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ABSTRACT

Provided in Volume II of a final report on the status of California educable mentally retarded (EMR) students reassigned to regular classes as a result of legislation are appended forms, instruments and project reports. Included are letters of introduction to various project phases, project data collection forms (including teacher questionnaires), the computer format of EMR transitional study data file, a discussion of dissemination activity, and eight published and unpublished reports of the project. (CL)

APPENDIX A

Letters of Introduction of Various Phases of Project

September 14, 1973

Mr. Guy Emanuele
New Haven Unified School District
33480 Western Avenue
Union City, California 94587

Dear Mr. Emanuele:

During the past two years your district has participated in a research project with the UCLA-CSULA Special Education Research Program, the project having to do with programs for EH and EMR pupils. As part of that project UCLA research staff interviewed Special Education administrators and teachers from 24 school districts, and summarized characteristics of 1366 pupils. A comprehensive report of the first phase of the project was sent to you in Fall 1972. A second phase of the project involved interviews with 58 school psychologists in ten school districts. Findings from the school psychologists' interviews will be mailed to you in October. Results of the studies have been made available to members of the California Legislature, the State Special Education Commission, the State Department of Education, and to school districts throughout the State. Findings have also received considerable attention on a national level through the United States Office of Education, and have been presented to professional groups and in professional publications. We feel the results well worth the efforts involved in the research.

We are now beginning the final phase of this project involving ten California school districts. I am writing to ask you to participate once again. The proposed project is really a direct outcome of our earlier work, and is a study with major implications for Special Education programs on both State and National levels.

It seems clear that the direction of educational programming for EH and EMR pupils, and perhaps for pupils in other categories of exceptionality, is placement in regular education settings. The "mainstreaming" emphasis receives legal and social, as well as educational, support. The California transition programs for decertified EMR pupils are examples of integration efforts, and while the intent and spirit of the efforts were obvious, the most appropriate, effective, and efficient means of accomplishment are not clear. Further, effectiveness of programs for decertified children has not been demonstrated; in-service needs for teachers, school psychologists, and principals have not been identified, nor have appropriate training programs been developed; possible changes in placement criteria and procedures have not been examined in depth.

In short, while it is clear that the direction of Special Education is toward integration within regular education, many of the problems associated with this move have not been identified nor studied. We intend to make this a major focus of our research.

The project will be conducted through the UCLA-CSULA Special Education Research Program in cooperation with the research efforts of J. E. Meyers of University of Southern California and D. L. MacMillan of University of California, Riverside. Professors Meyers and MacMillan are co-investigators of a study of transition pupils funded by the U.S. Office of Education. The UCLA project, under my direction, is funded through contract with the State Department of Education, under SB 1099. Through the cooperative efforts of both sets of researchers, it is possible to maximize our data and mimimize demands on districts.

In essence there are three phases of research, all to be conducted during the 1973-74 school year. Phase I, to be completed in Fall 1973, consists of interviews with district administrators and Special Education or transition program directors; it involves also the development of rosters of pupils eligible for decertification or placement over the last several years. This roster, to be compiled through archival search of records will be the basis for selection of a subsample of decertified pupils for the second part of the study. Phase II, to be conducted in Winter 1974, is essentially an effort to get current status of decertified EMR pupils. It involves followup of a subsample of pupils identified, coding of district data as to achievement and the like, and a more complete determination of current educational status. The last is the only part of the study which requires direct contact with pupils, and this will be limited to one session in a small group, total time per pupil to be no more than 45 minutes. Pupils will be given parts of an achievement test on an objective measure of perceptions of schooling, both standardized nonpsychometric and nonpersonality instruments. Comparison sets of pupils, chosen to match sample pupils on sex, age, school, and the like, will be given the same measures. All data will be coded numerically so that no pupil names nor individually identifying information will be taken from any district. All pupil information will, of course, be available to the appropriate designated district officer. Phase III, to be conducted during the Spring and Summer 1974, will include any final followup data collection, and the analyses and writing up of the findings.

We view the combined efforts of the research team as maximizing the research product in that we will provide the first comprehensive data on the status of decertified pupils, will deal with questions of teacher and ancillary staff concerns and needs for in-service training, and will be concerned with overall aspects of the integration of Special Education pupils into regular educational programs. The project is viewed as high priority by the California State Department of Education and the topic has been the subject of considerable interest on the part of members of the Legislature. The State Commission of Special Education

has reviewed and endorsed the importance of study of transition and in-service needs. In terms of national importance, it is likely that the current transition programs in California, and the implementation of programs of integration in California may become models for districts throughout the United States, thus providing impact on a national level.

We will, of course, provide you and your district with complete findings from the project. We hope we might have opportunity to meet with your teachers, school psychologists, and administrators to review findings and discuss implications for the district. All costs for the project will be carried through research contracts with State or USOE. All research personnel are, of course, provided by the project, so that minimal time of district people is needed.

I know this is an especially busy time of year for you, so I will wait until the first week in October to contact you by telephone to discuss details of the project. I sincerely hope you will be interested in continued participation with us. We look forward to working with you again.

Cordially,

Barbara K. Keogh, Ph.D.
Associate Professor
Director, Special Education
Research Program

BKK:cdb

cc: C. E. Meyers
D. L. MacMillan

Letter sent to teachers introducing teacher questionnaire in Los Angeles Unified District

A-4

May 15, 1974

WPH 403
University of Southern California
Los Angeles, California 90007
(213) 746-2041

Dear

The U.S. Office of Education has funded a study of the education of certain slower-learning children, carried out by a consortium of universities and your district. We have approval from the Office of the Deputy Superintendent to request teacher information about the achievement and adjustment of the selected students.

We realize that we are asking information at a very difficult time of the year. However, your comments are extremely valuable in providing needed information on children who are attending or have attended your classroom during this academic year. The U.S.O.E. has authorized payment of $3.00 for each questionnaire returned to us. We know that this stipend cannot adequately reimburse you for your time, effort and information; we hope though that the payment will help defray some of your expenses. The enclosed material includes a blank on which to put the address to which we will mail your check (normally within a couple days of receipt of your completed questionnaire). We will detach the blank so that your name is not identified with the responses. Also, please respond to this questionnaire only outside school hours to avoid conflicts with your time responsibilities to the school district.

Previously we have secured parent permission to ask you these questions. A student's name is given within the questionnaire, together with our code for him. Nevertheless, to maintain confidentiality, please erase or mark over his name so that nothing goes in the mail with his name on it. Within the questionnaire, we use his first initial in certain questions.

Thank you for your help. If you have questions or comments, or care to give us more "in depth" information by phone or letter, please contact us either way.

Sincerely,

C. Edward Meyers

C. Edward Meyers
Principal Investigator

APPROVED: Robert W. Lamson, Assistant Superintendent, Educational Support Services, Los Angeles Unified School District.

Letter sent to teachers introducing teacher questionnaire in statewide districts

A-5

April 20, 1974

USC Office
WPH 403
University of Southern California
Los Angeles, California 90007
(213) 746-2041

Dear

The U.S. Office of Education has funded a study of the education of certain slower-learning children, carried out by a consortium of universities and your district. We have full district approval for all phases of this study, including this request for teacher information about the achievement and adjustment of the selected students.

The U.S.O.E. has authorized a payment of $3.00 for each teacher participant. The enclosed material includes a blank on which to put the address to which we will mail your check (normally within a couple days of receipt of your completed questionnaire). We will detach the blank so that your name is not identified with your responses.

Two student names are given within the questionnaire, together with our code for them. Please erase and mark over the names so that nothing goes in the mail with their names on it. Within the questionnaire we use the first initial of each student in certain questions.

Thank you for your help. If you have questions or comments, or care to give us more "in depth" information by phone or letter, please contact us either way.

Sincerely,

Roland K Yoshida

Roland K. Yoshida
Project Coordinator

RKY:pdw

Enclosures

APPENDIX B

Data Collection Forms Used by Project

Student name_____

(1-2) District
__ __

(3-6) Student Code Number
__ __ __ __

(7) Population group

- ☐ 1 Decertified
- ☐ 2 EMR
- ☐ 3 Regular class
- ☐ 4 Does not apply

(8) Ethnicity

- ☐ 1 Anglo
- ☐ 2 Black
- ☐ 3 Chicano
- ☐ 4 Other non-white
- ☐ 5 Unknown

(9) Sex

- ☐ 1 Male
- ☐ 2 Female
- ☐ 3 Unknown

(10-15) Birthdate
__ __ __ __ __ __
Mo. Day Yr.

(16-18) Age at initial EMR recommendation (in months)
__ __ __

(19) What test was used for recommendation?

- ☐ 1 No test
- ☐ 2 Binet
- ☐ 3 Leiter
- ☐ 4 WISC
- ☐ 5 WAIS
- ☐ 6 WISC-Performance only
- ☐ 7 Tests 2 and 3 only
- ☐ 8 Test 2 and 4 only
- ☐ 9 Other 2 or more tests listed above

(20-22) Note Binet IQ given.
__ __ __

(23-25) Note Leiter IQ given.
__ __ __

(26-28) Note WISC-V IQ given.
__ __ __

(29-31) Note WISC-P IQ given.
__ __ __

(32-34) Note WISC-FS IQ given.
__ __ __

(35-37) Note WAIS IQ given.
__ __ __

(38) Was child placed in EMR classroom?

- ☐ 1 Yes
- ☐ 2 No
- ☐ 3 Unknown

(39-40) When was child placed in EMR classroom?
(Note academic year, 1966-67=66)
__ __

(41) Length of stay in EMR classroom.

- ☐ 1 Less than six months
- ☐ 2 6 months to 1 year
- ☐ 3 More than 1 year

(42) When was child recommended out of EMR classroom?

- ☐ 1 9/69-6/70
- ☐ 2 9/70-6/71
- ☐ 3 9/71-6/72
- ☐ 4 9/72-6/73
- ☐ 5 Before 9/69
- ☐ 6 Don't know but placed in non-EMR class between 9/69 to present
- ☐ 7 Does not apply-never decertified
- ☐ 8 Parent request initiated decertification

(43) What test was used for decertification recommendation?

- ☐ 1 No test
- ☐ 2 Binet
- ☐ 3 Leiter
- ☐ 4 WISC
- ☐ 5 WAIS
- ☐ 6 WISC-Performance
- ☐ 7 Tests 2 and 3 only
- ☐ 8 Tests 2 and 4 only
- ☐ 9 Two or more other tests listed above.

(44-46) Note Binet IQ given.
__ __ __

(47-49) Note Leiter IQ given.
__ __ __

Master File for School Record Questionnaire

Page	Variable	Explanation	Breakdown
1	Dist./Code	Enter child's district and subject code no.	None
	Sch. Enroll.	Record the number of students currently enrolled in subject's school	None
	Anglo %	Record the percentage of Anglos in child's school. For example, 45.1 would be recorded as 4 5 1. Use all three lines; include all zeros.	None
	Black %	See Anglo %.	None
	Chic. %	Record the percentage of spanish surname children. See Anglo %.	None
	ONW %	Record the percentage of all other ethnic groups not included in the Anglo, Black or Chicano category. See Anglo %.	None
	Class S	Record class size of the child. If in secondary school, record the number from the class which the regular match was selected from.	None
	Trans. Prog.	If decertified, record the type of transition currently given by school.	1 Resource teacher, child-direct 2 Resource teacher, teacher-consults 3 Self-contained transition class 4 Instructional Aide 5 Volunteers 6 No help given, attending reg. class 9 Don't Know
	Place	Current Placement	1 Regular Class 2 EMR 3 Social Adjust. 4 EH 5 Other special 6 Continuation

Page	Variable	Explanation	Breakdown
1	Work	Is child in a work study program?	1 Yes 2 No
	Achievement Test	Two subtests of the achievement tests should be recorded: Reading and Math. Listed below is a further explanation of the information required. Record information for each year given.	
	Type	Type of achievement test given.	1 Stanford 2 Metropolitan 3 California Achievement 4 California Test of Basic Skills 5 WRAT (Wide Range Achievement) 6 Other
	GrEq	Use all three spaces to record Grade Equivalent including all zeros. For example, grade equivalent 9.5 should be recorded as 0 9 5.	None
	P	Percentile if available from folder. Use both spaces and record all zeros if required.	None
	S	Stanine. Fill in single space.	None
2	Attend Year	Days absent which was recorded on yearly basis. For example, 101 days absent should be recorded as 1 0 1.	None
	Attend Sem	Days absent recorded on semester basis. Use two spaces per semester. The first of two spaces is used for the fall semester, the second two for the spring. For example, if a child was absent for 2 days in fall but 10 in spring, record as follows: 0 2 1 0.	None

Page	Variable	Explanation	Breakdown
2	Reading	Reading or English (secondary) grades for each semester. The first space for fall; the second for spring.	1 F; Unsatisfactory 2 D; Below Average 3 C; Satisfactory, Average 4 B; Good, Above Average 5 A; Excellent; Very Good
	Reading-Cit.	Citizenship marks for Reading or English if applicable.	See Reading
	Math	Mathematics marks for all years.	See Reading
	Math-Cit.	Citizenship marks for Math if applicable.	See Reading
	PA I	Practical Arts marks such as any shop course for boys, home economics for girls.	See Reading
	PA I-Cit.	Citizenship marks for Practical Arts	See Reading
	PA II	If child has two Practical Arts courses, then record the second course here.	See Reading
	PA II-Cit.	Citizenship marks for Practical Arts II.	See Reading
	PE	Physical education marks.	See Reading
	PE-Cit.	Citizenship marks for Physical Education.	See Reading
	Cit. gen.	If a child receives only one mark for co-operation, citizenship, etc., then record here only and leave all other citizenship mark spaces blank.	See Reading
	Place.	Record placements for children, for each semester.	1 Regular class, never EMR 2 EMR 3 Decertified, regular class 4 Decertified, EH 5 Decertified, returned to EMR 6 Decertified, Other special class 7 Decertified, Continuation School

Page	Variable	Explanation	Breakdown
3	Suspen Rec.	Suspension recommendation. Even though child may not have been actually suspended by school, record number of times school personnel recommended such action. If more than nine, record nine.	None
	Referral Anti-teacher	Record number of times child referred for actions against a teacher such as talking back, disruption in classroom, and so on.	None
	Pup. Conflict	Record number of times child referred for actions against fellow students such as fighting on playground.	None
	Maladjust.	Record number of times child referred for maladjustment to classroom which does not involve others such as withdrawal.	None
	Academic	Referrals for academic problems to any school personnel.	None
	Other	Any referrals which do not fit above categories such as health and so forth.	None
	Special Ach.	Special achievements such as awards, positions of leadership in the school, etc.	None
	Parent request: Take out of EMR	Record number of times parents requested that child be taken out of the EMR classroom.	None
	Return to EMR	Record number of times parents requested that child be retained or returned to EMR classroom.	None
	Information	Record number of times parent requested information about child from the school.	None
	School Conference	Record number of times school notified the parents about the child's school performance.	None

Page	Variable	Explanation	Breakdown
3	Extra-curricular		
	Athletic	Record number of after-school sports activities child is engaged in.	None
	Academic	Record number of after-school activities that involve academics such as French club, Speech, yearbook and so forth.	None
	Interest-Hobby	Record number of hobby activities such as car-racing club, fishing, etc.	None
	Social	Record number of social activities such as dance committee, boys club, etc.	None

To: Cum Record Searcher

From: R. Shea and J. Ponce de Leon

Re.: Changes in cum record data form

The following describes the rules for coding grade information (both subject and citizenship) onto the cum record data form; the table below illustrates a few of the grading systems encountered to date.

