of the twelve children continue in a similar program next year. Although much behavioral growth had occurred, these are the children who function best within a fairly structured environment, working toward short term goals with consistent amounts of reinforcement. The one case was not recommended for special consideration next year due to the fact that the student himself felt he did not need any special help. "I don't get into fights anymore", he says, and he does not!

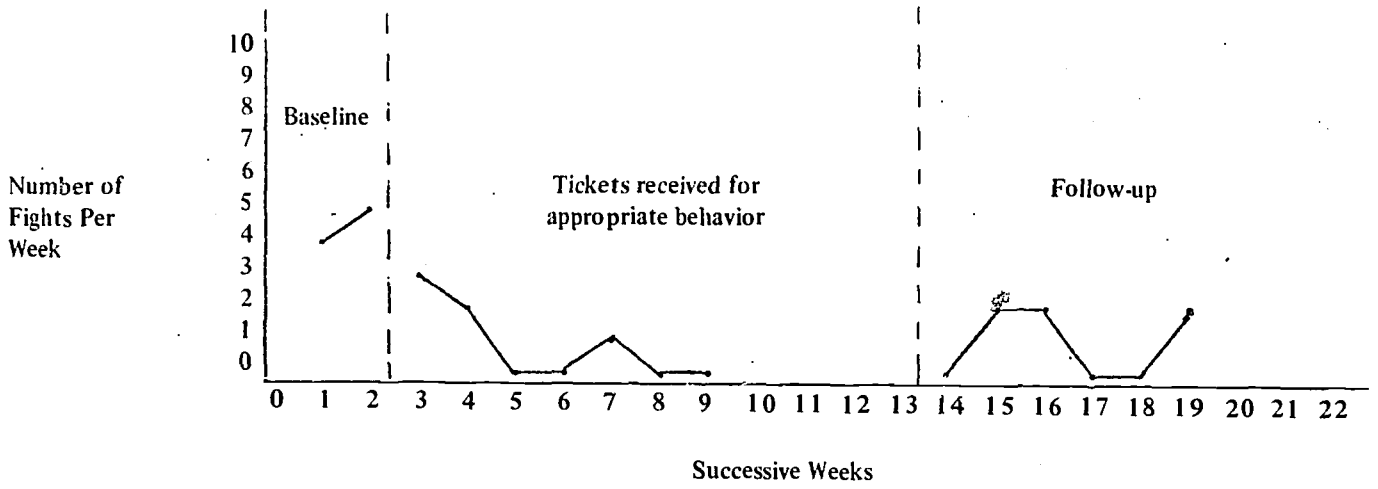


Figure 1. Program for reduction of fighting on playground

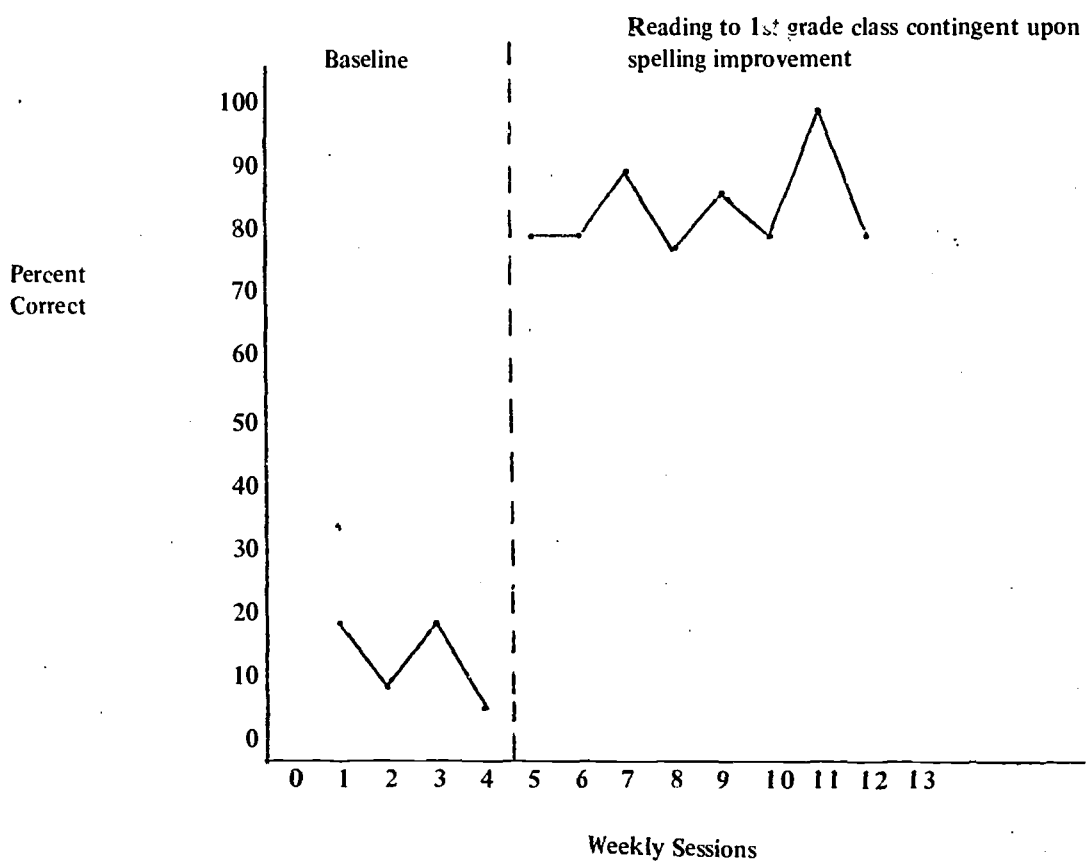


Figure 2. Program for increasing per cent of spelling words correctly

2. *Change the behavior of the classroom teacher so that she can change the behavior of the socially maladjusted, emotionally disturbed child so that he can function adequately in the regular classroom.*

Five different techniques were used to help the classroom teacher change her behavior. A description of each of these techniques and the results of these techniques follow.

Graphs: Graphs were kept on both the positive and negative verbalizations of the classroom teachers. How these graphs were used is explained in the following statement from the Behavioral Consultant.

"It is felt that the verbal behavior of the classroom teacher is the single most influencing variable in the control and management of children. That is, a teacher with a high rate of appropriate, positive behavior will create a classroom of children who display a high rate of appropriate, positive behavior. Of course, the opposite is true. The cause and effect relationship of the teacher's behavior is one which was emphasized in this project. To make the classroom teacher more aware and responsible for his/her verbal behavior was at times, a very delicate and difficult task. To suggest to the teachers that they may be directly reinforcing the very behavior that they wish to change was often quite threatening to them.

Graphs were kept on both the positive and negative verbalizations of the classroom teacher without their knowledge (See Table 1). This data was taken at the same time data was being gathered on the student. After baseline data was established, the behavioral program was carefully explained to the teacher. To implement the behavioral program, teachers or aides were required to change their behavior by reinforcing certain children for appropriate behavior and ignoring the inappropriate behavior. Some forms of token systems were often set up not necessarily for the children's benefit, but to insure that the teachers would, in fact, reinforce the children for specified behaviors. It was emphasized that each time a token or mark was given, the teachers were to pair it with verbal praise. (It was interesting to observe that often the students themselves reminded the teachers of their reinforcements). As soon as possible, the token system was phased out even though some teachers found it easier to give tokens than verbal praise. The power of their own verbal behavior was difficult for many teachers to accept.

Table I

Observation of Teacher's Positive and Negative Comments to Children

Teacher	Baseline Rate/Minute		End of Observation Period Rate/Minute	
	Positive	Negative	Positive	Negative
1	.05	.03	.08	.02
2	.05	.1	.08	.03
3	.05	.2	.1	.3
4	.1	.2	1.0	.8
5	.05	.1	.2	.2
6	.2	.05	.7	.1
7	.2	.1	.7	.2
8	.05	.5	1.0	.02
9	.1	.2	.05	.2
10	.05	.01	.04	.1
11	.5	.7	.6	.1
12	.05	.5	.3	.01
13	.01	.5	.05	.02
14	.2	.05	.1	.05
15	.1	.2	.1	.2
16	.2	.1	.5	.2
17	.3	.2	.2	.1
18	1.0	.1	2.0	.001

Graphs were also used as a reinforcer for the teacher. Mostly, they were shown to the teacher when her behavior had changed from negative to positive but in one instance, they were shown to a teacher whose negative comments outweighed her positive comments and who had not changed her verbal behavior after much modeling by both the behavioral consultant and the aide. It was used as a last resort. There was an immediate decrease in her negative verbal behavior but there was practically no increase in her positive behavior. Twenty-five years of teaching negatively could not be changed overnight.

In most cases, the teachers were unaware that data was being kept on them because of a desire not to change "normal" behavior before establishing a baseline. Teachers were, however, highly reinforced by the behavioral consultant and/or behavioral aide for any positive verbal behavior after the observation periods and so they soon realized the importance of positive comments in the classroom. The principal of the school was kept informed of the progress of both teacher and student and he was encouraged to observe in the classroom and reinforce any positive behavior of either student or teacher. It should be pointed out that the data were never used by the administrator as an evaluation tool. The effectiveness of the program would be jeopardized if data were put to that kind of use."

Video Tape Recorder: In the previous year's project the behavioral consultant found that often times teachers have

a different perception of what actually had happened in the classroom from the observer's perception. For this reason a video-tape recorder was ordered to be used in this year's program. The video tape became an actual record of classroom activities and was used to great advantage in this project. Teachers were often surprised at what they saw and asked for parts of the tape to be replayed several times. By isolating specific instances and observing the cause and effect relationships teachers seemed to become much more aware of their own behavior. Fourteen teachers completed the Video Tape Teacher Evaluation Form (Table II) and most reported that viewing themselves enhanced their awareness of their own behavior as well as the children's behavior. In addition most of the teachers felt that viewing the video tape enhanced the children's awareness of their own behavior. Some teachers reported that the children actually changed their behavior just by seeing themselves. Others changed their behavior after viewing themselves and discussing this behavior with the Behavioral Consultant. Unfortunately the video tape recorder did not arrive until the end of January and for this reason it was not used as much as was anticipated.

Table II
Video Tape Teacher Evaluation

	Less Aware 1	2	Same 3	4	More Aware 5
1. To what extent did the video tape recorder enhance your awareness of the class and/or child's behavior?			3	3	7
2. To what extent did the VTR enhance your awareness of your behavior toward the children?			4	2	7
	No Change 1	2	Some Change 3	4	Much Change 5
3. To what extent did the class and/or child change their behavior as a result of seeing themselves on the VTR?	2	2	5		2
4. To what extent did you change your behavior as a result of viewing the VTR?	3	1	3	3	1

Teacher Conferences and Staffings: The teacher conferences and staffings were an important method of

discussing behavioral techniques in dealing with children. In a fairly informal setting teachers were invited to discuss any problems or difficulty they might be having with classroom control and/or management. Approximately 125 such conferences and/or staffings were held. The feedback from teachers was very favorable. The following comments from classroom teachers indicate their evaluation of the program and its effect on their students. B was referred for the following behaviors - out of seat, non-completion of tasks, fighting with peers, and inappropriate attention seeking. According to the teacher "The student now remains in his seat unless in need of help, completes tasks, frequently uses appropriate attention seeking devices such as raising hand, apologizing for interruptions. Only through cooperation among the classroom teacher, behavior modification specialist, and parents has this child made progress. The team was always available with added programs or new ideas. The team was also available for conferences with parents." Another teacher states, "Billy displayed much physical aggression. He was observed and together Jim (the behavioral consultant) and Billy worked out a reinforcement plan to help. The plan was so effective that we eventually phased out the program." Another teacher states, "Mr. Thomas a) helped establish and maintain consistent reinforcement by staffing meetings, b) helped to outline and structure effective reinforcement methods, c) helped to define problems and list those behaviors needing modification, d) helped by conferencing with parents and/or teachers, e) gave time and support to classroom teachers in order to discuss problems. I feel this program is extremely effective. Behavior modification techniques and Mr. Thomas' suggestions are a basic part of my classroom. I am always willing to accept his suggestions because I feel his concern and willingness to help is genuine."

Use of the Behavioral Aide: The behavioral aide was used to help the classroom teacher in crisis situations. Baseline data indicated that a child had an extremely high rate of inappropriate behavior. Data also indicated that the classroom teacher highly reinforced the very behavior she wanted to alleviate. After observing the classroom situation, it was obvious that two things had to be accomplished. First, the child displaying the inappropriate behavior had to be managed so that his behavior would change from being inappropriate to appropriate. Secondly, the classroom teacher had to be taught how to behave appropriately toward the child so that she could influence his behavioral change. After training the Behavioral Aide and after at least one teacher and parent conference, the program was initiated. The Behavioral Aide entered the classroom and essentially took over all responsibility for teaching appropriate academic and social behaviors to the child. Time-out was used if needed. It was emphasized to the teacher that the aide was only temporarily placed in her

classroom and that she would be phased out as soon as possible. The teacher was to observe the aide and model after her whenever possible. Because of the extreme crisis nature of the situation, teachers readily welcomed the aide. In all cases, the child improved his academic and social behavior within a period of time and the classroom teacher was able to take over the program.

Instructional Aides: Bryant School is organized at the primary level on a differentiated staffing pattern which involves the use of many Instructional Aides. Various techniques were used to teach them to become more aware of their behavior. First, they were taught to identify and pinpoint movement cycles and tally them. After getting a baseline, an intervention program was implemented and the results were observed and counted. They were made aware of the cause-effect relationship between their behavior and the students. The Behavioral Consultant also functioned as a model, demonstrating different ways to handle the children with the aides counting his positive and negative verbalizations. Inappropriate behaviors were ignored and appropriate behaviors were highly reinforced. The data were discussed with them with appropriate comments concerning specific situations. Dramatic changes in their behaviors were observed by the Behavioral Consultant as well as the principal and teachers. Not only did the Instructional Aides change their behavior but they in turn, acted as models to the classroom teachers who had constant reminders of techniques of good classroom management over present.

3. *Change the behavior of the parents of the socially maladjusted, emotionally disturbed child so that he can function adequately in society.*

Three different techniques were used to help parents change their behavior: 1) use of the video tape recorder; 2) parent conferences; 3) parent class. Each of these techniques will be discussed below.

The Use of the Video Tape Recorder: The video tape recorder was used to show parents specific behaviors of their children. It brought home and school closer together as there was visual evidence of behavior that needed to be modified both at home and at school. When the child's behavior changed at school the video tape recorder was used by both behavioral consultant and classroom teachers to show his positive behavior. This acted as a reinforcer to the parents who had visual evidence of their child's ability to function adequately when he was treated differently by those adults in his environment. A specific example of a behavioral change resulting in the use of the video tape recorder follows:

During a parent conference the classroom teacher reported that she had informed the parent that her son was not doing his assigned seat work. She suggested that the parent remove certain privileges from her son unless he brought home information which indicated that he had

completed his work. The mother agreed during the conference but did not carry out the plan in actuality. The Behavioral Consultant was contacted and the problem explained. A video tape of the child displaying a high rate of off-task behavior was filmed. A conference was held with parents and the tape shown and discussed. The mother was shocked to see her son's behavior and verbalized her concern. A program was set up between the mother and teacher and implemented the following day. The teacher reported that the mother followed through with the program as set up and in a short time the student's behavior changed. In this case the video tape served as the catalyst and resulted in a successful program for that particular child.

Parent Conferences: Many parent conferences (approximately 50) and phone calls (approximately 30) were held by the Behavioral Consultant. Approximately 75% of these contacts dealt with behavioral programs which were either already initiated or about to be initiated. Parents usually were asked to administer reinforcers contingent upon appropriate classroom academic and/or social behavior. For example, after a specified number of "Good Work" slips, the child was allowed to ride the neighbor's horse for a specified number of hours. The program was set up and understood by parents, teachers and the student with the reinforcer chosen that was meaningful to that particular child. Many parents often adopted the same type of program at home, requiring the child to earn privileges he previously had taken for granted. Phone calls and conferences between parents, teachers, and the Behavioral Consultant functioned as reinforcers to all concerned. Thus, home and school worked closely together for the benefit of the child.

Parent Class: A class in the use of behavioral techniques with children was offered to a select group of parents. Approximately twelve parents took advantage of the offer. The class lasted 8 weeks and was designed to teach parents simple behavioral techniques in dealing with their children. The book, *Parents Are Teachers* by Wesley C. Becker, was used as a basis for discussion. The class was highly structured and specific expectations were expected of the parents. Four of the parents collected data and submitted it to the instructor (see examples in Figures 3 and 4). Other parents carried on programs but did not submit data. Most of these parents expressed real concern about their children but were essentially unaware of how they and their environment affected their children's behavior. By programming the class in such a way as to provide small steps of success, some of the parents demonstrated that they could change their behavior toward their child which in turn, changed his behavior. Without the cooperation and reinforcement of the parents, it is doubtful that some of these students would have been able to maintain their new modes of behavior.

Figure 3. Reduction of dawdling of daughter at dinner table

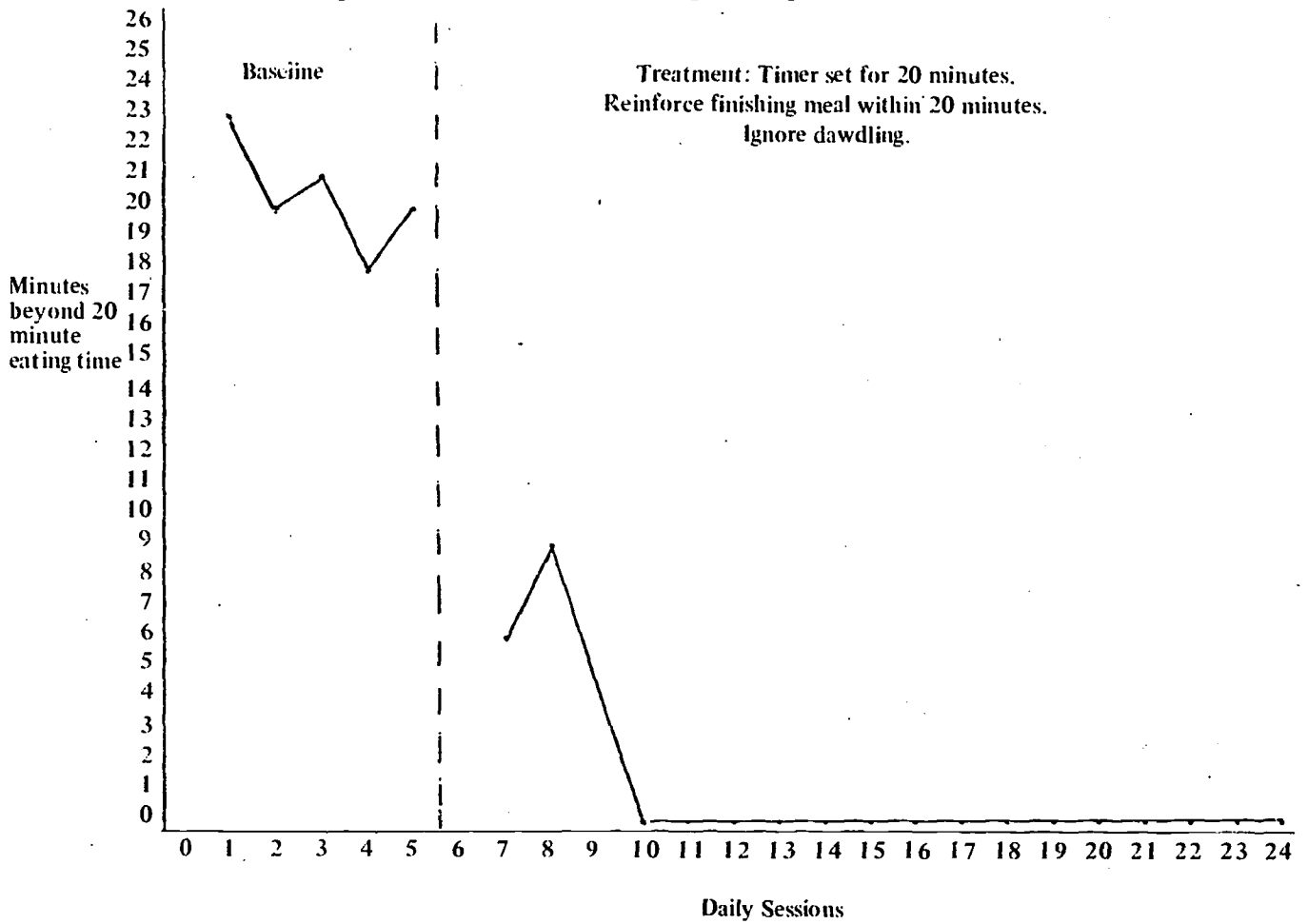
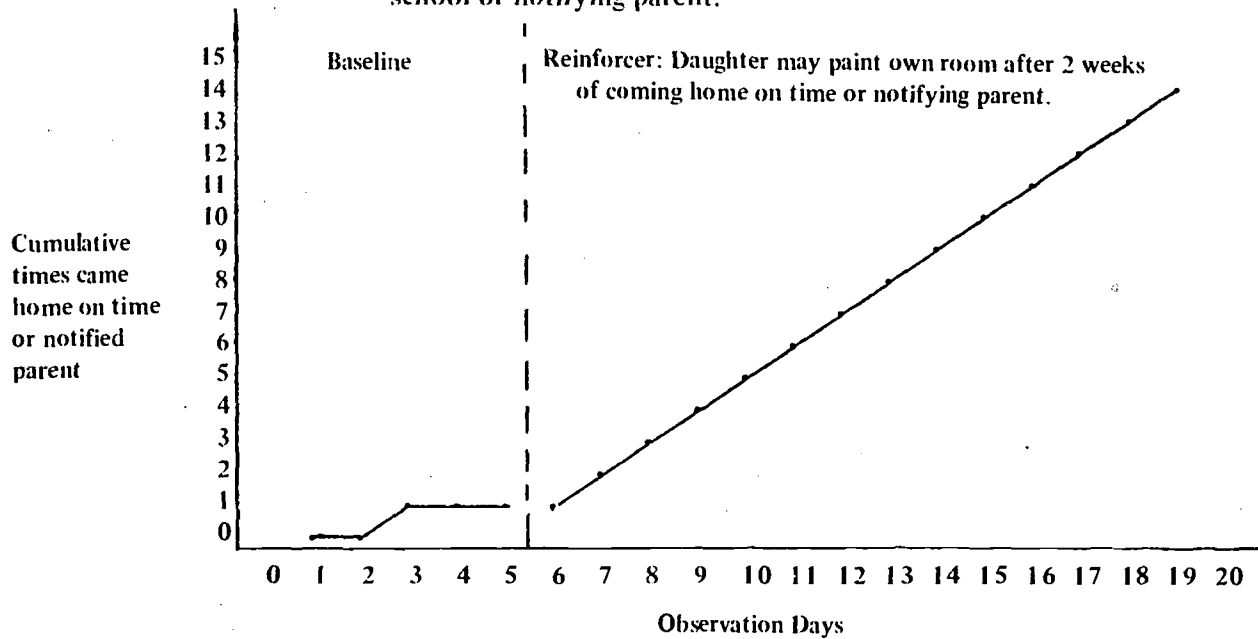


Figure 4. A program to increase daughter coming home on time after school or notifying parent.



Third Party Evaluator's Comments:

The organization and completeness of this project are to be commended. In order to make a behavioral change in a child, that child's environment must also be changed. In this project, changes were effected not only in the behavior of the identified emotionally disturbed, socially maladjusted children, but in the interactions with those children by both parents and teachers. While only a sample of the data for each objective is included here the remaining data are equally as impressive.

As one examines the statements of the teaching staff regarding the project, one is impressed with the amount of praise and confidence expressed in the Behavioral Consultant, Mr. Jim Thomas. Not only did Mr. Thomas conduct a successful project, but he completed an outstanding final report for that project as well.

This project is in its second year in the Lake Oswego District. It was felt by the Third Party Evaluator last year that the project was a promising and innovative model for

the handling of behavioral problems. Only one area was thought to be disappointing; that of parent involvement and data collection by parents.

An attempt was made to involve parents to a greater extent in this year's project. However, only twelve parents attended the parent class and of these only four parents submitted data on behavior change programs. It is impossible to document changes in these parents' interactions with their children without data. In addition, the reinforcing effect upon parents of data showing changes in their children's behavior cannot be over-emphasized.

In spite of this difficulty, the project must be considered effective in that it has resulted in change in students, in some parents, and has resulted in teachers actually carrying out behavior change programs in their classrooms with the support of the Behavioral Consultant. This project has demonstrated that classroom teachers can effectively manage the behavior of emotionally handicapped children in the regular classroom.

Title of Project: *Area Speech Therapist – Lake County I.E.D.*

Location of Project: *Lake County I.E.D.
Lakeview, Oregon*

Type and Number of Children Served: *81 Speech Impaired*

Funding Allocated: *\$10,500*

Project Beginning Date: *January 2, 1973*

Project Ending Date: *June 6, 1973*

Background and Rationale:

It was determined by the special education staff in Lake County, Oregon that approximately eighty children existed in various public schools in the county who had speech and/or hearing impairments. Prior to the inception of this Title VI project these children were served by a speech therapist from the Jackson County Intermediate Education District who came to the Lake County schools two Saturdays per month to serve this population. It was obvious with the large number of speech and hearing problems available that this arrangement was not sufficient to serve the needs of these children. Consequently, the current Title VI program was initiated. The purpose of this program was to serve all of these children on a frequent basis using a certified speech correctionist in Lake County.

Objectives and Evaluation Plan:

1. *To conduct a speech, hearing and language screening program in grades 1 through 3 to determine the number of children who require remedial help.*

The number of children screened and a list of the number of children who require therapy will be kept.

2. *To conduct a speech therapy program to provide remedial help to those children who require service.*

Appropriate speech and language tests given on a pre-posttest basis will be utilized including the Basic Concept Inventory, the McDonald Deep Test of Articulation and the Riley Test of Articulation. In addition, individual behavioral objectives will be stated for each child and data will be collected and submitted as to each child's acquisition of these behaviors.

3. *Develop for teachers a series of inservice speech and hearing programs designed to (a) improve their ability to identify children with communication problems, and (b) to improve their ability to provide supporting speech services for the speech and hearing specialist.*

The number of referrals made by each teacher and the number of programs that the therapist provided for the

teacher that were to be presented to a child and the data collected from that program.

4. *Develop for parents a series of informative educational programs in order to improve their knowledge of normal speech and language development, communication disorders and remedial procedures.*

Criterion reference behavioral checklists will be developed and administered on a pre-post basis to each parent.

Methodology:

This project was directed by the I.E.D. Superintendent and served by a certified speech pathologist. In addition, nine volunteers were utilized to carry out programs in selected areas in Lake County.

Since Lake County covers 8,340 square miles with a population of only 6,740, the speech pathologist worked on an itinerant basis, moving from school to school throughout the week. Each child was seen by the speech pathologist at least once a week for a period of twenty minutes. In the interim days when the speech pathologist was not there the volunteers ran programs in some of the school districts. The population and caseload of the speech therapist was made up primarily of articulation cases. The following is a breakdown of the types of cases and the number of children seen in each area: Articulation – 52; Stuttering – 1; Language – 13; Neuromuscular – 2; Auditory discrimination – 1; Voice – 3; Hearing impaired – 8; Total – 80 children.

It was anticipated that each of the schools in the district could be served by utilization of volunteers and paraprofessionals. These volunteers were primarily to have been public school children in the high school and junior high school levels. However, many of the school districts did not feel that they wanted their students to participate in the program in this way and consequently some of the children were then seen only once a week by the speech

therapist herself. The nine paraprofessionals who did participate were trained by the speech therapist. This training was begun in February and they were introduced in the programs and to the children in late February. Behavioral objectives were set down for each of them, but they did not teach the children alone until after they had met certain performance standards as set down by the speech therapist.

Inservice training for the classroom teachers was not held on a formal group basis but rather provided on an individualized basis where needed as determined by the speech therapist. Since there were a large number of teachers over a large area, this seemed a more appropriate strategy than providing group instruction relative to speech and language problems.

Results:

1. To conduct a speech, hearing and language screening program in grades 1 through 3 to determine the number of children who require remedial help.

The following is a breakdown of the number of children screened and the number of children who required therapy by grade from Lake County.

School	Grade	No. Screened
Union	1-8	55 students
Bullard	K-3	113 students
Fremont	K-3	168 students
A.D. Hay	4-6	274 students
Paisley	1-8	89 students
Silver Lake	1-8	58 Students
Plush	1-8	5 students
Adel	1-8	34 students
Fort Rock	1-8	44 students
Total		840 students

Grade	No. Who Required Therapy
Kindergarten	11
1st Grade	24
2nd Grade	13
3rd Grade	11
4th Grade	8
5th Grade	7
6th Grade	4
Total	80

2. To conduct a speech therapy program to provide remedial help to children who require services.

In schools which made use of the aide program, individualized data was taken for each child. The pre- and posttests used were the Photo Articulation Test and the McDonald Deep Test of Articulation. These were used in schools not utilizing the aide program.

Table I shows the gains made by those children served by the speech therapist where paraprofessionals were not used.

Eleven children were served by paraprofessionals and supervised by the speech pathologist. The following is the behaviors acquired by each child and the date the behaviors were acquired (Figure 1).

Table I

Results of children served directly by speech therapist

School	Student	Grade	Error Sounds--January	Error Sounds--June	Results
Adel	Tricia	1	/s/ and /z/ lisp	None	Corrected
	George	3	Tongue Thrust	None	Corrected
	Julie	2	w/r substitution	w/r substitution	Can produce /r/ sound correctly in all three positions. Not in conversation.
A.D. Hay	Jamie	4	Lisp on /s/ and /z/ sounds	None	Corrected the lisp
	Keith	4	Stutterer while reading. 25 non-fluencies per 75 words.	4 non-fluencies per 1,000 words	Reading within the normal fluency range
	Daniel	4	Lisp on /s/ and /z/ sounds.	1 error out of 50 tests words	Has corrected the sound, but does not have it in conversational speech.
	Daniel	4	Lisp on /s/ and /z/ sounds; substitute /w/ for /r/.	Substitutes /w/ for /r/.	Corrected the /s/ and /z/ lisp.
	David	4	Lisp on /s/ and /z/ sounds.	Lisp on /s/ and /z/ sounds.	Can produce correct sounds in all positions but tends to keep a mild lisp.
	Tammie	4	Lisp on /s/ and /z/ sounds.	Lisp on /s/ and /z/ sounds.	Can produce corrected sound in initial and final positions only with careful production.
	Kyle	5	Lisp on /s/ and /z/ sounds.	Lisp on /s/ and /z/ sounds.	Can produce correct sound in all positions but not in conversational speech.
	John	5	Lisp on /s/ and /z/ sounds. Distorts /sh/ & /ch/.	Lisp on /s/ and /z/ sounds. Distorts /sh/ & /ch/.	Can produce correct /s/ and /z/ sounds in all positions of words. Not in conversational speech.
	Robin	5	Lisp on /s/ and sounds.	None	Corrected
	Jim	5	Lisp on /s/ and /z/ sounds.	None	Corrected
	Terry	6	Substitutes w/r	None	Corrected
	Kent	6	Lisp on /s/ and /z/ sounds.	Lisp on /s/ and /z/ sounds.	Has corrected in all positions of words and is in the process of including it in conversational speech. One out of every 20 /s/ or /z/ sounds incorrect.
	Bullard	Allen	K	Delayed Speech & Language. th/s, b/v.	Delayed Speech & Language. th/s, b/v.
Kevin		K	Omits /s/ in blends s/sh, ts/ch, f/th, d/th (voiced).	Delayed Speech & Language. Omits /s/ in blends, s/z, f/th, w/r, d/th (voiced).	Has corrected s/sh and ts/ch only.
Torri		K	/s/ and /z/ lisp	None	Corrected
Peggy		1	/s/ and /z/ lisp	/s/ and /z/ lisp	Can produce /s/ and /z/ sounds correctly in all three positions. Beginning to include in conversation.
Donna		1	w/r substitution	w/r substitution	Can produce /r/ sound correctly in all three positions. Beginning to include in conversation.

Table I

Results of children served directly by speech therapist

(continued)

School	Student	Grade	Error Sounds—January	Error Sounds—June	Results
	Diana	1	w/r substitution	w/r substitution	Can produce /r/ in isolation and initial positions.
	Shawn	1	Mild aphasia	Same	Same
	Glenn	1	Tongue Thrust, Nasal Emission	Same	Can swallow correctly
	David	2	f/th, w/r, voice	f/th, voice	Corrected w/r substitution, can produce th correctly and is including it in his conversation. Voice, possible nodules.
	Patrick	2	Tongue Thrust, Lisp on /s/ and /z/.	Same	Same
	Keven	2	Delayed Speech & Language, f/th, f/s, sh/ch.	Delayed Speech & Language, f/th, s/s, sh/ch.	Is correcting all sounds. Poor muscular development
Fort Rock	Robyn	2	Tongue Thrust, Mild /s/ distortion	None	No difference with Tongue Thrust
	Bill	1	Mild Lisp /s/ and /z/	None	Corrected
	Janelle	1	w/r substitution	w/r substitution	None (is doing exercises because of inability to lift tongue palate).
	Roland	3	Laryngeal Stuttering	Same	None
Fremont	Randy	K	Delayed Speech & Language, s/sh, s/ch, ds/j, w/l, & blends n,t,s/th, t/k, d/g, s/f, s/v.	Delayed Speech & Language, s/sh, s/ch, w/l, blends s/th, w/r.	Has corrected ds/j, w/l, (except for blends), t/th, t/k, d/g, s/f, s/v, and included in conversation.
	Deanna	K	Mild distortion of /s/ and /z/, sh/ch.	None	Corrected
	Richard	K	th/s, omits in blends, sh/ch, th/f, b/v, d/th, (voiced).	th/s, /w/ for medial /f/, f/th d for medial voiced th.	Can pronounce /s/ in all positions. Has corrected sh/ch, b/v and initial and final voiced th.
	Mike	K	Lisp on /s/ and /z/.	None	Corrected
	Keith	K	t/k, d/g substitutes	None	Corrected
	Jim	K	Lisp /s/ and /z/.	None	Corrected
	Eric	K	t/k, t/th substitutes	None	Corrected
	David	K	Lisp on /s/ and /z/.	Same	Can produce sound in all positions, but not in conversation.
	Mike	1	Lisp on /s/ and /z/.	Same	Can produce in isolation and initial position.
	Bruce	1	Lisp on /s/ and /z/.	None	Corrected
	Tammie	1	th/s and w/r substitutes	w/r substitution	/s/ substitution corrected.
	Tonya	1	Delayed Speech & Language.	Same	Tonya is working on whole word concepts rather than sounds. Because her errors and substitutions are to numerous to deal with that way.
	Michael	1	/s/ and /z/ lisp	Same	None
	Mary	1	/s/ and /z/ lisp	Same	Can produce /s/ correctly in isolation only.

Table 1

Results of children served directly by speech therapist
(continued)

School	Student	Grade	Error Sounds--January	Error Sounds--June	Results
	David	2	/s/, /ch/, /sh/ lisp.	None	Corrected
	Joe	2	Neuro Muscular	Same	Is working with exercises and sounds in isolation.
	Scotty	3	/s/ and /z/ lisp	Same	Can correctly produce the /s/ in all positions and is including it in conversation.
	Wesley	3	/s/ and /z/ lisp	Same	None
	Eric	3	Lisp on /s/, /z/, /sh/ & /ch/.	Same	Is correcting the lisp on /s/ and /z/. Can say correctly in all three positions.
	Terry	3	Lisp on /s/ and /z/.	None	Corrected
	Marty	2	Lisp on /s/ and /z/.	Same	Can produce /s/ in all three positions
	Karl	2	w/r substitution	Same	None
	Reenda	2	w/r substitution	Same	Has corrected in all but final position.
	Kevin	Sp.Ed.	w/r/. ch/sh, f/th	Same	Same
	Sharon	Sp.Ed.	th/s, f/th	th/s	f substitution corrected
	Vicki	1	Auditory Discrimination.	Same	Same
Paisley	Faye	1	slight lisp on /s/ and /z/.	None	Corrected
	Ray	1	Lisp /s/ and /z/.	None	Corrected
	John	2	Lisp /s/ and /z/.	Same	Can produce correct sound in all positions. Not in conversation.
	Chris	3	Lisp on /s/ and /z/.	Same	Can produce in all positions. Not in conversation.
	April	3	Lisp on /s/ and /z/.	None	Corrected.
Silver Lake	Mary	2	Lisp on /s/ and /z/.	None	Corrected.
	Monica	1	w/r and sh/ch substitution.	sh/ch substitution	r corrected.
	Ozis	1	s distortion	None	Corrected
	Jody	1	s/sh substitution	None	Corrected
	Brian	1	t, sh/s, ch/sh, w/l, ch/th, f/th, s/f, t/k, d/g, b/v. Delayed Speech and Language.	Same	Is in process of correcting s/f substitution
	Shannon	3	Lisp on /s/, /z/, /sh/ and /ch/.	Lisp on /sh & /ch/.	Is correcting /s/ and /z/. Lisp does not have in conversation.
	Lori	3	w/r substitution	Same	Can pronounce corrected r in all positions. Not in conversation.
Union	Dawnella	1	Distortion of /sh/ & /ch/ Tongue Thrusts on them.	ch distortion	Corrected initial and medial sh and in conversation
	Kenny	1	b/v substitution	None	Corrected
	Bobby	1	Lisp on /s/ and /z/.	None	Corrected
	Sara	3	Lisp on /s/ and /z/.	None	Corrected.

Figure 1

Child Lori Aide Maryanne Kroencke

Starting Date February 23, 1973

Completion Date June 1, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>Feb. 23</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>March 2</u>	2. Produce sound in isolation.
<u>May 23</u>	3. Produce sound in beginning position of words.
<u> </u>	4. Produce sound in final position of words.
<u> </u>	5. Produce sound in middle position of words.
<u> </u>	6. Produces sound in beginning position of words in phrases.
<u> </u>	7. Produces sound in final position of words in phrases.
<u> </u>	8. Produces sound in middle position of words in phrases.
<u> </u>	9. Produces sound in beginning position of words in sentences.
<u> </u>	10. Produces sound in final position of words in sentences.
<u> </u>	11. Produces sound in medial position of words in sentences.
<u> </u>	12. Produces sound in more than one position of words in sentences.
<u> </u>	13. Produces sound in all positions of words in more than one word in sentences.
<u> </u>	14. Produces sound in any and all positions of words in telling stories.
<u> </u>	15. Produces sound in any and all position of words in conversational speech.

Figure 1

Child Shannon Aide Roxanne Nelson
Starting Date February 23, 1973
Completion Date June 1, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>Feb. 23</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>Feb. 23</u>	2. Produce sound in isolation.
<u>March 2</u>	3. Produce sound in beginning position of words.
<u>March 9</u>	4. Produce sound in final position of words.
<u>March 16</u>	5. Produce sound in middle position of words.
<u>March 26</u>	6. Produces sound in beginning position of words in phrases.
<u>April 6</u>	7. Produces sound in final position of words in phrases.
<u>April 13</u>	8. Produces sound in middle position of words in phrases.
<u>April 13</u>	9. Produces sound in beginning position of words in sentences.
<u>May 16</u>	10. Produces sound in final position of words in sentences.
<u>May 16</u>	11. Produces sound in medial position of words in sentences.
<u>May 24</u>	12. Produces sound in more than one position of words in sentences.
<u> </u>	13. Produces sound in all positions of words in more than one word in sentences.
<u> </u>	14. Produces sound in any and all positions of words in telling stories.
<u> </u>	15. Produces sound in any and all position of words in conversational speech.

Figure 1
(continued)

Child Jody Aide Glena Bowen

Starting Date February 23, 1973

Completion Date June 1, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>March 9</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>March 30</u>	2. Produce sound in isolation.
<u>April 3</u>	3. Produce sound in beginning position of words.
<u>April 11</u>	4. Produce sound in final position of words.
<u>April 25</u>	5. Produce sound in middle position of words.
<u>May 2</u>	6. Produces sound in beginning position of words in phrases.
<u>May 8</u>	7. Produces sound in final position of words in phrases.
<u>May 11</u>	8. Produces sound in middle position of words in phrases.
<u>May 15</u>	9. Produces sound in beginning position of words in sentences.
<u>May 18</u>	10. Produces sound in final position of words in sentences.
<u>May 23</u>	11. Produces sound in medial position of words in sentences.
<u>May 29</u>	12. Produces sound in more than one position of words in sentences.
<u> </u>	13. Produces sound in all positions of words in more than one word in sentences.
<u> </u>	14. Produces sound in any and all positions of words in telling stories.
<u>June 1</u>	15. Produces sound in any and all position of words in conversational speech. (When Tested)

Figure 1
(continued)

Child Mary Aide Gary Moser

Starting Date February 23, 1973

Completion Date June 1, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>March 2</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>March 9</u>	2. Produce sound in isolation.
<u>April 6</u>	3. Produce sound in beginning position of words.
<u>April 12</u>	4. Produce sound in final position of words.
<u>April 18</u>	5. Produce sound in middle position of words.
<u>April 27</u>	6. Produces sound in beginning position of words in phrases.
<u>May 4</u>	7. Produces sound in final position of words in phrases.
<u>May 16</u>	8. Produces sound in middle position of words in phrases.
<u>May 23</u>	9. Produces sound in beginning position of words in sentences.
<u> </u>	10. Produces sound in final position of words in sentences.
<u> </u>	11. Produces sound in medial position of words in sentences.
<u> </u>	12. Produces sound in more than one position of words in sentences.
<u> </u>	13. Produces sound in all positions of words in more than one word in sentences.
<u> </u>	14. Produces sound in any and all positions of words in telling stories.
<u>June 1</u>	15. Produces sound in any and all position of words in conversational speech: (When Tested)

Figure 1
(continued)

Child Monica Aide Sue Burgeson
Starting Date February 23, 1973
Completion Date June 1, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>March 2</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>March 9</u>	2. Produce sound in isolation.
<u>March 16</u>	3. Produce sound in beginning position of words.
<u>March 30</u>	4. Produce sound in final position of words.
<u>April 23</u>	5. Produce sound in middle position of words.
<u>May 1</u>	6. Produces sound in beginning position of words in phrases.
<u>May 11</u>	7. Produces sound in final position of words in phrases.
<u>May 16</u>	8. Produces sound in middle position of words in phrases.
<u>May 21</u>	9. Produces sound in beginning position of words in sentences.
<u>May 28</u>	10. Produces sound in final position of words in sentences.
<u>May 31</u>	11. Produces sound in medial position of words in sentences.
_____	12. Produces sound in more than one position of words in sentences.
_____	13. Produces sound in all positions of words in more than one word in sentences.
_____	14. Produces sound in any and all positions of words in telling stories.
<u>June 1</u>	15. Produces sound in any and all position of words in conversational speech. (When Tested)

Figure 1
(continued)

Child Brian Aide Sue Burgeson

Starting Date February 23, 1973

Completion Date June 1, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>March 9</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>April 12</u>	2. Produce sound in isolation.
<u>May 8</u>	3. Produce sound in beginning position of words.
_____	4. Produce sound in final position of words.
_____	5. Produce sound in middle position of words.
_____	6. Produces sound in beginning position of words in phrases.
_____	7. Produces sound in final position of words in phrases.
_____	8. Produces sound in middle position of words in phrases.
_____	9. Produces sound in beginning position of words in sentences.
_____	10. Produces sound in final position of words in sentences.
_____	11. Produces sound in medial position of words in sentences.
_____	12. Produces sound in more than one position of words in sentences.
_____	13. Produces sound in all positions of words in more than one word in sentences.
_____	14. Produces sound in any and all positions of words in telling stories.
_____	15. Produces sound in any and all position of words in conversational speech.

Figure 1
(continued)

Child Chris Aide Beverly Hills

Starting Date February 22, 1973

Completion Date May 31, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>March 8</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>March 22</u>	2. Produce sound in isolation.
<u>April 27</u>	3. Produce sound in beginning position of words.
<u>May 28</u>	4. Produce sound in final position of words.
<u> </u>	5. Produce sound in middle position of words.
<u> </u>	6. Produces sound in beginning position of words in phrases.
<u> </u>	7. Produces sound in final position of words in phrases.
<u> </u>	8. Produces sound in middle position of words in phrases.
<u> </u>	9. Produces sound in beginning position of words in sentences.
<u> </u>	10. Produces sound in final position of words in sentences.
<u> </u>	11. Produces sound in medial position of words in sentences.
<u> </u>	12. Produces sound in more than one position of words in sentences.
<u> </u>	13. Produces sound in all positions of words in more than one word in sentences.
<u> </u>	14. Produces sound in any and all positions of words in telling stories.
<u> </u>	15. Produces sound in any and all position of words in conversational speech..

Figure 1
(continued)

Child John Aide Beverly Hills
Starting Date February 22, 1973
Completion Date May 31, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>March 1</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>March 15</u>	2. Produce sound in isolation.
<u>May 7</u>	3. Produce sound in beginning position of words.
<u>May 30</u>	4. Produce sound in final position of words.
<u> </u>	5. Produce sound in middle position of words.
<u> </u>	6. Produces sound in beginning position of words in phrases.
<u> </u>	7. Produces sound in final position of words in phrases.
<u> </u>	8. Produces sound in middle position of words in phrases.
<u> </u>	9. Produces sound in beginning position of words in sentences.
<u> </u>	10. Produces sound in final position of words in sentences.
<u> </u>	11. Produces sound in medial position of words in sentences.
<u> </u>	12. Produces sound in more than one position of words in sentences.
<u> </u>	13. Produces sound in all positions of words in more than one word in sentences.
<u> </u>	14. Produces sound in any and all positions of words in telling stories.
<u> </u>	15. Produces sound in any and all position of words in conversational speech.

Figure 1
(continued)

Child April Aide Beverly Hills
Starting Date February 22, 1973
Completion Date May 31, 1973

CHECK LIST

Objectives: Articulation Programs

Date Goal Reached	
<u>March 1</u>	1. Discrimination of incorrect sound vs. correct sound.
<u>April 12</u>	2. Produce sound in isoiation.
<u>April 16</u>	3. Produce sound in beginning position of words.
<u>April 27</u>	4. Produce sound in final position of words.
<u>May 24</u>	5. Produce sound in middle position of words.
<u> </u>	6. Produces sound in beginning position of words in phrases.
<u> </u>	7. Produces sound in final position of words in phrases.
<u> </u>	8. Produces sound in middle position of words in phrases.
<u> </u>	9. Produces sound in beginning position of words in sentences.
<u> </u>	10. Produces sound in final position of words in sentences.
<u> </u>	11. Produces sound in medial position of words in sentences.
<u> </u>	12. Produces sound in more than one position of words in sentences.
<u> </u>	13. Produces sound in all positions of words in more than one word in sentences.
<u> </u>	14. Produces sound in any and all positions of words in telling stories.
<u>May 31</u>	15. Produces sound in any and all position of words in conversational speech. (When Tested)

Figure 1
(continued)

Child Julie Aide Susanne Takacs
February 22, 1973
Starting Date Pat Shine
Completion Date May 31, 1973

CHECK LIST

Objectives: Articulation Programs

- | Date Goal Reached | |
|-------------------|--|
| <u>March 1</u> | 1. Discrimination of incorrect sound vs. correct sound. |
| <u>March 15</u> | 2. Produce sound in isolation. |
| <u>May 7</u> | 3. Produce sound in beginning position of words. |
| <u> </u> | 4. Produce sound in final position of words. |
| <u> </u> | 5. Produce sound in middle position of words. |
| <u> </u> | 6. Produces sound in beginning position of words in phrases. |
| <u> </u> | 7. Produces sound in final position of words in phrases. |
| <u> </u> | 8. Produces sound in middle position of words in phrases. |
| <u> </u> | 9. Produces sound in beginning position of words in sentences. |
| <u> </u> | 10. Produces sound in final position of words in sentences. |
| <u> </u> | 11. Produces sound in medial position of words in sentences. |
| <u> </u> | 12. Produces sound in more than one position of words in sentences. |
| <u> </u> | 13. Produces sound in all positions of words in more than one word in sentences. |
| <u> </u> | 14. Produces sound in any and all positions of words in telling stories. |
| <u> </u> | 15. Produces sound in any and all position of words in conversational speech. |

3. *Develop for teachers a series of inservice speech and hearing programs designed to (a) improve their ability to identify children with communication problems, and (b) to improve their ability to provide supporting speech services for the speech and hearing specialist.*
4. *Develop for parents a series of informative educational programs in order to improve their knowledge of normal speech and language development, communication disorders and remedial procedures.*

Objectives 3 and 4 were not attended to during this project. Because of the late starting date (January), it was agreed to by the Director of Title VI and the third party evaluators that these objectives could be eliminated.

Third Party Evaluator's Comments:

Data would indicate that Objectives 1 and 2 were met in this project. However, it was unfortunate that this school district was not able to locate and employ a speech therapist before December, 1972. This resulted in service to children being delayed until January, 1973.

In addition, two of the four objectives were deleted from the project because of these time constraints.

However, it appears that these Title VI funds were well expended because a speech program has been initiated and will be continued by the local district in an isolated area which has certainly demonstrated a need for such services.

Title of Project: *Improving Reading Level of Emotionally Disturbed*

Location of Project: *Christie School
Marylhurst, Oregon*

Type and Number of Children Served: *23 emotionally disturbed*

Funding Allocated: *\$7,000*

Project Beginning Date: *July 1, 1972*

Project Ending Date: *June 30, 1973*

Background and Rationale:

The relationship between "reading failures," inadequate self-image, and behavior management appears significant in the children who are referred to Christie School. 96% of the children at Christie School have been diagnosed by schools as major behavior problems in the public school and have been referred to Christie School for continual guidance. 90% of these students are classified as under-achievers in reading, testing one, two, or three years below grade level. Since there was no staff member at Christie School who was a reading specialist, the children had no special reading program.

This project was designed to improve reading ability by hiring a reading specialist who would diagnose and prescribe successful procedures to teach reading.

Objectives and Evaluation Plan:

1. *To improve the reading level of emotionally disturbed children by hiring a reading specialist to plan a remedial program.*

The number of children served and the length of time each child was served will be reported.

2. *To diagnose reading disabilities, and to prescribe a course of study to meet these disabilities.*

The Gates-McGinitie diagnostic test was used. Also included were: an informal reading inventory test, and a phonic checklist test.

Methodology:

This project was served by a teacher with a Masters Degree in Extreme Learning Problems.

Throughout the year, a total of 23 girls were given instruction by the reading specialist. Since the population of the agency fluctuates, the amount of instruction fluctuated also. Normally, a girl would attend reading ½ hour each day (5 days a week) for at least 3-4 months. After this length of time, most girls had reached 5th grade level, and were replaced by girls reading with a greater handicap.

Students with the most severe reading disabilities (2 or more years below grade level), were taught in small groups of 2 or 3 students, according to their specific reading difficulty. After diagnosing the level of each child, a program was devised for that group to meet that particular need. Consequently, such methods as Distar, Gillingham, Stillman, and Fernald were used. Perception problems were dealt with by implementing activities to overcome that particular problem.

The educational program involved three classroom teachers who teach academic subjects in the morning. Each teacher has approximately ten students. Therefore, the reading specialist draws the poor readers from these three groups during the morning classes. Because of the advantage of having a small staff, it was possible to continually coordinate extra activities for classroom use. The reading specialist provided the classroom teachers with activities that could be used with those poor readers in the classroom. The reading specialist periodically reviewed the progress of each child. If it was believed that the child was not progressing, special exercises were incorporated into the program. In this way, each student would develop and improve his reading level both in the classroom as well as in the special reading sessions.

Since the girls being taught had severe emotional problems, it was necessary to implement behavioral programs for each girl, as well as to provide constant reinforcement for their efforts while in reading class. The kind of behavioral programs used involved a reward point system for each task performed. Also, such behavior controls as "time-out" and "ignoring" of attention getting behaviors were used.

Since these girls possessed negative attitudes about reading, it was necessary to provide "entertaining learning activities" to capture their interest and create a desire to want to attend reading class. To meet the needs for the girls to continue improving after they had completed the reading

program, the reading specialist provided each classroom teacher with skill building books. These included, *Reading Comprehension*, (Macmillan), *Reader's Digest Skill Builders*, *Getting the Facts*, (series by Barnell-Loft), and *New Practice Readers*, (Webster-McGraw-Hill).

Results:

1. *To improve the reading level of emotionally disturbed children by hiring a reading specialist to plan a remedial program.*

Twenty-three girls were tested and found to be 2 or more years below grade level. Because of the nature of this type of institution, the length of stay of the girls fluctuated. Therefore, the length of time that the girls worked in the reading program varied. See Table I for the number of hours each student received instruction.

Table I

Child	Entered	Left	Total Hours of Instruction
1	11-5-72	1-6-73	20
2	2-5-73	4-5-73	20
3	2-5-73	6-7-73	40
4	11-5-72	1-6-73	20
5	9-5-72	5-1-73	90
6	9-5-72	6-7-73	100
7	10-5-72	1-6-73	25
8	9-5-72	12-12-72	30
9	1-5-73	3-20-73	25
10	10-15-73	6-7-73	35
11	1-15-73	6-7-73	55
12			
13	10-5-72	1-6-73	25
14	2-1-73	6-7-73	50
15	2-1-73	6-7-73	50
16	11-5-72	1-6-73	20
17	9-5-72	3-20-73	60
18	1-7-73	1-17-73	5

2. *To diagnose reading disabilities, and to prescribe a course of study to meet these disabilities.*

A pre- and posttest were given at the times when the student entered and left the program. Because the length of time varied, the test results do not always indicate the actual progress made, since the Gates-McGinitie Test evaluates only extreme differences in growth. See Table II for these data.

Third Party Evaluator's Comments:

These data indicate that each of the objectives have been met for most of the students. However, one problem is readily apparent in reporting progress for each student. Since the students at Christie School are transitional and are enrolled at the school for an unknown short duration period of time, it is virtually impossible to evaluate progress on standardized reading tests. These tests are usually insensitive to small gains made by students and frequently the students leave without warning; therefore no posttest is administered. An alternative evaluation system might be to specify short-term behavioral objectives for each student, set criterion levels of acceptable performance and date when this criterion level was reached. This strategy would deal with both problems stated.

In general, this project has demonstrated itself to be beneficial to a population who obviously requires special assistance.

Table II

Name	CA	Public School Level	Pretest Gates-McGinitie				Posttest				Gain or Loss	Hours of Instruction		
			Date Grade Given	Test Coding	De-Comp.	Composite	Date Test Given	De-coding	Comp.	Composite				
1	14	8	11-5-72	4.6	8.8	7.4	6.2	6.4	6.2	6.2	6.2	6.2	+	20
2	12	6	2-5-73	2.8	2.8	3.1	4.1	5.0	4.1	4.1	4.0	4.0	+	20
3	12	7	2-5-73	4.0	3.1	3.8	4.7	5.0	4.7	4.6	4.6	4.6	+	40
4	12	6	11-5-72	6.3	3.0	4.0	5.0	6.3	5.0	5.0	5.0	5.0	+	20
5	10	5	9-5-72	0	0	0	1.0	1.3	1.0	1.0	1.0	1.0	+	90
6	11	5	9-5-72	0	0	0	3.0	3.5	3.0	3.0	3.0	3.0	+	100
7	11	5	10-5-72	10.7	3.1	4.0	10.7	10.7	4.2	4.0	4.0	4.0	+	25
8	12	7	9-5-72	5.2	5.6	5.0	5.2	5.2	5.6	5.0	5.0	5.0	0	30
9	10	4	1-5-73	4.4	1.8	2.0	4.4	4.4	2.8	2.8	2.8	2.8	+	25
10	12	7	10-15-72	3.0	3.0	3.1	4.2	4.2	3.5	3.5	3.5	3.5	+	35
11	9	4	1-15-73	0	0	0	1.0	1.0	1.0	1.0	1.0	1.0	+	55
12	12	7	5-9-73	2.5	3.0	3.3	2.5	2.5	3.0	3.0	3.3	3.3	0	13
13	10	5	10-5-72	3.5	5.1	4.5	4.5	4.5	5.1	4.5	4.5	4.5	+	25
14	13	7	2-1-73	3.0	4.2	4.0	4.3	4.3	4.2	4.0	4.0	4.0	+	50
15	12	7	2-1-73	3.5	3.8	3.6	5.2	5.2	4.8	4.6	4.6	4.6	+	50
16	12	7	4-5-72	5.2	3.3	4.0	6.0	6.0	4.8	4.6	4.6	4.6	+	20
17	10	5	9-5-72	3.0	2.0	2.8	4.0	4.0	2.8	2.8	2.8	2.8	+	60
18	12	7	1-7-73	2.4	2.0	2.0	2.4	2.4	2.0	2.0	2.0	2.0	0	5

Title of Project: *Classroom Experience for Multiple Handicapped Children Living in a Nursing Home Environment*

Location of Project: *Our Lady of Providence Child Center, Portland*

Type and Number of Children Served: *15 Multiple Handicapped*

Funding Allocated: *\$10,245*

Project Beginning Date: *September 1, 1972*

Project Ending Date: *August 31, 1973*

Background and Rationale:

The program described herein is for multiple handicapped children in need of a nursing care program. The children served are from the state as a whole, rather than an individual school district. The determination is to provide as intensive a program as possible for each child in a setting for multiple handicapped children in a 24-hour residential care facility.

Objectives and Evaluation Plan:

1. *To provide the opportunity for each child for further awareness and familiarity with his environment, adeptness in social skills, increased independence in practical living and all manner of experiences which would help stimulate the child.*

Individual data were to be maintained on each child in both the classroom and the physical therapy setting.

Methodology:

The coordination of the program is on an individual basis for each child. Recommendations for stimulation and speech therapy are made by Crippled Children's Division, Physio and Occupational Therapy Clinic and Multiple Disability Clinic of the University of Oregon Medical School. Children are currently being studied and followed regularly at these clinics and receive a reevaluation at scheduled intervals.

The project employs a Montessori teacher and provides Montessori equipment to help stimulate and develop multiple handicapped, nonambulatory young children in a 24-hour residence at Our Lady of Providence Children's Nursing Center. Emphasis is placed on practical life experience, stimulation and sensorial development. The child's full potential, whatever it may be, is realized as much as possible.

The Foster Grandparent Program provides aides to the program and the Montessori teacher works daily with the foster grandparent to provide the necessary training so that

she can effectively assist the teacher. The physical therapist is the other key person working in the program. Her activities are coordinated with the activities of the teacher in providing therapy to maximize the potential of the child.

Parent involvement is not possible because of the distance and/or the emotional inability to maintain such involvement. However, as parents are able to participate, opportunity is provided for them to observe and acquaint themselves with the techniques used.

Results:

1. *To provide the opportunity for each child for further awareness and familiarity with his environment, adeptness in social skills, increased independence in practical living and all manner of experiences which help stimulate the child.*

Many of these children have been in this setting for a number of years; and since this project has been funded under Title VI for also a number of years, the data on many of these children are continuous data which have been maintained over time. Consequently the data as they will be reported herein encompasses only the progress shown in the last year. Data will be reported by child. The same statement made in *Impact 6* must be repeated: Gains may be considered to be quite small in some cases, but one must constantly consider the profound degree of handicapping conditions that many of these children are exhibiting.

Since the major focus of the program is Montessori oriented, each child is discussed individually and in light of Montessori techniques. One should keep in mind that the Montessori philosophy does not force the child to undertake new tasks in any of the areas, although the opportunities for the child to take these tasks and the instruction in them are available.

Student 1. Birthdate: 6-22-65. Diagnosis: hydrocephalous with myelomeningocele and dislocated hip.

This child learned to put a lid on the smelling bottle and replace the bottle in the box. She learned to use the zip

frame. During the period she learned all eleven colors of the color tablets. She knows her numbers up through nineteen and can rote count to nineteen. She is able to add numbers from one to ten.

At the beginning of the year her knowledge of her alphabet letters was poor. She has now learned all the letters and learned to spell a few words, such as her name, girl, boy.

Because this child has general severe muscle weakness, physical therapy was oriented towards strengthening her upper extremities as the legs are non-functional. Sandbags were made and used to strengthen her biceps. She started at one quarter pound and increased to three or three and a half pounds during the period. The criteria for increasing it was if the child could lift the weight ten times in less than a minute for a week. In late December the child was seen dragging herself prone across the floor. Up to this time she had never had the strength to move without being on a stomach scooter. Since no other part of her daily routine had been changed, this progression seemed to be a result of the strengthening exercises.

At the same time sandbag exercises were introduced, shoulder exercises were also started. At the beginning period she was so weak she could hardly lift her hand to the top of her head. As she improved on this, other exercises were started such as holding the arms straight and raising them straight above her head with manual resistance to elbow flexion and extension.

Student 2. Birthdate: 4-9-70. Diagnosis: seizures with mild retardation.

During the period the child learned to place cylinders in the right hole and could stack four and five cubes independently but not necessarily appropriately and/or consistently. She learned to pour rice during the period.

In October she had started to pull herself to a standing position in bed and she later developed the standing to include chairs, tables, or any furniture. She could stand for over one half hour at a small table while working with her hands.

Use of hands consisted of rolling any object over and over in both hands and sticking it in her mouth, never using the toys, games or utensils properly, despite efforts to the contrary.

Efforts were made to increase her walking ability and she would finger walk and take steps on her own, but progression beyond that point did not occur.

Since she did not react to sound, it was questionable as to how much she could hear and no progress was made in language.

Student 3. Birthdate: 11-23-64. Diagnosis: hydrocephalous with shunts. Shunt also for subdural hematomas acquired from falls.

Because of his poor balance therapy included work on

balance and foot placement with exercises such as walking through ladders on the floor, placing feet on marked spaces on the floor, standing on one foot and lifting feet high in gait. He could walk alone, climb stairs, lift one foot off the floor momentarily, but was not able to run or jump.

He was being taught to exercise and stretch his own left hand by using his good right hand but would not initiate this himself, but could do it upon request.

A potty training program for the fifty-five weeks contained successful potty trips daily but only because staff would take him. On weekends there was poor success because the program was not consistently followed. It is interesting to note that when he went to a foster home with other handicapped children, the foster mother claimed that he was dry all of the time after three weeks in the home.

Student 4. Birthdate: 2-7-68. Diagnosis: seizure disorder with stroke on the right in infancy.

This child was only in school for a few months and the main problem was that she was a hand chewer or an object chewer. No systematic program of remediating this was successful.

Therapy for this child was the utilization of a standing table with pillow support followed by no pillow or support. At the beginning she needed magazine splints on both legs as both knees tended to collapse. The splint on the left was finally discarded when she could hold that leg straight.

At the beginning of the period she had no sitting balance. Within two months she was able to sit on her own and move about but not in a crawling manner. As her balance and skills increased, she started to creep about with a three-point touch, holding her right arm up.

She was placed on a walking program with adult support. At the beginning both feet had to be moved for her, but before she left the program her left foot moved easier on her own and she was beginning to make progress in moving the right foot on her own.

Student 5. Birthdate: 9-29-67. Diagnosis: hydrocephalous and myelomeningocele.

This child during the period learned to stack ten cubes with the Montessori pink tower. With the colored cylinders at the beginning of the period he could stack one cylinder on top of the first, but by the end of the period could stack eight cylinders appropriately and independently. He could work the zip frame.

Therapy program for this child was a maintenance therapy, and little progress was noted in this area. The child had difficulty with consistency in that on one day he would sit down well and other days he would not sit down at all. The therapist reported that it seemed as though he were doing what he wanted and it depended on how he felt for that day.

Student 6. Birthdate: 4-19-68. Diagnosis: mentally retarded of unknown etiology.

The Montessori teacher reports that when the child first started school it was difficult for her to concentrate on what she was doing and her eye hand coordination was very poor. No specific data are reported for this difficulty although after a year of work the teacher reports that the child seemed to improve and that her span of concentration has lengthened.

During the period she learned to pick up the cylinder and the cylinder block and could place it in the right hole with assistance.

During the period she learned to stack independently but not necessarily appropriately or consistently four cubes in the pink tower. She could stack six cylinders of the colored cylinders.

In the therapy program at the beginning of the year she was beginning to sit up on her own for short periods of one to five minutes each. By the end of the period she was sitting unsupported in almost all environments.

In early December she started scooting on her back around the floor. This was the first forward progression she had made on her own despite all attempts to pattern and to get her to crawl on her front. Therapy continued on a four point forward progression. In late April she was able to raise herself to a creeping position and creep around the room on her hands and knees chasing a string of bells. Rather than moving each extremity separately, she hopped, moving hands, then legs.

During the period she made some progress on the standing program which was a continual program during the year.

Another program with this child attempted to increase the length of time during a ten-minute period that she would play with an object as opposed to how many times she would lay down and stop playing. The results are sporadic and the therapist reports, "It all depends on her moods."

Student 7. Birthdate: 11-6-69. Diagnosis: heart defect and trachea obstruction.

This was the child's first year in school and according to the teacher, he strives to be independent and works until he completes a task. At the end of the period he was able to place cylinder blocks in the right hole, was able to pour rice, was able to stack seven colored cylinders appropriately and independently, was able to stack six cubes in the pink tower appropriately and independently.

Therapy consisted of work on independent sitting, improving hand coordination, and reading a better crawling progression. A hand exercise program was started to supplement the work on coordination at meals. He was timed while he put ten blocks into a container, starting with three inch cube blocks: eventually he was able to put the raisins in at the same speed. At the start of the program he could do nothing with his left hand but at the close of the period his left hand was only slightly less in ability than the right.

Although he could not independently feed himself at beginning of the period he can now independently feed himself.

At the start of the year he could not sit up by himself but at the end of the year he could raise himself to a sitting position with his legs internally rotated and out to the side.

Student 8. Birthdate: 5-5-70. Diagnosis: hydrocephalous.

During his first year of school last year he threw everything that was handed to him. This year he attends to tasks, has mastered all the sensorial activities and some of the activities of practical life. For instance, at the beginning of the period he could only stack three cubes of the pink tower; he can now build the entire tower. At the beginning of the period he could only stack four colored cylinders; he can now stack ten. He still does not know his colors, although he has mastered pouring rice, pouring water, and the zip frame.

According to the physical therapist he emits temper tantrums when made to do something he doesn't want to do. As far as could be determined no systematic program to remediate these tantrums was attempted. At the beginning of the year he was starting to crawl with four point contralateral rhythm, but at the end of the period is doing this rather fluently discarding earlier methods of dragging himself. In September he started using a standing program which was discontinued when he started to stand on his own in the bed and playpen which was the goal of the program. He was placed on a walking program at the beginning of the period and needed assistance to make his legs walk, but has not progressed to walking with support on one hand.

Student 9. Birthdate: 1-25-66. Diagnosis: secondary athetoid cerebral palsy with Lesch-Nyhan syndrome.

Although no data was submitted to support these statements, the teacher maintained that his speech had improved and that he recognizes and names all colors and letters. He is able to recognize numbers from one to ten and is learning the names of the days of the week. He is able to name two or three names of the months.

This child engaged in severe self-destructive behavior, head banging (which is a manifestation of his disease), and consequently his physical therapy program has halted a number of times on orders of a physician. During the period he learned to move his wheelchair about with his left hand.

Student 10. Birthdate: 3-13-67. Diagnosis: mental and physical retardation of unknown etiology.

According to the teacher this child is more interested in his work this year than he was last year but he still needs assistance in everything that he does because he throws every object that he picks up. Moreover if his routine is changed he gets "terribly upset and frustrated" until he becomes accustomed to the new routine. He has during the

period learned to reproduce some words, for example, such as "hi" and "Henry". At the beginning of the period he was able to stack four colored cylinders with assistance, and at the conclusion of the period he could stack eight with assistance.

At the beginning of the period he would not drink but at the conclusion he was drinking well out of a glass.

In January of 1973 he was put into a walker but would only go backwards pushing with his left foot. His right leg is approximately five inches shorter than his left from a dislocated hip. After putting on a temporary lift he used both feet and pushed forward in the walker. Although he does use the walker at this time, he does not take steps on his own if an adult holds him under his arm.

At the beginning of the period he would not sit alone and at the conclusion of the period he sat in the "crazy car" and other objects with small support. At the end of the period he began to sit alone on the floor or in his bed if so placed. However, he will not stay sitting long and he doesn't initiate sitting on his own as yet.

Student 11. Birthdate: 12-30-69. Diagnosis: retardation as a result of encephalitis.

This was the child's first year in school. According to the teacher "when she started she always wanted to have her fingers in her mouth. As a result she did not want to have anything in her hands." The teacher has noticed that she is becoming more aware of her surroundings. She is even a little interested in her schoolwork.

In work with the cylinder blocks at the beginning of the period she would only hold the knob, at the conclusion of the period she would place the cylinder in the right hole.

Physical therapy has been a slow progression due to nervousness and uncontrolled giggling and hyperactivity when overstimulated. Initially she was taken to the therapy room where other activity was going on merely to become accustomed to noise and activity. She was patterned daily to see if this would make a difference in coordination or movement. During the year she has progressed in her ability to cope with extra activity and she now responds to her name intermittently. She now likes to roll about on the floor or the raised playpen, and will pursue other children trying to play with them. She is able to lift her head and even has been noted to raise up prone on her elbows, both flexed and extended. She has been on a feeding program to eliminate tongue thrust which has been improving.

In the fall she only had grasp reflex with the right hand; at the end of the period she was trying to reach with her right hand and had grasp reflex with the left.

Student 12. Birthdate: 11-17-71. Diagnosis: multiple anomalies, severe retardation.

The therapy program was oriented towards maximal stimulation and proper development. During the program she started to sit up and at times attempted to crawl. By

April she could stand next to objects placed and developed a four point creep on hands and knees. In July she was standing on her own and began to cruise around the bed or playpen on her feet.

Student 13. Birthdate: 5-19-64. Diagnosis: spastic cerebral palsy, congenital dislocated hip, seizures and esotropia.