Code value for Cum Record	I 5 Grade Levels	II 4 Grade Levels	III 3 Grade Levels	IV 2 Grade Levels
1	F	U	U	
2	D	I	N	U N	U N
3	C	S	S	S S	S P
4	B	E	O	E O	
5	A				
6					

U = Unsatisfactory

I,N = needs to improve or some variant

S = Satisfactory

P = Pass

E = Excellent

O = Outstanding

For "U", "N" or equivalent in columns III & IV, assign a "2" unless definite information exists indicating failure, in which case assign a "1." For columns II & III "E" or "O" or the equivalent can be coded as a "4" or "5"; Code "E" or "O" as "5" if your scan of the cum records indicates "E" or "O" occurs

infrequently, otherwise code as "4." Code as "6" evaluations which fail to fit a grading system.

As a result of time constraints the following can serve as guidelines for shortening the time required to fill in a cum record:

- Delete page 3 (see attached)
- If a category/ies, such as attendance, requires searching additional sources or requires lengthy reconstruction obtain only the current (i.e., last school year 73-74) data.

If other problems arise regarding cum record search please contact R. Shea or J. Ponce de Leon at USC.

Name _____

School _____

Dist./Code _ _ _ _ _ _

Sch. Enroll.	Anglo %	Black %	Chic. %	ONW %	Class S.	Trans. Pg.	Place	Work	
_ _ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _	_	_	_	10
7	11	14	17	20	23	25	26	27	

Achievement Tests

		Reading				Math				
		Type	GrE	P	S	Type	GrE	P	S	
7	60-1	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
21	61-2	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
35	62-3	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
49	63-4	_	_ _ _	_ _	_	_	_ _ _	_ _	_	11
7	64-5	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
21	65-6	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
35	66-7	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
49	67-8	_	_ _ _	_ _	_	_	_ _ _	_ _	_	12
7	68-9	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
21	69-0	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
35	70-1	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
49	71-2	_	_ _ _	_ _	_	_	_ _ _	_ _	_	13
7	72-3	_	_ _ _	_ _	_	_	_ _ _	_ _	_	
21	73-4	_	_ _ _	_ _	_	_	_ _ _	_ _	_	14

		60-1	61-2	62-3	63-4	64-5	65-6	66-7	67-8	68-9	69-0	70-1	71-2	72-3	73-4
Attend Year	15	7	10	13	16	19	22	25	28	31	34	37	40	43	46
Attend Sem	16	7	11	15	19	23	27	31	35	39	43	47	51	55	59
Reading	17	7	9	11	13	15	17	19	21	23	25	27	29	31	33
Reading Cit.	18														
Math	19														
Math Cit.	20														
PA I	21														
PA I Cit.	22														
PA II	23														
PA II Cit.	24														
PE	25														
PE Cit.	26														
Cit. Gen.	27														
Place	28														

Teacher Comments

	Year	Placement	Comments
1.	60		
2.	61		
3.	62		
4.	63		
5.	64		
6.	65		
7.	66		
8.	67		

Teacher Comments

	Year	Placement	Comments
9.	68		
10.	69		
11.	70		
12.	71		
13.	72		
14.	73		

CODING SYSTEM FOR TEACHER COMMENTS*

(A) MENTAL ABILITY

1. High-Average Mental Ability--learns easily, above average ability, average ability
2. Low Mental Ability--slow learner, retarded, limited ability, immature intellectually, should be placed in special education class, promoted only because of age, poor memory, poor retention
3. Improving--seems to show intellectual improvement, learning rate increasing. has potential to learn
4. Combination of 1 & 3
5. Combination of 2 & 3

(B) GENERAL ACADEMIC COMPETENCE (Emphasis on Academic Output)

1. High-Average Academic Competence--does good work (output), general statement of above or at grade level work
2. Low Academic Competence--has trouble in academic skills, below grade average in all academic areas, etc.
3. Improving--statement that child is improving generally in academic subjects, shows academic progress in all areas
4. Combination of 1 & 3
5. Combination of 2 & 3
6. Child shows regression in academic competence

(C) ACADEMIC COMPETENCE (Math)

1. High-Average Math Competence--good at math, above grade level in math, normal understanding at grade level in math, adequate math ability
2. Low Math Competence--poor at math, needs to improve at math, below grade level in math
3. Improving--improving in math competence, statement that child is improving in math, shows progress in math, etc.
4. Combination of 1 & 3
5. Combination of 2 & 3
6. Child shows regression in math ability

(D) ACADEMIC COMPETENCE (Reading)

1. High-Average Reading Competence--good at reading, above grade level in reading, normal understanding at grade level in reading, adequate reading ability
2. Low Reading Competence--poor reader, needs to improve reading, below grade level in reading
3. Improving--improving in reading competence, statement that child is improving in reading, shows progress in reading, etc.
4. Combination of 1 & 3
5. Combination of 2 & 3
6. Child shows regression in reading ability

---

* Examples listed illustrate but not limit information content concerning the categories.

(E) COMPETENCE IN ENGLISH (Language Usage)

1. High-Average Competence--uses language well, extensive vocabulary, effective communication skills, uses language functionally for grade level placement
2. Low Competence--uses language with difficulty, cannot speak well, does not understand English, small vocabulary
3. Improving--improving in language skills, oral expression, communication
4. Combination of 1 & 3
5. Combination of 2 & 3

(F) CLASS WORK HABITS (Academic)

1. Positive--finishes work, tries hard, industrious, likes to work, good work habits, follows direction, good self-discipline, responsible, works independently
2. Negative--not finish work, poor work habits, short attention span, inattentive, lacks self-discipline, not settle down, hyperactive, needs supervision, requires attention (rewards or personal contact)

(G) CLASS ADJUSTMENT AFFECTIVE (Discipline)

1. Positive--happy or good mood, enjoys school, courteous, sweet, good social adjustment (class), shows interest
2. Negative--sullen, angry, hostile, withdrawn, shy, depressed, poor social adjustment, poor citizen, distracts others, discipline problem, not conform to class rules

(H) PEER RELATIONSHIPS IN THE CLASSROOM & SCHOOLYARD

1. High-Average Peer Relationships--liked by peers, leader, easy to manage, cooperatively participates in games, self-control, often chosen for teams
2. Rejected by peers, disliked, has no friends, social isolate, not included in play, group teases individual (group rejects individual)
3. Rejects peers, hostile, does not follow rules, disrupts play, social isolate (individual rejects group) (individual teases other children)
4. Undefined Problems--for example, wants kids to like him but goes about it in the wrong way, has peer problems (includes all vague peer problems)
5. Improving--beginning to make friends, less withdrawn or shy
6. Combination of 2 & 5
7. Combination of 4 & 5
8. Combination of 1 & 3

(I) CHRONIC ABSENTEEISM

1. Medical
2. Non-Medical
3. Reason not recorded

(J) TEACHER RECOMMENDATION FOR PLACEMENT

1. Should be retained--grade level
2. Should return to EMR
3. Should return to regular classroom
4. Should be placed in special class
5. Should be tested for possible alternative placement

(K) DIAGNOSTIC RELATED PROBLEMS

1. Speech
2. Perceptual or motor, perceptual-motor coordination
3. Medical--teacher asks for some medical intervention or specific mention of medication and so forth in cum
4. Visual
5. Hearing
6. Other-all other miscellaneous categories

(L) SPECIAL SERVICES RECEIVED

1. Speech therapy
2. Medication
3. Perceptual motor training
4. Tutoring
5. Other--all other miscellaneous categories

GENERAL RULES FOR CODING TEACHER COMMENTS

1. One and only one remark per space. If more than one comment fits a single category, then the first comment on sheet takes precedent. However, with the category of academic competence, the following subject order prevails: reading, math, spelling, social studies, shop, handwriting, and so on.

2. If two or more phrases in a sentence, both should be coded together.

3. If cannot understand handwriting of coder, leave blank.

4. Under peer relationships, if not specified goes under the classroom category.

5. If teacher comment is vague (e.g., "has made good progress") without specifying what specific area, then do not code any, disregard statement.

6. If a teacher comment for a specific year states "same as above-no change" or equivalent phrase, then code the previous year's statement.

PSYCHOLOGICAL, FILE 2

ID # _ _ _ _ _ _

NAME _____

1. Reasons for Referral

(7) __ 1 A
(8) __ 1 B
(9) __ 1 C
(10) __ 1 D

2. Reasons for Referral

(11) __ 1 A
(12) __ 1 B
(13) __ 1 C
(14) __ 1 D

3. Persuasive Element

(15) __ 1 A
(16) __ 1 B
(17) __ 1 C
(18) __ 1 D
(19) __ 1 E
(20) __ 1 F

4. Recommendation to Return

(21) __ 1 A
__ 2 B
__ 3 C

Note dates if A (Academic Year)

(22-27) __ __ __ __ __ __

5. Formal Documentation of A & D

(28) __ 1 A
__ 2 B
__ 3 C

Note dates if A (Academic Year)

(29-34) __ __ __ __ __ __

6. Reasons for Referral

(35) __ 1 A
(36) __ 1 B
(37) __ 1 C
(38) __ 1 D
(39) __ 1 E
(40) __ 1 F

7. Reason Not Decertified

(43) __ 1 A
(44) __ 1 B
(45) __ 1 C
(46) __ 1 D
(47) __ 1 E
(48) __ 1 F

8. Number of Prior Reevaluations

(49) __ (note number)

9. Referral Reason

(50) __ 1 A
(51) __ 1 B
(52) __ 1 C
(53) __ 1 D
(54) __ 1 E
(55) __ 1 F
(56) __ 1 G
(57) __ 1 H

10. Reason for Referral

(58) __ 1 A
(59) __ 1 B
(60) __ 1 C
(61) __ 1 D
(62) __ 1 E
(63) __ 1 F
(64) __ 1 G
(65) __ 1 H

11. Persuasive Element

(66) __ 1 A
(67) __ 1 B
(68) __ 1 C
(69) __ 1 D
(70) __ 1 E
(71) __ 1 F
(72) __ 1 G

12. A & D Decision

(73) __ 1 Yes
__ 2 No

13. New Work-Up

2. Reasons for Referral

(11) __ 1 A
(12) __ 1 B
(13) __ 1 C
(14) __ 1 D

3. Persuasive Element

(15) __ 1 A
(16) __ 1 B
(17) __ 1 C
(18) __ 1 D
(19) __ 1 E
(20) __ 1 F

4. Recommendation to Return

(21) __ 1 A
__ 2 B
__ 3 C

Note dates if A (Academic Year)

(22-27) __ __ __ __ __ __

5. Formal Documentation of A & D

(28) __ 1 A
__ 2 B
__ 3 C

Note dates if A (Academic Year)

(29-34) __ __ __ __ __ __

6. Reasons for Referral

(35) __ 1 A
(36) __ 1 B
(37) __ 1 C
(38) __ 1 D
(39) __ 1 E
(40) __ 1 F
(41) __ 1 G
(42) __ 1 H

(48) __ 1 F

8. Number of Prior Reevaluations

(49) __ (note number)

9. Referral Reason

(50) __ 1 A
(51) __ 1 B
(52) __ 1 C
(53) __ 1 D
(54) __ 1 E
(55) __ 1 F
(56) __ 1 G
(57) __ 1 H

10. Reason for Referral

(58) __ 1 A
(59) __ 1 B
(60) __ 1 C
(61) __ 1 D
(62) __ 1 E
(63) __ 1 F
(64) __ 1 G
(65) __ 1 H

11. Persuasive Element

(66) __ 1 A
(67) __ 1 B
(68) __ 1 C
(69) __ 1 D
(70) __ 1 E
(71) __ 1 F
(72) __ 1 G

12. A & D Decision

(73) __ 1 Yes
__ 2 No

13. New Work-Up

(74) __ 1 A1
__ 2 A2
__ 3 B

14. Any Notations

(75) __ 1 A
__ 2 B

(76) 4 2 G 5 4

PSYCHOLOGICAL FILE SEARCH

Time of Initial EMR Placement

1. Reason for referral from teacher. (mark more than one if indicated)
   a. Personal, social adjustment
   b. Achievement
   c. Not recorded
   d. Other

2. Reason for referral from psychologist. (mark more than one if indicated)
   a. Personal
   b. Achievement
   c. Not recorded
   d. Other

3. Persuasive element in committee that led to EMR status. (mark only one unless others are clearly evident)
   a. Low I.Q.
   b. Low achievement
   c. Poor personal, social adjustment
   d. Poor adaptive behavior
   e. Not recorded
   f. Other

4. Did teacher of EMR class ever recommend return to regular class prior to 1969?
   a. Yes (Give dates),
   b. No (If negative recommendation is recorded)
   c. No record of teacher recommendation

5. Was there formal documentation that the case was considered by the A & D committee prior to decertification?
   a. Yes (Give dates)
   b. Not recorded

(Numbers 6-8 pertain only to non-decertified EMR)