During the period in the classroom she was working on the dressing frames and although has use only of her right hand she is able to work with the frames with some help. In language she has developed a reading skill so she can read about thirty flash cards. She can spell out letters on each of the cards and read the words. She has learned to write the numbers one to ten. She has learned to recognize and to rote count the teen numbers.

She is on a standing program and is making some progress. She was on a potty training program and has learned to indicate when she must go to the potty. She is usually now dry all through the night with a few mistakes during the day. She can now speak and ask for things properly and politely and answers questions with full sentences. She used to refer to herself as she or you, but has acquired the concept of I and me.

Student 14. Birthdate: 1-22-66. Diagnosis: congenital rubella.

This was this child's first year in the school and his biggest problem was to sit still. He was always restless. Therefore the first few months were spent training him to sit quietly and to hold objects. During the period he learned to place the cylinders in the right hole.

When he first came to the program, he was eating on a bottle only and moving on his back in a scooting fashion. After one week he was taken off the bottle, seated in a highchair to eat and he now sits up straight and eats without any fuss.

Therapy time was concentrated on trying to get him to roll on to his stomach, to sit up in a chair with little support, to socialize and to focus on a person or an object. Most of the work periods and practice times provided unsatisfactory results. However, after about five months in the therapy room, he was seen pulling himself near the other children and lying next to them as opposed to being alone.

Student 15. Birthdate: 4-23-69. Diagnosis: rigid athetosis and severe developmental retardation.

This child made little progress in school. She had difficulty lifting her hands to pick up an object, although is beginning gradually to grip an object if it is placed between her fingers.

In therapy they have been working on programs for sitting, and holding a creeping position on all fours. Small progress was made.

Third Party Evaluator's Comments:

The comments made about this project last year are applicable also this year. When considering this project one must bear in mind that the degree of handicapping conditions of the children is severe and profound. These are some of the most seriously impaired children in the state and thus, progress with them must be made in minute steps. Therefore as one reads the progress reports of the teacher and the therapist one cannot help consider the progress of these children as significant.

However, throughout the reports of both the therapist

and the teacher there are continual examples of children who were exhibiting behavior problems and inappropriate behavior which seriously inhibited their learning. There was no evidence by either the therapist or the teacher that any systematic approach to eliminating these behavior problems was adapted. It is recommended, therefore, that if this program continues in its present format that both the teacher and therapist receive some training and advice on how to manage inappropriate behaviors in learning situations so as to facilitate the learning of these handicapped children.

Title of Project: *Preschool Program for Children with Special Needs*

Location of Project: *Oliver P. Lent Elementary School
5105 S.E. 97th Avenue
Portland Public Schools, Area II
Portland, Oregon 97266*

Type and Number of Children Served: *21 preschool children, ages 3-5 (10 learning disabled, 3 educable mentally retarded, 6 emotionally disturbed, 2 other health impaired)*

Funding Allocated: *\$18,000*

Project Beginning Date: *August 31, 1972*

Project Ending Date: *June 1, 1973*

Background and Rationale:

The Lent Elementary School community is located in the southeast section of the Portland metropolitan area. A census study described the population as low socio-economic including a disproportionate transient segment, a large number of one parent families, and families with limited educational backgrounds, i.e., low median number of school years completed. In 1966, this community was classified as depressed and disadvantaged by the criteria established for Title I fund recipients. Lent School received Title I funds for that one year. Although the Title I funding was terminated, the educational and social service needs of the community remained acute. Among all of the needs evident in the community, the one that was conspicuous because of the absence of available service was that of early childhood education.

Prior to the initiation of this project, in September of 1971, there was no concerned effort to deal with it. If a case can be made for the merits of early childhood education for children who **do not** exhibit special needs, there should be greater validity in the argument for those children who do have special needs. It was in the context of this background and rationale that the proposal for the preschool for children with special needs was initiated.

Objectives and Evaluation Plan:

1. *Plan and implement individual programs for children with chronic impairments.*

Baseline data will be taken on each of the behaviors selected for remediation. Individual data will then be taken on a daily basis so that appropriate decisions for program change can be made. In addition, baseline will be taken at the conclusion of the program to determine whether maintenance of the skills have incurred.

2. *To develop and provide an educational program for the educable mentally retarded that provides appropriate activities and experiences for the mental age rather than the chronological age of the child.*

Attendance data will be taken on each child enrolled in this program.

3. *To plan and provide activities and experiences that will facilitate emotionally disturbed children, reducing non-appropriate effective expression, withdrawal, and autistic behavior, and have the children demonstrate acceptable interaction in social situations.*

Baseline data will be taken on each of the behaviors selected for remediation. Individual data will then be taken on a daily basis so that appropriate decisions for program change can be made. In addition, baseline will be taken at the conclusion of the program to determine whether maintenance of the skills have incurred.

4. *To accurately diagnose and provide for the learning disabled child's non-specific learning interference.*

Pre- and post program tests will be administered to each program participant. The test battery will include the Denver Developmental Test, CCD Developmental Test, Peabody Picture Vocabulary Test, Draw-A-Person Test, Boston Speech Sound Discrimination Test and the Stanford-Binet Intelligence Test.

5. *To include and involve teachers, administrators and other district personnel in the project.*

Attendance records and summarized information of the extent and type of participation achieved will be kept.

6. *To involve parents and community members in the program.*

Attendance records reflecting the frequency and type of participation achieved will be kept.

7. *To have the school utilized as a community center by parents and community members for recreation and learning.*

Records of the number of parents that use the school facility and the type of use will be kept.

Methodology:

At the beginning of each school year, the project director, Prescriptive Education staff, and the preschool staff solicit referrals from existing community agencies that might have knowledge of families with exceptional preschool children, i.e., County Health nurses, Oregon Medical School, welfare workers, etc. The principal of Lent School sends a letter home with each child enrolled in the school explaining the program and requesting that any interested parent with a preschool child who might qualify for the class contact the school. In this same letter parents are encouraged to disseminate information about the program to parents of non-school age children.

Each referral receives a telephone call from the psychological examiner. He takes this opportunity to introduce himself, explain the program, and answer parents' questions about the program. This year forty-one referrals were received.

If, after this phone contact, the parent still wishes to pursue the program for his or her child, the psychological examiner makes an appointment for a home visit. Thirty-five home visits were made this year. During the home visit the psychological examiner goes into greater detail and responds to any concerns the parents may have. The parents are encouraged to visit the classroom with their child before making any commitment. In the course of the home visit a developmental history of the child is compiled and the child is administered the CCD Developmental Scale. This information, along with the results of the battery of screening instruments to be administered later, the observations made by the preschool staff, and the child's interests form the basis upon which appropriate objectives are selected for the child.

Out of the thirty-five children referred by parents, the twelve with the greatest immediate needs were selected to comprise the initial preschool enrollment. This group was divided into two sections. Each section met five days a week. The morning section met from 9:00 a.m. to 11:30 a.m. and the afternoon section from 12:00 a.m. to 2:30 p.m.

The classroom is organized into learning centers. Each center is equipped with materials and equipment that foster specific skills, i.e., gross motor, fine motor, perceptual, conceptual, language, social, and self sufficiency. On the basis of all the available information about a child, the

teacher and aide choose appropriate objectives for each child. Generally, the child is allowed to select his own learning environment. While he is engaged in activities of his choice, the teacher or aide works with the child on the skills or behaviors selected for development or remediation. This procedure affords a great deal of flexibility within the classroom and enables the child to develop independence and to exercise decision making skills by choosing among alternatives. A single center or activity can become the medium for the development of many different skills.

Example:

In the center equipped with fine motor materials a child selecting a puzzle might pursue any of the following objectives.

1. The manipulation of the pieces to complete the puzzle. (fine motor)
2. Identification of colors. (perceptual)
3. Description of shapes. (language development)
4. Counting pieces. (number concepts)

The same task can be used by more than one child, each pursuing his individual objective with a secondary objective of developing acceptable social behavior.

The ratio of adults or student aides to children is usually about three to one with many occasions where a one-to-one relationship is maintained for special activities.

Children needing help with speech or language development were served individually by the speech clinician. Appropriate activities were also outlined by her for implementation by the teacher, aide, and/or parents.

Psychological examiners worked with children and parents in the classroom and were available for personal consultation.

The reading specialist and diagnostic teachers served as resource persons for the staff and parents. The reading specialist concerned herself with readiness materials and activities and the diagnostic teachers helped establish liaison with the kindergarten and primary teachers of the Lent School staff.

The Catch Environmental Education Program staff has hosted the preschool staff, children, and parents at their work-study site on Larch Mountain on two separate occasions. Appropriate educational and recreational activities were cooperatively planned and several activities were carried over into the classroom, i.e., weather, growing plants, vocabulary development.

The Focus Program personnel of Madison High School were involved in volunteer work with the preschool staff and children.

In late January the staff initiated a swimming program for the children and parents. One morning each week the children and their parents were transported to the Oregon Athletic Club for a swim session. For one hour each child

was worked with on a one-to-one basis in an environment conducive to pursuing individual objectives and developing trust relationships.

Field trips were viewed as opportunities to provide group experiences and serve as vehicles for concept development. At least one field trip was scheduled each week with the appropriate pre-planning and follow up activities being integral elements of each plan.

Results:

1. Plan and implement individual programs for children with chronic impairments.

Individual data were to be taken on a daily basis. The project has some difficulty doing this as is evidenced by the following quotation from their final report:

"For the past year the preschool staffs have experimented with various data collection forms and techniques. Collecting data is a problem that confronts the personnel in most programs. Collecting meaningful data adds another dimension that compounds the problem since the question of what is meaningful data is not always a point upon which agreement is easily reached. The degree to which the time involved, the effort expended, and the inhibiting aspects of collecting data can be justified to people who are interested in spending their time interacting with the children is a dilemma with which the personnel in

this program have wrestled. To collect meaningful data in an unobtrusive manner is a goal worthy of pursuit if it results in benefits to the learner. Besides additional time and effort, sustained, consistent data collection requires commitment to the system."

Various forms were experimented with but essentially were never implemented according to both visitors of the Third Party Evaluation Team who visited the project on January 18 and May 15.

The project did report, however, some attempts at daily data keeping in the swimming program. Of the seventeen children who experienced the swimming program ten, who initially exhibited a fear of water, overcame that fear by the end of the school year. The child with the most severe apprehension had reduced his anxiety considerably.

In addition, the project produced one sample of more frequent data gathering as evidenced by the following comments and Table I.

As an example of the kind of day by day data collection that was carried on, the student who was included in the program under unusual conditions was selected. This child is the one who was not administered the pre and posttest battery. Table I is a compilation of some of the objectives included in his individualized program, showing the date intervention was initiated and the date performance met the termination criteria.

Table 1

STUDENT 16

TASKS	DATE INITIATED	DATE EXHIBITED
Gross Motor Skills		
Climbs climbing frame independently	2-5-73	4-6-73
Slides down slide without assistance	4-16-73	5-4-73
Runs obstacle course	3-26-73	4-20-73
Turns somersault without assistance	4-9-73	5-25-73
Fine Motor Skills		
Builds towers with blocks	3-5-73	4-13-73
Models objects using clay	3-12-73	4-6-73
Pastes shapes and pictures on paper	4-2-73	4-20-73
Uses crayons to scribble	2-12-73	3-5-73
Holds primary pencil correctly	4-23-73	5-18-73
Uses paper punch correctly	3-5-73	3-30-73
Uses scissors correctly	4-2-73	4-27-73
Can link "pop" beads together	3-26-73	3-30-73
Can draw a man with 8 parts	5-21-73	5-25-73

Table 1 (continued)

TASKS	DATE INITIATED	DATE EXHIBITED
Communication Skills		
Communicates verbally	2-5-73	2-17-73
Comes when called by name	2-5-73	4-2-73
Answers when spoken to	2-5-73	4-13-73
Initiates requests	4-2-73	5-11-73
Expresses a preference	3-12-73	4-13-73
Describes what he sees	2-26-73	3-16-73
Can answer questions about an incident	5-21-73	4-6-73
Can relate an incident	5-21-73	4-13-73
Interpersonal Skills		
Will initiate physical contact with teacher	2-5-73	2-23-73
Will interact with other children	2-12-73	3-9-73
Will join a group activity	3-12-73	4-6-73
Will participate in a group activity	3-12-73	4-13-73
Will engage in cooperative play	These	4-23-73
Verbally asserts himself with others	behaviors	5-11-73
Exhibits sense of humor for first time	encouraged	5-25-73
Ceased withdrawing and fetal positioning when asked to try something new	and emerged	5-11-73
Is sought by peers as a friend	on these dates.	5-4-73
Self Sufficiency Skills		
Will ask to go to the bathroom	2-5-73	2-16-73
Will go independently to and from bathroom	2-23-73	5-4-73
Hangs up coat	2-5-73	2-23-73
Picks up own toys	2-16-73	3-9-73
Washes hands	3-12-73	5-11-73
Washes face	3-26-73	5-11-73
Goes to lunch independently	3-12-73	4-27-73
Uses broom properly to sweep	3-5-73	3-30-73
Showers and dries himself	4-16-73	5-25-73
Wipes table	4-2-73	4-20-73
Blows nose	3-5-73	3-30-73
Runs errands to cafeteria	5-7-73	5-25-73

2. *To develop and provide an educational program for the educable mentally retarded that provides appropriate activities and experiences for the mental age rather than the chronological age of the child.*

Attendance data was taken on each child. These data indicated that 21 children attended this class during the year on a regular basis. Some of the students did not attend the class during the entire academic year.

3. *To plan and provide activities and experiences that will facilitate emotionally disturbed children, reducing non-appropriate effective expression, withdrawal, and autistic behavior, and have the child demonstrate acceptable interaction in social situations.*

Once again, daily data were to be gathered. No evidence was submitted for the accomplishment of this objective.

4. *To accurately diagnose and provide for the learning disabled child's non-specific learning interference.*

The following instruments were used as general baseline information as well as pre and post program measurements.

The CCD Developmental Progress Scale was used as a screening instrument as well as for pre and post program measurement. It attempts to portray the functional developmental level of a child in a pictorial manner. Scoring a child's performance in the recommended manner results in a "profile" that enables the administrator to see at a glance the comparative levels of functioning in the areas of motor, communication-interpersonal, and self sufficiency skills. Examination of the scored instrument reveals, quickly and clearly, those skills below the general level of a child's development which for some reason have not emerged, and require special attention.

In order to condense a large number of "profiles" for the purpose of growth comparison, the following procedure was developed:

Each section of the test contains five series of developmental tasks. The tasks are assigned "developmental ages" on the basis of research evidence that indicates that the scale item typically emerges within the general age level

to which it is assigned. The criteria for selection of an item was that between fifty and seventy-five percent of children of that age level demonstrated the skill.

If one point is given for each month of developmental age, a child who demonstrates all series of the motor skill tasks up to developmental age three would score 180 points. (Three [years] x twelve [months] x five [series of motor skills tasks]). An average developmental age on any section of the test could be computed by dividing the total score by five and then dividing the result by twelve. Since those involved in helping children develop are interested in what specific skills a child possesses and those that would be appropriate for him to develop, the "profile" is a greater value than a numerical score. (See Table II for score conversion chart.)

Table II

**CCD Developmental Progress Scale
Conversation Chart**

Score	Developmental Age
30	6 months
60	1 year
90	1½ years
120	2 years
150	2½ years
180	3 years
210	3½ years
240	4 years
270	4½ years
300	5 years
330	5½ years
360	6 years

Table III shows the comparison of the pre and post test scores for the motor skills section of the test.

Table III

INSTRUMENT – CCD DEVELOPMENTAL PROGRESS SCALE

SCORING – DEVELOPMENTAL AGE

MOTOR SKILLS SECTION

<u>Student</u>	<u>Pre Program</u>		<u>Post Program</u>		<u>Comparison</u>
	<u>Test Date</u>	<u>Score</u>	<u>Test Date</u>	<u>Score</u>	
1	10-9-72	162	5-30-73	288	+ 126
2	10-9-72	228	5-31-73	276	+ 48
3	10-2-72	114	5-30-73	170	+ 56
4	10-20-72	120	5-30-73	162	+ 42
5	10-4-72	No valid response	5-30-73	240	----
6	10-11-72	120	5-30-73	168	+ 48
7	10-10-72	228	5-30-73	300	+ 72
8	10-10-72	228	III-Not available for testing		----
9	10-4-72	150	5-30-73	204	+ 54
10	10-10-72	192	5-30-73	204	+ 12
11	11-16-72	150	5-30-73	216	+ 66
12	Transferred to Marshall Center				
13	12-4-72	132	5-30-73	126	- 6
14	9-?-72	72	5-29-73	No valid response	
15	2-8-73	288	5-30-73	312	+ 24
16	No pretest		5-30-73	264	----
17	4-2-73	228	5-30-73	252	+ 24
18	No pretest		No posttest		----
19	10-4-72	84	Moved		----
20	12-4-72	198	Moved		----
21	10-11-72	84	Withdrawn by parents		

The table is self explanatory except for the following information. Student 14 tested so low and responses were so difficult to elicit during formal testing situations that formal testing beyond the pretest on the CCD and the Denver was abandoned. Student 18 was included in the program under unusual circumstances and as a result had

limited formal testing. Using the conversion table the average growth in the motor skills area for children administered the pre and post tests was 9.6 months.

Table IV shows the comparison scores for the communication-interpersonal skills section of the test. The average growth in this area was 7 months.

TABLE IV
INSTRUMENT – CCD DEVELOPMENTAL PROGRESS SCALE
SCORING – DEVELOPMENTAL AGE
COMMUNICATION – INTERPERSONAL SKILLS SECTION

<u>Student</u>	<u>Pre Program</u>		<u>Post Program</u>		<u>Comparison</u>
	<u>Test Date</u>	<u>Score</u>	<u>Test Date</u>	<u>Score</u>	
1	10-9-72	150	5-30-73	204	+ 54
2	10-9-72	204	5-31-73	228	+ 24
3	10-2-72	168	5-30-73	216	+ 48
4	10-20-72	156	5-30-73	168	+ 12
5	10-4-72	No valid response	5-30-73	216	----
6	10-11-72	156	5-30-73	192	+ 36
7	10-10-72	228	5-30-73	264	+ 36
8	10-10-72	216	Ill – not available for testing		----
9	10-4-72	120	5-30-73	180	+ 60
10	10-10-72	192	5-30-73	252	+ 60
11	11-16-72	192	5-30-73	168	- 24
12	Transferred to Marshall Center				
13	12-4-72	114	5-30-73	114	0
14	9-?-72	6	5-29-73	No valid response	
15	2-8-73	204	5-30-73	252	+ 48
16	No pretest		5-30-73	192	----

Table IV, continued

17	4-2-73	216	5-30-73	228	+ 12
18	No pretest		No posttest		
19	10-4-72	138	Moved		----
20	12-4-72	204	Moved		----
21	10-11-72	102	Withdrawn by parents		

Table V shows the comparison scores on the self sufficiency section. Because many of the tasks appearing in this section of the test are dependent upon the subjective judgment of a parent, the tasks were duplicated in the

classroom setting for verification. The examiner was interested in the parent's evaluation of their child's growth and recorded their evaluations for both pre and post measurement. The average growth recorded is 14 months.

Table V

INSTRUMENT – CCD DEVELOPMENTAL PROGRESS SCALE
SCORING – DEVELOPMENTAL AGE
SELF SUFFICIENCY SKILLS SECTION

Student	Pre Program		Post Program		Comparison
	Test Date	Score	Test Date	Score	
1	10-9-72	204	5-30-73	228	+ 84
2	10-9-72	252	5-31-73	252	0
3	10-2-72	126	5-30-73	No parent available	----
4	10-20-72	No parent available	5-30-73	252	----
5	10-4-72	204	5-30-73	Parent not available	----
6	10-11-72	204	5-30-73	216	+ 12
7	10-10-72	240	5-30-73	348	+ 108
8	10-10-72	324	ILL – Not available for testing	----	----
9	10-4-72	150	5-30-73	Parent not available	----
10	10-10-72	150	5-30-73	276	+ 126
11	11-16-72	192	5-30-73	312	+ 120
12	Transferred to Marshall Center				

Table V, continued

13	12-4-72	Parent not available	5-30-73	126	----
14	9-7-72	60	5-29-73	No valid response	----
15	2-8-73	300	5-30-73	312	+ 12
16	No pretest		5-30-73	No parent available	----
17	4-2-73	180	5-30-73	276	+ 96
18	No pretest		No posttest		
19	10-4-72	120	Moved		
20	12-4-72	300	Moved		
21	10-11-72	180	Withdrawn by parents		

Table VI shows a tabulation of the pre and posttest scores on the Denver Developmental Screening Test. The

average gain of the children indicated by this instrument was 11 months.

Table VI

INSTRUMENT – DENVER DEVELOPMENTAL SCREENING TEST
SCORING – DEVELOPMENTAL AGE (COMPOSITE SCORE)
SHOWN IN MONTHS

<u>Student</u>	<u>Pre Program</u>		<u>Post Program</u>		<u>Comparison</u>
	<u>Test Date</u>	<u>Score</u>	<u>Test Date</u>	<u>Score</u>	
1	10-10-72	44	5-31-73	53	+ 9 mo.
2	10-10-72	50	5-30-73	59	+ 9
3	10-11-72	46	5-29-73	52	+ 6
4	10-10-72	50	5-29-73	74	+ 24
5	10-10-72	46	5-30-73	56	+ 10
6	10-10-72	45	5-30-73	53	+ 8
7	10-10-72	52	5-29-73	61	+ 9
8	10-10-72	54	5-29-73	63	+ 9

Table VI, continued

9	10-10-72	42	5-29-73	51	+ 9
10	10-26-72	54	5-29-73	61	+ 7
11	12-4-72	39	5-30-73	58	+ 19
12	Transferred to Marshall Center				
13	12-4-72	36	5-29-73	51	+ 15
14	1-8-73	12	Not testable		
15	4-29-73	61	No post test because of short duration		
16	Entered under unusual circumstances		5-31-73	50	----
17	4-12-73	36	No posttest of short duration		
18	4-4-73	41	No posttest - short duration		
19	10-10-72	49	Moved		
20	12-4-72	58	Moved		
21	10-31-72	18	Withdrawn by parents		

Table VII is a tabulation of the pre and posttest scores on the Peabody Picture Vocabulary Test. Computation reveals an average increase of 9.92 points on the children's I.Q. scores.

TABLE VII
INSTRUMENT - PEABODY PICTURE VOCABULARY TEST
FORM A

SCORING - COMPARATIVE CHRONOLOGICAL AGE
AND MENTAL AGE WITH RESULTING I.Q.

Student	Test Date	Pretest			Posttest			Comparison	
		CA	MA	IQ	Test Date	CA	MA		IQ
1	10-10-72	45	29	65	5-30-73	52	35	69	+ 4
2	10-11-72	51	39	76	5-23-73	58	46	81	+ 5
3	10-10-72	45	29	67	5-23-73	52	38	75	+ 8
4	10-10-72	74	32	38	5-23-73	81	32	40	+ 2

Table VII, continued

5	10-10-72	45	41	90	5-23-73	52	47	92	+ 2
6	10-10-72	79	46	60	5-29-73	86	59	77	+ 17
7	10-11-72	53	34	66	5-29-73	60	59	98	+ 32
8	10-10-72	54	71	116	5-29-73	61	75	122	+ 6
9	10-11-72	44	32	82	5-29-73	51	55	101	+ 19
10	10-10-72	53	55	101	5-29-73	61	82	118	+ 17
11	1-18-73	55	42	83	5-23-73	59	42	74	- 9
12	Transferred to Marshall Center								
13	1-18-73	47	25	55	5-23-73	51	25	Less than 55	
14	Not testable				5-29-73	No valid responses			
15	No pretest administered				5-29-73	63	37	63	----
16	No pretest administered				5-30-73	75	40	57	----
17	4-19-73	70	56	83	5-29-73	71	71	99	+ 16
18	No pretest administered				No posttest administered				----
19	10-11-72	50	28	64	Moved				----
20	No pretest administered				Moved				----
21	No valid responses				Withdrawn by parents				----

Table VIII is a comparison of pre and post program scores on the Stanford-Binet Intelligence Scale. This

instrument shows an average increase in I.Q. scores of .84 points.

Table VIII

INSTRUMENT – STANFORD-BINET INTELLIGENCE SCALE

FORM L–M

SCORING – COMPARATIVE CHRONOLOGICAL AGE, MENTAL AGE,
(IN MONTHS) AND I.Q.

<u>Student</u>	<u>Pretest</u>			<u>Posttest</u>				
	<u>Test Date</u>	<u>CA</u>	<u>MA</u>	<u>IQ</u>	<u>Test Date</u>	<u>CA</u>	<u>MA</u>	<u>IQ</u>
1	11-1-72	46	43	92	5-30-73	52	55	105
2	11-1-72	51	51	99	6-1-73	58	56	96
3	11-1-72	45	40	88	5-28-73	81	42	48
4	11-1-72	75	39	47	5-28-73	81	42	48
5	11-1-72	45	49	107	5-30-73	52	57	109
6	11-14-72	79	49	58	5-28-73	86	52	57
7	11-1-72	54	49	90	5-28-73	60	54	89
8	11-1-72	55	58	105	5-28-73	61	63	103
9	11-1-72	45	41	90	5-28-73	51	51	99
10	11-1-72	54	54	99	5-28-73	61	58	94
11	12-4-72	53	47	88	5-30-73	59	53	89
12	Transferred to Marshall Center							
13	12-15-72	46	29	64	5-28-73	51	31	59
14	Not testable							
15	Not administered							
16	No pretest – entered program under unusual circumstances				5-30-73	75	61	79
17	4-11-73	70	57	78	5-28-73	71	61	85
18	No pre- or posttest – short duration							
19	11-1-72	51	33	63	Moved			
20	12-4-72	55	54	97	Moved			
21	11-31-72	63	Unable to achieve any reaction					

Table IX shows the comparison of the pre and posttest scores on the Washington Speech Sound Discrimination Test. The speech clinician responsible for the

administration of this instrument has reevaluated the information derived from its use and has recommended it be replaced.

Table IX
INSTRUMENT – WASHINGTON SPEECH SOUND DISCRIMINATION TEST
SCORING – DISCRIMINATION AGE

<u>Student</u>	<u>Pretest</u>		<u>Posttest</u>	
	<u>Test Date</u>	<u>Discrimination Test</u>	<u>Test Date</u>	<u>Discrimination Test</u>
1	10-10-72	Below 3.5	5-30-73	4.5
2	10-10-72	Below 3.5	5-30-73	Between 4.0–4.5
3	10-12-72	Not valid	5-30-73	4.5
4	10-11-72	Below 3.5	5-30-73	Below 3.5
5	10-11-72	Below 3.5	5-30-73	4.5
6	12-21-72	Below 3.5	5-30-73	Below 3.5
7	10-10-72	4.5	5-30-73	4.5
8	10-10-72	4.5	5-31-73	4.5
9	10-10-72	Not valid	5-31-73	Not valid
10	10-11-72	Below 3.5	5-30-73	3.5
11	12-8-72	Below 3.5	5-31-73	4.5
12	Transferred to Marshall Center			
13	12-8-72	Not valid	5-30-73	Not valid
14	No pretest		No posttest	
15	4-19-73	Above Kgtn	5-31-73	4.5
16	No pretest		5-30-73	3.5
17	4-12-73	4.0	5-30-73	4.0
18	4-12-73	Above Kgtn	5-31-73	Above Kgtn
19	10-11-72	No valid response	Moved	

Table IX, continued

20	No pretest	Moved
21	No valid response	Withdrawn by parents

5. *To include and involve teachers, administrators, and other district personnel in the project.*

In spite of the increased demand for their services by the fifteen elementary and two high schools that they serve, the members of the South Prescriptive Education Program met the commitments that they made in terms of in-kind services to the preschool program.

William Thornton, director of South Prescriptive Education, devoted the necessary time to attend to the fiscal, staff, and coordinating aspects of the project.

Ray Coffeen, psychological examiner, received and processed every referral, made home visits, compiled developmental histories, administered the CCD Developmental Scale, and served as a resource person for the staff and parents.

William Wiseman, school psychologist, administered the Stanford-Binet, conferred with parents, worked with children and parents and served as a staff resource.

Robert Thurman, psychological examiner, administered the Denver Developmental Test and served as a resource.

Helen Scallon, reading specialist, administered the Peabody Picture Vocabulary Test, and worked with the preschool staff in designing activities and suggesting materials.

Sue Honson, speech clinician, administered the Washington Speech Sound Discrimination Test, worked with individual children, and served as a resource person for the staff and parents.

Ruth Arthur, social worker, served as the liaison person between the preschool parents and children who needed services and the community agencies that provided those services. She conferred with parents and was a staff resource.

Cal Norman, principal of Lent School, actively supported the program by making his resources available. School facilities were at the disposal of the parents for meetings and social functions. He took a leadership role in encouraging and facilitating interaction between the preschool and Lent School staffs.

Ester Chastain, Lent kindergarten teacher, regularly visited the preschool room and engaged in cooperative planning with the staff. From time to time preschool children had experiences in the kindergarten room and

kindergarten children took part in activities in the preschool room. One preschool child who was of kindergarten age spent a considerable amount of time in the kindergarten room and a kindergarten child who needed additional time working on developmental tasks was regularly scheduled in the preschool.

Shirley Zurcher, sixth grade teacher, organized her children into teams of four to assist as student aides in the preschool program. One team would accompany the class during the scheduled swim sessions. By rotating the teams all members of her class shared the experience.

Patti Burke's sixth grade class put on plays and puppet shows and read to the children on a one-to-one basis.

Richard Falaschetti, sixth grade teacher, supplied student helpers to assist on field trips.

Rosells Palmer, librarian, created a receptive climate in the library and provided appropriate experiences for the preschool children.

The following Lent School staff members also made significant contributions to the program by acting as resource people, through class activities, or the regular scheduling of student aides in the preschool.

Patricia Walhood, eighth grade teacher.

Billie Gates, fifth grade teacher.

Gayle Montei, teachers' aide.

Tim Ash, director of the Catch Environmental Education Project, provided planned experiences for the children and parents at the work study site on Larch Mountain.

Bill Olsen, director of the Madison High School Focus Program, scheduled student volunteers in the program.

Bill Clawson, special achievement specialist for Area II, was a regular visitor to the project.

Lucile Brunskill, South Area administrator, has attended staff and parent meetings and has been a strong supporter of the program.

6. *To involve parents and community member in the program.*

Fourteen parents representing thirteen families (out of a possible twenty-one) became involved in the program. This is approximately 62 percent. For most of the parents it was an average of once a week with the greatest number on "swim" days.

The nature of the involvement was primarily supportive, i.e., assisting on field trips, bringing snacks and items for use by the children, or making things for the children.

With the weekly swim sessions and the weekly field trips, the parents were not eager to make commitments toward evening meetings. There was a marked increase in parent involvement since January of this year.

Parents did work with children in the classroom but not to the extent desired by the staff.

The new staff had hoped to get the parents involved in developing skills of observation, data collection, and teaching techniques. There just was not enough time this year for them to implement these plans. They are interested in pursuing them in the future.

The new staff held a combination get acquainted dinner and planning meeting on January 12, 1973. Sixteen parents attended which, at that time, represented 94 percent of the families.

7. To have the school utilized as a community center by parents and community members for recreation and learning.

Mr. Cal Norman, principal of Lent School, has made every effort to establish his school as a community center. He has made the facility readily available for any educational or recreational program in which parents have shown an interest.

The preschool parents have used the building for their morning coffees, planning meetings, and evening meetings.

The school library and gym are available to the community after school hours.

The weekly field trips and swim sessions have, to some extent, served the purpose of after school activities.

Third Party Evaluator's Comments:

This project is in its second year of Title VI funding and is closely aligned to a national model of Early Childhood Learning for the Handicapped Project, funded by the Bureau for the Education of the Handicapped. Thus the project director and his staff come to this project with a great deal of experience.

Since the project is large and encompasses many objectives, it probably is well to discuss these objectives individually. Objective 1 calls for the planning and implementation of individual programs for children who have chronic impairments. It was envisioned when the objective was planned that baseline data would be taken on each of these children and daily data, or at least frequent data, maintained to determine the progress of the children and thus to modify the educational program for the children as needed. The project staff had a great deal of difficulty with this objective. They were unable to develop a system of frequent data keeping that would allow them to track most programs on a frequent basis. There is no evidence that baseline data were taken on all children; visits

to the project by third party evaluators were unable to uncover that information. One instance of evidence was submitted by the project indicating that some records were kept on a daily basis as to the progress of children.

Objective 3 focused on children who were emotionally disturbed or who were exhibiting a high rate of inappropriate behaviors. It is generally accepted fact that for these types of children the specific behaviors must be pinpointed and data maintained as to whether or not they are remediated. There is no report from the project as to whether or not such children were in the program, what their behaviors were, and if a program was initiated for them, what that program was and what the results were. It is interesting to note, however, that on the title page of the project report six emotionally disturbed children are indicated as being in the population of the project. No evidence as to progress with these children's behavioral aberrations was submitted.

Objective 4 deals with pre and posttest batteries. The initial test batteries to be administered were the Denver Developmental Test, the CCD Developmental Test, Peabody Picture Vocabulary Test, the Draw-A-Person Test, Speech Sound Discrimination Test and the Stanford-Binet Intelligence Test. All of these were administered, and data are reported by the project for these, with the exception of the Draw-A-Person Test. The third party evaluation team was unable to find any evidence that this test was administered what the results of it were.

Objective 5 was adequately reported and indicated a high involvement of teachers, administrators and district personnel in the project.

Objective 6, the involvement of parents in the program, indicates that parents were participating in the program to a marked extent and that the staff made a major effort to involve the parents and did so with reasonable success.

Objective 7 was to have the school utilized as a community center by parents and community members for recreational learning. Records of the number of parents that use the school facilities and the type of use were to be kept. The records submitted did not include such numbers, although there is certainly an anecdotal report that the school was utilized as a community center by the parents and community members.

It should be noted, before summarizing the above results, that the project experienced some difficulties during the past year by the replacement of staff in the early part of the school year. The new staff could not assume their duties until January and the project indicates that much of their difficulties were related to that change in staff in mid-year. It certainly must be conceded that any project that effects a mid-year staff change will have difficulties. However, the type of difficulties experienced with this project - the inability to gather data and failure to

submit data as agreed upon indicates more difficulties than just a mid-year staff change.

There can be no doubt that the results achieved by Objective 4 indicate that progress was made with the children in this program. The program is not faulted for lack of progress with children, but certainly there are areas where progress is not indicated, or has not been reported. The major weakness is in the failure to report information about the six emotionally disturbed children and progress made with their inappropriate behaviors. We are willing to concede the fact that the project staff had difficulty with this requirement because of the changing of the project staff in the middle of the school year. Yet, the project administrators and supervisors are not inexperienced and

certainly should have been able to advise and direct the new project staff in the requirements for Title VI evaluation.

One of the continuing hallmarks of the excellence of Title VI programs within the state of Oregon has been that as individual programs go into their second or third year of funding in a Title VI status - and these instances of programs having that opportunity are relatively infrequent - these programs have generally manifested a decided improvement during the second year by presenting a much more sophisticated evaluation model and therefore, have been able to document progress of individual children to a greater extent. The third party evaluation team can not see such progress in this project.

Title of Project: *Classroom Services to Emotionally Disturbed and Learning Disabled*

Location of Project: *Area I, Portland Public Schools, Portland, Oregon*

Type and Number of Children Served: *63 emotionally disturbed and/or learning disabled*

Funding Allocated: *\$16,000*

Project Beginning Date: *July 1, 1972*

Project Ending Date: *June 30, 1973*

Background and Rationale:

There was not planned program in Portland's Administrative Area I for helping the emotionally disturbed or learning disabled child in the regular classroom. A survey of principals indicated that there were approximately 170 such students in the nine schools to be served by this proposed program, from a total enrollment of 2,800.

A program was needed which would help to eliminate the gap by providing explicit help to the classroom teacher who has one or more learning disabled or emotionally disturbed students. In addition, it would provide help for the teacher who needs to change her own behavior in order to be more effective in teaching such students. It was felt that this program would provide a less expensive and more positive alternative to removing the student from the school setting. Also, some children would be served early enough in their development that their problems could be dealt with before they become too serious.

Objectives and Evaluation Plan:

1. *Emotionally disturbed or learning disabled children will exhibit behavior consistent with reasonable classroom expectations.*

At the end of the six months ask the teacher if she would now keep the child in the classroom rather than placing him outside. The Hill-Walker behavioral checklist will be administered on a pre, interim, and posttest basis. A prescriptive program will be written for each child which will include a behavioral objective, measurement strategy, and a plan for treatment.

2. *Teachers will exhibit in their interaction with students a significant increase in contingent responses to student behavior. Substitutes may be included in exhibiting increases in contingent responses to student behavior, although this is not mandatory.*

Two observers will count the positive and negative interactions between teachers and children in the study. This will be done in the beginning and at the end of the

study. (Two observers need not be present at every observation, but periodic reliability checks will be made and that data will be submitted at the end of the project year.)

3. *Teachers will demonstrate acquisition of specific behavior modification skills by being able to write a complete behavioral prescription including definition of the behavior, development of measurement strategy, designing of a behavior modification program using cues and consequences.*

Each teacher must submit a plan which she has developed on the student to the project director.

Methodology:

One teacher, called the Special Project Coordinator, was hired. The qualifications for this position were as follows: Minimum of 3 years of teaching experience, training in systematic and objective analysis of instruction, familiarity with several approaches to pupil management, knowledge of child growth and development, experience in consultation and supervision, and experience in designing and teaching inservice or college classes.

The job responsibilities were designated: Coordination of the Area I Title VI project to provide services to emotionally disturbed and learning disabled students in nine elementary schools, work with principals and teachers in developing pupil management programs, collect data about student behavior in classrooms for use in consultation with teachers to design programs for behavior improvement, design and conduct inservice classes for teachers.

Three Special Education graduate students from Portland State University helped the coordinator carry out her responsibilities. Each spent a portion of one term with the project. These students had had training in precision teaching, behavior modification, and methods for working with emotionally disturbed and learning disabled children.

Instruction was done directly with the teachers: they then planned programs for teaching their students the new behaviors which the student and the teacher had agreed upon. Most of the instruction was carried on through eight inservice classes held at the schools in which the faculties taught. However, some instruction was carried out through individual conferences with teachers. Teachers learned to pinpoint behaviors specifically, take baseline data, and to apply principles of reinforcement and extinction in systematic ways.

In addition, about one-third of the time was spent on developing and improving the communication skills of the teacher, especially how to respond in a crisis. Role playing, simulation games, reading and discussion of current literature on behavior management were also included. All instruction revolved around the child the teacher was attempting to help. Each week she brought data to share with others on the student's progress, and the class offered suggestions for further strategies.

Results:

1. *Emotionally disturbed or learning disabled children will exhibit behavior consistent with reasonable classroom expectations.*

Of the forty-eight children actually served, only five had teachers who would not choose to keep them in the regular classroom at the conclusion of the program. In three of these five cases, six months had not elapsed between initiation of service and the close of the school year. Perhaps, had there been more time for the child to show improvement, the teacher might have been willing to continue.

The Hill-Walker Problem Behavior Identification Checklist data was collected regarding twenty-seven of the forty-eight children served. Reasons for not obtaining the data on the other twenty-one children ranged from teachers simply never turning it in (even with repeated requests), teachers initiating and carrying out programs for children without informing the project coordinator until too late to get the pretest Hill-Walker for baseline data, resignation and transfer of teachers, expulsion of students before the conclusion of the program,¹ to forgetfulness of the coordinator to give the teacher the form.

- c. Figure 1 gives the mean raw pre- and posttest scores of children who were served.² The means seem to indicate that these children were not "problem students." However, data on five children with serious problem behaviors (See Figure 1 and Table 1)

¹ In both cases of student expulsion, the cause was out-of-classroom behavior when the child was not under the teacher's supervision.

² Interim tests were not feasible as not enough time elapsed.

Table 1

**Raw Scores – Pre- and Posttest for Children Who Were Served
Walker Problem Behavior Identification Checklist**

Child No.	1		2		3		4		5		Total	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
3	7	8	3	2	11	10	3	0	1	1	25	21
4	9	0	10	0	9	4	0	0	0	0	28	4
5	5	6	0	0	10	5	0	0	2	0	17	11
6	21	12	13	3	10	3	2	0	6	6	52	24
7	13	12	2	2	10	9	0	3	4	7	29	33
8	1	2	10	7	7	6	7	4	6	3	30	22
9	1	0	0	1	4	2	1	1	0	0	6	4
11	22	26	0	0	11	10	7	0	0	0	40	36
12	19	8	6	0	11	11	15	14	6	6	57	39
13	16	15	2	2	11	10	8	0	5	5	42	32
14	11	16	7	14	7	9	4	10	7	9	36	58
16	7	16	0	1	12	12	4	4	0	3	23	36
24	4	6	2	5	4	5	0	6	0	0	10	22
27	22	24	4	4	12	11	13	9	8	8	59	56
28	11	21	2	0	12	12	6	3	0	0	31	36
29	26	24	2	2	11	13	21	21	14	5	74	65
31	1	0	0	0	6	4	3	0	0	1	10	5
32	13	11	0	8	12	11	3	6	6	6	34	42
35	19	19	0	2	12	10	11	4	1	1	43	36
36	1	0	1	1	6	5	1	0	2	2	11	8
38	24	8	3	0	12	9	7	0	9	5	55	22
40	7	9	0	0	9	8	0	0	6	8	22	25
43	25	20	0	0	11	11	18	6	11	8	65	45
53	23	25	6	6	13	9	14	9	8	2	64	51
54	25	16	9	6	12	7	12	6	10	1	68	36
58	19	13	2	2	11	10	3	3	6	7	41	35
60	18	20	0	0	10	10	0	0	6	0	34	30

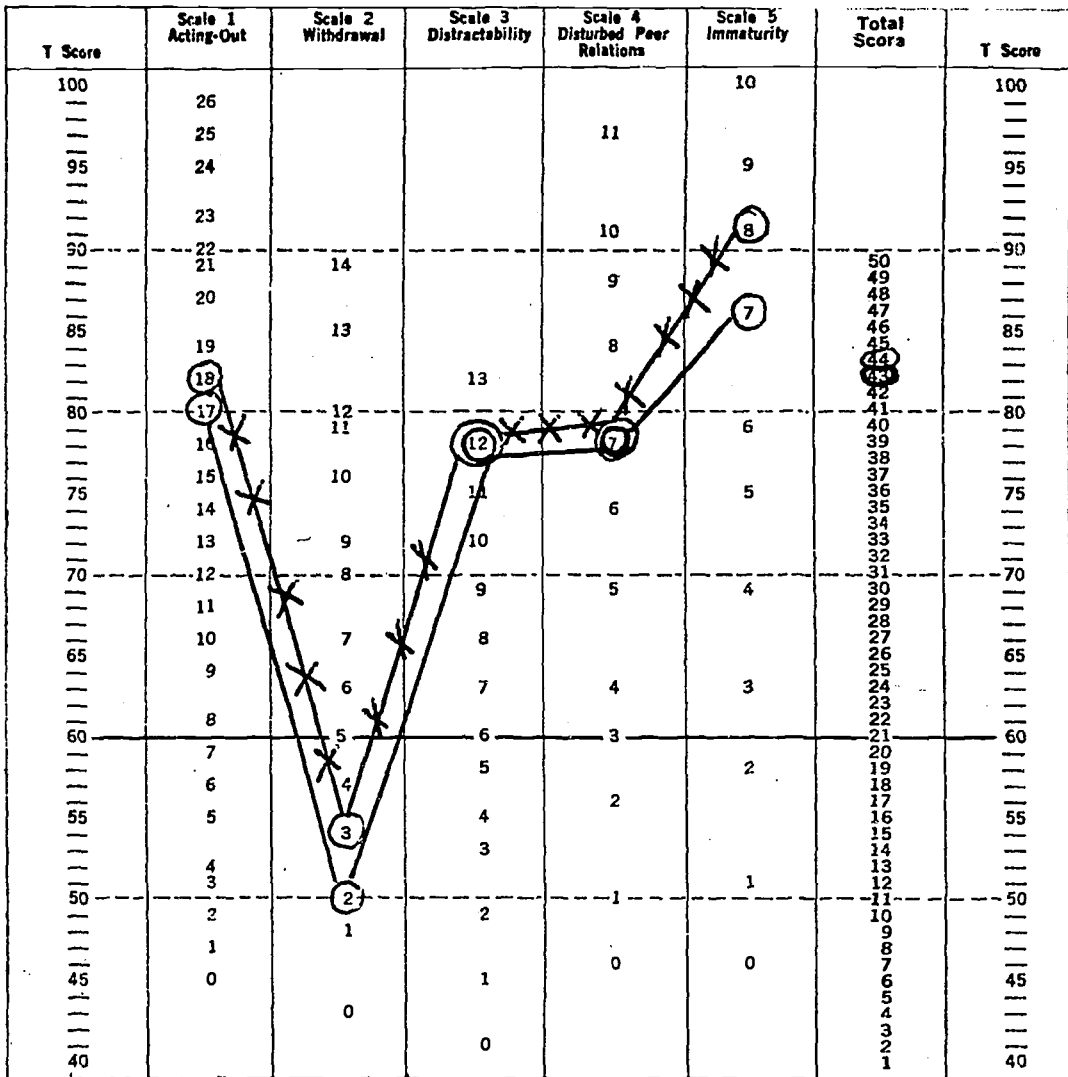
The selection was quite general. A teacher could choose any child whom she felt had problems interfering with his learning. The coordinator was unwilling to refuse a child the teacher's help just because the child did not score high enough on the Hill-Walker. It was also felt that the teacher would be more willing in the future to tackle more severe problems if she had previously experienced success with a

child who had less severe problems.

The mean raw scores show an improvement in distractibility, disturbed peer relations, and in immaturity. In contrast, most of the children who were not served showed no improvement and a tendency toward increased problem behaviors (Figure 2, Table 2).

Mean Raw Scores – All Students Who Were Tested and Not Served

Profile Analysis Chart (PAC)



— Pretest
 - - - - - Posttest

Figure 2

Table 2
Children Who Were Not Served

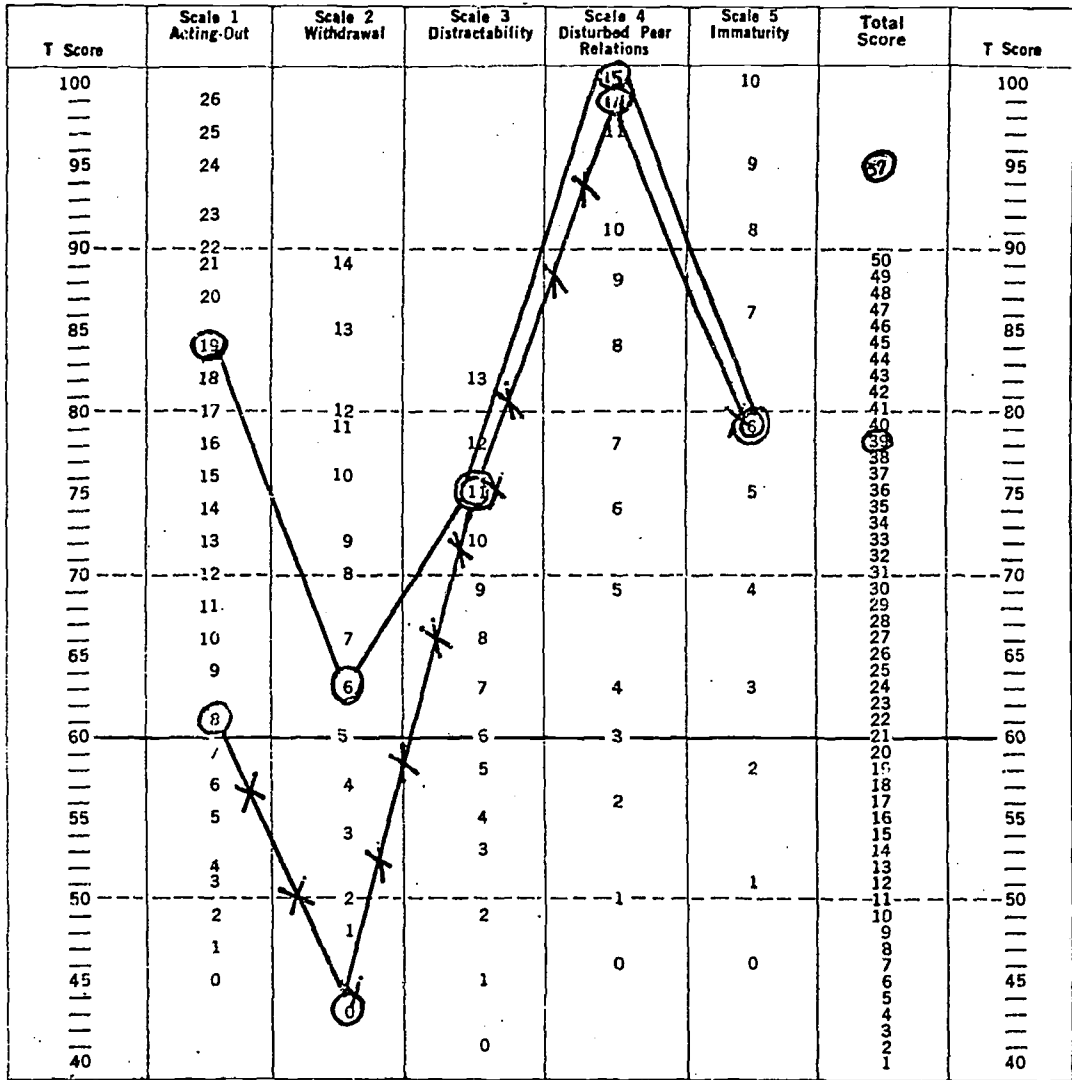
Child No.	1		2		3		4		5		Total	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	19	20	4	0	11	12	1	4	5	5	40	41
15	14	24	0	0	11	12	3	12	13	11	41	59
23	17	19	0	0	14	12	7	3	4	3	42	37
33	8	14	6	2	12	11	9	0	12	7	47	34
37	26	14	0	0	11	11	1	1	7	0	45	26
42	25	26	2	14	14	13	6	19	15	11	62	73
46	12	12	0	0	10	10	5	9	3	3	30	34

The coordinator felt that the program would have far greater impact if teachers could be made aware of the effects of their own efforts in as many ways as possible. They had their own charts on the specific behaviors they were helping the children with, but it was believed that more information was needed. Hence, the Hill-Walker was used with a frequency scale such that the teacher could

code how often the behavior occurred. Analysis was done at this level, and the graph allows the teacher to see the decrease in the frequency of the behavior even though it has not been completely eliminated.

An example is shown in the case of Child 12. The teacher can see precisely where and the degree to which the behaviors have changed. (See Figures 3 and 4, and Table 3).

Profile Analysis Chart (PAC)

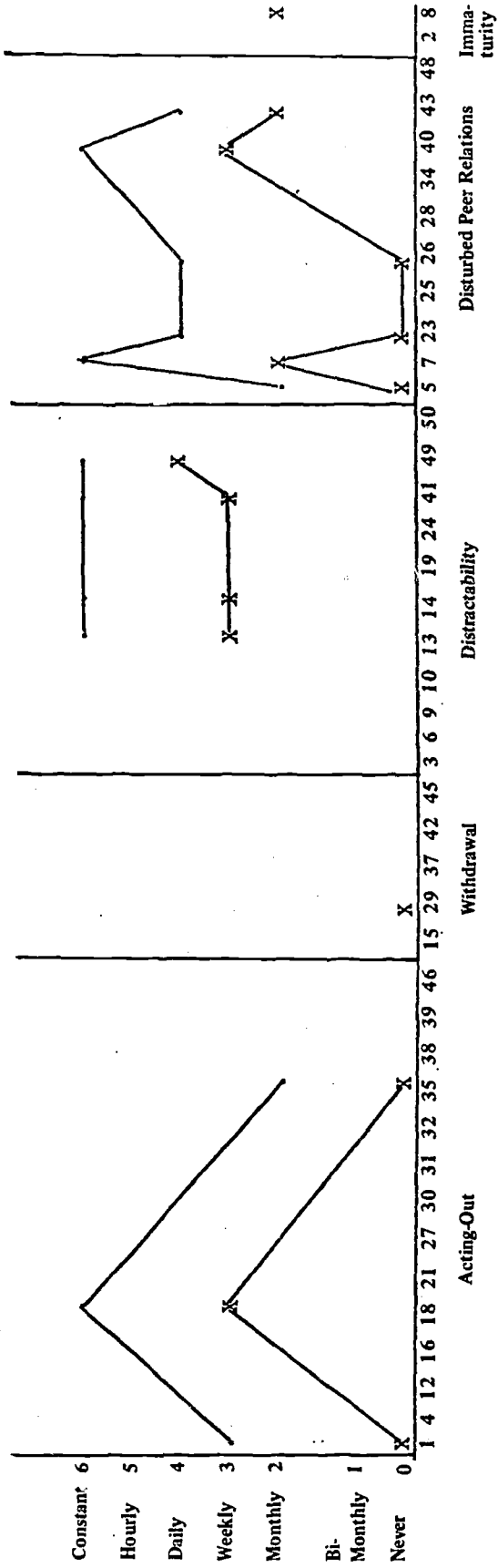


----- Pretest
 * * * * * Posttest

Child 12
 Teacher 12

Figure 3

Behaviors Which Changed Substantially (2 or more on Frequency Scale)



Behavior No. - Walker Problem Behavior Identification Checklist

Child 12

Teacher 12

pretest 1/25 —
posttest 5/3 ****

Figure 4

Table 3

Substantial Behavior Changes

	1/25	5/3
1. Complains about others' unfairness, etc.	Weekly	Never
5. Comments that no one understands him.	Monthly	Never
7. Will destroy or take apart something he has made rather than display it.	Constant	Monthly
8. Other children act as if he were taboo.	Daily	Monthly
13. Performs below demonstrated ability level.	Constant	Weekly
14. Disturbs other children, fighting, teasing, etc.	Constant	Weekly

A prescriptive program was written for every child served. Several formats were tried, and the coordinator allowed the teachers their choice so long as the plan met the criteria of including a behavioral objective, measurement strategy, and treatment plan.

The data sheets indicate that forty-two of the forty-eight children who were served showed success or partial success in attaining the specific behavior goals they were working on. A summary of the data for Objective 1 can be found in Table 4.

Table 4

- Referred – Teacher initiated contact with consultant for help with the child.
- Served – Teacher took specific, planned action to solve the problem
- Improvement – A decrease in total raw score on the Hill-Walker

No. of children referred	No. of children served	% of referrals who were served	% of children served who showed success or partial success in attaining specific behavior goals	% of children served showed teachers would be willing to keep them	% of children served who showed improvement on Hill-Walker	% of children referred but not served who showed improvement on Hill-Walker
63	48	48 = 76% 63	42 = 86% 48	43 = 89% 48	19 = 70% 27	2 = 28% 7

The Hill-Walker data is present for only 34 children. Of these 34; 27 were served and 7 were not served.

2. Teachers will exhibit in their interaction with students a significant increase in contingent responses to student behavior. Substitutes may be included in exhibiting increases in contingent responses to student behavior, although this is not mandatory.

The project coordinator was unable to collect data on all teachers in the program. Fifteen were selected on the basis of convenience in getting into their classrooms (location, schedule, etc.).

The Teaching Research Observational Form was not used; instead a simpler one was employed. Observer recorded the number of positive comments and the number of negative comments during the observation period.

“Positive” was any teacher comment that indicated the teacher’s satisfaction and/or pleasure with the student and/or his behavior.

“Negative” was any teacher comment that showed the teacher’s dissatisfaction and/or displeasure with the student and/or his behavior.

A summary of the data follows:

- Teachers who—
 - increased both positive and negative contingent responses 1
 - increased positive and decreased negative contingent responses 2

- increased positive and made no change in negative 2
- increased negative and decreased positive 0
- increased negative and made no change in positive 1
- decreased both positive and negative comments 6
- decreased positive and no change in negative 2

The teachers who increased their contingent responses did do it by becoming more positive. (Teacher 10 is the exception. She was considerably more negative.)

However, the majority of the teachers observed decreased both + and -. This data may indicate both a success and a failure. The success is that things were going well enough that the teachers felt no need to say anything. Thus, major behavior problems were not occurring. The failure may appear to be that the teachers weren’t immediately reinforcing this acceptable behavior. Perhaps, these classes of children were at the stage where intermittent reinforcement was sufficient. For some children the acceptable behavior may even have been self-reinforcing.

The coordinator and the graduate students did several reliability checks with each other but did not record this

data. They were consistently in accordance to the extent that they could use their data for program planning - evaluation.

3. *Teachers will demonstrate acquisition of specific behavior modification skills by being able to write a complete behavioral prescription including definition of behavior, development of measurement strategy, designing of a behavior modification program using cues and consequences.*

Table 5 shows the number of teachers served and the number of those teachers who prepared programs.

Teachers trained in inservice implemented programs more often than those trained thru individual conferences. Of the inservice teachers, 13% failed to follow through. Twenty-nine percent of the conference teachers neglected to follow through with the agreed upon actions.

Teachers had positive feelings about the inservice classes. One faculty requested a second class for the subsequent team. A summary of teachers' opinions is found in Table 6.

Table 5

Total Teachers Served = 66		Teachers Who Prepared Programs = 42*	
Inservice	43	Preparation only	4
Discussion Group	6	Preparation and Implementation	38
Conferences	17		

* Some teachers served more than one child.

Table 6

AREA INSERVICE EVALUATION SUMMARY

CLASS TITLE: Preventing and Managing Deviant Pupil Behavior
LOCATION: West Sylvan, Astor, Ainsworth, Ockley Green Schools - Area I
TERM: Fall, Winter, Spring, 1972-73 (8 classes)
INSTRUCTOR: Anne Stockman

1. Were the course objectives clear to you?

	1	2	3	4	5
Not Clear			1	14	23
					Very Clear

Comments: None

Table 6 continued.

2. To what extent were the objectives of the course met?

				15	2	20
1	2	3	4			5
Not at all						Very adequately

Comments:

I was unable to effectively use modification as I wanted to use it this year.

I may be high on this evaluation but this is the way I feel about this class. The manner, the rapport, the results I received were great.

Would enjoy a continuation of this class.

3. To what extent were the instructional strategies appropriate to the content of the course?

19	1	7	1	3	1
1	2	3	4		5
Very Appropriate					Inappropriate

Comments:

As a new teacher, helped me find more ways of handling behavior problems.

Many good ideas presented that helped me in my classroom. Strategies were either applicable or could be adapted.

4. To what extent have you been successful in applying the concepts and understandings gained in this course in your professional role?

	2	9	1	14	14
1	2	3	4		5
Not at All					Highly

Comments:

Gave me ideas for getting books returned on time. Fewer overdue's now.

Has helped me help children get along together. Have had success with one student so feel course was worthwhile.

In some cases. Tried many techniques but found they lasted only a few days.

This has really helped me a great deal in handling the more difficult situations. I can really tell a difference in the way I feel when I am facing a crisis – more confident and more effective.

5. In your judgment should Area I continue to offer this course?

Yes 33 Yes, with modification 3 No

Explain your response:

I learned too much not to recommend it for next year. Would like to include parents in the class.

Anne Stockman is an excellent teacher in this field.

Table 6 continued.

Anne Stockman is well-prepared and concise in her teaching techniques.

It is most helpful.

My attitude has changed. I'm more patient.

More time for application, case studies.

Interesting, worthwhile, methods can actually be applied.

Would recommend to classroom teachers.

Course valuable to teachers K-6; not so useful in 7-8.

More teachers should be able to take advantage of the course.

Most relevant class I've ever taken.

Good techniques.

I used variations of the strategies suggested. I plan to use many strategies at the beginning of the year next year.

Practical. Faces problems and modifies pupils' behavior if you can take the time. With 35 pupils, to handle each one as you should sometimes creates other problems. Need more practical courses like this in Portland.

Behavior Modification is a very useful tool, but I find it difficult to apply in the classroom. I wish I could get someone to act as an advisor in the classroom to help me see what I do wrong and how I could improve.

Many concepts worked. Many did not.

I was able to get positive results utilizing the strategies.

I had a positive feeling from this course because many strategies did work.

The concepts of the course are applicable in working with youngsters.

I feel many teachers could gain information relative to strategies in dealing with youngsters.

- a. new teachers
- b. experienced teachers
- c. concerned teachers

I felt this was a valuable course mainly because the instructor had a great amount of expertise, handled the class in an interesting informal way, and was concerned how we were developing our projects and how she could help. I had a good feeling taking the class and felt I learned some new techniques as well as reinforcement of techniques already known and being developed. Having Mrs. Stockman at the school during the week was most beneficial in order to ask quick questions, have her come into the classroom, and to hear positive reinforcement. I liked some of the good common sense freeing responses, reinforcers and general ideas. There was excellent interpersonal relations within the members of the class, and I would like to see a follow-up class with the same instructor.

Third Party Evaluator's Comments:

The individual data to support the analysis of this report was presented to the Third Party Evaluator. It was simply too voluminous to present in this report. Significant to the report is the fact that many teachers found through the inservice training that by simply changing their classroom management techniques, i.e., saying more positive statements, ignoring some behaviors and "catching a child being good", etc., many of their behavior problems disappeared.

Documentation of many behavior changes were not possible as teachers did not collect baseline data. Although it would have been more desirable to do so (the third party evaluators are not being overly critical), the fact that the teachers did document some changes is significant enough to convince the Third Party Evaluators of the success of this program.

Experience has shown that not all teachers are willing to examine their effect on a child's behavior. The project staff are to be complimented on attempting to continue to work with those who were interested in self-examination with the intent of improving their skills in reducing behavior problems.

It is suggested that during the next year of funding the documentation of the effect of teacher instruction be more closely adhered to, and that the Title VI staff explore new ways to encourage the active participation of additional teachers as well as to maintain the support of teachers who supported this year's efforts.

In summary, the project attempted to deal with a large number of children as well as classroom teachers. The initial efforts can be termed successful and with some modifications in this year's strategies they should have the foundations of being a replicable model.

Title of Project: *Itinerant Language/Learning Disorders*

Location of Project: *Portland Public Schools, District No. 1
Speech and Hearing Services
Child Care Center*

Type and Number of Children Served: *36 primary age children who evidenced language and/or learning disorders.*

Funding Allocated: *\$15,000*

Project Beginning Date: *July 1, 1972*

Project Ending Date: *June 30, 1973*

Background and Rationale:

During the school year of 1971-72, sixty-six children were diagnosed as severe language disordered and were enrolled in the Portland Public School Language Disorders Program. However, on March 1, 1972, thirty students under nine years of age appeared on the waiting list for Language Disorders classes. These students displayed extreme learning difficulties in the academic areas of reading, spelling and mathematics and perceptual, behavioral and motor coordination problems. Because of insufficient training and time, these children's educational needs were not being met in the classroom or by special educational personnel. There were insufficient openings for them in the Language Disorders Classroom Program as it was projected that only eight of the then currently enrolled students would be dismissed at the termination of the 1971-72 school year.

A proposal for an itinerant language and learning disorders program was submitted to eliminate the problem of what to do with the children for whom there was no service. This project was approved and an itinerant teacher and a half-time aide were employed to provide specialized training for these children. The itinerant teachers utilized techniques and procedures which are known to alleviate the extreme learning, perceptual, and motor coordination problems demonstrated by those students diagnosed as extreme language and learning disordered. Each child in the program was seen five days a week for approximately forty-five minutes. Methods, and materials were exchanged with the classroom teacher and the children received individualized academic programs within the regular classroom structure.

Objectives and Evaluation Plan:

1. *To have each child perform at grade level with mental age being considered in the academic areas of reading, spelling, writing and arithmetic.*

The following tests were used: Jastek Wide Range Achievement Test, teacher-made test for writing, and criterion referenced inventories for reading, spelling and math.

2. *To develop gross motor skills to enable children to function at the optimum of their ability.*

The following tests were used: Selected items from the Lincoln-Oseretsky Motor Skills Test were compiled in the form of teacher-made scales for gross and fine motor skills.

3. *To develop children's perceptual skills commensurate with chronological age.*

The following tests were used: Goodenough Draw-a-Person, Frostig Developmental Test of Visual Perception, teacher-made tests of auditory sequencing (from the Gesell Scale) and commands, and selected auditory subtests of the ITPA.

4. *To achieve expressive and receptive language commensurate with children's chronological age.*

The following tests were used: Peabody Picture Vocabulary Test, Boehm Test of Basic Concepts, teacher-made tests of self-identification and basic concepts, selected auditory subtests of the ITPA, and a language sample scored by use of the Laura Lee Developmental Sentence Scoring Technique and Mean Length of Response.

Methodology:

The itinerant language and learning disorders project staff consisted of one language and learning teacher and a half-time aide.

Mrs. Lavon Haley was the itinerant language and learning disorders teacher. She has a BA degree in Speech Pathology and Special Education and a MA degree in Speech

Pathology with a special emphasis in language disorders. Mrs. Haley taught two years with the Portland Public Schools and one and one-half years with Seattle Public Schools as a speech clinician. She did her Master's work at the University of Washington and obtained her clinical hours at the Child Development and Mental Retardation Center on that campus.

Mrs. Katherine Keane was the itinerant half-time aide. Mrs. Keane is a certified teacher and taught third and fourth grade for two years in a parochial school. Mrs. Keane brought the qualities and confidence of an experienced teacher into the position of program aide.

Supervisor of the entire project was Mrs. Ruth Peets, Specialist in the Program for Speech, Hearing and Language Disorders for Portland Public Schools, District No. 1.

Several speech clinicians on the Portland Public Schools, District No. 1 speech staff were utilized to assist some of the children in the program. Of the speech clinicians utilized, all have a BA degree with several years experience and several also have their MA degrees. One speech clinician previously employed by Portland Public Schools served as a volunteer teacher for one child two hours weekly.

One building aide was utilized in programming for two children seen on a consultative basis. This aide has had teaching experience and was a certified teacher.

The program was implemented with a variety of procedures and services. Generally, all children seen in the program were evaluated by the itinerant language/learning disorders teacher and a prescriptive program was planned in cooperation with the classroom teacher to alleviate each child's difficulty. Most children were seen by the itinerant teacher in a one to one or small group situation at least in the initial stages of their program. Program planning included utilization of remedial services within the child's school (e.g.--speech therapy, remedial reading, Distar reading), preparation of special methods and materials for the classroom teacher, and training and programming of aides and other specialized personnel within the school.

Nine children who received the full diagnostic evaluation were seen by the itinerant teacher in a one to one or small group situation, for approximately forty-five minutes. These children were enrolled in the program for an average of five months. In addition to the nine children, an additional five children were seen on a consultative basis by the itinerant teacher. These children evidenced particular difficulties in reading, writing, spelling or math and were grouped with the original nine children according to the type of program needed. These children were seen an average of three times weekly for about one-half hour and were enrolled approximately three and one-half months for service.

Three children were initially diagnosed and seen by the itinerant teacher and then programmed to be served by the

itinerant aide. Of these children, one was seen for four months on a one to one remedial basis for one hour daily. The other two were seen for five months in a small group situation three times weekly for one hour. These two children also received help from the remedial reading and Distar reading program in their school.

Two children were evaluated by the itinerant teacher and a program was planned for them to be administered by the speech therapist in their building. One of the children was seen for five months on a twice weekly basis for forty-five minutes and the other was seen for six weeks on a twice weekly basis for one hour.

Two children were initially evaluated and seen by the itinerant teacher and then their programs were entirely administered by the classroom teacher with some assistance from the speech therapist in the building. One of the children received help for the whole school year and the other received help for five months. The program planned for these two children within their regular classroom included special materials and methods for meeting their individual needs.

An additional two children were evaluated by the itinerant teacher and a program was planned for them to be followed by the volunteer aide in the school. These children received help for approximately one-half hour from January through May. One of the children was also enrolled in a small group situation and received direct service from the itinerant teacher during April and early May.

Of the twenty-three children initially evaluated one of them moved before a program was initiated. A second child received service for only two months and then was transferred to the Edgefield Lodge for emotionally disturbed children:

A fifth service was provided for approximately thirteen children who were not evaluated by the itinerant teacher, but who evidenced learning difficulties within their classroom. These children were serviced by means of teacher conferences and special materials and methods suited for their particular needs as observed by the teacher.

Results:

Goal No. 1. Children will perform at grade level in academic areas of reading, spelling and math with consideration of mental ability.

The evaluation procedures for academic progress were: Jastek Wide Range Achievement Test (WRAT) and criterion referenced inventories for individual programs. The following data was obtained on each child who **evidenced difficulty on the pretest**. These are the children who were programmed for remediation of the particular problem apparent in the initial evaluation. If the child performed at grade level, he was not included in the specific remedial program and his scores are **not** included in the following data.

Following is a breakdown of reading scores on the Jastek Wide Range Achievement Test according to type of Program received: Table 1 shows all scores, Table 2 shows students seen by Language/Learning Disorders Specialist on a one-to-one daily program. (Coding on data charts: a slash through a score indicates this score was not included in computing mean scores as data on pre- and posttests were not complete.)