6. Reason for referral for most recent reevaluation of non-decertified EMR's. (more than one may be checked)
   a. Regular, mandated reevaluation
   b. Good behavior, social adjustment
   c. Poor behavior, social adjustment
   d. Good achievement
   e. Poor achievement
   f. Not recorded
   g. Other

7. Reason why not decertified (mark more than one if indicated)
   a. Low I.Q.
   b. Low achievement
   c. Poor personal, social adjustment
   d. Poor adaptive behavior
   e. Not recorded
   f. Other

8. Number of prior reevaluation of non-decertified EMR's. (do not include most recent)

Time of Decertification

(Numbers 9-14 only for decertified Cases)

9. Referral reason from teacher at time of decertification. (mark more than one if indicated)
   a. Regular, mandated reevaluation
   b. Good behavior, social adjustment
   c. Poor behavior, social adjustment
   d. Good achievement
   e. Poor achievement
   f. Not recorded
   g. No official decertification
   h. Other

10. Referral reason from psychologist at time of decertification. (mark more than one if indicated)
    a. Regular, mandated reevaluation
    b. Good behavior, social adjustment
    c. Poor behavior, social adjustment
    d. Good achievement
    e. Poor achievement
    f. Not recorded
    g. No official decertification
    h. Other

11. Persuasive element in the A & D conference that led to decertification. (mark only one unless others are clearly evident)
    a. High I.Q.
    b. High achievement
    c. Good social adjustment
    d. Good adaptive behavior
    e. Not recorded
    f. No official decertification
    g. Other

12. Was there a clear, official A & D conference record?
    a. Yes
    b. No

13. Was a new psychological work-up done on the subject at time of decertification?
    a. Yes (What did it consist of?)
        1. Complete reevaluation
        2. Committee review without testing
    b. No (date of previous work-up)

14. Any notations that child has been seen or any follow-up done since time of decertification?
    a. Yes (If yes what)
    b. No

Name ____________________

School ____________________

Coder ____________________

(every card)

TEACHER COMMENTS

60-1	61-2	62-3	63-4	64-5	65-6	66-7	67-8	68-9	69-0	70-1	71-2	72-3	73-4	76 80
7 - 8	9-10	11-12	13-14	15-16	17-18	19-20	21-22	23-24	25-26	27-28	29-30	31-32	33-34	
_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	
35-36	37-38	39-40	41-42	43-44	45-46	47-48	49-50	51-52	53-54	55-56	57-58	59-60	61-62	
_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	2 9 G 5 4
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_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	3 3 G 5 4

DIST./CODE 1 6 _ _ _ _ _ _ (every card)

School _____

Coder _____

TEACHER COMMENTS

	60-1	61-2	62-3	63-4	64-5	65-6	66-7	67-8	68-9	69-0	70-1	71-2
	7 - 8	9-10	11-12	13-14	15-16	17-18	19-20	21-22	23-24	25-26	27-28	29-30
(A) Mental Ability (7-34)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
	35-36	37-38	39-40	41-42	43-44	45-46	47-48	49-50	51-52	53-54	55-56	57-58
(B) Acad. Comp. (Gen.) (35-62)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(C) Acad. Comp. (Math) (7-34)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(D) Acad. Comp. (Rdg.) (35-62)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(E) Comp. Eng. (7-34)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(F) Work Habits (35-62)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(G) Adjustment (7-34)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(H) Peer Relations (35-62)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(I) Chronic Abs. (7-34)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
(J) Teacher Recom. (35-62)	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _

DIST./CODE _ _ _ _ _ _ (every card)

Diagnostic Related Problems (7-48)

60-1	61-2	62-3	63-4	64-5	65-6	66-7
7 12	13 18	19 24	25 30	31 36	37 42	43 4
67-8	68-9	69-0	70-1	71-2	72-3	73-4
7 12	13 18	19 24	25 30	31 36	37 42	43 4

33 **Special Services Received (7-41)**

60-1	61-2	62-3	63-4	64-5	65-6	66-7
7 11	12 16	17 21	22 26	27 31	32 36	37 41
67-8	68-9	69-0	70-1	71-2	72-3	73-4
7 11	12 16	17 21	22 26	27 31	32 36	37 41

60-1	61-2	62-3	63-4	64-5	65-6	66-7
12 ----	13 18 ------	19 24 ------	25 30 ------	31 36 ------	37 42 ------	43 48 ------

76 80
3 4 G 5 4

67-8	68-9	69-0	70-1	71-2	72-3	73-4
12 -----	13 18 ------	19 24 ------	25 30 ------	31 36 ------	37 42 ------	43 48 ------

76 80
3 5 G 5 4

60-1	61-2	62-3	63-4	64-5	65-6	66-7
11 ----	12 16 -----	17 21 -----	22 26 -----	27 31 -----	32 36 -----	37 41 -----

76 80
3 6 G 5 4

67-8	68-9	69-0	70-1	71-2	72-3	73-4
11 ----	12 16 -----	17 21 -----	22 26 -----	27 31 -----	32 36 -----	37 41 -----

76 80
3 7 G 5 4

Return this with the completed questionnaire so that we may send you your $3.00 stipend. Normally you would receive it within a couple days. If you do not receive it within 10 days, phone or write us.

We will detach this blank from your questionnaire so that your name will not be associated with your responses.

Send check to:

Name: _____

Address: _____

City: _____ Zip Code _____

EMR TRANSITIONAL STUDY[1]

TEACHER QUESTIONNAIRE - FORM A

C. Edward Meyers
University of Southern California

Donald L. MacMillan
University of California, Riverside

Roland K. Yoshida
University of Southern California

---

[1]Preparation of this questionnaire was supported by a grant from the U.S. Office of Education, No. 0-73-5263. If there are questions concerning the administration of this questionnaire by the respondent, please contact project offices at WPH 403, University of Southern California, Los Angeles, California 90007.

General Instructions:

1. Note that some questions ask for a single check mark, others a numerical figure.
2. Answer the questions concerning the students named in this questionnaire as based on your current school-year experience with them, even if he is not currently in your classroom.
3. After you have completed the questionnaire booklet for all the selected students in your class, place them in the prepared envelope and seal it. Be sure to include your name and address so that we can send a $3.00 remittance as soon as possible for your participation in this project.

   Please send the questionnaire and stipend form as instructed in the covering letter.

(For Project Use Only)

District Code Number ___ ___

School Code Number ___ ___ ___

Teacher Code Number ___ ___ ___

Student #1 Number ___ ___ ___ ___

Student #2 Number ___ ___ ___ ___

Student Name #1: _____

(Erase or mark out student's name before sending.)

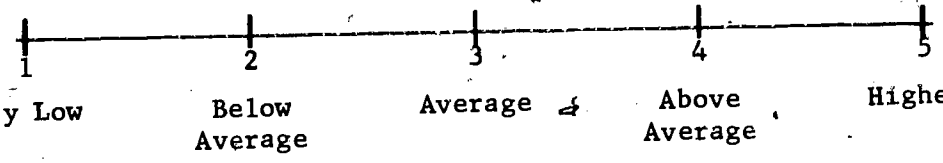
(21) 1. What kind of a class would you say _____ is in? (Check only one.)

_____ 1 Predominately high ability group
_____ 2 Predominately low ability group
_____ 3 Combination of various ability groups

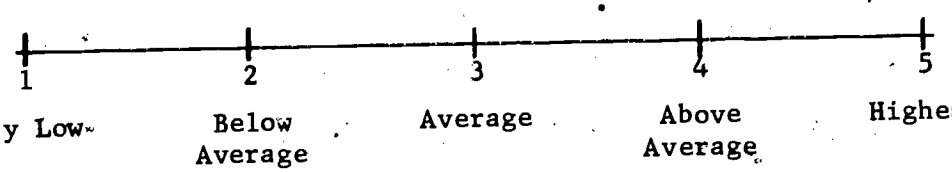
(22) 2. Your class level is listed as the ___th grade. What proportion of the students in the class do you believe or know to read at or above this grade level? (Check only one.)

_____ 1 More than half
_____ 2 About half
_____ 3 Under half
_____ 4 Very few

(23) 3. Mark what you judge to be _____'s own achievement level among the class members as you have observed it somewhere from 1 to 5 on this scale.



(24) 4. Mark also what you judge to be _____'s general social acceptance among his (her) classmates in this class.



(25-26) 5. How many times have you referred _____ to the principal or another school agent for discipline problems? (Write number below. If you do not have actual numbers, please estimate.)

_____

6. How often has _____ been absent and tardy from your class over the past academic year? (Check appropriate boxes.)

		Never 1	Rarely 2	Sometimes 3	Often 4	Frequently 5
(27)	Absence from class	☐	☐	☐	☐	☐
(28)	Tardiness	☐	☐	☐	☐	☐

Student Name #2: _____
(Erase or mark out student's name before sending.)

(31) 7. What is _____'s general achievement level in your class?

1	2	3	4	5
Very Low	Below Average	Average	Above Average	Highest

(32) 8. Mark also what you judge to be _____'s general social acceptance among his (her) classmates, in this class and in the school?

1	2	3	4	5
Very Low	Below Average	Average	Above Average	Highest

(33-34) 9. How many times have you referred _____ to the principal or another school agent for discipline problems? (Write number below. If you do not have actual numbers, please estimate.)

_____

10. How often has _____ been absent and tardy from your class over the past academic year? (Check appropriate boxes.)

		Never 1	Rarely 2	Sometimes 3	Often 4	Frequently 5
(35)	Absence from class	☐	☐	☐	☐	☐
(36)	Tardiness	☐	☐	☐	☐	☐

11. Have the parents of either student contacted you about his special needs during this school year? (Mark number of times below; if answer is none, mark appropriate statement.)

(37-39) _____ 1 yes, for _____, about _____ times
(40) _____ 1 no for _____.

(41-43) _____ 1 yes, for _____, about _____ times
(44) _____ 1 no for _____

Student Name #1: _____
(Erase or mark out student's name before sending.)

(51) 12. _____ was a transition student, once having been in an EMR placement. He (she) presumably has received some help for his (her) special learning needs. If so, was the help given to you, or to him (her), or a combination?

_____ 1 to him (her) (as through a tutor or aide)
_____ 2 to me, consultation and materials given to help him (her) and others
_____ 3 a combination
_____ 4 no help has been provided, at least to me
_____ 5 other (explain): _____

(52) 13. If support of some kind was provided for _____'s education, how do you evaluate it?

_____ 1 it was of great value
_____ 2 it was somewhat helpful
_____ 3 it was of little or no value
_____ 4 does not apply, no help given to me

14. If support or assistance of any kind whatsoever has been provided, identify it here. (Mark all that apply.)

(53) _____ 1 volunteers
(54) _____ 1 instructional aide
(55) _____ 1 school-district tutors, such as resource teachers
(56) _____ 1 resource room for children
(57) _____ 1 resource teacher consultation
(58) _____ 1 case history information to help understand special needs presented by counselor or other personnel
(59) _____ 1 other (please indicate what): _____

(60) 15. How did you find techniques you used in teaching (e.g., discussions) prior to receiving transitional students to work with transitional students?

1 2 3 4 5

Poorly Average Very Well

Comments: _____

_____

(61) 16. How did you find materials you used in teaching (books, work sheets), prior to receiving transitional students, to work with the transitional students?

1 2 3 4 5

Poorly Average Very Well

Comments: _____

_____

(62) 17. Did having the transitional student in any way have an impact upon your instruction for the remainder of the class?

_____ 1 yes
_____ 2 no
_____ 3 uncertain

18. Explain how this affected your class. (Mark all that apply, and if needed add your own comment):

(63) _____ 1 extra assistance had to be provided; took time and energy
(64) _____ 1 class disruption through his behavior
(65) _____ 1 others picked on him
(66) _____ 1 had to prepare materials specifically for him
(67) _____ 1 take time to work with aide, tutor, volunteers, etc.
(68) _____ 1 other: _____

(69) Please provide a little statistical information about yourself as the teacher:

_____ 1 Male _____ 2 Female

(70) Years of experience teaching at about this level:

_____ 1 One year
_____ 2 Two to four years
_____ 3 5-10 years
_____ 4 11 or more years

(71-72) Total other years of teaching: _____ years

(73-74) Total special class experience in the EMR or special training class, if any: _____ years

(75) Ethnic membership:

_____ 1 Anglo
_____ 2 Black
_____ 3 Chicano
_____ 4 Oriental
_____ 5 Other

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Send check to:

Name: _____

Address: _____

City: _____ Zip Code _____

EMR TRANSITIONAL STUDY[1]

TEACHER QUESTIONNAIRE - FORM B

C. Edward Meyers
University of Southern California

Donald L. MacMillan
University of California, Riverside

Roland K. Yoshida
University of Southern California

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[1]Preparation of this questionnaire was supported by a grant from the U.S. Office of Education, No. 0-73-5263. If there are questions concerning the administration of this questionnaire by the respondent, please contact project offices at WPH 403, University of Southern California, Los Angeles, California 90007.

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3. After you have completed the questionnaire booklet for all the selected students in your class, place them in the prepared envelope and seal it. Be sure to include your name and address so that we can send a $3.00 remittance as soon as possible for your participation in this project.

   Please send the questionnaire and stipend form as instructed in the covering letter.

(For Project Use Only)

District Code Number ___ ___

School Code Number ___ ___ ___

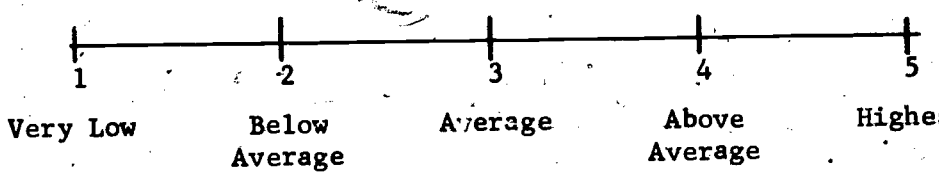
Teacher Code Number ___ ___ ___

Student #1 Number ___ ___ ___ ___

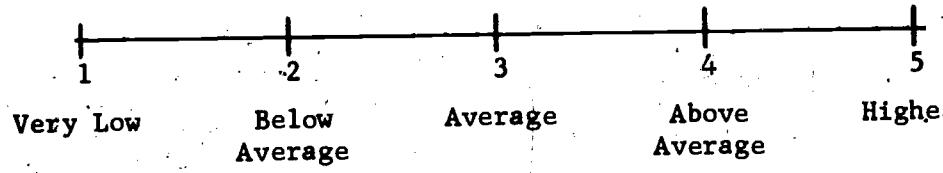
Student's Name: _____

(Erase or mark out student's name before sending.)

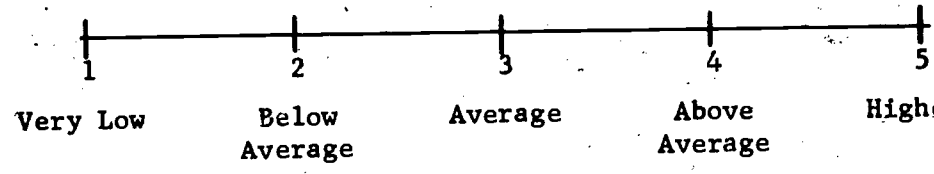
(21) 1. Mark what you judge to be _____'s own achievement level among the members of this and similar EMR classes, somewhere 1 to 5 on this scale.



(22) 2. Mark what you judge to be _____'s general social acceptance among his (her) classmates.



(23) 3. Mark also what you judge to be _____'s general social acceptance among other student groups in this school unit.



(24-25) 4. How many times have you referred _____ to the principal or another school agent for discipline problems this school year? (Write number below. If you do not have actual numbers, please estimate.)

_____

5. How often has _____ been absent and tardy from your class over the past academic year? (Check appropriate boxes.)

		Never 1	Rarely 2	Sometimes 3	Often 4	Frequently 5
(26)	Absence from class	☐	☐	☐	☐	☐
(27)	Tardiness	☐	☐	☐	☐	☐

6. Have the parents of this student contacted you about his special needs during this school year?

(28-30) _____ 1 yes, about _____ times
(31) _____ 1 no

(32) 7. Would this student in your judgement be able to get along in school if he (she) were reassigned to a regular program?

_____ 1 no
_____ 2 only if given transition help
_____ 3 yes, even without transition help
_____ 4 I don't know

(33) 8. Even if you answered #2 or #3 above, do you believe he (she) would be better off staying in special class?

_____ 1 yes
_____ 2 no
_____ 3 don't know

(34) 9. Were you an EMR teacher when all EMRs were re-evaluated (about 1969-1972)?

_____ 1 yes
_____ 2 no

10. If yes, and many EMRs were reassigned, how did it affect the EMR class? (Mark all that apply.)

(35) _____ 1 lowered the average learning level
(36) _____ 1 reduced behavioral problems
(37) _____ 1 increased behavioral problems
(38) _____ 1 took away some good in-class helpers
(39) _____ 1 other (specify): _____

_____

11. What do you know or have heard about the success of the reassigned EMR students?

(40) There was unqualified success in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(41) Academic difficulty was experienced in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(42) Behavior problems occurred in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(43) Unqualified acceptance of the transitional students was given by regular teachers for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(44) Unqualified acceptance of the transitional students was given by regular class peers for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

12. For the transitional student, did the program: (Mark all that apply.)

(45) _____ 1 help him stay in school
(46) _____ 1 aid him in coping with regular academic program
(47) _____ 1 help him to adjust to different school situations
(48) _____ 1 other (specify): _____

_____

13. What is happening, as you see it, to the EMR program as a consequence of the decertification and reassignment of EMRs to regular programs?

_____

_____

_____

_____

14. To the EMR teacher?

_____

_____

_____

_____

(61) Because your response to the above is anonymous, please provide a little statistical information about yourself as the teacher:

_____ 1 male _____ 2 female

(62) Years of experience teaching EMR at this program level:

_____ 1 one year
_____ 2 two to four years
_____ 3 5-10 years
_____ 4 11 or more years

(63-64) Total special class experience in the EMR or special training class, if any: _____ years.

(65-66) Total <u>other</u> (elementary, secondary) years of teaching: _____ years.

(67) Ethnic membership:

_____ 1 Anglo
_____ 2 Black
_____ 3 Chicano
_____ 4 Oriental
_____ 5 Other

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We will detach this blank from your questionnaire so that your name will not be associated with your responses.

Send check to:

Name: _____

Address: _____

City: _____ Zip Code _____

Social Security #: _____

EMR TRANSITIONAL STUDY[1]

TEACHER QUESTIONNAIRE - FORM A

C. Edward Meyers
University of Southern California

Donald L. MacMillan
University of California, Riverside

Roland K. Yoshida
University of Southern California

---

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(For Project Use Only)

District Code Number ___ ___

School Code Number ___ ___ ___

Teacher Code Number ___ ___ ___

Student #1 Number ___ ___ ___ ___

Student #2 Number ___ ___ ___ ___

Student Name #1: _____

(Erase or mark out student's name before sending.)

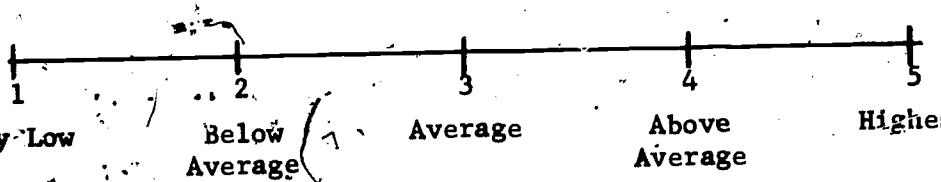
(21) 1. What kind of a class would you say _____ is in? (Check only one.)

_____ 1 Predominately high ability group
_____ 2 Predominately low ability group
_____ 3 Combination of various ability groups

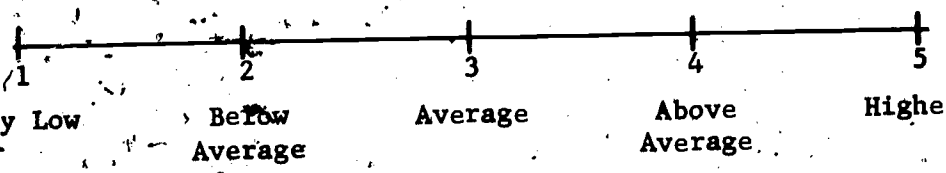
(22) 2. Your class level is listed as the _____th grade. What proportion of the students in the class do you believe or know to read at or above this grade level? (Check only one.)

_____ 1 More than half
_____ 2 About half
_____ 3 Under half
_____ 4 Very few

(23) 3. Mark what you judge to be _____'s own achievement level among the class members as you have observed it somewhere from 1 to 5 on this scale.



(24) 4. Mark also what you judge to be _____'s general social acceptance among his (her) classmates in this class.



(25-26) 5. How many times have you referred _____ to the principal or another school agent for discipline problems? (Write number below. If you do not have actual numbers, please estimate.)

_____

6. How often has _____ been absent and tardy from your class over the past academic year? (Check appropriate boxes.)

		Never 1	Rarely 2	Sometimes 3	Often 4	Frequently 5
(27)	Absence from class	☐	☐	☐	☐	☐
(28)	Tardiness	☐	☐	☐	☐	☐

Student Name #2: _____
(Erase or mark out student's name before sending.)

(31) 7. What is _____'s general achievement level in your class?

1	2	3	4	5
Very Low	Below Average	Average	Above Average	Highest

(32) 8. Mark also what you judge to be _____'s general social acceptance among his (her) classmates, in this class and in the school?

1	2	3	4	5
Very Low	Below Average	Average	Above Average	Highest

(33-34) 9. How many times have you referred _____ to the principal or another school agent for discipline problems? (Write number below. If you do not have actual numbers, please estimate:)

_____

10. How often has _____ been absent and tardy from your class over the past academic year? (Check appropriate boxes.)

		Never 1	Rarely 2	Sometimes 3	Often 4	Frequently 5
(35)	Absence from class	☐	☐	☐	☐	☐
(36)	Tardiness	☐	☐	☐	☐	☐

11. Have the parents of either student contacted you about his special needs during this school year? (Mark number of times below; if answer is none, mark appropriate statement.)

(37-39) _____ 1 yes, for _____, about _____ times
(40) _____ 1 no for _____

(41-43) _____ 1 yes, for _____, about _____ times
(44) _____ 1 no for _____

We are again referring to the first student in the next two questions.

Student Name #1: _____

(Erase or mark out student's name before sending.)

(51) 12. _____ was a transition student, once having been in an EMR placement. He (she) presumably has received some help for his (her) special learning needs. If so, was the help given to you, or to him (her), or a combination?

_____ 1 to him (her) (as through a tutor or aide)
_____ 2 to me, consultation and materials given to help him (her) and others
_____ 3 a combination
_____ 4 no help has been provided, at least to me
_____ 5 other (explain): _____

(52) 13. If support of some kind was provided for _____'s education, how do you evaluate it?

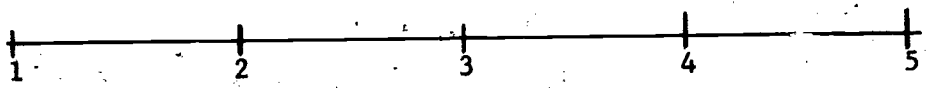
_____ 1 it was of great value
_____ 2 it was somewhat helpful
_____ 3 it was of little or no value
_____ 4 does not apply, no help given to me

The following questions refer to the transition program in general:

14. If support or assistance of any kind whatsoever has been provided, identify it here. (Mark all that apply.)

(53) _____ 1 volunteers
(54) _____ 1 instructional aide
(55) _____ 1 school-district tutors, such as resource teachers
(56) _____ 1 resource room for children
(57) _____ 1 resource teacher consultation
(58) _____ 1 case history information to help understand special needs presented by counselor or other personnel
(59) _____ 1 other (please indicate what): _____

(60) 15. How would you evaluate techniques you used in teaching (e.g., discussions) prior to receiving transitional students, to work with transitional students?

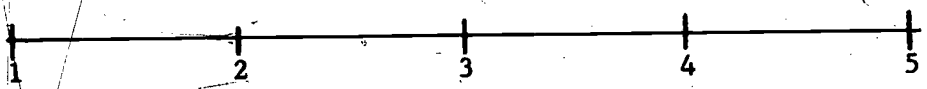


Poorly Average Very Well

Comments: _____

_____

(61) 16. How would you evaluate materials you used in teaching (books, work sheets), prior to receiving transitional students, to work with the transitional students?



Poorly Average Very Well

Comments: _____

_____

(62) 17. Did having the transitional student in any way have an impact upon your instruction for the remainder of the class?

_____ 1 yes
_____ 2 no
_____ 3 uncertain

18. Explain how this affected your class. (Mark all that apply, and if needed add your own comment):

(63) _____ 1 extra assistance had to be provided; took time and energy
(64) _____ 1 class disruption through his behavior
(65) _____ 1 others picked on him
(66) _____ 1 had to prepare materials specifically for him
(67) _____ 1 take time to work with aide, tutor, volunteers, etc.
(68) _____ 1 other: _____

(69) Because your response to the above is anonymous, please provide a little statistical information about yourself as the teacher:

_____ 1 Male _____ 2 Female

(70) Years of experience teaching at about this level:

_____ 1 One year
_____ 2 Two to four years
_____ 3 5-10 years
_____ 4 11 or more years

(71-72) Total other years of teaching: _____ years

(73-74) Total special class experience in the EMR or special training class, if any: _____ years

(75) Ethnic membership:

_____ 1 Anglo
_____ 2 Black
_____ 3 Mexican-American
_____ 4 Oriental
_____ 5 Other

(Optional)
The questions on this page are optional. Please answer if you wish to do so.

19. What do you know or have heard about the success of the reassigned EMR students?

(21) There was unqualified success in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(22) Academic difficulty was experienced in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(23) Behavior problems occurred in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(24) Unqualified acceptance of the transitional students was given by regular teachers for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(25) Unqualified acceptance of the transitional students was given by regular class peers for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

20. For the transitional student, did the program: (Mark all that apply.)

(26) _____ 1 help him stay in school
(27) _____ 1 aid him in coping with regular academic program
(28) _____ 1 help him to adjust to different school situations
(29) _____ 1 other (specify): _____

_____

Return this with the completed questionnaire so that we may send you your $3.00 stipend. Normally you would receive it within a couple days. If you do not receive it within 10 days, phone or write us.

We will detach this blank from your questionnaire so that your name will not be associated with your responses.

Send check to:

Name: _____

Address: _____

City: _____ Zip Code _____

EMR TRANSITIONAL STUDY[1]

TEACHER QUESTIONNAIRE - FORM B

C. Edward Meyers
University of Southern California

Donald L. MacMillan
University of California, Riverside

Roland K. Yoshida
University of Southern California

[1]Preparation of this questionnaire was supported by a grant from the U.S. Office of Education, No. 0-73-5263. If there are questions concerning the administration of this questionnaire by the respondent, please contact project offices at WPH 403, University of Southern California, Los Angeles, California 90007. Permission to reproduce this copyrighted work has been granted by the National Clearinghouse for Bilingual Education.

General Instructions:

1. Note that some questions ask for a single check mark, others a numerical figure.
2. Answer the questions concerning the students named in this questionnaire as based on your current school-year experience with them, even if he is not in your classroom at this time.
3. After you have completed the questionnaire booklet for all the selected students in your class, place them in the prepared envelope and seal it. Be sure to include your name and address so that we can send a $3.00 remittance as soon as possible for your participation in this project.

   Please send the questionnaire and stipend form as instructed in the covering letter.

(For Project Use Only)

District Code Number ___ ___

School Code Number ___ ___ ___

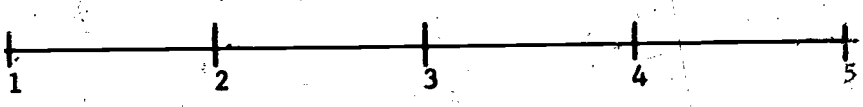
Teacher Code Number ___ ___ ___

Student #1 Number ___ ___ ___ ___

Student's Name: _____

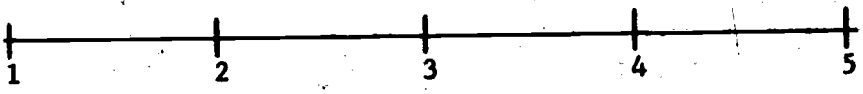
(Erase or mark out student's name before sending.)