Table 1

Academic Scores
Jastek Wide Range Achievement Test
 Data given in grade level scores

The following scores are those obtained on children programmed for reading:

Student No.	Pre Test	Post Test	Difference	Time Enrolled
1		--	--	--
2	2.9	4.2	1.3*	.4
3	1.0	1.5	.5*	.2
4	1.3	3.3	2.0*	.6
5		--	--	--
6	1.4	2.1	.7	.6
7	2.5	3.8	1.3*	.6
8	2.3	2.9	.6*	.2
9	2.3	4.8	2.5*	.7
11	1.6	2.5	.9*	.4
12	1.4	2.5	1.1*	.7
13	1.3	2.3	1.0*	.7
14	2.5	2.8	.3	.2
15	2.3	2.5	.2	.4
16		--	--	--
17	1.3	1.3	.0	.4
18	2.3	3.0	.7*	.4
20	2.4	2.9	.5	.4
22		--	--	--

Mean grade level	1.9	Mean grade level	2.8	Mean Diff.	.9	average time in program	.5
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Children enrolled in the reading program made an average gain of .9 grade levels in .5 (½) years, or an average of 1.8 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program

Table 2

Students seen by Language/Learning Disorders Specialist on a one-to-one daily program

Student No.	Pre Test	Post Test	Difference	Time Enrolled
2	2.9	4.2	1.3*	.4
3	1.0	1.5	.5*	.2
4	1.3	3.3	2.0*	.6
6	1.4	2.1	.7	.6
7	2.5	3.8	1.8*	.6
8	2.3	2.9	.6*	.2
9	2.3	4.8	2.5*	.7

Mean grade level	1.9	Mean grade level	3.2	Mean Diff.	1.3*	average time in program	.5
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Children seen on a direct daily basis for reading made an average gain of 1.4 grade levels in .5 (½) school year, or an average of 2.6 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program.

Table 3 shows the data on children receiving reading help on a consultative basis, or on a program with teacher or aide:

Table 3

Students receiving reading help on consultative basis, program with teacher or program with aide

Student No.	Pre Test	Post Test	Difference	Time Enrolled
11	1.6	2.5	.9*	.4
12	1.4	2.5	1.1*	.7
13	1.3	2.3	1.0*	.7
14	2.5	2.8	.3	.2
15	2.3	2.5	.2	.4
17	1.3	1.3	.0	.4
18	2.3	3.0	.7*	.4
20	2.4	2.9	.5	.4

Mean grade level	1.9	Mean grade level	2.5	Mean Diff.	.6	average time in program	.45
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Children receiving consultative or programmed reading with teacher or aide made an average gain of .6 grade levels in .45 school years, or an average of 1.3 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program.

Of those children receiving reading help in the second group, three were programmed and assisted by the itinerant language/learning disorders program aide. These children are shown in Table 4. They made the greatest gains of all children programmed.

Table 4

Children programmed and assisted by the itinerant language/learning disorders program aide

Student No.	Pre Test	Post Test	Difference	Time Enrolled
11	1.6	2.5	.9*	.4
12	1.4	2.5	1.1	.7
13	1.3	2.3	1.0	.7
	Mean grade level 1.4	Mean grade level 2.4	Mean Diff. 1.0	average time in program .6

Children receiving reading assistance from the program aide made an average gain of 1.0 grade levels in .6 school years, or an average of 1.7 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program.

Children on the reading program increased their ability to decode consonant sounds by 20 sounds per minute and decreased their errors by 8 sounds per minute. The average child read consonant sounds at a rate of 37 consonants a minute with 9 errors at the beginning of the program and at a rate of 57 sounds per minute with 1 error at this years end.

In addition, these children increased their ability to decode vowel sounds by 11 sounds per minute and decreased their errors by 10 sounds per minute. The average child read vowel sounds at a rate of 32 vowels per minute with 12 errors at the beginning of the program and at a rate of 43 sounds per minute with 2 errors at this years end.

Children on the reading program also increased their ability to decode consonant-vowel-consonant words (e.g. man, cup, top) by 6.2 words per minute and decreased their errors by 8.5 words per minute. The average child read consonant-vowel-consonant words at a rate of 15.8 words per minute with 10.7 errors at the beginning of the program and at a rate of 22 words per minute with 2.2 errors at the end of their reading program.

Furthermore, children on the reading program increased their ability to decode consonant blends and digraphs by 6.5 words per minute and decreased their errors by 6.4 words per minute. The average child read consonant blends and digraphs at a rate of 17.4 words per minute with 8.1

errors at the beginning of the program and at a rate of 23.9 words per minute with 1.7 errors at the end of their program.

Children on the reading program increased their ability to recognize sight words by 13 words per minute and decreased their errors by 5 words per minute. The average child read at a rate of 29 words per minute with 8.7 errors at the beginning of the program and at a rate of 42 words per minute with 3.7 errors at the end of their program.

Children enrolled in the language/learning disorders program increased their ability to read in a first grade level book by an average of 22.3 words per minute and decreased their errors by an average of 5.6 words per minute. The average child read at a rate of 33.1 words per minute with 7.3 errors at the beginning of the program and at a rate of 55.4 words per minute with 1.7 errors at the end of their program.

Each of the children also made progress in their individualized reading programs which corresponded to the appropriate grade level for each child and the reading program best suited for their needs.

Reading Inventory Discussion: The improvement scores on the reading inventory data are considerably lower than those scores presented in the *Regional Resource Diagnostic Inventory*. Experience with the children in the language/learning disorders program allowed us to set lower criterion levels of performance before moving to a different step. The reason for the lower criterion levels was three-fold: (1) children with learning disorders tend to have difficulty decoding at a fast rate even if they know all the material. There was little difference in rate between the very easiest reading material and the readers at the appropriate grade level at the end of the year in spite of a wide discrepancy in difficulty; (2) to set very high rates of reading before moving to the next step would have been detrimental to the children's reading progress. Generally, criterions were set between 35-40 words per minute with two or less errors. This rate proved to be a good learning rate and was fast enough for the children to gain meaning from printed material, but also allowed for time to "work out" a word or two. Reading at a rate below 30 words per minute or at any rate with more than 5-6 errors was considered too difficult material for the child to handle; (3) the children's rates gradually improved as they learned new material. As the children became more proficient readers their decoding abilities increased on a rate per minute basis. Continual data was kept on each child throughout the program. Most of the children moved from an average of 30 words per minute to 50 words per minute on their daily lessons. This rate is reflected in the reading or Primer Stories on the pre and posttest basis on the data chart. It held for most children while reading at their particular grade level.

It must also be stated that the average gain for all children included those scores for children who were not considered "proficient" in a certain task area and who will be continued in the program next year. These scores tended to lower the "average" decoding rate for the more proficient readers.

In addition to the lower criterion levels for reading, it was discovered that the language/learning disorders children were particularly slow in sound blending skills, (see blending chart, reading inventory). The children knew the consonant and vowel sounds well; however, they had difficulty putting them together to make a word. This difficulty was evident in every child in the reading program and related to their overall deficiency in the auditory area. Only after the children learned to write the alphabet and began in a rigid spelling program did their blending skills improve. This information provided a strong support for the remedial procedures utilized in the program. The reading-writing-spelling skills were taught simultaneously as an auditory-visual-motor associative processing. This procedure was credited as the most successful teaching method employed in this year's program.

Children enrolled in the spelling program made an average gain of 1.2 grade levels in .5 (½) school years, or an average of 2.4 times growth in the month of school. The following is a breakdown of spelling scores on the Jastek Wide Range Achievement Test according to type of Program received. Table 5 shows those students seen by language/learning disorders specialist on a one-to-one daily program.

Table 5

Students seen by Language/Learning Disorders Specialist on a one-to-one daily program

Student No.	Pre Test	Post Test	Difference	Time Enrolled
2	1.8	3.5	1.7*	.4
3	1.3	1.6	.3	.2
4	1.1	2.7	1.6*	.6
6	1.4	1.8	.4	.7
7	1.4	3.2	1.8*	.6
8	1.6	2.7	1.1*	.2
9	1.0	3.2	2.2*	.7
10	1.6	4.2	2.6*	.5
Mean grade level	Mean grade level 1.4	Mean Diff. 2.9	average time in .5*	program

Children seen on a direct daily basis for spelling made an average gain of 1.5 grade levels in .5 (½) school year, or an average of 3 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program.

Students receiving spelling help on a consultative basis, program with teacher or program with aide are shown in Table 6.

Table 6

Students seen on a consultative basis, program with teacher or program with aide

Student No.	Pre Test	Post Test	Difference	Time Enrolled
11	1.2	2.5	1.8*	.4
12	1.0	2.3	1.3	.7
13	1.2	2.3	1.1	.7
14	1.3	2.0	.7*	.2
15	1.6	2.3	.7	.4
17	1.9	1.2	.3	.4
18	2.0	3.0	1.0*	.4
20	1.5	2.5	1.0*	.4
21	2.6	3.7	1.1*	.4
23	1.8	2.9	1.1*	.4
Mean grade level	Mean grade level 1.6	Mean Diff. 2.5	average time in .9*	program

Children receiving consultative or programmed spelling with teacher or aide made an average gain of .9 grade levels in .45 school years, or an average of 2 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program.

Of those children receiving spelling help in the second group, three were programmed and assisted by the itinerant language/learning disorders program aide. These children made significant gains in spelling and are shown in Table 7.

Table 7

Children programmed and assisted by the itinerant language/learning disorders program aide

Student No.	Pre Test	Post Test	Difference	Time Enrolled
11	1.2	2.5	1.8*	.4
12	1.0	2.3	1.3*	.7
13	1.2	2.3	1.1	.7
Mean grade level	Mean grade level 1.1	Mean Diff. 2.35	average time in 1.25*	program

Children receiving assistance from the program aide made an average gain of 1.25 grade levels in .6 school years, or an average of 2 times growth in one school month.

* significant growth (2 to 1) in the length of time enrolled in the program.

Data on students given the Non-standardized Spelling Inventory are shown in Table 8.

Table 8

Non-Standardized Spelling Inventory

Data given in no. letters per minute written by each child.
no. errors

Student No.	Pre Test	Post Test	Difference
2	28/3	33/1.6	+5/-1.4
3	(see individual data)		
4	21/8	32/0	+11/-8
6	12/7	21/2	+9/-5
7	23/9	28/1	+5/-8
8	5/1	20/1	+15/0
9	11/6	28/1	+17/-5
10	27/2	39/1	+12/-1
11	15/3	18/2	+3/-1
12	9/2	18/0	+9/-2
13	9/1	15/3	+6/+2
14	24/6	26/4	+2/-2
16			
18	32/9	31/2	-1/-7
20	34/2	46/3	+12/+1
21	27/5	34/1.3	+7/-3.7
23	26/7	31/3	+5/-4
Mean score	20/4.7	Mean score 28/1.7	Mean Diff. +8/-3

Children enrolled in the language/learning disorders spelling program made an average gain of writing 8 letters per minute with a decrease of 3 errors per minute.

Children using manuscript writing form made an average gain of 7.1 letters per minute and made 2 or less errors in their spelling. Children using cursive writing form made an average gain of 8.2 letters per minute and made 3.7 or less errors in their spelling.

Table 9 shows scores obtained on children programmed for math. Scores obtained on children who evidenced difficulty in math and who were programmed within the regular classroom are shown in Table 10.

Table 9

Academic Scores
Jastek Wide Range Achievement Test on Math

Student No.	Pre Test	Post Test	Difference	Time Enrolled
1				
9	2.1	3.2	1.1	.7
11	1.2	2.6	1.4*	.4
19	1.9	2.6	.7	.5
Mean grade level	1.7	Mean grade level 2.8	Mean Diff. 1.1*	average time in program .5

Children who received direct math assistance made an average gain of 1.1 grade levels in .5 (½) school years, or an average of 2.2 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program.

Table 10

Children programmed within the regular classroom

Student No.	Pre Test	Post Test	Difference	Time Enrolled
6	1.2	2.1	.9	.7
8	2.8	2.8	.0	.2
10	2.2	3.2	1.0*	.5
12	1.9	2.6	.7	.7
13	1.2	2.1	.9	.7
20	2.2	2.4	.2	.4
Mean grade level	1.8	Mean grade level 2.4	Mean Diff. .6	average time in program .5

Children who received math assistance within the regular classroom made an average gain of .6 grade levels in .5 (½) school years, or an average of 1.2 times growth in one month of school.

* significant growth (2 to 1) in the length of time enrolled in the program.

Discussion: It is evident from the data obtained that each child made considerable progress in their academics compared to the length of time enrolled in the remedial program. It is also evident in examining the breakdown of scores that the children made the greatest gains when seen in a one-to-one or small group daily situation by specially trained personnel. The data also supports that an aide can be trained to remediate these children's difficulties and the children can make substantial gains. The children who made the least overall progress were those children who only received service from their classroom teacher with special materials or who received limited help from a building aide or special personnel. Some of the possibilities for the discrepancies may lie in the following:

- 1) lack of teacher time for consistent one to one or small group instruction;
- 2) lack of background of teachers and/or special personnel in language/learning disorders;
- 3) misuse of or lack of **training** in using special methods and materials;
- 4) gaps in programming for the child by the language/learning disorders specialist.

Alleviation of these problems will possibly be in providing an inservice class for teachers in methods and materials for language/learning disorders.

It is hypothesized that children with language and learning disorders can make substantial academic progress in an itinerant program when that program consists of: (1) remedial one-to-one or small group sessions by specially trained personnel; (2) special programming for academics in the classroom; and (3) a later integration of the child into the classroom work after basic skills have been mastered. Children with language and learning disorders need the individualized program and must be helped in addition to his or her classroom work. A classroom teacher does not have the time that is necessary to diagnose, plan, and administer the remedial procedures to insure success for these children.

It is also apparent from the spelling and writing data that those children who learned the cursive form of writing (as compared to manuscript) made the greatest gains in their spelling and handwriting skills. It is hypothesized that teaching children cursive writing: (1) assists them in overcoming some of their visual perceptual difficulties involving spatial relations and eye-hand coordination; (2) teaches the letter form without confusion of the capitol and small cases; and (3) gives continuity in a visual form to the auditory sequence processing involved in spelling.

From the math data obtained, it is evident that the majority of children did not make as great a gain as was necessary to remediate their problems. This is an apparent weakness in this year's program and it will hopefully be alleviated in the project for the 1973-74 school year.

Goal No. 2. Children will develop gross and fine motor

coordination skills to enable them to function at the optimum of their ability.

The evaluation procedures for assessment of gross and fine motor skills were: selected items from the Lincoln-Oseretsky Test of Motor Skills compiled in the form of a 10 point rating scale. The following data was obtained on each child enrolled in the language/learning disorders program (Table 11).

Table 11

Non-standardized Gross Motor Coordination Test

Student No.	Pre Test	Post Test	Difference
1			
2	10/10	10/10	0
3	10/10	10/10	0
* 4	4/10	7/10	2
5			
* 6	8/10	10/10	2
* 7	3/10	10/10	7
* 8	5/10	8/10	3
9	9/10	10/10	1
*10	4/10	10/10	6
11			
*12	5/10	6/10	1
13			
*14	1/10	2/10	1
15			
16			
17			
18			
19			
20	10/10	10/10	0
*21	5/10	10/10	5
22			
*23	3/10	7/10	4
	Mean (4.3) score 6/10	Mean (7.5) score 8.5	Mean (+3.2) Diff. 10+2.5
*9 children with evident motor prob.	(4.3)	(7.5)	(+3.2)

Children enrolled in the language/learning disorders program made an average gain of 2.5 of 10 points in gross motor skills; however, of those children, only 9 evidenced real problems on the pre test and these children made an average gain of 3.2 of 10 points on the gross motor skills post test.

Table 12 shows the results of the Non-standardized Fine Motor Coordination Test.

Table-12

Non-standardized Fine Motor Coordination Test

Student No.	Pre Test	Post Test	Difference
1	--	--	--
2	10/10	10/10	0
3	10/10	10/10	0
4	9/10	10/10	1
5	--	--	--
* 6	8/10	10/10	2
* 7	6/10	10/10	4
8	10/10	10/10	0
9	9/10	10/10	1
*10	5/10	9/10	4
11	--	--	--
12	10/10	10/10	0
*13	8/10	10/10	2
14	--	--	--
15	--	--	--
16	--	--	--
17	10/10	10/10	0
18	--	--	--
*19	6/10	10/10	4
20	10/10	10/10	0
21	10/10	10/10	0
22	--	--	--
*23	5/10	9/10	4
Mean score	9/10	Mean score 10/10	Mean Diff. +1
*6 children with evident problems	(6/10)	(9/10)+3)	(+3)
	(6/10)	(9/10)	(+3)

Children enrolled in language/learning disorders program made an average gain of 1 out of 10 points in fine motor coordination; however, of those children only 6 evidenced real problems on the pretest. Of those 6 children, an average of 3 of 10 points were gained on the post test scores.

Goal No. 3. Children will develop perceptual skills commensurate with chronological age.

The evaluation procedures for perceptual progress were: Good-enough Harris Draw-a-Person, Frostig Developmental Test of Visual Perception, non-standardized auditory closure, and sound blending. The following data was obtained on each child who evidenced difficulty on the pre test. These children were programmed for remediation of the particular problem apparent in the initial evaluation. If the child performed at age expectancy level, he was not included in the remedial perceptual program and his scores are not included in the following data.

Children enrolled in the language/learning disorders program made an average mental age gain as tested on the Draw-a-Person Test of 11 months in approximately 5 months time. Children enrolled in the itinerant language/learning disorders program made an average gain of 5 perceptual quotient points as tested on the Frostig Test. They also made an average gain of 2.2 points on the auditory test. Of those children, 11 evidenced problems on the pretests and these children made an average gain of 2.7-2.8 points. The children made an average gain of 3.3 scaled score points on the ITPA test of Auditory Memory. An average gain of 8.7 scaled score points was made on the auditory closure subtest. This gain is significant according to ITPA scaled score points. Children made an average gain of 5 scaled score points on the Sound Blending Subtest if their scores were 33 or below on the pre-test. Overall, children made an average of 4.3 scaled score points gain during the school year.

Discussion: The data on all tests of visual and auditory perception indicates growth by those children enrolled in the language learning disorders program. However, it is not apparent to the writer just how valid all of these tests are on a pre and posttest basis. The following chart gives a discussion of each of the above tests regarding their diagnostic and measurement effectiveness.

Test	Discussion	Effectiveness
Good-enough Harris Draw a Person	This test was a good diagnostic tool and measurement tool. It gave evidence of considerable growth in perception and was a good means by which to pinpoint perceptual disorganization.	good as both diagnostic and growth measurement tool
Frostig Developmental Test of Visual Perception	This test was not a good diagnostic or growth measurement tool. This may be attributed to: 1) many of the children were older than the 7 yr. 11 mo. standardization age; 2) the test did not relate to the child's visual-auditory-motor associative processing that was involved in the remedial program for reading, writing and spelling; and 3) it was not clear what the test measured other than progress with the Frostig Program materials.	not effective tool

<i>Non-standardized test for auditory memory and sequencing.</i>	This test was utilized more as a diagnostic tool rather than a measure of growth. Many of the children enrolled in the program evidenced difficulty with auditory memory and sequencing and these problems manifested themselves in the children's language and academic skills. Training was given in language and academics to learn in spite of these difficulties rather than remediation of auditory problems. These auditory memory and sequencing problems are in all probability related to an immaturity of the neuro-physiological auditory processing rather than a problem which is readily remediable. The diagnostic information assisted personnel in planning an appropriate program for each child.	good as a diagnostic tool as it is difficult to measure auditory perceptual growth
<i>ITPA Subtests Auditory Memory</i>	This test was utilized much the same way as the non-standardized test. It was a good diagnostic tool; however, it gave us little new information. It is recommended that this be eliminated from the test battery.	effective in diagnosis but gave no new information
<i>Auditory Closure</i>	This test gave evidence of considerable growth in the children's ability to utilize and organize auditory information. However, even as a diagnostic test, the auditory closure subtest performance scores did not give any critical information to the program planning for a child. It is recommended that this test also be eliminated.	gave evidence of growth in the auditory area, correlating with the remedial program; however, it was not critical in program planning.
<i>Sound Blending</i>	This test was neither an effective diagnostic tool nor effective as a measure of growth. All children enrolled in the remedial program for reading and spelling evidenced difficulty on the criterion reference inventory for sound blending (see reading data); however, only three children fell below age expectancy on the ITPA sound blending test. This may be due to a different processing for the two test tasks; however, the criterion inventory gave more useful diagnostic and measurement information. It is not necessary to include the ITPA sound blending test in the test battery.	not effective as either diagnostic tool or measurement tool

The above evaluation of the perceptual tests is critical in planning for next year's program. It was evident to the personnel involved in this year's program that many of the perceptual tests did not give information pertinent to the child's prescriptive program. It was also questionable whether perception could be trained and if it could, was it really measured. Alterations in the goals for next year's project relate to these findings. The goal to have each child's perceptual skills commensurate with chronological age will be eliminated from the program. Perceptual training will be included for the children as it is reflected in his or her performance in language, reading, spelling, writing and math.

Goal No. 4. Children will develop language skills commensurate with their chronological age.

The evaluation procedures for language progress were: Peabody Picture Vocabulary Test (PPVT), Boehm,

Language Sample Scores, ITPA Subtests of Grammatical Closure, Verbal Expression, Auditory Reception, and Auditory Association, non-standardized test of basic concepts and self identification. The following data was obtained on each child who evidenced difficulty on the pretest. These children were programmed for remediation of the particular problem apparent in the initial evaluation. If the child performed at age expectancy level he was not included in the language remedial program and his scores are not included in the following data.

Children enrolled in the language learning disorders program made an average gain of 4 I.Q. points and 8% ile points on the Peabody Picture Vocabulary Test. A chart of all PPVT Scores is provided on the following page as less than 50% of the children evidenced vocabulary difficulty (Table 13). A mental age score was computed using the PPVT for all children; however, this score is not considered valid (see discussion of test following data charts).

Table 13

Peabody Picture Vocabulary Tests,

Student No.	Form A (Pre)		Form B (Post)		Difference	
	I.Q.	% ile	I.Q.	% ile	I.Q.	% ile
1	88	21%	--	--	--	--
2	113	82%	116	84%	5	2
3	92	34%	100	52%	8*	18*
4	129	96%	123	94%	-6	-2
5	95	42%	--	--	--	--
6	91	33%	86	18%	-5	-15
7	116	75%	111	71%	-5	-4
8	109	71%	113	82%	4	11
9	85	16%	104	64%	19	48*
10	114	82%	123	94%	9	12
11	101	53%	--	--	--	--
12	100	53%	89	24%	-11	-29
13	78	8%	83	11%	5	3
14	--	--	--	--	--	--
15	99	45%	97	38%	-2	-7
16	--	96%	--	--	--	--
17	100	54%	118	90%	18	36*
18	--	--	--	--	--	--
19	96	42%	96	42%	0	0
20	106	63%	115	87%	9	24*
21	--	--	--	--	--	--
22	109	71%	--	--	--	--
23	--	--	--	--	--	--
		54% ile		61% ile		+7% ile
Mean			Mean		Mean	
I.Q. 102			I.Q. 105		Diff. I.Q. +3	

All children enrolled in the language/learning disorders program, whether or not they evidenced difficulty with receptive vocabulary or not, made an average gain of 3 I.Q. points and 7% ile points on the Peabody Picture Vocabulary Test.

* significance difference scores

Children enrolled in the language/learning disorders language program made an average gain of 5.6 points on the Boehm test. Children enrolled in the program (on whom DDS were computed) made an average gain of 2.7 points in their language samples using Lee's Developmental Sentence Scoring Technique. Children enrolled in the program made an average gain of 5 scaled score points in the area of grammar; however, one child dropped from a near normal score to a score one standard deviation below the norm. This child did not receive any formal remedial work in grammar during the year. Of all the other children who did receive remedial work in grammar, four made significant gains upward, moving from one or two standard deviations below the norm to normal or near normal scores. These children made an average gain of 6.6 scaled score points, or almost significant improvement as 7 indicates significant difference. This data is shown in Table 14.

Table 14

ITPA Subtest-Grammatic Closure

Student No.	Pre Test	Post Test	Difference
1	28	--	--
3	23	25	+2
6	22	24	+2
8	19	26	+7*
9	27	36	+9*
11	26	--	--
12	18	23	+5
13	20	24	+4
15	9	22	+13*
16	22	--	--
18	30	41	+11*
19	32	24	-8*
	Average Total Diff:		+5 Scaled Score Points

Scores of 34 or more are not included as these are well within the normal range according to scaled scores for the I.T.P.A.

A score of below 30 is considered one standard deviation below the norm.

A score of below 18 is considered two standard deviations below the norm.

A significant difference score is 7 scaled points or more.

* significance difference scores

Only six children evidenced expressive difficulty as tested on the ITPA verbal expression subtest. These children made an average gain of 6 scaled score points, which was almost significant growth in verbal expression. Children enrolled in the language/learning disorders program made an average gain of 5 scaled score points on the ITPA test of auditory reception. Children evidencing difficulty with auditory association made an average gain of 2 scaled score points on the ITPA subtest during enrollment in the language/learning disorders program. They also made an average gain of .7 points on the self-identification test. Of those children, only 8 evidenced real problems on the pretest and these children made an average gain of 1.2 to 1.3 points. Children made an average gain of 2.2 points on the test of basic concepts. Those children evidencing problems in concepts on the pretest (9) made an average gain of 3.2 to 3.3 points.

Discussion: The data on all tests for language gave evidence of growth by all children enrolled in the remedial language program; however, as with the perceptual tests, the language tests were not effective enough in diagnosing particular problems or recording growth. The following chart provides a critical discussion for each test and a summary of recommendations for the 1973-74 school year program.

Test**Discussion****Effectiveness***Peabody Picture Vocabulary Test*

The PPVT was neither a good diagnostic tool or measure of growth. The PPVT evidenced some definite weaknesses as an effective tool as follows:

1) it gave elevated scores to those children with normal or above average intelligence (although some still evidenced comprehension difficulty in their academic experiences.)

2) three children made considerable drops between pre- and posttesting which may have been due to inconsistencies between Form A and B. The *Language Speech and Hearing Services in Schools* journal, Vol. 3, No. 2, page 42, states Form A scores higher than Form B.

3) children in the model schools scored lower than the children not in model schools which may have been due to language and/or cultural differences. *Journal of Language, Speech and Hearing Services in Schools*, Vol. IV, No. 1, pg. 37, reports that black children as a group tend to score lower on the PPVT than other groups.

Because of these weaknesses in the validity and reliability, the use of the PPVT with language/learning disordered children is questioned. It is our recommendation that a different tool for receptive language be considered for pre- and posttesting.

Poor, as either a diagnostic test or test of growth for learning/language disordered children

Boehm Test

This test was used mainly as a measure of growth. It's diagnostic implications are narrow; however, it gives specific information for basic concept remediation. It assisted the programmers in planning for a child. Because of it's length, a different test may fulfill the same purpose in a shorter time.

Effective tool for program planning; however, it takes a long time to give

Language Sample
MLR
Lee DSS

The diagnosis of language problems by taking a language sample is effective for both diagnosis and as a measure of growth. Samples were taken only on those children who evidenced difficulty in communication (either on the ITPA Verbal Expression sub-test or with the examiner in the testing situation.) The reason for only a few such samples was due to the time involved in transcribing and scoring them. The use of Laura Lee's Developmental Sentence Scoring technique gave useful information for remediation but the scores and computed percentiles are not valid because: 1) scoring the samples was difficult and the examiner "learned" as she worked which made the initial samples invalid in their normative data; 2) changes in the norms and scoring were made by Laura Lee at the NW University during the 72-73 school year; 3) the test is not standardized, but is rather a tool for analyzing language; and 4) many of the children were older than the test norms.

good information was gained; Lee's DSS was too lengthy for information gained

Computing mean length of response (MLR) was considered valuable information and generally accurate norms were presented.

It is suggested that language samples be taken on all children who evidence language problems; however, the Lee DDS technique should be eliminated until further facility with the information is learned and until more standardized norms and procedures are available.

Test	Discussion	Effectiveness
ITPA Subtests		
<i>Grammatical Closure</i>	The Grammatical Closure subtest provided useful diagnostic information, but was difficult to generalize as a measure of growth. The use of the ITPA subtest did not give as complete a picture of the children's grammatical competency as was necessary for prescriptive programming for each child.	useful as a general diagnostic tool, but not as a measure of growth
<i>Verbal Expression</i>	The same information for language skills was generally found for all three subtests-- that is, general diagnostic information but not specific information for prescriptive planning. It is recommended that a different means for language evaluation be utilized for next year's program. The ITPA is recommended for overall diagnosis of the individual child's strengths and weaknesses (in both auditory and visual areas.) Comparing the language/learning impaired child's performance to a normative score for each subtest does not give a true picture of how the child is (or is not) learning. If the ITPA is utilized as a diagnostic measure, then the complete battery should be administered and a psycholinguistic age be computed. With this information, the evaluator can better determine how the child is processing and the diagnosis would be of more value than a standard normative comparison of individual subtest scores. (See ITPA manual for analysis of test information.)	diagnostic tool; but not a measure of growth
<i>Auditory Reception</i>		
<i>Auditory Association</i>		
<i>Non-standardized tests:</i>	The non-standardized tests gave useful information for planning each child's program. Most of the children knew their colors, body parts, name, address, etc., as indicated in the high pretest scores and the low difference scores. However, if a child had difficulty (or would have) a different remedial approach was implemented in their language therapy. This information is necessary in determining the child's level of basic concept information before planning for academic progress.	useful and necessary in planning a prescriptive program
<i>self identification</i>		
<i>basic concepts</i>		

Summary: The testing for assessment of language problems was entirely too lengthy and did not give needed information for a prescriptive program. It is recommended that a criterion referenced inventory utilized with the non-standardized tests and language sample be implemented for diagnosis and measurement of language growth. The Los Angeles Public Schools has prepared a sequenced language inventory which would meet the needs of assessment and measurement of language much the same way as the criterion referenced inventory for reading. Utilization of this tool instead of those outlined in the original project is recommended for the 1973-74 school year program.

Third Party Evaluator's Comments:

The thoroughness with which the project staff monitored this project is to be commended. A careful self-analysis has been presented.

The Third Party Evaluators are in agreement with the conclusion drawn from this project. Specifically, that a criterion referenced language inventory could be most appropriate as well as, efficiently administered, provide an on-going data collection system. It would allow individual programs to be modified based on data and provide a continual feedback system for the teacher in order to improve the quality of the services being provided.

Not all of the data are presented in this report. For a more complete overview of the project the reader should request such data from the project director.

Title of Project: *Junior High School Program for Emotionally Disturbed Children*

Location of Project: *Heights Junior High School
12456 N.E. Brazee
Portland, Oregon 97230*

Type and Number of Children Served: *Approximately 60 junior high school-aged children of average to above average intelligence whose behavior was characterized by both academic and behavioral problems in the school setting.*

Funding Allocated: *\$23,229*

Project Beginning Date: *August 21 1972*

Project Ending Date: *June 15, 1973*

Background and Rationale:

In 1964 the Parkrose School District and the Multnomah County Mental Health Clinic employed NIMH funds to initiate a four-year school based program for severely disturbed elementary-age children. This project met with sufficient success and local acceptance that it is now an integral part of the district's special education program.

Efforts to increase the flexibility and productivity of this program resulted in the initiation of a Title VI grant for a social transition classroom to serve those children who had made sufficient growth in the program for severely disturbed so that they could: (1) benefit from a classroom environment more nearly like that of a regular classroom setting yet maintain sufficient structure to insure individual success through social and academic rewards; and (2) serve the needs of a number of children who could not meet the criteria for placement in the classroom for the severely disturbed yet were failing to achieve the minimum standards of performance in their regular classrooms. This project proved to be of such benefit that it also received district support although the climate for new program development in most districts was seriously limited.

The experience with the two classes at the elementary school left the district with two pressing and unanswerable problems. The first concerned children who had made some progress in the elementary program but needed additional support as they moved into junior high school. The second problem centered around the need for some type of program to handle children whose social-emotional problems did not surface until they reached junior high school. To answer these needs a project was initiated under Title VI for the education of disturbed children in the 12-15 age group.

In its first year (1970-71) the project dealt primarily with acting-out eighth and ninth grade males. Consequently, the major effort went into remediating behavioral problems at the expense of alleviating academic weaknesses. In most cases parent involvement was minimal. The program did provide the school with much needed support and guidance in handling "emotionally disturbed" students and consequently was well received by administrators and staff.

Nevertheless, the question remained as to whether broader and more significant gains could be made if the program dealt with a larger spectrum of the student's environment; i.e., both academic and behavioral school problems, as well as work with the family. In order to answer this question the project received continued Title VI funding as well as significant district funding during its second year (1971-1972).

While the project's second year provided results indicating considerable success with students both in the academic and behavioral spheres, there remained a sizable gap in the processes of reintegrating project students into the total involvement in the regular school program and integrating the project's concepts and skills into the regular school structure. The project received matching district and Title VI funding for its third year in order to discover methods for eliminating these weaknesses.

Objectives and Evaluation Plan:

1. *To train regular classroom teachers to use behavior modification techniques.*

Teachers will enroll in the course titled Psychology 507 - Human Motivation, which will deal primarily in

classroom management techniques.

2. *Establish teacher teams to work with students whose emotional problems require more structure and support than can be provided by the regular school environment but, who do not require placement in the project classroom.*

A report indicating the establishment of teams and results of their actions will be submitted.

3. *To provide a classroom experience designed to increase the output of positive social behavior and improve academic performance in the basic skills.*

Pre- and posttest of the California Test of Basic Skills and the Bond, Balow and Hoyt New Developmental Reading Test will be administered as well as comparing grade point averages. A Behavioral Data Checklist will be administered aloud with pre- and posttest of the Walker Behavior Problem Checklist. School attendance and assignments as well as individual and group behavioral data will be presented.

4. *To conduct counseling sessions designed to assist in the development of positive behaviors.*

A detailed reporting of individual behavioral contracts, personal contacts and groups sessions will be reported.

5. *To provide parents with training in behavior modification techniques and to assist them in applying these techniques.*

A description of the training procedure and examples of parent application of techniques will be submitted.

6. *To continue revision and refinement of the model for the educationally handicapped within the framework of the junior high school.*

A description of how the refinement took place will be submitted.

Methodology:

Project Staff

The project staff consisted of both a direct and an auxiliary component. The full-time staff included two teachers, a coordinator, and a twenty-five hour-a-week secretary-research assistant. The auxiliary staff which attended general project staff meetings consisted of the District's Director of Child Services, the District's mental health consultant, a speech therapist, and a reading teacher. Building counselors and administrators were also available for staffings.

Selection of the Title VI staff was designed to produce a young, close knit, open, and energetic team with varied areas of personal and professional strength. Ms. McCulloch, a project teacher had served as an aide in the 1972-73 project. Her major areas of strength were creative skills in language arts instruction, extreme calmness aligned with strength, openness and honesty with students and fellow professionals, and a solid understanding of behavioral

principles. Ms. McCulloch's team taught an eighth grade language arts-social studies section with a large number of "B" level students. Aside from this, however, her primary assignment was the project classroom (variously labeled resource room and classroom throughout the report) where she spent approximately 75% of the school day. Her ability to consistently provide a positive, open, controlled classroom with such a difficult male student population played a major role in the success of the program.

Mr. Dan Koretz, a project teacher, had worked as an aide for two years at the Parkrose Elementary Project for Emotionally Handicapped Students. His primary areas of strength were: (1) his creativity in developing an exciting math curriculum, (2) his extreme energy and dedication to the program, (3) his ability to establish many positive relationships with students outside the project and consequently to make the project resource room and students more a part of the general school environment, (4) his involvement in clubs, student government, student rights, etc. in the school at large, (5) his persistence in keeping the faculty attuned to the needs of students, (6) a real understanding of the underlying concepts of behavioral and humanistic ideologies and an ability to apply this knowledge to practical considerations.