(21) 1. Mark what you judge to be _____'s own achievement level among the members of this and similar EMR classes, somewhere 1 to 5 on this scale.



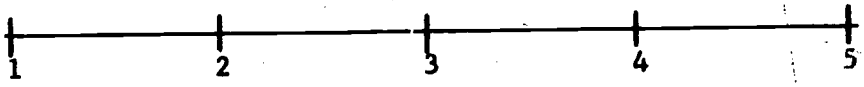
1	2	3	4	5
Very Low	Below Average	Average	Above Average	Highest

(22) 2. Mark what you judge to be _____'s general social acceptance among his (her) classmates.



1	2	3	4	5
Very Low	Below Average	Average	Above Average	Highest

(23) 3. Mark also what you judge to be _____'s general social acceptance among other student groups in this school unit.



1	2	3	4	5
Very Low	Below Average	Average	Above Average	Highest

(24-25) 4. How many times have you referred _____ to the principal or another school agent for discipline problems this school year? (Write number below. If you do not have actual numbers, please estimate.)

_____

5. How often has _____ been absent and tardy from your class over the past academic year? (Check appropriate boxes.)

		1 Never	2 Rarely	3 Sometimes	4 Often	5 Frequently
(26)	Absence from class	☐	☐	☐	☐	☐
(27)	Tardiness	☐	☐	☐	☐	☐

6. Have the parents of this student contacted you about his special needs during this school year?

(28-30) _____ 1 yes, about _____ times
(31) _____ 1 no

(32) 7. Would this student in your judgement be able to get along in school if he (she) were reassigned to a regular program?

_____ 1 no
_____ 2 only if given transition help
_____ 3 yes, even without transition help
_____ 4 I don't know

(33) 8. Even if you answered #2 or #3 above, do you believe he (she) would be better off staying in special class?

_____ 1 yes
_____ 2 no
_____ 3 don't know

(34) 9. Were you an EMR teacher when all EMRs were re-evaluated (about 1969-1972)?

_____ 1 yes
_____ 2 no

10. If yes, and many EMRs were reassigned, how did it affect the EMR class? (Mark all that apply.)

(35) _____ 1 lowered the average learning level
(36) _____ 1 reduced behavioral problems
(37) _____ 1 increased behavioral problems
(38) _____ 1 took away some good in-class helpers
(39) _____ 1 other (specify): _____

_____

11. What is happening, as you see it, to the EMR program as a consequence of the decertification and reassignment of EMRs to regular programs?

_____

_____

_____

_____

12. To the EMR teacher?

_____

_____

_____

_____

(61) Because your response to the above is anonymous, please provide a little statistical information about yourself as the teacher:

_____ 1 male _____ 2 female

(62) Years of experience teaching EMR at this program level:

_____ 1 one year
_____ 2 two to four years
_____ 3 5-10 years
_____ 4 11 or more years

(63-64) Total special class experience in the EMR or special training class, if any: _____ years.

(65-66) Total <u>other</u> (elementary, secondary) years of teaching: _____ years.

(67) Ethnic membership:

_____ 1 Anglo
_____ 2 Black
_____ 3 Mexican-American
_____ 4 Oriental
_____ 5 Other

(Optional)
The questions on this page are optional. Please answer if you wish to do so.

13. What do you know or have heard about the success of the reassigned EMR students?

(21) There was unqualified success in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(22) Academic difficulty was experienced in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(23) Behavior problems occurred in the regular program for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(24) Unqualified acceptance of the transitional students was given by regular teachers for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

(25) Unqualified acceptance of the transitional students was given by regular class peers for:

_____ 1 all (90-100% of reassigned students)
_____ 2 most (50-89%)
_____ 3 some (10-49%)
_____ 4 few (under 10%)
_____ 5 don't know

14. For the transitional student, did the program: (Mark all that apply.)

(26) _____ 1 help him stay in school
(27) _____ 1 aid him in coping with regular academic program
(28) _____ 1 help him to adjust to different school situations
(29) _____ 1 other (specify): _____

_____

SUGGESTED PROCEDURES FOR THE MOBILITY STUDY

Step 1. Select a random sample of decertified and EMR youngsters. In the _____ district, the number will be _____ for the decertified and _____ for the EMR for a total of _____ students to be followed. Figure 1 on page 4 gives a summary outline of the proposed method for following mobile students in this study. A more detailed narrative on the steps in the process is given below.

Step 2. For the sample, we need to determine the latest known status of the out-of-district student. That is, has the student: dropped-out, graduated, been expelled, transferred to another district, and so forth? The above process will yield three groups of students: a) those who left the district by means of graduation, drop-out, and so on, b) those students who transferred to another school district, and c) those students whose whereabouts are unknown.

Step 3. With the first group (those who graduated, etc.) we need to follow back to when the student was last in school. We will need to record information from the student's cum file (see attached form). The variables will be exactly the same as those collected for the in-district group. The student or his parents will never be contacted during this procedure. We have a research assistant who will be available to collect the cum record information.

Step 4. With the group whose status is unknown, the procedure presented above will be in effect.

Step 5. On the transferred group, two strategies will be in effect:

a) conduct the cum record search,

b) determine the district to which the student transferred when (s)he left your district.

Step 6. The project will then contact the receiving district by first sending a letter introducing the project (see attached letter) and then following with a telephone call. We would ask only whether the student is still in the district and if so, what program he is in. No teacher or other instructional personnel from the student's new district will be contacted by the project.

Step 7. Step 6 will be repeated until either the student is located or his whereabout is determined as unknown.

The procedures given above are suggestions which may be modified to suit the conditions of individual districts. It is important that we accumulate data which indicates how the selected students achieved academically and socially while in your school district and how they are doing in their current one, if applicable. The methods for accomplishing these goals may vary from district to district depending on the individual situation. We welcome any procedures which will enhance the probabilities of accomplishing our goals.

Several points deserve mentioning. They are addressed to the relationship of the project to the student and district and the support help given by the project.

1) No student will be contacted by the project. Furthermore, any information gathered on the students will be kept confidential according to the methods followed for the in-district students.

2) We will assign a research assistant to supervise this project with additional help from other project personnel. We have access to a lease-line which enables us to telephone any location in the state. Also, any postage and so forth will be paid for by the project.

3) The research assistants will be available to collect cum record information. That is, aid in locating the past placements of the students and the location of a copy of the cum record.

In short, we would like to reduce the cost in terms of personnel time and materials to the district. In this respect, we have made provisions for full-time research assistants to be assigned to this effort, for postage and handling, and all telephone calls which need to be made in contacting other districts.

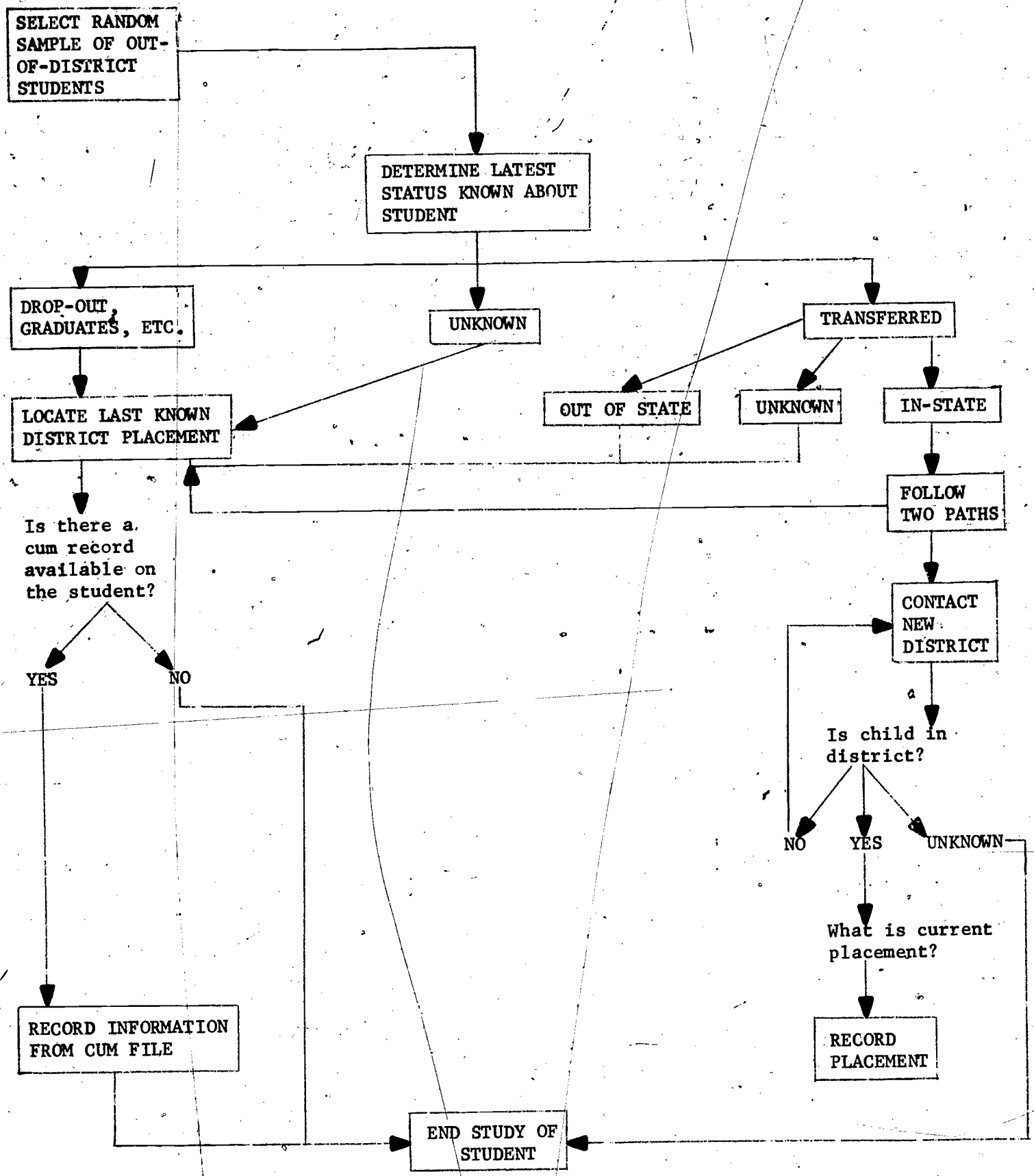


Figure 1. Proposed method for securing information on students in mobility study.

MOBILITY STUDY

(1-6) ID # _ _ _ _ _ _ NAME _____

(7-12) Birthdate _ _ _ _ _ _

(20-21) 1. What is the most recent information about the student known by the _____ district?

_ 1 Unknown

_ 2 Graduated

_ 3 Drop-out

_ 4 Expelled

_ 5 Jail

_ 6 Deceased

_ 7 Home Teacher

_ 8 Adult Education

_ 9 In Private School

_ 10 Transfer from District-In State

_ 11 Transfer from District-Out of State

_ 12 Transfer from District-Don't Know

2. What was the student's last known school district placement. Note placement and collect information from his cumulative record.

Name of school _____

(22) Cum record information collected.

_ 1 Yes

_ 2 No

_ 3 Not located

(23-25) 3. If above response was 9, 10 or 11, name, address and telephone of private or public school or school district that child transferred to.

Name of school (district) _____

Address _____

City, State _____ Zip Code _____

Telephone # _____

(26-27) 4. Contact new district by phone or mail. What is the most recent information about the student known by the first contacted school district?

_ 1 Unknown -- never heard of child, left school district but don't know status

_ 2 Graduated

_ 3 Drop-out

_ 4 Expelled

_ 5 Jail

_ 6 Deceased

_ 7 Home Teacher

_ 8 Adult Education

_ 9 In Private School

_ 10 Transfer from district-In State

_ 11 Transfer from district-Out of State

_ 12 Transfer from district-Don't Know

_ 13 In District School

(28) 5. If in district school, what is his placement?

_ 1 Regular Class

_ 2 EMR

_ 3 EH

_ 4 Social Adjustment

_ 5 Other Special Class

_ 6 Continuation School

_ 7 Don't Know

(29-31) 6. Repeat question #3. If above response was 9, 10 or 11, name, address and telephone of private or public school or school district that child transferred to.

Name of school (district) _____

Address _____

City, State _____ Zip Code _____

Telephone # _____

(32-33) 7. Repeat question #4. Contact new district by phone or mail. What is the most recent information about the student known by the second contacted school district?

_ 1 Unknown -- never heard of child, left school district but don't know status

_ 2 Graduated

_ 3 Drop-out

_ 4 Expelled

_ 5 Jail

_ 6 Deceased

_ 7 Home Teacher

_ 8 Adult Education

_ 9 In Private School

_ 10 Transfer from district-In State

_ 11 Transfer from district-Out of State

_ 12 Transfer from district-Don't Know

_ 13 In District School

(34) 8. Repeat question #5. If in district school, what is his placement?

_ 1 Regular Class

_ 2 EMR

_ 3 EH

_ 4 Social Adjustment

_ 5 Other Special Class

_ 6 Continuation School

_ 7 Don't Know

(35-37) 9. Repeat question #3. If above response was 9, 10 or 11, name, address and telephone of private or public school or school district that child transferred to.

Name of school (district) _____

Address _____

City, State _____ Zip Code _____

Telephone # _____

(38-39) 10. Repeat question #4. Contact new district by phone or mail. What is the most recent information about the student known by the third contacted school district?

_ 1 Unknown -- never heard of child, left school district but don't know status

_ 2 Graduated

_ 3 Drop-out

_ 4 Expelled

_ 5 Jail

_ 6 Deceased

_ 7 Home Teacher

_ 8 Adult Education

_ 9 In Private School

_ 10 Transfer from district-In State

_ 11 Transfer from district-Out of State

_ 12 Transfer from district-Don't Know

_ 13 In District School

(40) 11. Repeat question #5. If in district school, what is his placement?

_ 1 Regular Class

_ 2 EMR

_ 3 EH

_ 4 Social Adjustment

_ 5 Other Special Class

_ 6 Continuation School

_ 7 Don't Know

12. If above response was from 1-12, END SEARCH.

Form for listing last known status of decertified out-of-district subjects

MOBILITY STUDY -- DECERTIFIED

DISTRICT _____

No.	Code No.	Name	Birthdate	Status	Verified	Code Sheet
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
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18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						

Form for listing last known status of out-of-district EMR subjects

MOBILITY STUDY -- EMR

DISTRICT _____

No.	Code No.	Name	Birthdate	Status	Verified	Code Sheet
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
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30.						