Dr. Vern Jones, project coordinator, was in his second year as director of the program. His primary areas of strength were: (1) his ability to work effectively with and obtain outstanding support from parents, (2) his intense dedication in time and energy to the program -- a dedication which earned the project the respect of school and district staff, (3) his ability to function effectively as a consultant to teachers, (4) his ability to make use of and work effectively with auxiliary district personnel and outside agencies, (5) his positive honest caring for the project students and their families expressed openly and honestly, (6) a sound theoretical foundation and practical application of educational and psychological theories.

The ability of the project's professional staff to function as a flexible team whose job roles and amount of time spent in the project room fluctuated according to personal and student needs was a key to the success of the program. A compatible, open, real staff is a necessity for a functional program with emotionally handicapped adolescents.

Description of the Program

During the 1972-73 school year, Heights Junior High School operated on a modified modular schedule with seventeen alternating twenty and twenty-five minute periods and three half-hour lunch periods. Approximately 25% of a student's time was designated "study" time. During this time, students were to attend designated study areas or use available school facilities such as the shop, gym, etc. with written teacher permission.

Students accepted into the Title VI program were placed in one of three categories or levels. Students designated as "A" level students were scheduled into the Title VI resource room during all of their study time and were taught either one or two courses by the Title VI staff.

All "A" level students were seventh graders. This decision was based on the previous two years of research indicating that success rates were much higher with seventh grade students. Also, by working most intensely with a somewhat more homogenous group of students, it became easier to induce group cohesiveness, appropriate modeling, etc.

Students placed on "B" level were scheduled into the resource area for 50% or less of their study time and took all course work from regular classroom teachers. An attempt was made to schedule these students with teachers who had successfully completed one or more inservice courses offered through the Title VI program. "B" level students consisted primarily of students who were being integrated into complete involvement in the regular school program. However, several "B" level students were eighth graders who were new to the district and who were having severe difficulties adjusting to the school setting.

Finally the program dealt with a small number of students with extreme juvenile problems. Title VI services for these "C" level students consisted primarily of establishing a behavioristically oriented program to deal with the students' behavior in school or attempting to find and receive parental support for a placement outside of the school setting.

The Title VI program was designed to attack the problems of the emotionally handicapped student by concentrating on five areas: (1) remediation of academic weaknesses, (2) extinction of inappropriate and self-defeating school behaviors, (3) improving the student's ability to relate effectively to others and to evaluate his responses, (4) improving the parent's ability to act as productive change agents, (5) provide the regular classroom teacher with increasingly effective methods of dealing with such primary concerns as classroom motivation and control.

The three primary methods for improving basic academic skills were small, individualized classes taught or team taught by the Title VI teachers, mandatory study time with teachers available for immediate feedback to students and privileges provided for the completion of work, and intensive one-to-one remedial work in reading, speech, or perception provided by the auxiliary staff. The Title VI program provided direct instruction in seventh grade language arts, remedial math, and prealgebra. The language arts class consisted of a strong emphasis on spelling, punctuation, sentence structure, and writing, and basic library and dictionary skills. The hard skill materials were interspersed with many high interest activities such as creative writing (the class produced a paper considered by

many to be better than the school paper), spelling bingo, field trips, etc. The math classes were aimed at providing rapid improvement in basic skills while maintaining student interest and integrity by providing the highly intelligent but lowly skilled student with challenging math concepts. Mr. Koretz developed a math curriculum which placed a heavy emphasis on strong conceptual development and activity. The curriculum used cuisenaire rods, abaci, geoguards, the *Activities in Mathematics* series (Scott, Foresman and Co.), the *Motion Geometry* series (Harper & Row), the *School Mathematics Project* (Suisenaire Co.), and an emphasis on students helping students.

In addition to teaching a language arts class and several math classes in the project classroom the Title VI teachers team taught courses in eighth grade language arts and social studies, and seventh and eighth grade science. The science classes were established as a means for providing all Title VI students with an individualized program in a small group, yet taught in the science department. The flexibility and extensive equipment found in science classes made science a particularly difficult situation for the Title VI students. However, the previous year's attempt at teaching science in the Title VI area had proved far from satisfactory. The team teaching situation provided an excellent curriculum while at the same time allowing the Title VI teacher to model classroom management techniques. The team teaching of language arts and social studies at the eighth grade level was established primarily as a means for providing a smoother and more complete transition for "B" level students into complete involvement in the regular school program. By having a Title VI teacher in the classroom, students were able to receive more individual attention on academic problems while at the same time having a more consistent approach to their remaining behavior difficulties.

The structuring of study time for Title VI students was a second strong emphasis in the academic area. Students were required to complete two out-of-class assignments a day before they could use the free-time area of the resource room or would be given a pass to work in the shop, use the gym, etc. In addition, behavior during periods of study was closely monitored.

A final method for dealing with the student's academic weaknesses was the use of auxiliary specialists to work with student's reading, speech, or perceptual difficulties.

During the 1972-73 school year, the program's orientation moved towards an integration of areas two and three; i.e., a primary tool for extinguishing inappropriate and self-defeating school behaviors was to improve a student's ability to relate effectively to others and to evaluate his own behavior. This is not to say that behavior modification concepts were not employed. Rather, they were employed in a conceptionally sound and well integrated manner. In cases where a student's acting out

behavior was extreme, contracts were established. Furthermore, the project staff constantly monitored their behavior to determine such things as positive to negative ratios of verbalization, consistency in ignoring inappropriate behavior, and time lapse and methods of reinforcing appropriate behavior. However, several basic changes were made. Group meetings were held for 45 minutes every other day throughout the entire school year. These group meetings centered on solving problems arising in the room with the three major objectives being to have the group take increasing responsibility for their behavior, to have the group become change agents for individual students, and to improve patterns of communication; i.e., reduce interruptions, fights, withdrawal, etc.

During the second semester, the "A" level students were divided into two groups and the groups competed for a group payoff. A chart was placed on the wall in the Title VI resource room and pluses were given for appropriate behavior and checks for inappropriate behavior. Each plus counted +1 point and each check -1. At the end of each week, the group with the highest score was able to choose a group payoff. The payoff most often chosen was lunch out followed by some free-time - often used to play soccer. The concept for this program was based on Brofenbrenner's study of Russian child rearing as discussed in *Two Worlds of Childhood*. We applied the concept to the resource room in order to reduce the teacher's role as control agent and to shift that role to a more effective and less negative agent - the peer group.

An additional change in project policy and philosophy centered around the use of field trips. On only one occasion during the year was a student's participation on a field trip based upon his meeting a specified grade, work, or contract requirement. Instead, field trips were viewed as positive learning experiences both in the academic and social domains, and attendance was dependent solely on the student presenting a behavior problem pattern prior to and during the trip which would not prove detrimental to the rights of others present. Student exclusion was most often a group decision with the three Title VI staff members having one vote each.

The fourth area of concentration was helping the parents to become more effective change agents. All parents whose child was involved on an "A" level were required to attend a weekly parent group or meet weekly with the project coordinator. The latter option was included since several parents worked during the time group meetings were held. Parents of "B" level students were invited to attend group meetings or individual conferences. The parent groups consisted of a 12-week session on practical application of behavior modification principles (parents only), a 6-week session on transactional analysis (parents and students separately except for the last session), and a 10-week session on communication skills and problem solving with parents and students working together.

This format was designed so that the parents could learn behavior management skills early in the year when their child was first entering the project and needed immediate behavior change. This was followed by a low keyed transactional analysis session designed to provide parents and students with a safe tool for examining themselves and their ways of dealing with others. The final sessions were spent on high risk, high gain interactions where the families could employ both their knowledge of communications and their problem solving skills.

The fifth and final area of emphasis to change students' behavior was improving the ability of classroom teachers and administrators to deal with emotionally handicapped students. Three major approaches were used to attain this goal. First, the Title VI coordinator offered a graduate course, Psychology 507 - Human Motivation, at both junior high schools. A total of thirty-three teachers took the course which emphasized a comprehensive approach to classroom management and motivation. The teachers discussed and analyzed behavior modification techniques, the use of class meetings, the works of Maslow, Rogers, Glasser, George I. Brown, Herndon, Silberman, Brofenbrenner, Bruner, Kozol, and others. Secondly, the Title VI staff made themselves available for model teaching, leading class meetings, writing prescriptions for problem students, etc. Thirdly, the Title VI staff was a vocal, positive, student-oriented faction in the school. The staff attempted to work harder; to remain positive with problem students; and to prove that by analyzing teacher behavior and providing a more consistent, open and positive stimulus and response pattern to students one could change students behavior.

Results:

1. To train regular classroom teachers to use behavior modification techniques.

The Title VI Coordinator taught a course in classroom management and motivation at both junior high schools in the district. The course, Psychology 507 - Human Motivation, dealt with an analysis of various concepts of classroom management. The course covered the works of Hewitt, Hering, Walker, Brophy and Good, Silberman, George I. Brown, Glaser, Herndon, Kozol, Rogers, Maslow, Spirow, Brofenbrenner, and Bruner. The teachers were asked to examine their teacher styles and patterns of responding with students and to determine the philosophical basis and data supporting their behavior.

The decision to cover a wide spectrum of classroom management concepts stemmed from the orientation of the instructor and the fact that a large percentage of the teachers enrolled in the courses had taken the earlier Title VI course on behavior modification.

As in any course, the quality of the projects carried out by the teachers varied immensely. A large percentage of the projects employed behavior modification principles. This

occurrence was likely effected by the teachers' familiarity with these concepts and the fact that such projects lend themselves to brevity, concise data collection, and low risk on the teachers' part. Overall the projects were of good quality and the discussions surrounding the material presented were excellent.

2. *To establish teacher teams to work with students whose emotional problems require more structure and support than can be provided by the regular school environment, but who do not require placement in the project classroom.*

The establishment of teacher teams was a long, political process. Unlike elementary school teachers who have almost complete responsibility for a small group of students ("their kids"), the junior high school teacher will often work with as many as 160 students. In this situation, subject matter takes a high priority. A junior high teacher is only responsible for a student during approximately 12% of the school day and is consequently less willing to invest large amounts of time and energy in changing the student's behavior. At Heights Junior High School where the project classroom was housed, the official establishment of teams was unnecessary. "B" level students were placed with teachers who had completed one or more Title VI courses and were interested in working with problem students. By team teaching several courses, offering continual consultation, and meeting frequently during lunch and before and after school, the teams functioned very well on an informal basis. Given the large number of students worked with in the building, this informal procedure appeared more desirable than an attempt to form several teams at each grade level — a necessity since the Title VI students were spread between several teachers in each subject matter area. The use of morning staffings worked

very well for cases where all of a student's teachers needed to meet together. The results of one such staffing — which also included both parents — can be found in Figures 1 and 2.

Figure 1

Example of contract for a "B" level student (No. 18)

D---- H---- has been having problems in keeping up with her school work. The Title VI staff, several of D----'s teachers and her parents met last Friday to discuss this problem.

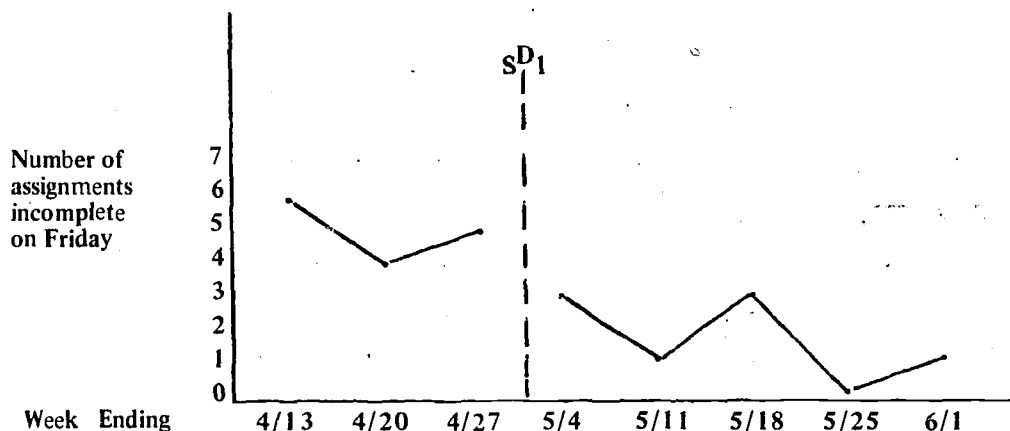
A contract has been set up which involves the following:

1. All of her teachers are asked to make a complete list of all overdue and due assignments. This list should include all work sheets and names of books. The list is to be turned into the Title VI mail box no later than 3:00 p.m. every Friday.
2. Ms. McCulloch will explain the work to D---- so there will be no questions when she gets home.
3. Mr. H---- will pick up the work plus the books at 4:00 p.m.
4. D---- will go straight home and stay in the house until all of her work is done. Her parents will pay no attention to her until the work is completed.

We feel that isolating D---- in class when she is distracting others or herself will be beneficial.

Figure 2

Results of Contract Between Coordinator and "B" Level Student (No. 18) and Parents



The establishment of teacher teams at the building not housing a project resource center appeared to be a necessity. However, teachers were somewhat skeptical and waited to see what type and quality of services could be provided by a three-hour a day consultant. Consequently, during a majority of the school year, the coordinator spent his time at Fremont Junior High School working as a consultant to teachers, counselors, and administrators; observing students; and heading staff meetings. A sample prescription emanating from one such staffing can be found in Figure 3. During the twenty-fourth week of school the

coordinator requested that the Fremont staff evaluate the Title VI services and make recommendations for changes. In this evaluation the faculty expressed their belief that they needed to become more involved in the change process, and the teacher team concept was begun. Teachers volunteered for the teams and a seventh and eighth grade team were formed. The philosophical and mechanical tools for the operation of the teams were drawn up by the teams (Figure 4). The team concept has received exceptionally strong support from the building administrators and will go into effect in the fall.

Figure 3

**Example of a Prescription Sent Out Following
A Staffing**

Re: J--- S---

From our discussion of October 3, it appears that J--- is having considerable difficulty in the school setting and that much of his problem is caused by a real need for attention. This need is understandable given his current family situation. In order to help J--- meet these needs and remain in the school setting we recommend the following program.

1. That inappropriate talkouts on J---'s part be ignored as long as possible. When his actions become so disruptive that he cannot remain in the classroom, he should be sent to the office for the remainder of the period. Try to avoid getting into a power struggle with J---. Simply ignore the behavior until it can no longer be ignored and then dismiss him. Let him know ahead of time that this procedure will be employed.
2. In classes where J--- is not working, give him the right to fail. Simply let him know that you want him to be a part of the class but that the decision is up to him.
3. Reinforce appropriate behavior on J---'s part. He needs to realize that his need for attention can be met through emitting appropriate behavior.
4. Reinforce J---'s interest in football. This should provide some valuable opportunities for developing friendships.
5. Bev Pratt and Vern Jones will have a conference with Mrs. S--- to discuss the home situation as well as J---'s current school problems. Please hand in any information you wish the mother to know to the counseling office by Wednesday of next week (10/11).
6. Most important is letting J--- realize that he can be accepted and have positive interactions with teachers and peers. However, he must also realize that he will not be given attention for obviously inappropriate behavior.
7. It may be advisable to clue the class in to your program for J---. In this case it would be better if J--- were not present -- you might call the office for an excuse to remove J--- for a time. Honesty is the best policy. J--- will be clued in from the counseling office as to this program -- but to save face with peers it would be better if he was not discussed in his presence.

Vern Jones and Bev Pratt

The team consists of the following members:

Polley, Rothrock, Halloway, Halme, Smedley, Fantetti, Togni, Butcher, West,
Jones, Pratt and Harris.

Figure 4

TOTAL TEAM APPROACH

A teacher team approach to helping behavior problem students within the regular classroom

The seventh and eighth grade teams at Fremont Junior High School have adopted the following outline.

1. Rationale

It is recognized that there are certain junior high school students who require a more intensive, consistent, and individualized academic and behavioral environment in order to benefit from the school experience. In many cases these students' behavioral disorders are not severe enough to necessitate placement in a special classroom situation.

Experience has proven that a counselor or consulting psychologist cannot effectively provide and receive feedback on a number of behavior problem students when these students have few teachers in common. In such a situation it becomes logistically impossible to have frequent enough contacts with all teachers involved.

Consequently, the administration and staff at Fremont Junior High School have worked with the counseling staff and the Child Services Department to establish two teams of teachers which will each have approximately six behavior problem students.

These six students will be scheduled so that all or nearly all of their teachers will be team members. This procedure will make it feasible for team members, counselors, administrators, and Child Services personnel to communicate regularly and effectively in order to provide a growth producing environment for each student.

It is also recognized that parent support and involvement in this team effort is necessary in order to provide maximum benefits to the student and therefore maximize effective use of valuable teacher time. Therefore, students will be assigned to a team only if parents agree to having their child involved and are themselves willing to become involved.

II. Operational Procedures

The teams will consist of the following members:

7th grade team	Course	8th grade team
Gary Poppinga	Math	Iris Boon
Boyd Allred	Science	Ori Polley
Nancy Strom	Block	Marcella Othus
Van Gotberg	Block	Jack Sandmeyer
Bob Roberts	Reading	Bob Roberts
Larry Smedley	P.E.	
Lionel Miller	Survey	
Mark Fantetti	Survey	
	Electives	Greg Rounds
Bev Pratt	Counselor	Bev Pratt
Hal Harris	Counselor	Hal Harris

The teams will meet every other week (the 8th grade team one week, the 7th grade the next) from 7:15 to 8:00 a.m. Team members, counselors, and the coordinator of the junior high program for behavior for behavior problem students will be present at every meeting. Building administrators, a district speech therapist, the district's mental health consultant, the Director of Child Services, or district administrators may attend meetings when needed.

The primary function of the bi-weekly meetings will be to provide a method of effective communication between the students' teachers and counseling/consultant personnel. The meetings will be led by the Parkrose Project Junior High Coordinator. The coordinator will have the following responsibilities:

1. to call and chair all team meetings
2. to coordinate the establishment of an effective, individualized academic and behavioral prescription for each student
3. to disseminate these prescriptions to team members and other necessary personnel
4. to meet weekly with each student's parents in either a group or individual meeting.

The team teachers' responsibilities will be to:

1. attend team meetings
2. give full effort in carrying out prescriptions established in team meetings

The counselors' responsibilities will be to:

1. attend team meetings
2. provide crisis counseling support and consultation when the Project coordinator is not in the building.
3. To provide a classroom experience designed to increase the output of positive social behavior and improve academic performance in the basic skills.
4. pre-post examination of school attendance
5. pre-post examination of Metropolitan Achievement Test scores
6. evaluation form – team members
7. evaluation form – parents whose children have been involved

III. Evaluation

The Parkrose Project is dedicated to the concept that the value of all school programs should be proven by objective and subjective data. Consequently, the following procedures will be used to evaluate the total team approach:

1. pre-post Walker Behavioral Checklists to be collected on every student who is selected
2. pre-post classroom observation on the Title VI observation sheet
3. pre-post examination of school grades

Pre- and posttests were conducted using the California Test of Basic Skills (Table I). New "A" level Title VI students were administered the entire (10 subtests) battery, while the previous year posttests were used as pretests for several of the "B" level students. In order to provide a more accurate measurement of reading skills, the building reading teacher administered pre- and posttests on the Bond, Balow, and Hoyt New Developmental Reading Test – Intermediate Level to those students whose reading ability was seen as an academic problem area (Table II). Finally, students' grade point averages were recorded (Table III).

Table 1
California Test of Basic Skills – Pre- and Posttest Results

Student	Reading Vocabulary Test 1		Reading Comprehension Test 2		Language Mechanics Test 3		Language Expression Test 4		Language Spelling Test 5		Arithmetic Computation Test 6		Arithmetic Concepts Test 7		Arithmetic Application Test 8		Study Skills Reference Test 9		Study Skills Graphic Test 10	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	7	–	7	–	12	–	7	–	9	–	13	–	14	–	0	–	4	–	10	–
2	*	9	10	16	4	5	7	12	*	3	*	19	*	12	*	4	3	5	3	10
3	27	–	12	–	1	–	10	–	6	–	*	–	15	–	*	–	5	*	7	–
5	15	15	6	9	13	–	9	13	8	10	8	17	7	8	7	8	7	6	1	15
6	*	16	14	26	3	14	5	11	*	9	16	17	8	12	3	7	6	12	*	14
7					11	16	20	21			26	31	16	22						
8					9	12	7	12			18	–	13	–						
9	9	6	12	15	5	11	7	9	*	1	6	18	0	9	*	1	8	8	4	7
12					7	11	10	10	13	18	23	20	12	12						
13	34	27	24	27	6	7	16	16	10	17	8	6	0	0	6	4	6	6	11	6
14	18	19	13	19	8	10	10	12	12	14	7	12	6	14	5	10	3	11	8	15
15	4	16	6	11	5	5	9	14	9	8	12	11	5	9	2	6	6	10	11	6
18					17	19	21	20	19	17	16	16	15	17						
20					16	12	20	28			18	37	9	20						
21					6	9	13	17			39	38	20	18						
22	5	10	1	3	3	3	3	4	4	6	7	12	10	18	3	7	3	4	5	5
23	9	8	22	31	10	12	8	12	4	10	10	17	6	10	3	11	4	11	1	9
25	15	14	0	7	2	10	4	14	6	8	13	18	3	5	5	7	0	5	4	13
27	23	21	10	13	4	7	14	11	20	18	27	27	12	18	9	17	9	5	10	17
30	25	–	15	–	13	–	10	–	11	–	24	–	14	–	0	–	3	–	23	–
31	19	–	17	–	10	–	8	–	5	–	12	–	0	–	0	–	6	–	0	–
32	12	11	13	25	11	13	10	14	14	16	17	20	12	11	9	13	9	12	18	15
33	11	11	13	15	6	14	6	14	6	8	6	11	6	11	0	6	3	5	10	5
34	16	30	18	10	4	4	17	12	9	6	2	14	11	18	8	17	6	11	12	9

– indicates that student was not available for posttesting

*indicates that student refused to take the test on two occasions

An examination of the data indicates the following results. On the language subtests of the CTBS (subtests 1-5), pre- and posttest data were available on twenty students. Of these, fifteen showed patterns of general gain throughout the language skills area, one (No. 20) gained in language expression while scoring lower in language mechanics, one student (No. 18) remained nearly constant, while three students (No. 13, 27, 34) showed mixed patterns of gains and losses.

On the math subtests (6, 7, 8), results were available on nineteen students. Of these, fifteen showed significant gains in all areas, three students (No. 12, 18, 21) remained nearly constant, while one student (No. 13) showed a general loss pattern.

On the subtests of study skills (9, 10) pre- and posttest results were available on fourteen students. Of these, five showed significant gains in both the library (9) and graphic (10) skill areas. Four students (No. 15, 32, 33, 34) showed gains on the library skills subtest and losses on the graphic subtest. Two students (No. 5, 9) remained constant in the library skills area and showed gains on the graphic skill subtest. One student (No. 27) gained in graphic skills, but showed a loss in library skills, one student (No. 22) remained constant on both tests, and one student (No. 13) remained constant in library skills but fell in graphic skills.

Reading test results showed that eleven of the thirteen students tests showed gains in total reading ability while two students (No. 25, 27) showed losses of two-tenths of a grade level. Seven of the students (No. 4, 6, 10, 14, 23, 32, 34) showed gains of 1.2 or more grade levels.

The amount of tests given during the current project year was excessive. To expect students to put forth a maximum effort on the entire CTBS battery in addition to an extensive reading test after thirty-four weeks of school is unrealistic. By the end of the testing sessions, it was obvious that numerous students were not working up to their ability level. Consequently, the 1973-74 Parkrose Project Junior High will test all students on the Bond, Balow, Hoyt reading test as well as CTBS subtests 6, 7, 9, and 10. This amount of testing should provide an adequate measure of academic growth in the areas of language, mathematical, and study skills without overtaxing the students.

Table III tracks the grade point averages of the Title VI students. Pre- and posttest grades were available on twenty-nine students. Twenty-four of these students showed improvement in grades between the quarter prior to their entry into the program and the last quarter of school (despite the fact that a significant percentage of students had a slight drop in their grades between the third and fourth quarter).

These results proved somewhat surprising to the Title VI staff since while the 1972-73 program dealt more extensively and effectively with social, emotional growth and basic academic skills than the previous year's program; students were not given contracts which provided material gain for improved grades, nor was attendance on field trips dependent upon school grades. Apparently there is potential for having improved academic and study skills and improved behavior influence school grades without specifically reinforcing grades.

Five methods of evaluation were employed to measure the amount of improvement in appropriate school and social behavior of Title VI students. Four of these measures will be discussed in this section while the fifth will be presented in the section dealing with counseling sessions.

First, the Walker Problem Behavior Identification Checklist was administered on a pre-posttest basis. Every teacher of each student was given the checklist during the sixth week of school and again at the end of the school year. As seen in Table IV, total scores decreased in twenty of the twenty-nine cases, increased between 0.00 and 2.5 in five cases, and increased significantly in four cases. In two of the three cases where significant gains were found (students 1 and 5) extreme home problems were a central factor. In these cases the parents failed to attend group meetings or cooperate with the school and the students developed serious drug and behavioral problems. The third student's father was away much of the first semester, and communication between the school and home deteriorated. In this case, however, the father began attending parent groups and working extremely hard at home during the last nine weeks, and the student's behavior and grades showed marked improvement.

Table II

The New Developmental Reading Test -- Intermediate Level
Scores in Grade Level
Pre- and Posttest Results

Student	Vocabulary		Comprehension		Total	
	Pre	Post	Pre	Post	Pre	Post
4	4.2	5.7	3.9	5.8	4.1	5.8
6	4.6	6.0	3.7	4.9	4.2	5.5
8	3.6	4.1	3.8	4.8	3.7	4.5
9	5.5	-	4.6	-	5.1	-
10	4.0	5.3	3.0	5.8	3.5	5.6
14	5.5	7.8	3.7	8.2	4.6	8.0
15	6.5	7.8	4.3	5.0	5.5	6.4
22	3.7	4.1	3.3	3.5	3.5	3.8
23	4.7	7.4	4.3	6.0	4.5	6.7
24	4.1	5.0	3.5	3.5	3.8	4.3
25	5.7	5.5	6.2	5.9	5.9	5.7
27	6.8	7.2	6.8	5.9	6.8	6.6
32	4.2	5.7	5.0	5.9	4.6	5.8
34	4.8	6.5	4.6	6.7	4.7	6.6

Table III

Computed by the following numerical point system:

A=4 B=3 C=2 D=1 F=0 S=2 P=2 U=0 NG=0

Student	Quarter Prior to Entry	Grades While in Program			
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
1	0.67	2.00	1.33	1.25	Residential
2	*	2.29	2.00	2.20	2.00
4	1.83	—	1.80	2.17	2.33
5	0.00	2.50	1.67	1.60	Suspended
6	1.33	—	—	—	2.33
7	1.67	1.86	3.00	2.57	2.57
8	1.20	1.60	1.40	1.60	1.50
9	.50	—	—	1.60	1.50
10	1.50	—	2.17	0.83	1.17
11	1.83	—	2.40	—	1.0
12	1.33	1.00	2.00	1.14	1.43
13	0.75	2.67	2.00	1.50	1.33
14	1.67	—	—	2.00	1.00
15	1.16	—	1.67	2.00	1.83
17	0.17	—	—	1.83	1.50
18	1.50	1.60	1.71	1.67	1.86
19	1.67	—	—	1.83	1.17
20	1.33	1.33	1.17	1.43	1.87
21	1.67	2.00	2.00	1.33	1.33
22	*	2.14	2.00	1.80	1.83
23	1.57	—	1.83	1.83	1.83
25	1.16	—	—	3.17	2.50
27	1.20	—	—	1.00	1.67
28	1.86	—	1.86	2.57	2.43
29	0.67	—	—	1.40	1.67
32	0.67	—	—	—	2.50
33	Expelled	2.43	2.00	2.14	2.43
34	0.00	2.67	1.80	1.83	1.17
35	1.67	—	—	1.50	1.83

* Designates 7th grade students who were placed in the program midway through the first 9 weeks grading period. At the time of placement all of these students had less than a I.O.G.P.A.

Table IV

Walker Problem Behavior Checklist Mean Scores
Pre- and Posttest Results

Student	1 Acting Out		2 Withdrawal		3 Distractibility		4 Disturbed Peer Relations		5 Immaturity		Total	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
1	0.50	7.75	3.50	0.75	2.00	6.50	0.50	1.75	0.00	0.50	6.50	17.75
2	9.67	5.60	2.33	0.80	8.00	5.80	0.78	0.00	3.44	0.00	23.33	12.20
4	7.29	8.17	4.85	2.33	6.57	5.00	5.29	5.00	4.71	4.33	28.71	24.83
5	5.20	6.60	3.20	5.20	4.60	7.00	1.60	1.40	1.40	4.80	16.00	25.00
6	6.83	0.20	1.00	0.20	6.50	2.80	2.50	0.00	2.16	0.00	22.16	3.20
7	4.00	3.83	1.75	5.83	5.00	1.83	1.75	2.50	2.00	2.67	14.50	16.66
8	5.25	6.20	4.25	0.20	5.50	1.80	1.50	0.00	1.50	0.00	18.00	8.20
9	14.20	6.40	2.20	0.80	10.80	5.80	6.80	3.20	4.00	1.20	38.00	17.40
10	0.75	2.00	4.25	5.00	3.50	3.25	2.00	1.50	4.50	2.00	15.00	13.75
11	7.60	8.00	2.00	2.00	8.60	10.00	3.40	3.00	1.80	1.00	24.00	24.00
12	0.00	0.50	4.60	3.00	0.00	1.25	0.00	0.00	0.00	0.00	4.60	4.75
13	6.40	2.20	7.60	3.60	2.40	3.80	4.40	1.00	4.40	2.40	14.50	13.00
14	14.33	5.83	0.33	0.00	10.00	4.33	3.66	0.17	0.00	1.17	28.00	11.50
15	4.00	4.00	1.50	1.60	5.75	3.40	2.25	0.60	2.75	3.40	16.25	13.00
17	2.60	4.00	1.20	1.17	3.00	3.83	0.60	0.83	0.80	2.33	8.40	12.16
18	8.20	4.57	2.80	0.00	6.60	6.57	2.40	0.57	3.80	1.43	23.80	13.14
19	4.40	5.25	2.40	0.75	2.40	4.00	1.60	1.50	0.40	0.50	10.80	12.00
20	3.57	10.80	0.85	2.40	3.42	6.00	0.00	1.40	0.42	4.20	8.26	24.80
21	5.00	3.00	0.40	0.83	6.50	4.50	1.33	1.17	0.66	0.33	13.83	9.83
22	10.00	0.60	0.00	1.40	10.00	3.40	0.00	0.00	2.00	0.40	22.00	5.80
23	11.16	3.67	0.33	2.00	8.83	2.67	3.83	0.17	0.33	1.00	24.83	9.51
25	3.25	2.86	3.25	2.57	9.50	2.71	2.50	0.86	3.00	1.14	16.50	10.14
27	13.16	15.20	0.33	0.20	7.83	5.40	3.67	0.80	2.16	3.40	27.16	25.00
29	11.00	4.50	3.33	5.25	9.67	4.50	3.00	2.25	3.67	1.00	30.67	17.50
32	4.14	0.00	2.42	0.33	6.71	0.00	1.42	0.00	3.00	0.00	17.71	0.33
33	14.50	4.75	0.00	0.50	5.50	4.75	4.50	2.00	2.00	0.00	24.50	12.00
34	2.16	3.80	1.83	0.60	3.16	5.40	1.66	1.40	1.33	1.40	10.14	12.60
35	6.40	1.25	1.00	2.50	7.60	6.50	4.40	3.50	3.80	4.25	23.20	18.00

A second method of evaluating student behavior change was the Title VI Behavioral Data Checklist (Figure 5). A five minute random sample of attending vs. nonattending behavior was taken in every class for each student on a pre-post basis. The coder observed the student every 15 seconds for five minutes and indicated at each interval whether or not the student was attending. As seen in Table V, twenty-one of the twenty-eight students for whom pre-post observations were available showed increases in attending behavior. Five students showed patterns of slight decreases in attending behavior (No. 12, 18, 19, 22, 33). However, it should be noted that decreases were small (8% or less in four cases) and that the students were all emitting very high attending patterns on both their pre- and posttest scores. One student (No. 29) showed a constant attending pattern, while one student (No. 5) showed a large decrease.

Table V

Observations from Title VI Behavioral Data Checklist
Percent of Time Attending
Eliciting Appropriate Classroom Behavior

Student	Pre	Post
1	78	Left school
2	48	86
3	85	Moved
4	80	97
5	62	23
6	51	83
7	91	98
8	88	98
9	28	74
10	61	93

Student	Pre	Post
11	34	61
12	95	91
13	67	86
14	54	93
15	29	95
16	54	Moved
17	40	53
18	90	82
19	100	80
20	96	96
21	55	68
22	81	76
23	17	78
24	61	Moved
25	46	98
27	30	72
28	46	86
29	30	88
30	43	Expelled
31	81	Moved
32	35	79
33	89	85
34	74	78
35	13	58

School attendance was a third tool employed in evaluating student behavior change (Table VI). However, attendance was initially seen as a problem with only seven students (No. 2, 4, 8, 15, 22, 29, 33). Of these seven, six showed marked improvement and one (No. 2) showed a slight improvement. It should be noted that six students (No. 1, 5, 9, 11, 20, 21) showed marked attendance difficulties. In two of these cases illness or family vacations caused this change. Of the remaining four, one student (No. 1) was placed in a residential treatment center, and three (No. 5, 9, 21) simply had increased school difficulties.

Table VI

School Attendance Record

Student	Pre Days missed during first 9 weeks of school	Post Days missed during second nine weeks of school
1	3	10
2	6	5
3	6	Moved
4	6	1
5	2	11
6	0	1
7	0	0
8	8	1
9	1	6
10	1	2
11	2	19
12	3	3
13	1	2
14	0	3
15	7	0
16	2	Moved
17	1	2
18	1	0
19	3	3
20	1	5
21	0	9
22	5	0
23	1	3
25	0	1
27	0	1
28	0	0
29	6½	2
30	Expelled	Expelled
31	3	Moved
32	1	0
33	4	1
34	0	0
35	1	0

The fourth measure used to examine student behavior was the use of charts posted on the walls in the Title VI classroom. As mentioned earlier, the Title VI staff devised a method for employing peer group pressure as a means of improving student behavior. The students and staff developed the behaviors which would be monitored, the procedures for monitoring behavior, and the possible group rewards (Figure 6). Student behavior improved markedly. During the first week the group procedure was employed, the winning group had a minus number (more checks than pluses). However, by the fifth week, both groups had positive totals.

Figure 6

Description of the Group Behavior Change Program as worked out with and presented to the students

BEHAVIORS FOR GROUP MONITORING

1. Behavior in non Title VI classes, including
 - a. to class on time
 - b. prepared for class
 - c. no disciplinary problems

d. adequate participation

A Title VI teacher will check with each teacher once every week.

2. Behavior in Title VI classes

- a. to class on time
- b. prepared for class
- c. no disciplinary problems
- d. adequate participation

A Title VI teacher will randomly give pluses for appropriate behavior and minuses for inappropriate behavior.

3. Behavior in Title VI study halls

- a. seated in appropriate area
- b. using time well – being productive
- c. no excessive talking out

4. Behavior in halls, etc.

(All disciplinary reports from teachers or administrators will be counted.)

GROUP ACTIVITIES

1. Every Friday the group which has done best will go out to lunch.
2. Once a week each group will have one afternoon free to leave school and do volunteer work in the community. Each group will have elections periodically to choose projects.
3. Once in awhile, teachers will give group extra projects. For example, the groups might be given one week to memorize the multiplication tables, and either group, if successful, would get a group payoff.

A chart was also established in order to assure that all students do two assignments each day before they received free-time privileges such as playing games, listening to the stereo, sitting in the beanbag chairs, receiving a pass to the shop or gym area, etc. The use of this chart significantly increased the number of assignments completed.

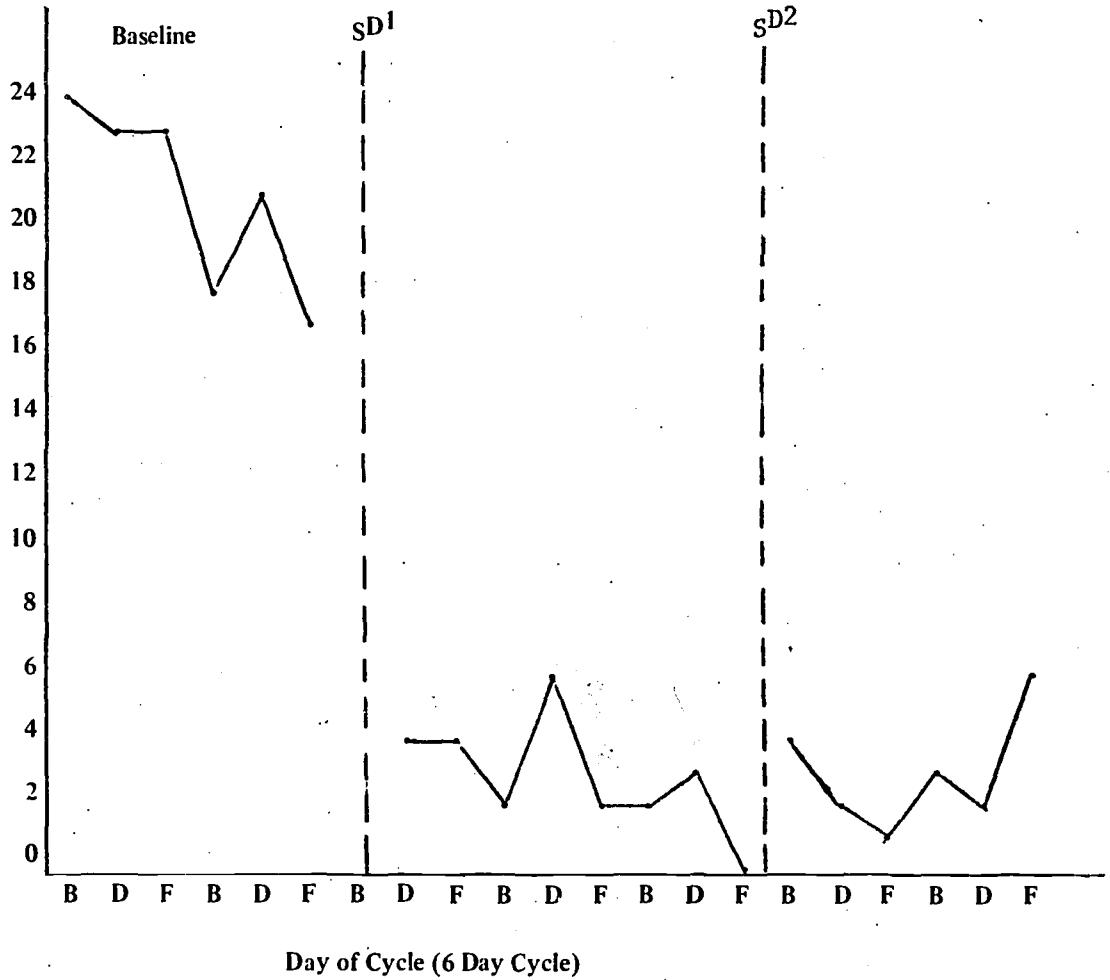
4. To conduct counseling sessions designed to assist in the development of positive behaviors.

The counseling session employed by project personnel could basically be broken down into four types: (1) group counseling, (2) counseling centered around contracts, (3) crisis counseling following periods of time out, (4) rap session. Group counseling was employed to reach two overlapping goals: open, democratic solution to classroom problems and improved interpersonal communication skills. An example of the type of data collected and the success of the groups led by the project teachers can be seen in Figure 7.

Figure 7

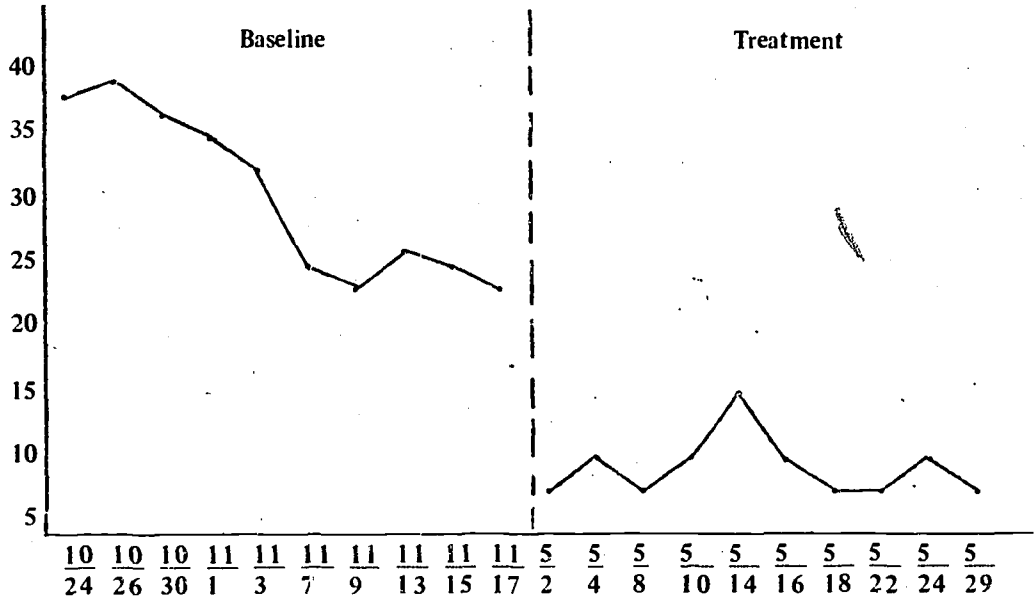
Examples of Student Behavior Data During Classroom Meetings

Number of interruptions of other students in a 15 minute period



SD1 – Student informed that after 5 interruptions he would be excluded from the group meeting for the remainder of the day

Total student interruptions during a 15 minute period



Contracts with students were used much less frequently than in the 1971-72 project. When contracts were devised, they most often employed logical, home, or peer-based consequences as opposed to material rewards. The reason for this alteration in the project's format was an extensive amount of feedback from students stating that they perceived the contracts as bribes and that they were consciously changing their behavior simply to receive the reward. They openly indicated that they were playing a cost economy game and saw no real change in their attitudes. This feedback from students fit with an analysis early in the year of which "B" level students were functioning most effectively in the school setting. Those whose primary intervention had been home-based, logical consequence-based, appeared to be functioning well. Those who had been primarily dependent upon contractual agreements during a large portion of the year were having problems similar to those which had required their admission into the program. Therefore, contracts were usually worked out between a Title VI staff member, the student, and parents, peers, or administrators. Contracts very seldom dealt with material rewards earned on an individual basis. See example of Contract in Figures 8 and 9.

Figure 8.

Example of a contract with an extreme behavior problem "A" level student (No. 2)

Contract for D--- A----

If D--- A---- has a discipline problem at school (i.e., bad language, refusing to obey a teacher, skipping class, talking out in class, or fighting) his parents will be called and he will be grounded for that Friday night.

If D--- has a second discipline problem he will be grounded all day Saturday.

If D--- has a third discipline problem during the week, he will be grounded for Sunday.

If D--- has a fourth discipline problem, he will not be allowed to take part in his weekend hockey game.

If D--- has a fifth discipline problem during any week, he will not be allowed to watch television all weekend.

D--- A---- Student

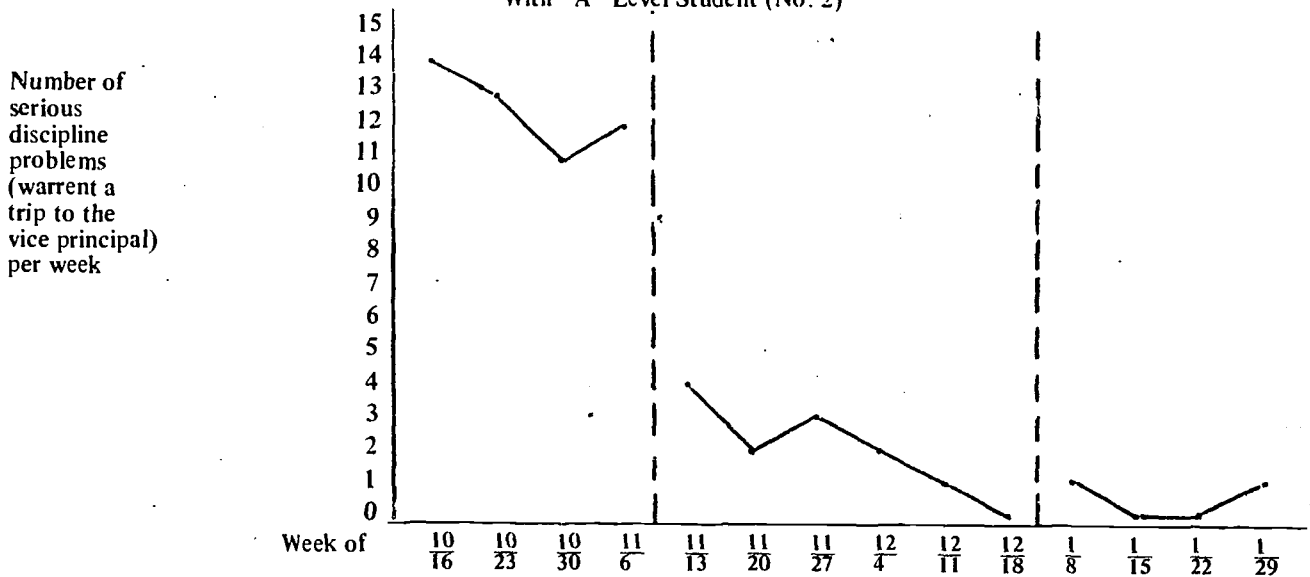
Mrs. A---- Mother

Dr. Vernon F. Jones --- Title VI

Dated: 11-13-72

Figure 9

Results of Home Contract With "A" Level Student (No. 2)



SD¹ Contract on preceding page
SD² Contract altered so that first discipline problem meant Sunday grounding

The third type of counseling sessions were sessions following periods of "time out." One very real problem in dealing with behavior problem junior high school boys is how to handle periods of uncontrolled behavior. It was determined that by immediately counseling the student, the project staff was both reinforcing inappropriate behavior and establishing an unrealistic situation; i.e., in the regular school program such outbursts are not followed by positive counseling. However, methods such as sending the student home were potentially reinforcing and failed to place the responsibility with the student. The procedure worked out by the Title VI staff can be seen in Figure 10. This procedure proved most satisfactory as it placed the responsibility on the student, reinforced only appropriate behavior, and provided the student with a means of reestablishing positive contact with a Title VI staff member.

The final type of counseling sessions employed were rap sessions where a Title VI staff member and two to six students would spontaneously discuss issues of concern. These frequent sessions provided ideal situations for students to discuss serious peer problems, home problems, drug concerns, etc. Both classroom teachers were excellent at providing safe, productive rap sessions, and these sessions were a vital part of the program.

5. To provide parents with training in behavior modification techniques and to assist them in applying these techniques.

As discussed earlier, the parent groups combined training in behavior modification techniques and the examination of interpersonal communication patterns, with a family problem solving format where both skills could be practiced. The value and success of the parent groups and extensive parent contacts (Table VII) can best be seen by examining the parent evaluation forms accompanying this report and by the letter framed and presented to the School Board by the parents. A great deal of the success of the program must be attributed to the willingness of the parents to change their behaviors and to become more effective change agents for their children. The project's

success in working with parents can be largely attributed to the tremendous amount of feedback and services provided parents. In addition to the parent groups, parents received frequent written reports on their child's school progress and frequent phone contacts. Furthermore, the students' parents felt free to call a Title VI staff member at any time to discuss problems relating to the student.

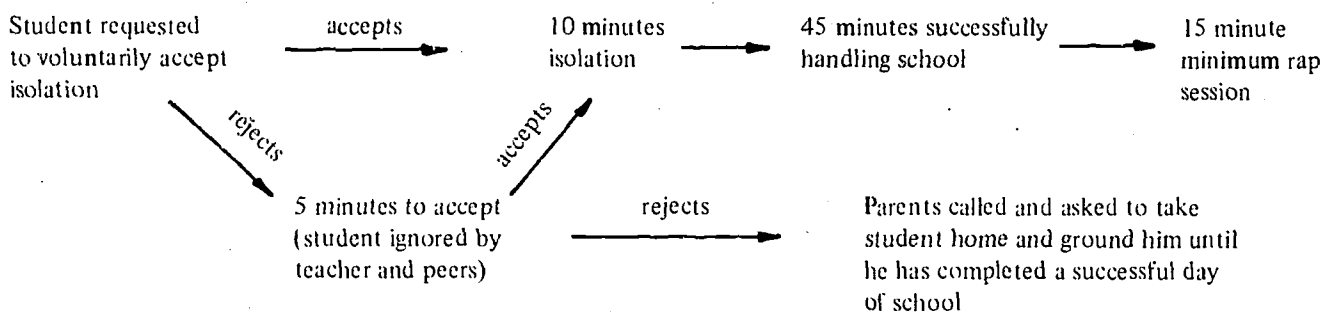
Table VII
Total Parent and Professional Contacts*

Student	Total Parent	Total Professional (outside of district)
1	95	98
2	173	9
3	45	37
4	4	6
5	87	18
6	23	0
7	4	0
8	6	10
9	37	4
10	4	7
11	86	33
12	6	2
13	101	14
14	87	5
15	45	0
16	15	6
17	0	0
18	71	0
19	0	0
20	61	0
21	9	3
22	75	9
23	49	2
24	39	14
25	52	0
26	30	63
27	30	0
28	4	0
29	5	10
30	18	27
31	37	15
32	48	0
33	35	4
34	97	0
35	34	0
Others	27	33
TOTAL	1,539	429

*Includes all recorded phone conversations, home visits, school conferences, evening conferences, and parent groups. Does not include a substantial number of contacts (perhaps 10%) which either Title VI teachers or coordinator failed to record.

Figure 10

Procedure for Handling Student's Being Out of Control



At a car wash held to finance an overnight field trip in April, all "A" level students and their parents participated. Parents worked with the students, brought in their cars and friends cars, and talked with the students during slack periods.

6. *To continue revision and refinement of the model for the educationally handicapped child within the framework of the regular junior high school.*

The third year of Title VI funding allowed the program to develop into a viable, effective model and to come closer to answering several important questions.

Several issues clarified themselves during the three years of Title VI funding. First, a project is as good as the people who work in it. There is no substitute for open, real, caring, talented, and dedicated teachers. The 1972-73 program had two exceptional teachers.

Secondly, there appears to be very real limits to the amount of responsibility for changing student behavior which can be placed in the hands of the regular classroom teacher. Junior high school teachers deal with approximately 150 students a year in a classroom setting and numerous additional students in extracurricular activities. In addition, each teacher has a student for only a small percentage of the school day. Consequently, these teachers of necessity lack the intense interest in and energy for changing the behavior of an individual student. Therefore, the establishment of a team of specialists to work with these students in both the academic and behavioral areas appears mandatory if significant changes are to be made. The experience of this project at Fremont Junior High School bears out this belief. In most cases, teachers found it difficult to work with extreme acting-out or passive-aggressive students even when provided with prescriptions for doing so. What was really required in the building in order to provide meaningful services was a resource room staffed by a teacher and an aide. This room, functioning in a manner similar to the project room at Heights and under the supervision of the coordinator could have provided the services necessary for dealing with a majority of the seriously emotionally handicapped students in the building. It is the Title VI coordinator's belief that while the teacher team concept is theoretically sound and based on sincere concern by the teachers, that it cannot deal with extreme problem children. The team concept should, however, provide services for borderline students if teachers place a high enough priority on the time and energy commitment required.

Over the past three years, the Title VI project has carefully examined the concern of integrating project students back into total involvement in the regular school community. A satisfactory procedure composed of three parts has been developed. First and most importantly, project students always remain a part of the regular school program. Students are never placed in the project classroom

for more than 50% of the school day, and often for as little as 20%. In addition, students not in the program use the Title VI resource room, and Title VI staff become involved with non-project students in a variety of ways (clubs, coaching, refereeing, teaching, etc.). Secondly, as project students become prepared to spend a reduced amount of time in the project room, they are scheduled into classes taught by teachers who have had one or more of the courses offered through the Title VI program. In addition, project staff are occasionally involved in team teaching courses in which a large number of "B" level students are enrolled. Thirdly, when a student moves to the high school, a written report is sent and a conference held with the senior high school counseling staff to discuss the student and make recommendations in both the academic and behavioral domains. While a more intensive follow through procedure at the high school would be desirable, it is currently unfeasible given the number of counselors available, the size of the school, and the subject matter orientation of much of the staff.

The major area of weakness in the 1972-73 Title VI project under evaluation was the project staff's continued inability to set a realistic limit on the number of students involved. Project personnel worked with large numbers of students who would be classified as borderline and for whom no data was collected. The project coordinator even led an additional evening parent group for some of the parents of these students. It is the project staff's recommendation that in the future the staff work with a more limited number of students and more closely concentrate their efforts on these student without, however, slackening staff involvement as members of the entire school staff.

Third Party Evaluator's Comments:

This year's report once again was well organized and carefully analyzed by the project coordinator. As one examines and reviews this year's data and compares it with the last two years, the results are most impressive.

The Title VI staff did respond to the earlier data by concentrating on the younger children who showed more significant gains academically and socially than the older students whose behaviors are more entrenched and for whom identifying and controlling reinforcers is much more difficult. The staff did not ignore nor reject the older students, only the focus of the project was on the younger. The shift in emphasis will hopefully result in fewer eighth and ninth grade behavior problems.

The data for the past three years indicate the emergence of a successful model for junior high school age behavior problem children. This model has not been static, but continuously modified based on direct input from students, teachers, parents and administrators.

With few disagreements the teaching and administrative

staffs at both junior high schools support the continuation of this model. That is not to say that there were no criticisms or disagreements with some of the methods employed by the Title VI staff, but that the general consensus was that this is a most valuable program and is being responsive to the needs of the junior high school age behavior problem child. In addition, the inservice training courses provided by the Title VI staff for the junior high school class teachers has provided the regular classroom teacher with needed skills in dealing with behavior problem children on a day to day basis. In essence what has happened as a result of this particular model being implemented is that the rate of attendance has increased and the number of expulsions and suspensions has decreased. In other words, the Title VI staff with the cooperation of the regular classroom teachers have found methods by which they were able to keep behavior problem children in school, motivate them, and help them become an integral part of the school environment.

The Third Party Evaluators believe that one of the most beneficial aspects of the program has been a change in attitude by the junior high school staff members. Prior to the inception of this Title VI model many teachers favored suspensions and expulsions for a wide variety of behaviors. As a result of the implementation of this program teachers are now making efforts to maintain those children in school and find alternative means by which to deal effectively with

the inappropriate behaviors these children are emitting within the school environment.

The Third Party Evaluator believes it is necessary to scrutinize every last detail of data submitted by the project, but it was impossible to include all of the data submitted by the project in this report. However, the reader is referred to **Impact V** and **Impact VI** for further information regarding the comparison of this year's project with the past two years. This year's data stands for itself and when compared with the last two years will show that the Title VI staff and the school personnel were sensitive to the data and modified and changed program strategies as a result of the data. The Third Party Evaluator recommends that the VI staff and the Parkrose Public School District, in some other way than is being reported in **Impact VII**, report to the public the results of the past three years. In addition, it would be beneficial to those engaged in similar projects to have some follow-up data on the Parkrose projects for the next two or three years. Should you have any questions regarding this program and its implementation you should contact the Director of Child Services, Parkrose Public Schools, Portland, Oregon.

The Third Party Evaluator would like to congratulate the staff of the Title VI project as well as those teachers who were instrumental in maintaining this program for the past three years and to express the hope that this project will be continued in future years.

Title of Project: *Educable Mentally Retarded Classroom on Junior High Level*

Location of Project: *Prineville, Oregon*

Type and Number of Children Served: *16 Educable Mentally Retarded*

Funding Allocated: *\$11,000*

Project Beginning Date: *September 5, 1972*

Project Ending Date: *June 6, 1973*

Background and Rationale:

The goal of this project was to academically help the EMR students from ages twelve through fifteen years. The school district has had for the last nine years an on-going program for primary EMR students whose ages ranged from six through eleven years. In the past, when these EMR students reached twelve years of age, they were placed directly into a regular junior high classroom. With special Title VI funds it was hoped that a special junior high school program could be developed for children from ages twelve through fifteen, who were evaluated as being EMR. It was the intent of this program to supply these children with a positive learning environment so that the students had a fair chance of experiencing academic success in their remaining school careers. At the same time, other junior high EMR students with no previous connection with the local primary EMR class were given a chance to succeed academically.

Objectives and Evaluation Plan:

1. *Establish a junior high school program for fifteen to eighteen EMR students at the Prineville Junior High School.*

The number of students and staff included in the program and a narrative description of the program.

2. *Improve reading skills of EMR students.*

Slosson Oral Reading Test or the Doren Diagnostic Reading Test, and/or the Gates-MacGinitie Reading Test.

3. *Improve math skills of EMR student.*

Wide range achievement test and other appropriate individualized math tests.

4. *Reduce the number of hours each EMR student spends in the EMR classroom during the school year 1972-73.*

Weekly count of hours each child spends in the EMR classroom.

Methodology:

The project was staffed by a project director, a teacher certified to teach Educable Mentally Retarded, and a teacher aide.

This special class was scheduled to begin operation in the late fall of 1972 in the Prineville Junior High School, with a specific room set aside and designated for this junior high EMR class.

During this school year, 1972-73, a building program was undertaken to enlarge the Junior High and High School. However, some construction problems arose which prevented completion on schedule, and students in the city schools were not shifted, as originally planned making the special classroom which was planned not available. Therefore, on January 22, 1973, this special class was housed in the Crooked River Elementary School area, and this was the first time the EMR students attended the special class in a permanent classroom.

The special class teacher, met regularly with the students in his room during the period from September 15, 1972 to January 2, 1973.

It was decided to keep each junior high EMR student in their regular building during the morning, until noon. In the afternoon these students were transported to the special EMR classroom, located at Crooked River School. By so doing, these older students could receive elective courses in the morning which couldn't have been provided in the special room in the afternoon. There were eight students involved.

In the morning the younger students attended the special EMR class. In the afternoon they went back to their regular classrooms and received the regular instruction. There were eight of these students who received instruction in the special class in the mornings.

Three students were in a primary EMR class in the afternoon, and then attended the junior high EMR classroom in the mornings.

In summary then, each child in this special class received a half day's instruction in actual special class. The other half of the child's day was spent in the regular classroom setting. Each of the eight students who attended the special room in the mornings received three hours of instruction per day. Each of the eight Junior High students received two and one half hours of instruction each school day.

One of the teacher's activities included administering the Slosson Intelligence Test to students thought to be eligible for the program. In addition, he became acquainted with his students by having them read orally, and gave them various teacher-made tests to help determine their academic levels of proficiency.

He also devised an individual program in both math and reading whereby each child progressed at his own rate. A daily graph was kept on each child in order to ascertain growth. Students were introduced to this individual program from the early fall, and it was successfully used throughout the year.

Concentration was on two main academic areas, reading and math.

Reading Program

1. All students read at least ten minutes a day silently from a book of their own choice. A "book completed" list was kept for each individual student.
2. All students read a minimum of three times per week orally to the teacher's aide, from a reading series such as *Deep Sea Adventures* or *Morgan Bay Mysteries*. These series are progressive in the degree of reading difficulties.
The teacher aide would (1) listen, (b) underline in her book any mispronounced words, (c) discuss plots, characters, etc. with student, (d) review previous mispronounced words, (e) make flash cards of words missed in that day's reading for future word review.
3. All students were assigned and progressed in the SRA reading labs, with a minimum of four assignments per week. Five perfect test scores were required before advancement.
4. Students, also as a way of more review, typed the words from their oral reading.
5. All students worked occasionally (one to two times a week) on teacher-made hand-outs such as, crossword puzzles, following direction games, etc.
6. Boys worked in the *Checkered Flag Reading Labs*. (Produced by Fleid Educational Publications). These are reading kits with high interest, low level units which include tapes, books, filmstrips and records. Also included are different types of tests for each reader. These also were utilized to a limited amount. It was intended that the

Checkered Flag series be used more in a motivational way than in an instructional manner.

7. Three boys of very low level reading ability worked in and progressed through programmed reading workbooks.
8. Three more advanced students worked in the *Reading Success Series* workbook.
9. All students worked in the Cyclo-Teacher learning kits, at least three times each week.

Math Program

1. All students had appropriate grade level workbooks. More advanced students had two workbooks. The second book had practical, everyday problems which often involved low level abstract thinking.
2. All students had occasional ditto hand-outs that involved math. Included were games, puzzles, etc. The objective was motivational more than instructional.
3. Students were assigned lessons from the math area of the cyclo-teacher learning kits. This is a professionally programmed learning machine.
4. The major portion of the math program was a teacher-designed program which included work sheets in all four basic operations, addition, subtraction, multiplication and division.

These programmed learning worksheets were progressive in nature. For example: the first sheet in addition is, 1 plus the numbers 0 thru 5. The second sheet is the number 1 plus the numbers 6 thru 9, and the third sheet is 2 plus numbers 0 thru 5, etc.

This program included sheets as mentioned above for all four operations, and included addition of digit in columns of three, subtraction of two place digits, division of two places with remainder, and four digit multiplications.

The program was open ended, in that it could have been continually expanded to meet the needs of the faster or more advanced students.

Each worksheet was called by an alphabet letter. For example, addition A, addition B, and etc.

A scoring criteria was set for each individual student depending on the speed of that student's handwriting. (Students were asked to write to 100 for one minute to determine speed.)

This allowed us to test students for one minute timings on each individual worksheet. Students were expected to meet a level of 15-20 problems per/minute per/page (correct) depending upon individual speed and difficulty or complexity of problems.

If students failed to meet their criteria they were then reassigned that particular worksheet for the following week. Then after three or four days of practice another one

minute test was given on that same worksheet. One minute testing also eliminates the fatigue factor. If a student met this criteria he was then assigned the next higher level in that particular operation. Graphs were kept on each child for all four math operations and included both correct and incorrect responses.

In addition to the two subjects, reading and math, students were given exposure to spelling, taken on field trips, introduced to health topics (cleanliness, appearance, etc.) and allowed to try various activities such as sewing, crafts, etc.

Results:

1. *Establish a Junior High School Program for fifteen to eighteen EMR students at the Prineville Junior High School.*

Table I
Slosson Oral Reading Test Results

Student	Date	Score Grade Equivalent (p=pretest P=posttest)	Gain
1	11/20/72 6/6/73	2.5 (p) 4.2 (P)	+1.7
2	3/6/73 6/73	7.0 (p) 7.9 (P)	+ .9
3	3/6/73 6/6/73	7.5 (p) 5.7 (P)	-1.5
4	3/5/73 6/73	1.9 (p) 2.3 (P)	+ .4
5	3/6/73 6/73	2.4 (p) 3.1 (P)	+ .7
6	3/5/73 6/5/73	7.9 (p) 7.9 (P)	0
7	3/6/73 6/6/73	4.5 (p) 4.6 (P)	+ .1
8	3/6/73 6/6/73	2.9 (p) 3.2 (P)	+ .3
9	3/5/73 6/6/73	5.4 (p) 6.4 (P)	+1.0
10	1/3/73 5/1/73	5.9 (p) 6.7 (P)	+ .8
11	3/6/73 6/6/73	1.7 (p) 1.9 (P)	+ .2
12	3/5/73 6/6/73	1.7 (p) 1.7 (P)	0
13	11/16/73 6/5/73	3.4 (p) 4.4 (P)	+1.0
14	11/5/72 6/6/73	5.8 (p) 6.7 (P)	+ .9
15	11/5/72 6/6/73	2.8 (p) 3.8 (P)	+1.0
16	3/6/73 6/6/73	6.0 (p) 6.4 (P)	+ .4

There were a total of sixteen EMR students enrolled in this program. Eight students were at the junior high level, and eight students were younger.

2. *Improve reading skills of EMR students.*

The Slosson Oral Reading Test was used on a pre-posttest basis. (See Table I.) Thirteen students showed some gains in reading ability with only one student showing a loss during the year.

3. *Improve math skills of EMR students.*

The Wide Range Achievement Test (math section) was used on a pre-posttest basis. Pretest was given in March 1973 and posttest was given in June, 1973. Results show (see Table II) that seven students made some gain in grade equivalent scores, five children showed a loss in grade equivalent scores and four neither gained or lost grades during the three month instructional period.

Table II
Wide Range Achievement Test Results

Student	Date	Score Grade Equivalent (p=pretest P=posttest)	Gain
1	3/6/3 6/73	3.0 (p) 2.6 (P)	- .4
2	3/7/3 6/73	5.2 (p) 4.5 (P)	.7
3	3/7/3 6/73	3.9 (p) 4.7 (P)	+ .8
4	3/7/3 6/73	4.5 (p) 3.9 (P)	- .4
5	3/7/3 6/73	3.9 (p) 3.9 (P)	0
6	3/7/3 6/73	3.9 (p) 4.2 (P)	+ .3
7	3/7/3 6/73	3.6 (p) 3.9 (P)	+ .3
8	3/7/3 6/73	4.2 (p) 4.2 (P)	0
9	3/7/3 6/73	5.0 (p) 4.5 (P)	- .5
10	3/7/3 6/73	4.7 (p) 5.5 (P)	+ .8
11	3/7/3 6/73	3.9 (p) 3.9 (P)	0
12	3/7/3 6/73	2.8 (p) 4.2 (P)	+1.4
13	3/7/3 6/73	3.9 (p) 4.2 (P)	+ .3
14	3/7/3 6/73	4.2 (p) 5.2 (P)	+1.0
15	3/7/3 6/73	3.6 (p) 2.4 (P)	-1.2
16	3/7/3 6/73	4.5 (p) 4.5 (P)	0

In addition, individualized programs were run in the areas of addition, subtraction, multiplication, and division. See Table III for the results of these programs. Results show that the sixteen children acquired 294 math skills with each child acquiring an average of eighteen skills between January 1, 1973 and June 6, 1973.

were collected in December, 1972 and January, 1973 show good gain scores while those data points that were collected in March, given two exceptions, show little, if any gain. Again, if pretest data had been collected in September we may have seen some good gains achieved by these students on this project.

Table III
Individualized Math Program Results

Student	Addition Skills Acquired	Subtraction Skills Acquired	Multiplication Skills Acquired	Division Skills Acquired	Total
1	4	4	4	0	12
2	6	4	5	3	18
3	9	3	7	5	24
4	4	3	2	3	12
5	7	5	4	1	17
6	6	4	5	4	19
7	7	7	7	6	27
8	4	4	4	3	15
9	10	0	6	7	23
10	2	1	4	1	8
11	7	5	5	5	22
12	5	7	5	3	20
13	6	6	5	7	24
14	5	4	3	3	15
15	7	4	6	5	22
16	6	5	2	3	16
Total	95	66	74	59	294
x	5.9	4.1	4.6	3.68	18.3

4. *Reduce the number of hours each EMR student spends in the EMR classroom during the school year.*

The project did not reduce the number of hours these students spent in the classroom.

Third Party Evaluator's Comments:

It becomes apparent, when one examines the test results, that the major fault of this program lies in its failure to collect pretest data in September of 1972. None of the WRAT scores were collected before March of 1973, leaving merely three months between pre- and posttest. It is not realistic to expect to show significant change over a three month period with this type of measuring instrument. The same criticism applies to the Slosson testing instrument. It is interesting to note, however, that those data points which

The project deserves to be complimented on its development of a very well planned individualized math program. The collection of these data provided a good check on student progress in this academic area.

The project staff reports that the district is planning on continuing this program next year and this fact is an indicator of a successfully conducted program. The project rationale and its program strategies are in all probability sound, and it is recommended that a sound data collection system be initiated during September of 1973, with continuous on-going data being collected throughout the year. This type of data system would allow for continuous monitoring of children's progress along with providing the necessary posttest data at the conclusion of the year. The staff deserves to be commended for providing a much needed service to the district, community, and children of Prineville, Oregon.

Title of Project: *Pre-School Prevention of Speech Problems*

Location of Project: *Wasco Intermediate Education District, The Dalles*

Type and Number of Children Served: *Parents of pre-school aged children*

Funding Allocated: \$3,305

Project Beginning Date: 7/10/72

Project Ending Date:

Background and Rationale:

A problem faced by many speech clinicians is the problem of large case loads and not enough time to serve the children who need assistance with these problems. It was the feeling of the Wasco County Intermediate Education District that many of the speech problems presented by young primary age children could be prevented if a program were set up by which parents could be trained to provide programs in teaching their children to talk in the home situation before they were enrolled in school. In addition it was felt that the parents should be provided with information concerning the types of experiences and activities that should be conducted with children in order to reduce their chances of developing a functional speech or language problem. It was our opinion that a significant reduction of children entering school with speech and language problems could be realized if the parents were given this type of training.

It was the purpose of this project to provide parents with information concerning childrens' language development and the kinds of activities that would reinforce the development of normal language and speech patterns. These skills were to be used by the parent in the home setting prior to the child entering school. By reducing the number of children entering school with speech or language problems it would allow the clinician time to spend with children who had more severe speech and language problems.

Objectives and Evaluation Plan:

1. *To reduce the incidence of speech and language problems among the first grade children in the schools in Wasco and Sherman Counties.*

To evaluate this objective the incidence of speech and language problems was to be reported from the academic years 1970-1971, 1971-1972, and the incidence figures were also to be collected in September of 1972 at the beginning of this project.

2. *To develop a criterion reference test in relation to the "Teach Your Child to Talk" kit that would assess the parents' knowledge of normal development of speech and language and the treatment of speech and language behaviors.*

To evaluate this objective a test was developed and administered to all parents involved in the program on a pre- posttest basis.