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SANTA BARBARA • SANTA CRUZ

LOS ANGELES, CALIFORNIA 90024
OE Project
WPH 403
University of Southern California
Los Angeles, California 90007

November 20, 1974

Dear

The U.S. Office of Education (through the Pacific State Hospital/Neuropsychiatric Institute Research Group) has funded a project to study the educational implications of the mandatory decertification of many EMR students in California during the years 1969-1973. We have completed the first phase of this project which studied the current status of students in ten districts throughout the state.

We have found, however, that nearly half of these students had moved to other districts during the course of our investigation. In order to determine the possible bias in the data caused by such mobility, we have randomly selected samples of students who had left our ten districts. The records show that the student or students listed at the end of this letter have attended or are now attending your school system. We have also noted the school district from which they transferred and our contact individual there.

We would like to ask you only two questions:

(a) Whether the student is attending your district, and

(b) If he is, in what general programs (EMR, EH, regular class, continuation school) he is enrolled for the academic year 1973-1974; if not, what is the name of the school district to which he transferred or what is his status such as drop-out, graduate, and so forth.

This information will be kept strictly confidential following the rules set forth by our 10 districts and the Department of HEW. We will remove the student's name so there will be no possibility of disclosing this information. Your school district's identity will also be protected in this manner. We have assured each district that neither the students nor their parents will be contacted in the course of this study.

Enclosed is a self-addressed and stamped post card which asks you the name of the school district official who can supply us the information. We hope that you can return this card as soon as possible so that our research assistant, Ms. Linda Hiser, can contact you concerning this student. Your cooperation is greatly appreciated in furthering the goals of this study.

If you have any questions, Ms. Hiser or I would be happy to answer them. Our address and telephone numbers are as follows: P.O. Box 100-R, Pacific State Hospital, Pomona, California 91766; (714) 595-2011 or (213) 746-2041.

Thank you again for considering this request.

Sincerely,

Roland K. Yoshida (pdw)

Roland K. Yoshida, Ph.D.
Project Coordinator

RKY:pdw

Enclosures

Student Name	District	Contact
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

APPENDIX C

Computer Format of EMR Transitional Study Data File

Card No. 1

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7	Population group 1 Decertified 2 EMR 3 Regular class 4 Does not apply
8	Ethnicity 1 Anglo 2 Black 3 Chicano 4 Other non-white 5 Unknown
9	Sex 1 Male 2 Female 3 Unknown
10-15	Birthdate Month (two digit number) Day (two digit number) Year (two digit number)
16-18	Age at initial EMR recommendation (in months) _____ _____ _____
19	What test was used for EMR recommendation? 1 No test 2 Binet 3 Leiter 4 WISC 5 WAIS 6 WISC-Performance only 7 Tests 2 and 3 only 8 Tests 2 and 4 only 9 Other 2 or more tests listed above

Card No. 1

Column No.	Variable
20-22	Note Binet IQ given. (three digits)
23-25	Note Leiter IQ given. (three digits)
26-28	Note WISC-V IQ given. (three digits)
29-31	Note WISC-P IQ given. (three digits)
32-34	Note WISC-FS IQ given. (three digits)
35-37	Note WAIS IQ given. (three digits)
38	Was child placed in EMR classroom? 1 Yes 2 No 3 Unknown
39-40	When was child placed in EMR classroom? (Note academic year, 1966-67=66) ____ ____
41	Length of stay in EMR classroom. 1 Less than six months 2 6 months to 1 year 3 More than 1 year
42	When was child recommended out of EMR classroom? 1 9/69-6/70 2 9/70-6/71 3 9/71-6/72 4 9/72-6/73 5 Before 9/69 6 Don't know but placed in non-EMR class between 9/69 to present 7 Does not apply-never decertified 8 Parent request initiated decertification
43	What test was used for decertification recommendation? 1 No test 2 Binet 3 Leiter 4 WISC 5 WAIS 6 WISC-Performance 7 Tests 2 and 3 only 8 Tests 2 and 4 only 9 Two or more other tests listed above.

Card No. 1

Column No.	Variable
44-46	Note Binet IQ given. (three digits)
47-49	Note Leiter IQ given. (three digits)
50-52	Note WISC-V IQ given, (three digits)
53-55	Note WISC-P IQ given. (three digits)
56-58	Note WISC-FS IQ given. (three digits)
59-61	Note WAIS IQ given.
62	What was decertification placement? 1 Regular class 2 EH 3 Social adjustment 4 Other special class 5 Unknown 6 No change in placement made-Stayed in EMR classroom
63	Were other placements made after initial one after decertification? 1 Yes 2 No
64	1 Name other placements: EMR
65	1 Name other placements: Regular class
66	1 Name other placements: EH
67	1 Name other placements: Social adjustment
68	1 Name other placements: Other special class
69	1 Name other placements: Continuation School
72	Sample designation 1 Singlet 2 Dyad 3 Triad including Area K random sample only 4 Does not belong 5 Area K-stratified sample 6 Area K-stratified and random samples

Card No. 2

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7	Current placement of student 1 In district school 2 Transfer from district-in California 3 Transfer from district-out-of-state 4 Transfer from district-Unknown 5 In private school 6 Other special class-TMR 7 Drop-out 8 Graduation 9 Unknown
8	If in district school, current placement 1 EMR 2 Regular class, transition 3 Regular class, no transition 4 EH 5 Social adjustment 9 Not ascertained
9	Other placements of students 1 Deceased 2 Expelled 3 Jail 4 Home teacher

Card No. 3

Column No.	Variable
1-2	District
3-6	Subject Code Number
7	Level of test 1 Primer 2 Elementary 3 Primary I 4 Primary II 5 Intermediate 6 Advanced
8	A (1)--Reasons for incomplete results 1 Chronic absence from school 2 Child refuses to take test 3 Child fails to complete second section of test 4 Parent refuses permission to administer test 5 Drop-out from school before test administered 6 Transfer from school before test administered 7 Graduation from school before test administered 8 School building or district refuses to permit testing 9 Insufficient time for project to give test, IE, late start in district, miscellaneous
9-10	Raw Score (1) - Word Knowledge
11	A (2)--see column 8
12-13	Raw Score (2) - Word Analysis
14	A (3)--see column 8
15-16	Raw Score (3) - Reading
17	A (4)--see column 8
18-19	Raw Score (4) - Math Concepts
20	A (5)--see column 8
21-22	Raw Score (5) - Math Computation
23	A (6)--see column 8
24-25	Raw Score (6) - Math Problem Solving
26-28	Raw Score (7) - Total Reading
29-31	Raw Score (8) - Total Math
32	Blank
33-35	Standard Score (1) - Word Knowledge
36-38	Standard Score (2) - Word Analysis
39-41	Standard Score (3) - Reading
42-44	Standard Score (4) - Math Concepts
45-47	Standard Score (5) - Math Computation
48-50	Standard Score (6) - Math Problem Solving
51-53	Standard Score (7) - Total Reading
54-56	Standard Score (8) - Total Math

Card No. 3

Column No.	Variable
57	Blank
58-59	Grade Equivalent (1) - Word Knowledge
60-61	Grade Equivalent (2) - Word Analysis
62-63	Grade Equivalent (3) - Reading
64-65	Grade Equivalent (4) - Math Concepts
66-67	Grade Equivalent (5) - Math Computation
68-69	Grade Equivalent (6) - Math Problem Solving
70-71	Grade Equivalent (7) - Total Reading
72-73	Grade Equivalent (8) - Total Math

Card No. 4

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7	Level of Metropolitan Test 1 Primer 2 Elementary 3 Primary I 4 Primary II 5 Intermediate 6 Advanced
8	Reasons for incomplete results 1 Chronic absence from school 2 Child refuses to take test 3 Child fails to complete second section of test 4 Parent refuses permission to administer test 5 Drop-out from school before test administered 6 Transfer from school before test administered 7 Graduation from school before test administered 8 School building or district refuses to permit testing 9 Insufficient time for project to give test, IE, late start in district, miscellaneous
	Responses to Metropolitan Achievement Test Number of columns vary by test level; each response given one field:
11-49	Primer-Listening for Sounds
11-45	Primary I - Word Knowledge
11-50	Primary II - Word Knowledge
11-60	Elementary - Word Knowledge
11-60	Intermediate - Word Knowledge
11-60	Advanced - Word Knowledge

Card No. 5

1-2	District Code Number
3-6	Subject Code Number
7	Level of Metropolitan Test See Col. 7 of card No. 4

Card No. 5

Column No.	Variable
8	Reasons for incomplete results
	See Col. 8 of card No. 4
	Responses for Metropolitan Achievement Test
	Number of columns vary by test level; each response given one field.
--	Primer - No subtest (blank card)
11-50	Primary I - Word Analysis
11-45	Primary II - Word Analysis
--	Elementary - No subtest (blank card)
--	Intermediate - No subtest (blank card)
--	Advanced - No subtest (blank card)

Card No. 6

1-2	District Code Number
3-6	Subject Code Number
7	Level of Metropolitan Test
	See Col. 7 of card No. 4
8	Reasons for incomplete results
	See Col. 8 of card No. 4
	Responses for Metropolitan Achievement Test
	Number of columns vary by test level; each response given one field.
11-43	Primer - Reading
11-52	Primary I - Reading
11-54	Primary II - Reading
11-55	Elementary - Reading
11-55	Intermediate - Reading
11-55	Advanced - Reading

Card No. 7

1-2	District Code Number
3-6	Subject Code Number

Card No. 7

Column No.	Variable
7	Level of Metropolitan Test See Col. 7 of card No. 4
8	Reasons for incomplete results See Col. 8 of card No. 4
	Responses for Metropolitan Achievement Test Number of columns vary by test level; each response given one field.
11-44	Primer - Numbers
11-45	Primary I - Math Concepts
11-50	Primary II - Concepts
11-50	Elementary - Concepts
11-50	Intermediate - Concepts
11-50	Advanced - Math Concepts

Card No. 8

1-2	District Code Number
3-6	Subject Code Number
7	Level of Metropolitan Test See Col. 7 of card No. 4
8	Reasons for incomplete results See Col. 8 of card No. 4
	Responses for Metropolitan Achievement Test Number of columns vary by test level; each response given one field.
--	Primer - No subtest (blank card)
11-37	Primary I - Math Computation
11-43	Primary II - Math Computation
11-50	Elementary - Math Computation
11-50	Intermediate - Math Computation
11-50	Advanced - Math Computation

Card No. 9

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7	Level of Metropolitan Test See Col. 7 of card No. 4
8	Reasons for incomplete results See Col. 8 of card No. 4
	Responses for Metropolitan Achievement Test Number of columns vary by test level; each response given one field.
--	Primer - No subject (blank card)
--	Primary I - No subject (blank card)
11-45	Primary II - Math Problem Solving
11-45	Elementary - Math Problem Solving
11-45	Intermediate - Math Problem Solving
11-45	Advanced - Math Problem Solving

Card No. 10

1-2	District Code Number
3-6	Subject Code Number
7-10	School Enrollment (four digits)
11-13	Percentages of Anglo students in subject's school. For example, 45.1 would be recorded as 451.
14-16	Percentage of Black students in subject's school.
17-19	Percentage of Spanish surname students in subject's school.
20-22	Percentage of all other ethnic group students not included in the Anglo; Black, and Spanish surname category.
23-24	Number of students in a single classroom with subject. If in secondary school, number from the class from which the regular match was selected.

Card No. 10

Column No.	Variable
25	Type of transition currently given by school 1 Resource teacher, child-direct 2 Resource teacher, teacher-consults 3 Self-contained transition class 4 Instructional Aide 5 Volunteers 6 No help given, attending reg. class 9 Don't know
26	Current Placement 1 Regular Class 2 EMR 3 Social Adjust. 4 EH 5 Other special 6 Continuation

Card No. 11

1-2	District Code Number
3-6	Subject Code Number
7	Type of achievement test (Reading-1960) 1 Stanford 2 Metropolitan 3 California Achievement 4 California Test of Basic Skills 5 WRAT (Wide Range Achievement) 6 Other
8-10	Grade equivalent (Reading-1960) for example, grade equivalent 9.5 should be recorded as 095.
11-12	Percentile score (Reading-1960)
13	Stanine (Reading-1960)
14	Type of achievement test-1960 (Mathematics)
15-17	Grade Equivalent (Mathematics-1960)
18-19	Percentile Score (Mathematics-1960)
20	Stanine (Mathematics-1960)

Card No. 11

Column No.	Variable
21	Type of achievement test-(Reading-1961)
22-24	Grade equivalent (Reading-1961)
25-26	Percentile Score (Reading-1961)
27	Stanine (Reading-1961)
28	Type of achievement test-(Mathematics-1961)
29-31	Grade equivalent (Mathematics-1961)
32-33	Percentile Score (Mathematics-1961)
34	Stanine (Mathematics-1961)
35	Type of achievement test-(Reading-1962)
36-38	Grade equivalent (Reading-1962)
39-40	Percentile Score (Reading-1962)
41	Stanine (Reading-1962)
42	Type of achievement test-(Mathematics-1962)
43-45	Grade equivalent (Mathematics-1962)
46-47	Percentile Score (Mathematics-1962)
48	Stanine (Reading-1962)
49	Type of achievement test-(Reading-1963)
50-52	Grade equivalent (Reading-1963) for example, grade equivalent 9.5 should be recorded as 095.
53-54	Percentile Score (Reading-1963)
55	Stanine (Reading-1963)
56	Type of achievement test-(Mathematics-1963)
57-59	Grade equivalent (Mathematics-1963)
60-61	Percentile Score (Mathematics-1963)
62	Stanine (Mathematics-1963)

Card No. 12

1-2	District Code Number
3-6	Subject Code Number
7	Type of achievement test given (Reading-1964)

1 Stanford
2 Metropolitan
3 California Achievement
4 California Test of Basic Skills
5 WRAT (Wide Range Achievement)
6 Other

Card No. 12

Column No.	Variable
8-10	Grade equivalent (Reading-1964)
11-12	Percentile Score (Reading-1964)
13	Stanine (Reading-1964)
14	Type of achievement test-(Mathematics-1964)
15-17	Grade equivalent (Mathematics-1964)
18-19	Percentile Score (Mathematics-1964)
20	Stanine (Mathematics-1964)
21	Type of achievement test-(Reading-1965)
22-24	Grade equivalent (Reading-1965)
25-26	Percentile Score (Reading-1965)
27	Stanine (Reading-1965)
28	Type of achievement test-(Mathematics-1965)
29-31	Grade equivalent (Mathematics-1965)
32-33	Percentile Score (Mathematics-1965)
34	Stanine (Mathematics-1965)
35	Type of achievement test-(Reading-1966)
36-38	Grade equivalent (Reading-1966)
39-40	Percentile Score (Reading-1966)
41	Stanine (Reading-1966)
42	Type of achievement test-(Mathematics-1966)
43-45	Grade equivalent (Mathematics-1966)
46-47	Percentile Score (Mathematics-1966)
48	Stanine (Mathematics-1966)
49	Type of achievement test-(Reading-1967)
50-52	Grade equivalent (Reading-1967)
53-54	Percentile Score (Reading-1967)
55	Stanine (Reading-1967)
56	Type of achievement test-(Mathematics-1967)
57-59	Grade equivalent (Mathematics-1967)
60-61	Percentile Score (Mathematics-1967)
62	Stanine (Mathematics-1967)

Card No. 13

1-2	District Code Number
3-6	Subject Code Number

Card No. 13

Column No.	Variable
7	Type of achievement test-(Reading-1968)
8-10	Grade equivalent (Reading-1968)
11-12	Percentile Score (Reading-1968)
13	Stanine (Reading-1968)
14	Type of achievement test-(Mathematics-1968)
15-17	Grade equivalent (Mathematics-1968)
18-19	Percentile Score (Mathematics-1968)
20	Stanine (Mathematics-1968)
21	Type of achievement test-(Reading-1969)
22-24	Grade equivalent (Reading-1969)
25-26	Percentile Score (Reading-1969)
27	Stanine (Reading-1969)
28	Type of achievement test-(Mathematics-1969)
29-31	Grade equivalent (Mathematics-1969)
32-33	Percentile Score (Mathematics-1969)
34	Stanine (Mathematics-1969)
35	Type of achievement test-(Reading-1970)
36-38	Grade equivalent (Reading-1970)
39-40	Percentile Score (Reading-1970)
41	Stanine (Reading-1970)
42	Type of achievement test-(Mathematics-1970)
43-45	Grade equivalent (Mathematics-1970)
46-47	Percentile Score (Mathematics-1970)
48	Stanine (Mathematics-1970)
49	Type of achievement test-(Reading-1971)
50-52	Grade equivalent (Reading-1971)
53-54	Percentile Score (Reading-1971)
55	Stanine (Reading-1971)
56	Type of achievement test-(Mathematics-1971)
57-59	Grade equivalent (Mathematics-1971)
60-61	Percentile Score (Mathematics-1971)
62	Stanine (Mathematics-1971)

Card No. 14

1-2	District Code Number
3-6	Subject Code Number

Card No. 14

Column No.	Variable
7	Type of achievement test-(Reading-1972)
8-10	Grade equivalent (Reading-1972)
11-12	Percentile Score (Reading-1972)
13	Stanine (Reading-1972)
14	Type of achievement test-(Mathematics-1972)
15-17	Grade equivalent (Mathematics-1972)
18-19	Percentile Score (Mathematics-1972)
20	Stanine (Mathematics-1972)
21	Type of achievement test-(Reading-1973)
22-24	Grade equivalent (Reading-1973)
25-26	Percentile Score (Reading-1973)
27	Stanine (Reading-1973)
28	Type of achievement test-(Mathematics-1973)
29-31	Grade equivalent (Mathematics-1973)
32-33	Percentile Score (Mathematics-1973)
34	Stanine (Mathematics-1973)

Card No. 15

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7-9	Days absent (1960-61) Recorded on yearly basis. For example, 101 days absent should be recorded as 101.
10-12	Days absent (1961-62)
13-15	Days absent (1962-63)
16-18	Days absent (1963-64)
19-21	Days absent (1964-65)
22-24	Days absent (1965-66)
25-27	Days absent (1966-67)
28-30	Days absent (1967-68)
31-33	Days absent (1968-69)
34-36	Days absent (1969-70)
37-39	Days absent (1970-71)
40-42	Days absent (1971-72)
43-45	Days absent (1972-73)
46-48	Days absent (1973-74)

Card No. 16

1-2	District Code Number
3-6	Subject Code Number
7-8	Days absent - semester (Fall, 1960-61)
9-10	Days absent - semester (Spring, 1960-61)
11-12	Days absent - semester (Fall, 1961-62)
13-14	Days absent - semester (Spring, 1961-62)
15-16	Days absent - semester (Fall, 1962-63)
17-18	Days absent - semester (Spring, 1962-63)
19-20	Days absent - semester (Fall, 1963-64)
21-22	Days absent - semester (Spring, 1963-64)
23-24	Days absent - semester (Fall, 1964-65)
25-26	Days absent - semester (Spring, 1964-65)
27-28	Days absent - semester (Fall, 1965-66)
29-30	Days absent - semester (Spring, 1965-66)
31-32	Days absent - semester (Fall, 1966-67)
33-34	Days absent - semester (Spring, 1966-67)
35-36	Days absent - semester (Fall, 1967-68)
37-38	Days absent - semester (Spring, 1967-68)
39-40	Days absent - semester (Fall, 1968-69)
41-42	Days absent - semester (Spring, 1968-69)
43-44	Days absent - semester (Fall, 1969-70)
45-46	Days absent - semester (Spring, 1969-70)
47-48	Days absent - semester (Fall, 1970-71)
49-50	Days absent - semester (Spring, 1970-71)

Card No. 16

Column No.	Variable
51-52	Days absent - semester (Fall, 1971-72)
53-54	Days absent - semester (Spring, 1971-72)
55-56	Days absent - semester (Fall, 1972-73)
57-58	Days absent - semester (Spring, 1972-73)
59-60	Days absent - semester (Fall, 1973-74)
61-62	Days absent - semester (Spring, 1973-74)

Card No. 17

1-2	District Code Number
3-6	Subject Code Number
7	Reading or English (if secondary school) grades (Fall, 1960-61)
8	Reading or English (if secondary school) grades (Spring, 1960-61)
9	Reading or English (if secondary school) grades (Fall, 1961-62)
10	Reading or English (if secondary school) grades (Spring, 1961-62)
11	Reading or English (if secondary school) grades (Fall, 1962-63)
12	Reading or English (if secondary school) grades (Spring, 1962-63)
13	Reading or English (if secondary school) grades (Fall, 1963-64)
14	Reading or English (if secondary school) grades (Spring, 1963-64)
15	Reading or English (if secondary school) grades (Fall, 1964-65)
16	Reading or English (if secondary school) grades (Spring, 1964-65)
17	Reading or English (if secondary school) grades (Fall, 1965-66)
18	Reading or English (if secondary school) grades (Spring, 1965-66)
19	Reading or English (if secondary school) grades (Fall, 1966-67)
20	Reading or English (if secondary school) grades (Spring, 1966-67)
21	Reading or English (if secondary school) grades (Fall, 1967-68)
22	Reading or English (if secondary school) grades (Spring, 1967-68)
23	Reading or English (if secondary school) grades (Fall, 1968-69)
24	Reading or English (if secondary school) grades (Spring, 1968-69)
25	Reading or English (if secondary school) grades (Fall, 1969-70)
26	Reading or English (if secondary school) grades (Spring, 1969-70)

Card No. 17

Column No.	Variable
27	Reading or English (if secondary school) grades (Fall, 1970-71)
28	Reading or English (if secondary school) grades (Spring, 1970-71)
29	Reading or English (if secondary school) grades (Fall, 1971-72)
30	Reading or English (if secondary school) grades (Spring, 1971-72)
31	Reading or English (if secondary school) grades (Fall, 1972-73)
32	Reading or English (if secondary school) grades (Spring, 1972-73)
33	Reading or English (if secondary school) grades (Fall, 1973-74)
34	Reading or English (if secondary school) grades (Spring, 1973-74)

For all variables concerning grades of subject (cards 17-27), the following Table presents the method of coding.

	I	II	III	IV
Code Value for Cum Record	5 Grade Levels	4 Grade Levels	3 Grade Levels	2 Grade Levels
1	F	U U		
2	D	I N	U N	U N
3	C	S S	S S	S P
4	B	E O	E O	
5	A			
6				

U = Unsatisfactory
I,N = Needs to improve or some variant
S = Satisfactory
P = Pass
E = Excellent
O = Outstanding

For "U", "N" or equivalent in columns III & IV, assign a "2" unless definite information exists indicating failure, in which case assign a "1." For columns II & III "E" or "O" or the equivalent can be codes as a "4" or "5"; Code "E" or "O" as "5" if your scan of the cum records indicates "E" or "O" occurs.

Card No. 18

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7-34	Citizenship marks for Reading or English. (See Card 17 for column & coding breakdown.)

Card No. 19

1-2	District Code Number
3-6	Subject Code Number
7-34	Mathematics marks (See Card 17 for column & coding breakdown.)

Card No. 20

1-2	District Code Number
3-6	Subject Code Number
7-34	Citizenship marks for Mathematics (See Card 17 for column & coding breakdown.)

Card No. 21

1-2	District Code Number
3-6	Subject Code Number
7-34	Practical Arts Marks such as any shop course for boys, home economics for girls. (See Card 17 for column & coding breakdown.)

Card No. 22

1-2	District Code Number
3-6	Subject Code Number
7-34	Citizenship marks for Practical Arts (See Card 17 for column & coding breakdown.)

Card No. 23

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7-34	Marks for second Practical Arts course (See Card 17 for column & coding breakdown.)

Card No. 24

1-2	District Code Number
3-6	Subject Code Number
7-34	Citizenship marks for second Practical Arts course (See Card 17 for column & coding breakdown.)

Card No. 25

1-2	District Code Number
3-6	Subject Code Number
7-34	Physical Education marks (See Card 17 for column & coding breakdown.)

Card No. 26

1-2	District Code Number
3-6	Subject Code Number
7-34	Citizenship marks for Physical Education (See Card 17 for column & coding breakdown.)

Card No. 27

1-2	District Code Number
3-6	Subject Code Number
7-34	General Citizenship marks (See Card 17 for column & coding breakdown.)

Card No. 28

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7-34	Placements for 1960-61 to 1973-74 academic years

1 Regular class, never EMR
2 EMR
3 Decertified, regular class
4 Decertified, EH
5 Decertified, returned to EMR
6 Decertified, Other special class
7 Decertified, Continuation school
8 Regular class match, other special class placement, never EMR
9 TMR

Card No. 29

1-2	District Code Number
3-6	Subject Code Number

MENTAL ABILITY

1 High-Average Mental Ability
2 Low Mental Ability
3 Improving
4 Combination of 1 & 3
5 Combination of 2 & 3

7-8	Mental Ability - 1960-61
9-10	Mental Ability - 1961-62
11-12	Mental Ability - 1962-63
13-14	Mental Ability - 1963-64
15-16	Mental Ability - 1964-65
17-18	Mental Ability - 1965-66
19-20	Mental Ability - 1966-67
21-22	Mental Ability - 1967-68
23-24	Mental Ability - 1968-69
25-26	Mental Ability - 1969-70
27-28	Mental Ability - 1970-71
29-30	Mental Ability - 1971-72
31-32	Mental Ability - 1972-73
33-34	Mental Ability - 1973-74

GENERAL ACADEMIC COMPETENCE

1 High-Average Academic Competence
2 Low Academic Competence
3 Improving
4 Combination of 1 & 3
5 Combination of 2 & 3
6 Child shows regression in academic competence

Card No. 29

Column No.	Variable
35-36	General Academic Competence - 1960-61
37-38	General Academic Competence - 1961-62
39-40	General Academic Competence - 1962-63
41-42	General Academic Competence - 1963-64
43-44	General Academic Competence - 1964-65
45-46	General Academic Competence - 1965-66
47-48	General Academic Competence - 1966-67
49-50	General Academic Competence - 1967-68
51-52	General Academic Competence - 1968-69
53-54	General Academic Competence - 1969-70
55-56	General Academic Competence - 1970-71
57-58	General Academic Competence - 1971-72
59-60	General Academic Competence - 1972-73
61-62	General Academic Competence - 1973-74

Card No. 30

1-2	District Code Number
3-6	Subject Code Number
7-34	ACADEMIC COMPETENCE (Math) 1960-61 to 1973-74 1 High-Average Math Competence 2 Low Math Competence 3 Improving 4 Combination of 1 & 3 5 Combination of 2 & 3 6 Child shows regression in math ability
35-62	ACADEMIC COMPETENCE (Reading) 1960-61 to 1973-74 1 High-Average Reading Competence 2 Low Reading Competence 3 Improving 4 Combination of 1 & 3 5 Combination of 2 & 3 6 Child shows regression in reading ability

Card No. 31

1-2	District Code Number
3-6	Subject Code Number

Card No. 31

Column No.	Variable
7-34	COMPETENCE IN ENGLISH (Language Usage) 1960-61 to 1973-74
	1 High-Average Competence 2 Low Competence 3 Improving 4 Combination of 1 & 3 5 Combination of 2 & 3
35-62	CLASS WORK HABITS -- 1960-61 to 1973-74
	1 Positive 2 Negative

Card No. 32

1-2	District Code Number
3-6	Subject Code Number
7-34	CLASS ADJUSTMENT AFFECTIVE (Discipline) 1960-61 to 1973-74
	1 Positive 2 Negative
35-62	PEER RELATIONSHIPS IN THE CLASSROOM & SCHOOLYARD -- 1960-61 to 1973-74
	1 High-Average Peer Relationships 2 Rejected by peers 3 Rejects peers 4 Undefined Problems 5 Improving 6 Combination of 2 & 5 7 Combination of 4 & 5 8 Combination of 1 & 3