Methodology:

The major emphasis of this project was to reduce the incidence of speech and language problems of entering first grade children. This was to be accomplished by providing parent training in ways to stimulate children to talk and therefore develop normal language patterns in the home situation prior to the child's entering first grade. Therefore, this project conducted training workshops for the parents of potential first grade children. The names of potential workshop participants were obtained through sources such as birth announcements in the local newspapers, school records, health department records, and mothers who were receiving assistance from the local Childrens' Services Office. In addition, news articles describing the program appeared in the local newspapers and on the local TV station. Notices were also sent home through the schools describing the workshops.

Twenty workshops were conducted throughout communities in Wasco County and in two communities in Sherman County during the 1972-73 academic school year. Each workshop consisted of three evening meetings which lasted approximately two and one half to three hours. The information presented in the workshops centered around speech and language development from birth to age five and the presentations included suggested language activities for each age level. A commercially produced kit entitled "Teach Your Child To Talk" provided the primary source of information in the workshop. The kit was composed of a

workshop manual, a movie, approximately two hundred color slides, and a cassette tape with examples of various types of landmarks in speech and language development.

In addition to the kit material, three mimeographed handouts were included as part of each workshop series. These included a hearing checklist which was discussed at the beginning of the first meeting, a copy of the article entitled "A Child's Mind Is Shaped Before Age Two" which was given to the participants at the first meeting to read on their own; the contents of this were then discussed at the second meeting. A poem was handed out at the termination of the final meeting which had to do with language development of children. Each workshop participant was administered a pretest which was designed to assess their knowledge in speech and language development when they entered the program and a posttest was used to evaluate the gain in information that they acquired over the three

It was hoped that the workshop would attract approximately 200 participants; however, a total of 157 people attended the workshops with 112 of the total attending all three meetings and 45 completing two or less sessions. It was felt that the primary reason for not reaching 200 parents was the amount of time required to contact the potential participants and invite them to the workshops. It was also felt that attendance would be greater during the coming year because the effects of word of mouth communication by the parents should increase the attendance at the workshops. The staff felt that they could increase enrollment at the workshops by having volunteers in the community solicit people to attend the workshops prior to the time a workshop was scheduled for a particular community. These volunteers would be people who had attended the workshop during its first year of operation. The IED staff plan to supply these volunteers with form letters and potential names of people in the community who they should contact and invite to the workshops during the coming year.

This program and the longitudinal aspect of the study have drawn considerable attention throughout the Northwest and the nation as reported by the project staff. The project director has received numerous letters from communities in the states of Oregon and Washington requesting information about the format of the project. In addition three people from Oregon and one from Washington have visited the staff in The Dalles and discussed plans for the implementation of similar types of programs in their area. In addition the project director was invited to speak to the Prevention Committee of the American Speech and Hearing Association at their annual convention in November, 1972 in San Francisco, California. The presentation was well received by the Committee and numerous outlines of the project were distributed to the Committee members; these were taken back to their various

areas throughout the United States for purposes of dissemination. After the project director's presentation to the Prevention Committee, he was appointed to this Committee and is now a member of the American Speech and Hearing Association's Prevention Committee.

Results:

1. *To reduce the incidence of speech and language problems among first grade children in the schools in Wasco and Sherman Counties.*

To evaluate this objective the incidence of speech and language problems will be reported from the academic years 1970-71, 1971-72, and the incidence figures will also be collected in September of 1972 at the beginning of this project. The staff accomplished the measurement of this objective during the first two weeks in September as part of their normal screening program and they used the following battery of tests to identify children with speech and language problems: (1) Peabody Picture Vocabulary Test; (2) Riley Articulation and Language Test; and (3) taped examples of running conversation which are to be analyzed at a later date. For the purpose of evaluation of objective 1 the staff used the articulation portion of the Riley Articulation and Language Test. According to test norms 10% of a first grade population would be expected to score below a cut-off score of 83. Results of the test data from the articulation portion of the Riley Articulation and Language Test indicated that 77 of the 347 first grade children tested in Wasco and Sherman counties scored below the 83 cut-off point. This represents 22% of the population testes falling below the 83 cut-off score or more than twice the standardized average. These results seem to indicate that a much larger number of children in the schools in Wasco and Sherman counties have articulation problems than would normally be expected. The same scoring procedure will be used each year for the next six years and at the end of the six year period the percentage figures of those scoring below 83 will be submitted to determine if significant reduction has taken place during this time.

At the time of submission of this report, results were not available from the Peabody Test or the taped examples of running conversation. The tapes were being analyzed by the Speech and Hearing Department of Oregon College of Education and the analysis had not been completed. This analysis, along with the Peabody scores, would provide a measure of language difficulties.

Incidence figures from the years 1970-71 and 1971-72 were not available as these were lost when the IED staff moved from one building to another. Therefore the incidence are only available beginning in September of 1972.

2. *A criterion reference test will be developed in relation to the "Teach Your Child To Talk" kit and will assess*

the parents knowledge of normal development in speech and language and the treatment of speech and language behavior.

This test was to be administered on a pre- posttest basis to the parents involved in the workshop. It should be noted that this test was only administered to those parents who attended all three of the workshop sessions.

Two forms of the test for the "Teach Your Child To Talk" kit were developed, Form A and Form B. Both tests had 23 items on it and each item was worth two points. Those parents who took Form A on the pretest were given Form B on the posttest and those who took Form B on the pretest were given Form A on the posttest. Table I presents the scores on the test developed from the "Teach Your Child To Talk" material. The first section in Table I, Informational Test, provides the scores. It can be noted that 112 parents took the pre- posttest using Form A Form B, and 54 took the pre- posttest using Form B-Form A. As can be seen the range of the top score would be 46 on both tests. It can be noted that improvement was shown in both groups in comparing the pretest from the posttest. Both sets of parents increased their posttest scores indicating that they had gained knowledge in the areas of speech and language development as assessed by this test. In both sets of tests seven parents received perfect scores on the posttest where none had done this on the pretest. Also the range of scores in the 41 to 45 area increased by almost 30 parents on both sets of tests. A second test was also developed which was identified as an Attitudinal Test and this test was composed of seven items with five points being given for each correct answer on this test. This test was designed to assess the parents' attitudes towards general home activities and feelings towards children and their use of language in the home setting. As can be seen on this test again Form A and Form B were developed for pre- and posttest testing. It can be seen in comparing the pretest and the posttest that parents increased their scores on the posttest over the pretest indicating that they were acquiring more positive attitudes towards helping their child develop speech and language competencies in the area of home setting.

Third Party Evaluator's Comments:

This project was successfully initiated a parent training program by which parents can be informed and given directions on how to reinforce and encourage language in the preschool child in the home setting. It is felt that this project was able to initiate a successful first year effort in this direction with 112 parents attending all three sessions of the twenty workshops that were offered. The project

director felt that they would liked to have reached 200 parents during this first year but this was not attained; however, as this is only the first year of the project 112 parents attending all three sessions should be considered a successful project. As support for this the recognition and honors that the project has received from the American Speech and Hearing Association should be an indication of the importance of this type of effort.

The project was successful in meeting some aspects of ther prescribed objectives. It is unfortunate that the incidence of speech and language problems for the children in the years 1970-71 and 1971-72 were lost for this would have helped provide more complete longitudinal data of speech and language problems with the children in the area. However, since the project is designed to run for six years, it is felt by the third party evaluation team that the information acquired beginning with the 1972 school year should be adequate to initiate the assessment of the long range effect of this program. However, the data from the two years previous to 1972 would have been valuable in determining, from a reliability standpoint, the incidence of speech and language problems with children prior to the intitiation of the workshops.

In addition, it should be noted that the data provided only were an indication of the articulation problems of the children. No data were submitted to indicate the language problems or gains of the children although these data were to be submitted as part of the evaluation plan. These data are needed if the project is to identify not only the speech problems of the children but also the language difficulties that they possess in the first grade.

Results of the tests given to the parents covering the material presented in the workshops indicate that the parents were learning the type of information that the project staff desired. It is believed by this evaluator that the project staff is using an excellent method to contact parents next year by recruiting volunteers from the parents who have gone through the first year's workshop. These parents should be excellent recruiters for parents who have not attended and who will be eligible to attend in the coming years.

As indicated the overall reaction to this project by various individuals and organizations indicate that they believe it is providing a much needed service and information source to both parents, who are concerned about the speech and language development of their children, and professional individuals, who are concerned about ways of reducing the incidence of speech and language problems in primary aged children. However, until better "hard data" regarding language development are submitted, the third party evaluation team must reserve total endorsement of the project.

Table I

1972-73 TEACH YOUR CHILD TO TALK WORKSHOPS
TEST DATA

May 31, 1973

Informational Test

N=112

Score Range	Pretest No. Scoring Form A	Posttest No. Scoring Form B	Pretest No. Scoring Form B	Posttest No. Scoring Form A
46	0	7	0	7
41-45	5	32	3	29
36-40	30	16	26	15
31-35	21	3	19	2
26-30	2	0	5	1
21-25	0	0	1	0
16-20	0	0	0	0
0-15	0	0	0	0
N	58	58	54	54

Attitudinal Test

N=112

Score Range	Pretest No. Scoring Form A	Posttest No. Scoring Form B	Pretest No. Scoring Form B	Posttest No. Scoring Form A
35	2	5	1	10
30-34	20	38	13	28
25-29	30	13	28	14
20-24	6	2	12	2
15-19	0	0	0	0
0-14	0	0	0	0
N	58	58	54	54

Title of Project: *Application of Learning Systems in a Child Re-Education Setting*

Location of Project: *Edgefield Lodge Inc.
Troutdale, Oregon*

Type and Number of Children Served: *Twelve (12) emotionally disturbed children (eleven in extended day care and one in a five day residential program)*

Funding Allocated: *\$15,000*

Project Beginning Date: *July 1, 1972*

Project Ending Date: *June 30, 1973*

Background and Rationale:

In a recent (1969) study by the State of Oregon Mental Health Division, it was estimated that there were approximately 800 children, 6 - 12 years old, in Portland School District No. 1 who were sufficiently emotionally disturbed, and learning disabled that they required residential treatment. There are six non-tax supported treatment facilities for children which serve the tri-county area (i.e. Multnomah, Washington, Clackamas). These agencies during the 1971-1972 school year reported a combined school roster of 101 children between the ages of 6-12; of these 44 come from School District No. 1. In all likelihood, during the 1972-1973 fiscal year, these agencies will provide residential treatment and school for 60-80 children 6-12 years old. Thus, of the 800 children in School District No. 1, there will remain 720-740 for whom special treatment is needed. Edgefield Lodge treats children of this age range but needed a school which was organized around sound learning principles and procedures in order to provide effective treatment and education to this neglected population.

Funding of this project enabled Edgefield Lodge to provide treatment and education for an additional 12 of these 720-740 children who needed such services and who otherwise would not have received them.

Objectives and Evaluation Plan:

1. *For those children referred to Edgefield Lodge, to reduce academic hindering behaviors while concurrently increasing academic performance at Edgefield Lodge.*

WRAT - Individual prescriptive data from behavioral and academic programs will be utilized.

2. *To provide inservice training which will emphasize the management of children's behavior and their academic performance in groups and individually.*

Teaching Research Classroom: Observation Checklist will be used. Samples of Prescriptive Programs developed by the project staff.

3. *To provide parent training groups for parents so that they can assist with the social behaviors which are problems for their child.*

(a) The projects conducted by the parents will be submitted in the final report; (b) where appropriate, the Family Observation Record will be administered.

Methodology:

Project staff consisted of the following: (1) Dr. B. Goocher - Project Director; clinical psychologist and Director of Edgefield Lodge Inc.; (2) Ms. Mary Ellen West - Classroom Teacher; certified elementary classroom teacher with previous experience with emotionally disturbed children; (3) Mr. Wilson Hills - Classroom Supervisor; certified classroom teacher and presently program manager for day treatment; (4) Dr. David Grove - project consultant; presently employed at Teaching Research Division, Oregon State System of Higher Education; (5) Mr. Stan Serline - Business Manager at Edgefield Lodge, Inc.; (6) Co-teacher/Child careworker - the staff member who filled this position changed several times during the course of the project.

Edgefield Lodge is a private, non-profit organization that offers three basic treatment modalities to behavior problem children in the Portland Metropolitan area. The three

programs range from a community out-patient program to a seven day residential program. This project dealt primarily with the third component, that being a five day extended day care program. Ten to twelve children from the extended day care program benefited from the services of the Title VI program. These children were primarily ages six to eight years of age and had varying degrees of experience in the Portland Public Schools. All children in this project were referred because of behavior problems that were incompatible with survival in the public school and/or community domain.

The ten to twelve children in this project arrived at Edgefield Lodge at 7:30 in the morning and left at 4:30 in the afternoon five days a week. From 8:00 until 2:30 each day the children were involved in a highly structured, individualized classroom experience. This classroom experience was devoted to establishing behaviors which were compatible with survival in the public schools and concurrently increasing the chances of survival by working in the academic areas of math, reading and spelling. All ten to twelve children were served in one classroom which was staffed by a teacher/child care worker and a child care worker/co-teacher. The curriculum ranged from commercially available materials such as Sullivan and Distar to materials that were created by the Edgefield staff. The created materials specifically dealt with reading in which a skill file was developed with a corresponding scope sequence. During the remainder of the day (that is, 2:30 to 4:30) the children were involved in unit kinds of experiences that dealt primarily with establishing social behaviors.

A rather extensive diagnostic procedure was employed to determine what academic and behavioral deficits that a child had upon entering the Edgefield program. These diagnostic procedures ranged from interviews with the parents and collaborative data collected by them to the data collected from the school system indicating deficits in certain academic areas. This data then was combined with observations taken of the child upon admission to Edgefield and through an analysis of these two evaluation procedures a remediation priority was established. Once the behaviors (either academic or behavioral) were delineated a staff conference was held and as an outcome of this staff conference individual prescriptive programs were developed. These programs quite frequently were tied into the agency wide token system which was based upon the premise of positively reinforcing a desirable behavior and ignoring or timing out inappropriate behaviors. Once a program was established continuous daily data was collected and analyzed by the staff and changes were made in the program on a daily basis based upon the child's performance. The data analysis and updating of the individualized programs was accomplished by the classroom

personnel as well as by Wilson Hill, the Director of the extended day care program and by Dr. David Grove.

Staff Training

During September of 1972 the Edgefield personnel received two (2) weeks of intensive inservice training. The following aspects were stressed during this inservice program:

The development of an effective treatment approach which aims at either reducing maladaptive behaviors or increasing appropriate behaviors must be sensitive to the individual needs of each child and requires the following steps: First, the establishment of a behavioral definition which describes the desired terminal behavior. The definition cannot be vague or abstract, but must contain behavioral components which comprise the terminal behavior. Each of the participants in the inservice training received experience in observational technology which included the derivation of appropriate definitions for both appropriate and inappropriate behaviors as well as the utilization of these definitions in the observation of real life situations.

Second, this definition must be employed in recording the frequency of the designated behavior(s). Objective recording is important as it provides the staff with information regarding the progress of the student and hence, the effectiveness of their procedures. Following the instruction in behavioral definitions each participant in the inservice training received in-field experience in utilizing these definitions and recording the occurrence or non-occurrence of the behaviors delineated. The observation of the actual behaviors is important if the staff is to develop a relevant evaluation methodology.

After the observational and evaluational technology was demonstrated the basic principles of learning were explored. It was explained that behaviors are controlled by the consequences which immediately follow them. This is the basic underlying principle upon which all other principles depend. Therefore, by delivering the appropriate consequences, the probability of that behavior occurring in the future can be influenced. Four types of consequences discussed during the meetings were as follows:

1. Positive reinforcement - a stimulus which when **presented increases** the strength or future probability of that behavior.
2. Negative reinforcement - a stimulus which when **withdrawn increases** the strength or future probability of that behavior.
3. Punishment - is any stimulus which when **presented decreases** the future probability of that behavior.

4. Cost procedures - any stimulus which when **withdrawn decreases** the future probability of that behavior.

Reinforcement is the most frequently used consequence of the two types, positive and negative. It involves the contingent delivery of a desirable event for the appropriate behavior. Consumable commodities, free art period, verbal praise, free time, and special events are some of the frequently used reinforcing stimuli. Many of these reinforcers were eventually utilized by the staff that participated in the inservice training. However, there are indications that a negative reinforcer can be effectively used in treatment situations. If the staff member arranges the conditions so that the child escapes something he wants to escape from contingent upon completion of a task specified by that staff member, he is in effect using a negative reinforcement. For example, if we allow a student who has a strong dislike for a 25 minute math period to leave the room early, contingent upon appropriately completing an assignment, we should see an increase in the output of work as we have withdrawn the negative stimulus of staying in the math room contingent upon completion of the math assignment.

One of the procedures discussed in the inservice was shaping. Shaping is a procedure used when a desired behavior is at a very low level or is occurring at a low frequency. For example, if a child is disruptive a treatment program might specify that he should be reinforced for non-disruptive behavior. Now this child probably has never gone an entire morning without being disruptive behavior, then for 15 minutes and continue shaping until he has an entire morning of non-disruptive behavior.

It was further explained that the extinction of behavior refers to withdrawing the reinforcement until the behaviors

return to a low level occurrence. For example, if a child is being reinforced (i.e. attention) for inappropriate behaviors, the staff member could decrease the frequency of that behavior by withdrawing the attention when the child engaged in the undesirable behavior.

During the inservice training these topics were discussed with the participants and they were subsequently encouraged to use each of the principles in their treatment settings. In addition to discussing the basic principles and theoretical issues underlying behavior intervention techniques, the instructors also discussed the successful implementation of these techniques in a variety of settings such as public schools, state hospitals, child residential facilities, as well as within the home in regard to the development of one's own children.

Parent Training

Edgefield Lodge has developed a family observation rating (F.O.R.) system which is utilized to delineate the daily operation of each family constellation. The major factors observed are: (1) appropriate social interaction; (2) inappropriate social interaction; (3) commands and command compliance; (4) positive interactions; (5) negative interactions; (6) violation of social norms (i.e. expectations specified by each family); and (7) self-directed behaviors. These observations are made, of the entire family, during intake and also before major treatment changes (i.e. transfers or discharges) and aid in the designing suitable parental alternatives. Table I contains data from a portion of a F.O.R. data reduction form which deals with commands and consequences for one of the Edgefield families.

Table I

Category	Family Member			
	Mom	Dad	Brother*	Brother
I. Commands Emitted	37%	12%	29%	21%
A) Compliance	11%	0%	43%	60%
B) Noncompliance	78%	100%	57%	40%
C) Do for	11%	0%	0%	0%
II. Consequences Emitted	27%	16%	46%	11%
A) Positive	80%	100%	88%	100%
B) Negative	26%	0%	12%	0%

*This is the child who subsequently was admitted to an Edgefield treatment program.

The command data from Table I suggests that mom emitted 37% of the total commands given during the recorded observation period. Of these 11% were complied with by the person to whom the command was directed while 78% terminated in noncompliance and 11% were concluded by having the mother doing the requested task herself. The consequence data for the first brother indicates that he emitted 46% of the total consequences of which 88% were positive. The data in Table I becomes somewhat more meaningful when it is compared with the data in Table II which reports who received the commands and the consequences.

The data from this table suggests that the first brother received 25% of the total commands given while only 50% of these were terminated through compliance. The younger brother received 75% of the requests and complied with

75%. The "consequence received" data suggests that the older brother received only 13% of all the consequences transmitted which is second lowest in the family. A review of the data from Tables I and II suggest that (1) command compliance might be an important remediation area (i.e. only 11% of Mom's requests are terminated with compliance); (2) few consequences are emitted by Mom (27%) and Dad (16%) thus hindering the acquisition of new behaviors; (3) no requests are made to Mom and Dad; (4) the older brother only complies with 50% of the requests; and (5) receives only 13% of the total consequences of which 100% are positive. If point five (5) is compared with point four (4), above, one notes that there are no negative consequences for non-compliance. Additional information can be obtained from Table III which contains the data for inappropriate social interaction.

Table II

Category	Family Member			
	Mom	Dad	Brother*	Brother
I. Commands Received	0%	0%	25%	75%
A) Compliance	—	—	50%	72%
B) Noncompliance	—	—	50%	22%
C) Do for	—	—	—	6%
II. Consequences Received	19%	5%	13%	62%
A) Positive	86%	100%	100%	87%
B) Negative	14%	—	—	13%

Table III

Category	Family Member			
	Mom	Dad	Brother*	Brother
Inappropriate Social Interaction				
Emitted	0%	0%	69%	31%
Received	8%	0%	23%	69%

This data suggests that the older brother emitted inappropriate social behavior 69% of the time of which all of it was directed to his younger brother. His younger brother emitted 31% inappropriate social behavior with 8% of it directed towards mother and 23% directed towards his older brother. The preliminary evidence obtained from the entire family observation and reinforced in Tables I, II and III suggested that a parent training program must be established which would help the parents remediate the following problems: (1) increase Dad's involvement in both the areas of commands and consequences; (2) provide the parents with alternative ways to deal with non-compliance and inappropriate social behaviors; and (3) increase the rate and frequency of positive interactions between all family members.

The data from the F.O.R. is subsequently compiled with the initial intake information and parent intervention programs are then initiated. At the same time the parent(s) are enrolled in an "institutional" parent training group. During these weekly group sessions the parents are introduced to the same principles outlined in the preceding section on "Behavior Setting Personnel" with resource material selected from *Living with Children* by Patterson and Gullion and from *Parents are Teachers* by Becker. As practical information is transmitted the parents are required to institute the principles in a programmed, sequenced fashion. For example, for the family just discussed, in regards to the F.O.R., the parents were given two forms during the discussion on specifying and pinpointing behaviors. These two forms were selected because of the recommendations to: (1) increase positive interactions; and (2) develop an effective way to handle inappropriate behaviors. The parents were told to record, on these forms, during the ensuing week and upon returning to the next parent group discussed their findings with the trainer. The lack of effective consequences were delineated as well as the low rate of interaction between family members. Before leaving this session the parents were given a consequence for child non-compliance (i.e. sent to room, ignore, or loss of privilege, etc.) and told to increase the number of positive interactions so that there were twice as many positive interactions per day as negative interactions. The same types of form were given the parent (the first one is retained by the trainer and establishes a baseline level because it contains the frequency of both non-compliance and rate and ratio of consequences), and they were told to implement and record the new program. During subsequent meetings the same format was followed with more child behaviors added to the treatment program and additional treatment alternatives explored. If after six (6) weeks of training, the parents have demonstrated a decreasing dependency from the instructors the parents are transferred to a "maintenance" group which is directed by parents with minimal support from the Edgefield professional staff.

The parent training program just discussed was in effect until June of 1973. At this time the parent training was modified by connecting it directly to the token system to insure a more efficient program initiation. The major problem with the format just described was the temporal delay between parent participation and the designing of an effective treatment program. A review of some of the initial problem lists, derived during intake, indicated that every family had problems centering around compliance (task completion) and inappropriate social behavior which typically took the form of physical aggression between peers. Consequently, these two categories were specified on the Phase I card with the parents' responsibility being one of sending the appropriate data (i.e. number of tasks completed out of the number of tasks requested, and the number of inappropriate physical interactions) with the child and the points being delivered and exchanged at Edgefield. One of the criterion for movement of the child from Phase I to Phase II is that this parent program must be conducted for two weeks with data turned-in daily. During Phase II the parents must design their own program with the controls being dispensed in the home environment. By the end of Phase II the parents must have developed an effective child management system. Not only does this program provide for a more efficient initiation of a treatment program with known reinforcers already specified (tokens) but it forces the parents to develop a system at the same speed at which the child is progressing in treatment. This should help to eliminate the problem arising from the child being ready to return to the community but the parents not being ready to receive him.

Results:

1. *For those children referred to Edgefield Lodge, to reduce academic hindering behaviors while concurrently increasing academic performance at Edgefield Lodge.*

The data presented in Table IV represents the behavior of academic performance while each child operated under the umbrella of the token system. The measure was derived from individual administrations of Wide Range Achievement Test (WRAT). A comparison can be made between the pretest scores in reading, spelling and arithmetic and those obtained in the same areas after exposure to the Edgefield academic behavioral setting. The scores reported are in terms of grade levels. For example, child No. 1 made a 2.0 grade level gain in reading after being in the Edgefield Program for ten months whereas child No. 8 made an 8.8 grade level gain in spelling after a period of 6 months. The test is designed so that the average student, in the public school, will make a one grade level gain per year.

Table IV

Child	Pretest				Posttest			
	Chron Age	Reading	Spelling	Arithmetic	Chron. Age	Reading	Spelling	Arithmetic
1	11.6	1.5	1.7	2.6	12.4	3.5	2.6	3.9
2	10.9	3.5	2.2	2.4	11.5	4.8	4.7	3.9
3	11.1	2.6	2.6	3.0	11.9	3.5	3.5	4.7
4	6.3	Kg3	Pk7	Kg5	6.7	1.8	1.6	2.4
5	7.9	1.2	1.2	2.2	8.1	2.2	1.6	3.0
6	9.6	2.5	2.3	2.6	9.9	2.5	2.6	2.6
7	11.4	2.6	2.3	3.6	12.0	3.6	2.9	4.2
8	10.1	7.5	5.0	4.2	10.7	8.7	13.8	4.7
9	7.10	Kg5	Pk2	K7	8.8	Kg9	Kg5	1.0
10	7.4	Pk4	1.2	Kg5	8.1	1.5	1.4	2.6
11	9.5	4.2	3.9	2.8	9.8	5.3	6.8	3.9
12	9.9	1.4	1.0	1.2	10.6	1.5	1.3	2.8
13	8.4	1.3	1.2	1.4	8.8	1.5	1.6	2.6
14	6.7	N.5	1.0	1.2	7.6	1.5	1.7	2.6
15	8.10	2.6	2.3	3.2	9.2	2.6	2.3	3.6
16	7.2	1.4	1.2	1.6	7.7	2.0	1.7	3.2
17	9.9	3.1	2.7	3.2	9.11	3.9	2.9	3.9
18	7.10	1.5	1.4	2.2	8.7	1.9	2.0	3.2
19	6.7	1.3	1.0	Kg5	6.10	1.3	1.2	1.9
20	7.4	Kg5	1.2	1.2	8.3	1.4	1.4	2.1
21	7.10	Pk2	1.2	Kg6	8.9	Kg8	1.1	1.4

*Children enrolled in the class established through Title VI funding.

A more direct method of looking at child performance is through individualized programs which contain a token system as part of the contingency management. Currently, every child who was involved in this program was on a token system. In some cases, subsystems were developed when the child was having exceptional behavior manifestations. An example subsystem would be placing a child on contingent poker chips which can be subsequently exchanged for points. This allows for a more tangible reinforcement system as well as increases the number of reinforcers available by increasing the poker chip/point exchange ratio.

During the course of this project, fourteen individualized programs and twenty-nine group programs were designed to remediate academic and/or behavioral deficits.

Some samples of these individual programs are as follows:

Table V shows the baseline, treatment and post-treatment data for a twelve year old child who had frequent violent emotional outbursts resulting from confrontation with frustrating experiences. This frustration re-occurred despite staff assurances that the treatment expectations were within the child's behavioral and cognitive skill limits. These violent periods were previously

controlled through isolating (time-out) the child but this approach did not appear to be remediating the difficulties. The baseline data indicated that he had, on the average, 3.7 violent periods per day, of which 1.9 of those required isolation. This baseline data was collected over an eight day period. During treatment, the isolation continued to be employed but in addition the child was placed on a token system where two (2) points were given for appropriately handling frustration, ten (10) points for going an entire day without being frustrated, and five (5) points for an entire day without experiencing time-out period. The treatment data, over a seventy-six day period indicated that the daily average dropped to 1.2 with only .29 time-outs per day. He had one seventeen day period without experiencing inappropriate frustration and consequently received no time-outs. The points were withdrawn during the post-treatment period and the number of frustrations and time-outs continued to decline. This program demonstrates the successful utilization of special programs through (a) the identification of problem behavior; (b) appropriate baseline substantiation; (c) the designing of a program based upon sound intervention principles; (d) the successful transition to a more "natural" environmental situation through the withdrawal of the points.

Table V

Baseline		Treatment		Post-Treatment	
No. of Outburst per day	No. of Timeout per day	No. of Outburst per day	No. of Timeout per day	No. of Outburst per day	No. of Timeout per day
3.7	1.9	1.2	.29	.33	.22

Table VI shows the data from a program conducted with a six year old child who was easily distracted and consequently had problems staying on task. The baseline data indicated that over five days the child was attending to the designated task, within an academic setting, 32% of the time. During treatment, the child was reinforced with teacher attention and consumables for staying on task. Under this condition, the child obtained an average of 62% over eleven days. Finally, the program was withdrawn and the child maintained his treatment average of 62%. A comparison of this data with the public school data in Table XIV indicates that the child is close to public school norm.

Table VII contains the summary data for a special program which attempted to reduce "talk-outs" with an eight year old child. The child was constantly talking which

interfered with his ability to engage in productive behavioral setting activities. The treatment program required the delivery of points for each ten (10) minute interval in which a talk-out did not occur. The program appears to have been successful, although there is a slight increase in the inappropriate behavior following treatment. A slight increase is not uncommon following the withdrawal of behavioral programs therefore requiring some over-training (i.e. long exposure) during treatment.

Table VIII contains the summary data for a group, special program where the behavior to be increased was assignment completion in an academic setting through the delivery of contingent points. The program was not withdrawn because of the staff's contention that the behavior had not been adequately acquired.

Table VI

Baseline	Treatment	Post-Treatment
% of Time on-task	% of time on-task	% of time on-task
32%	62%	62%

Table VII

Baseline	Treatment	Post-Treatment
No. of talk-outs in 10 minute intervals	No. of talk-outs in 10 minute intervals	No. of talk-outs in 10 minute intervals
17.0	1.9	2.1

Table VIII

Baseline	Treatment
% of class completion assignment	% of class completion assignment
45%	77.5%

2. To provide inservice training which will emphasize the management of children's behavior and their academic performance in groups and individually.

Following the training, observations were made to determine if some of the discussed principles and concepts had generalized to the various treatment settings. The Teaching Research Observation Form was utilized throughout the 1972-1973 year with the observations being conducted by both naive and informed observers. A portion of this observation concentrated on the kinds of positive and negative interactions which the staff is having with their children. It is hypothesized that if the staff is having predominately positive, **contingent** interactions with their children they are (1) accelerating the acquisition of appropriate social behaviors; (2) appropriately programming the treatment prescriptions for each child because poor programming would result in child failure thus reducing the opportunity for positive staff-child

interactions; and (3) establishing themselves as positive elements by being associated with the delivery of positive consequences. This would be an important variable if the child is to be successfully returned to his "natural" environment. The contingent negative interactions were also recorded because a low frequency of such interaction is important to insure maximum learning. Finally, the number of times the staff interacted inappropriately with the children was also reported. The data, reported in terms of percent, derived from four staff members located in the classroom behavior settings can be seen in Table IX.

No baseline information was obtained prior to the inservice, consequently an intrastaff comparison cannot be made to determine the amount of improvement directly attributable to training. However, an indicator can be obtained through a comparison of this data with data obtained under a no-treatment condition in a "typical" elementary public school. This public school data can be seen in Table X.

Table IX

Category	Staff			
	A	B	C	D
1. % of total consequences delivered that were positive	74%	79%	90%	72%
2. % of total consequences delivered that were negative	9%	11%	4%	12%
3. % of total consequences delivered that were inappropriate	17%	10%	6%	16%

Table X

Category	Staff			
	1	2	3	4
1. % of total consequences delivered that were positive	32%	26%	13%	24%
2. % of total consequences delivered that were negative	9%	26%	0%	10%
3. % of total consequences delivered that were inappropriate	59%	48%	87%	66%

A comparison made between the average percentage for each category for Edgefield and the public school can be seen in Table XI.

Another variable observed with the Teaching Research Observation Form was the percent of the group of children, in any behavior setting, who were task oriented. The critical

Table XI

Category	Edgefield	Public School
1. % of total consequences delivered that were positive	78.8%	23.8%
2. % of total consequences delivered that were negative	9.0%	11.3%
3. % of total consequences delivered that were inappropriate	12.2%	65.0%

This summary data suggests that the staff in the Edgefield classroom behavioral settings have a higher percentage of positive interactions and a lower percentage of negative interactions. In addition the lower percentage of inappropriately delivered consequences increases the probability that the consequences that are delivered are in fact serving a remediation function. If the three hypotheses proposed earlier are valid, the Edgefield setting ought to be more conducive to learning than the public school setting. Additional data will be presented in this report which will reinforce this assumption.

feature denoted was whether the child was engaged in the task that was defined by the staff as having therapeutic value. A time sampling technique was employed where each child was observed every 60-seconds and the observer recorded whether the child was task-oriented. Table XII shows the data for Edgefield classroom settings and Table XIII for the public school settings.

An average percent comparison between Edgefield and the sampled public school can be seen in Table XIV.

Table XII

Category	Staff			
	A	B	C	D
% of children task oriented	78%	81%	90%	68%

Table XIII

Category	Staff			
	1	2	3	4
% of children task oriented	70%	52%	63%	73%

Table XIV

Category	Edgefield	Public School
% of children task oriented	79.3%	64.5%

This comparison is especially impressive when it is remembered that many of the Edgefield children were removed from the public school for inappropriate classroom behaviors. Most of these children are classified, by the school personnel, as hyperactive, having a short attention span, and aggressive. These data presently suggest that the inservice training was effective in: (1) increasing positive interactions between the staff and the children; (2) decreasing the negative and inappropriate interactions; and (3) increasing the percentage of the children who were attending to the appropriately defined task.

3. To provide parent training groups for parents so that they can assist with the social behaviors which are problems for their child.

Of the thirteen (13) children currently enrolled in the residential program eleven (11) started home programs within the first week with one of the remaining two initiating a home program during the second week. Only

one of the thirteen families did not submit home data. Eleven of the thirteen programs progressed towards a successful termination with the remaining two in doubt because of either unreliable and/or unsubmitted data.

The following is a sample of a program run by a parent and the resulting data from the program:

This program was designed to decelerate physical aggression (hitting, biting, swearing) in a seven year old boy. During baseline these behaviors were occurring 17 times per day. A program was initiated in which five tickets were delivered to the child for thirty minutes of appropriate play (the child did not engage in any of these behaviors). The tickets could then be traded for items contained on a menu of reinforcers (free play, TV time, etc.). One month after treatment was initiated these behaviors had decelerated to 5 times per day. After two months and subsequently in posttesting, the behavior maintained at 1 time per day. Table XV demonstrates these data.

Table XV

Baseline	Treatment After 30 Days	Treatment After 60 Days	Posttest
17 times per day	5 times per day	1 time per day	1 time per day

Third Party Evaluator's Comments:

Each of the three objectives for this project have been met. The description of the project activities, format of the final report and the data for each objective were submitted in detail and with extreme clarity.

The procedures used in this project have been

demonstrated by the data submitted to be extremely successful ones. It is the opinion of the third party evaluator that any school district or agency interested in initiating or modifying a program which is to serve children with either academic or behavioral deficits should examine the procedures used in this project in great detail.