Card No. 33

1-2	District Code Number
3-6	Subject Code Number
7-34	CHRONIC ABSENTEEISM -- 1960-61 to 1973-74
	1 Medical 2 Non-Medical 3 Reason not recorded

Card No. 33

Column No.	Variable
35-62	TEACHER RECOMMENDATION -- 1960-61 to 1973-74 1 Should be retained 2 Should return to EMR 3 Should return to regular classroom 4 Should be placed in special class 5 Should be tested for possible alternative placement

Card No. 34

1-2	District Code Number
3-6	Subject Code Number
7-12	DIAGNOSTIC RELATED PROBLEMS -- 1960-1961 One space per problem; more than one problem can be noted. 1 Speech 2 Perceptual-Motor 3 Medical 4 Visual 5 Hearing 6 Other
13-18	Diagnostic Related Problems (1961-1962)
19-24	Diagnostic Related Problems (1962-1963)
25-30	Diagnostic Related Problems (1963-1964)
31-36	Diagnostic Related Problems (1964-1965)
37-42	Diagnostic Related Problems (1965-1966)
43-48	Diagnostic Related Problems (1966-1967)

Card No. 35

1-2	District Code Number
3-6	Subject Code Number
7-12	DIAGNOSTIC RELATED PROBLEMS -- 1967-1968 (See columns 7-12 of Card No. 34)
13-18	Diagnostic Related Problems (1968-1969)
19-24	Diagnostic Related Problems (1969-1970)
25-30	Diagnostic Related Problems (1970-1971)
31-36	Diagnostic Related Problems (1971-1972)
37-42	Diagnostic Related Problems (1972-1973)
43-48	Diagnostic Related Problems (1973-1974)

Card No. 36

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7-11	SPECIAL SERVICES RECEIVED -- 1960-1961 1 Speech Therapy 2 Medication 3 Perceptual Motor Training 4 Tutoring 5 Other
12-16	Special Services Received (1961-1962)
17-21	Special Services Received (1962-1963)
22-26	Special Services Received (1963-1964)
27-31	Special Services Received (1964-1965)
32-36	Special Services Received (1965-1966)
37-41	Special Services Received (1966-1967)

Card No. 37

1-2	District Code Number
3-6	Subject Code Number
7-11	SPECIAL SERVICES RECEIVED -- 1967-1968 (See columns 7-11 of Card No. 36)
12-16	Special Services Received (1968-1969)
17-21	Special Services Received (1969-1970)
22-26	Special Services Received (1970-1971)
27-31	Special Services Received (1971-1972)
32-36	Special Services Received (1972-1973)
37-41	Special Services Received (1973-1974)

Card No. 38

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
7-9	School Code Number
10-12	Teacher Code Number

13 7. Would this student in your judgment be able to get along in school if he (she) were reassigned to a regular program?

1 No
2 Only if given transition help
3 Yes, even without transition help
4 I don't know

14 8. Even if you answered #2 or #3 above, do you believe he (she) would be better off staying in special class?

1 Yes
2 No
3 Don't know

15 9. Were you an EMR teacher when all EMRs were re-evaluated (about 1969-1972)?

1 Yes
2 No

10. If yes, and many EMRs were reassigned, how did it affect the EMR class? (Mark all that apply.)

16 1 Lowered the average learning level
17 1 Reduced behavioral problems
18 1 Increased behavioral problems
19 1 Took away some good in-class helpers
20 1 Other (specify): _____

21 1. What kind of a class would you say _____ is in? (Check only one.)

1 Predominately high ability group
2 Predominately low ability group
3 Combination of various ability groups

22 2. Your class level is listed as the __ th grade. What proportion of the students in the class do you believe or know to read at or above this grade level? (Check only one.)

1 More than half
2 About half
3 Under half
4 Very few

Card No. 38

Column No. Variable

23 3. Mark what you judge to be _____'s own achievement level among the class members as you have observed it somewhere from 1 to 5 on this scale.

1 Very Low
2 Below Average
3 Average
4 Above Average
5 Highest

24 4. Mark also what you judge to be _____'s general social acceptance among his (her) classmates in this class.

1 Very Low
2 Below Average
3 Average
4 Above Average
5 Highest

25-26 5. How many times have you referred _____ to the principal or another school agent for discipline problems? (Write number below. If you do not have actual numbers, please estimate.) _____

6. How often has _____ been absent and tardy from your class over the past academic year? (Check appropriate boxes.)

27 Absent from class

1 Never
2 Rarely
3 Sometimes
4 Often
5 Frequently

28 Tardiness

1 Never
2 Rarely
3 Sometimes
4 Often
5 Frequently

29 3. Mark also what you judge to be _____'s general social acceptance among student groups in this school unit.

1 Very Low
2 Below Average
3 Average
4 Above Average
5 Highest

Card No. 38

Column No. Variable

11. Have the parents of either student contacted you about his special needs during this school year? (Mark number of times below; if answer is none, mark appropriate statement.)

37-39
1 Yes, for _____, about _____ times
1 No for _____

40 13. What do you know or have heard about the success of the reassigned EMR students?

41 There was unqualified success in the regular program for:

1 All (90-100% of reassigned students)
2 Most (50-89%)
3 Some (10-49%)
4 Few (under 10%)
5 Don't know

42 Academic difficulty was experienced in the regular program for:

1 All (90-100% of reassigned students)
2 Most (50-89%)
3 Some (10-49%)
4 Few (under 10%)
5 Don't know

43 Behavioral problems occurred in the regular program for:

1 All (90-100% of reassigned students)
2 Most (50-89%)
3 Some (10-49%)
4 Few (under 10%)
5 Don't know

44 Unqualified acceptance of the transitional students was given by regular teachers for:

1 All (90-100% of reassigned students)
2 Most (50-89%)
3 Some (10-49%)
4 Few (under 10%)
5 Don't know

45 Unqualified acceptance of the transitional students was given by regular class peers for:

1 All (90-100% of reassigned students)
2 Most (50-89%)
3 Some (10-49%)
4 Few (under 10%)
5 Don't know

Card No. 38

Column No. Variable

For the transitional student, did the program: (Mark all that apply.)

46 1 Help him stay in school
47 1 Aid him in coping with regular academic program
48 1 Help him to adjust to different school situations
49 1 Other (specify):_____

50 Type of student

1 Decertified
2 EMR
3 Regular Match

51 12. _____ was a transition student, once having been in an EMR placement. He (she) presumably has received some help for his (her) special learning needs. If so, was the help given to you, or to him (her), or a combination?

1 To him (her) (as through a tutor or aide)
2 To me, consultation and materials given to help him (her) and others
3 A combination
4 No help has been provided, at least to me
5 Other (explain):_____

52 13. If support of some kind was provided for _____'s education, how do you evaluate it?

1 It was of great value
2 It was somewhat helpful
3 It was of little or no value
4 Does not apply, no help given to me

14. If support or assistance of any kind whatsoever has been provided, identify it here. (Mark all that apply.)

53 1 Volunteers
54 1 Instructional aide
55 1 School-district tutors, such as resource teachers
56 1 Resource room for children
57 1 Resource teacher consultation
58 1 Case history information to help understand special needs presented by counselor or other personnel
59 1 Other (please indicate what):_____

Card No. 38

Column No.	Variable
60	15. How would you evaluate techniques you used in teaching (e.g., discussions) prior to receiving transitional students, to work with transitional students? 1 Poorly 2 Poorly-Average 3 Average 4 Average-Very Well 5 Very Well Comments:_____
61	16. How would you evaluate materials you used in teaching (books, work sheets), prior to receiving transitional students, to work with the transitional students? 1 Poorly 2 Poorly-Average 3 Average 4 Average-Very Well 5 Very Well Comments:_____
62	17. Did having the transitional student in any way have an impact upon your instruction for the remainder of the class. 1 Yes 2 No 3 Uncertain
	18. Explain how this affected your class. (Mark all that apply, and if needed add your own comment):
63	1 Extra assistance had to be provided; took time and energy
64	1 Class disruption through his behavior
65	1 Others picked on him
66	1 Had to prepare materials specifically for him
67	1 Take time to work with aide, tutor, volunteers, etc.
68	1 Other:_____
69	Because your response to the above is anonymous, please provide a little statistical information about yourself as the teacher: 1 Male 2 Female
70	Years of experience teaching at about this level: 1 One year 2 Two to four years 3 5-10 years 4 11 or more years

Card No. 38

Column No.	Variable
71-72	Total other years of teaching:_____ years
73-74	Total special class experience in the EMR or special training class, if any:_____ years
75	Ethnic membership: 1 Anglo 2 Black 3 Mexican 4 Oriental 5 Other

Card No. 42

Column No.	Variable
1-2	District Code Number
3-6	Subject Code Number
	1. Reason for referral from teacher (initial EMR placement)
7	1 Personal, social adjustment
8	1 Achievement
9	1 Not recorded
10	1 Other
	2. Reason for referral from psychologist (initial EMR placement)
11	1 Personal
12	1 Achievement
13	1 Not recorded
14	1 Other
	3. Persuasive element in A & D leading to EMR status
15	1 Low I.Q.
16	1 Low achievement
17	1 Poor personal, social adjustment
18	1 Poor adaptive behavior
19	1 Not recorded
20	1 Other
21	4. Did teacher recommend return to regular class prior to 1969?
	1 Yes 2 No (If negative recommendation is recorded) 3 No record of teacher recommendation
22-27	Note date if yes given above--2 spaces per Academic year.
28	5. Was there formal documentation that case was considered by A & D committee prior to decertification?
	1 Yes 2 No
29-34	Note dates if yes given above--2 spaces per Academic year.
	6. Reasons for referral for most recent reevaluation of non-decertified EMR's.
35	1 Regular, mandated reevaluation
36	1 Good behavior, social adjustment
37	1 Poor behavior, social adjustment
38	1 Good achievement
39	1 Poor achievement
40	1 Not recorded
41	1 Other

Card No. 42

Column No.	Variable
42	Blank
	7. Reasons why not decertified
43	1 Low I.Q.
44	1 Low achievement
45	1 Poor personal, social adjustment
46	1 Poor adaptive behavior
47	1 Not recorded
48	1 Other
49	8. Number of prior reevaluations of non-decertified EMR's. Note frequency.
	9. Referral reason from teacher at time of decertification.
50	1 Regular, mandated reevaluation
51	1 Good behavior, social adjustment
52	1 Poor behavior, social adjustment
53	1 Good achievement
54	1 Poor achievement
55	1 Not recorded
56	1 No official decertification
57	1 Other
	10. Referral reason from psychologist at time of decertification.
58	1 Regular, mandated reevaluation
59	1 Good behavior, social adjustment
60	1 Poor behavior, social adjustment
61	1 Good achievement
62	1 Poor achievement
63	1 Not recorded
64	1 No official decertification
65	1 Other
	11. Persuasive element in the A & D conference that led to decertification.
66	1 High I.Q.
67	1 High achievement
68	1 Good social adjustment
69	1 Good adaptive behavior
70	1 Not recorded
71	1 No official decertification
72	1 Other
73	12. Was there a clear, official A & D conference record?
	1 Yes
	2 No

Card No. 42

Column No.	Variable
74	13. Was a new psychological work-up done on the subject at the time of decertification? 1 Complete reevaluation 2 Committee review without testing 3 No work-up
75	14. Any notations that child has been seen or any follow-up done since time of decertification? 1 Yes 2 No

APPENDIX D

Dissemination Activity to Date

Based on OEG-0-73-5263

Dissemination Activity to Date

Based on OEG-0-73-5263

Papers Published and in Press

Jones, M. P., & Yoshida, R. K. Fortran IV program to determine the proper sequence of records in datafile. Educational and Psychological Measurement. In press.

MacMillan, D. L. The effect of experimental success and failure on the situational expectancy of EMR and nonretarded children. American Journal of Mental Deficiency, 1975, 80(1), 90-95.

MacMillan, D. L., Jones, R. L., & Aloia, G. F. The mentally retarded label: A theoretical anaylsis and review of research. American Journal of Mental Deficiency, 1974, 79(3), 241-261.

MacMillan, D. L., & Wright, D. Outer directedness in children of 3 ages as a function of experimentally induced success and failure. Journal of Educational Psychology, 1974, 66(6), 919-925.

Meyers, C. E., Sundstrom, P. E., & Yoshida, R. K. The school psychologist and assessment in special education: A report of an Ad Hoc Committee of Division 16. School Psychology Monographs. 1974, 2(1), 3-57.

Yoshida, R. K. Out-of-level testing of special education students with a standardized achievement battery. Journal of Educational Measurement. In press.

Yoshida, R. K., & Meyers, C. E. Effects of labeling as EMR on teachers expectancies for change in a student's performance. Journal of Educational Psychology, 1975, 67, 521-527.

Papers Completed and in Editorial Consideration

MacMillan, D. L., Jones, R. L., & Meyers, C. E. Mainstreaming the mildly retarded: Some questions and cautions. Submitted to Mental Retardation.

Yoshida, R. K. Point, counterpoint: An evaluation of the teacher expectancy variable for the mildly retarded student. Submitted to Journal of Special Education.

Conference Presentations and Addresses

MacMillan, D. L. Effect of litigation on programs for the educable mentally retarded in California. American Association on Mental Deficiency, Atlanta, Georgia, May 30, 1973.

MacMillan, D. L. Consequences of decertification of EMR children. Joint session of American Academy on Mental Deficiency and American Association on Mental Deficiency, Toronto, June 4, 1974.

MacMillan, D. L. Status shifts in mildly retarded children. American Association on Mental Deficiency & American Academy on Mental Deficiency, Toronto, June 4, 1974.

MacMillan, D. L. Research on mainstreaming: Promise and reality. Keynote address, conference on mainstreaming. Sponsored by USOE and University of Miami, San Diego, California, December 16, 1974.

MacMillan, D. L. Follow up report on special education placement. Sponsored by University of Connecticut, Technical Assistance Department for State Directory, special educatio and one member of each State Board of Education. New Orleans, Louisiana February 25, 1975.

MacMillan, D. L. The child's perspective in mainstreaming. Paper presented at the Convention of the California State Federation of Council on Exceptional Children, San Diego, November 8, 1975.

MacMillan, D. L., Meyers, C. E., & Yoshida, R. K. The decertification of minority group EMR students in California: Its historical background and an assessment of student achievement and adjustment. Presented at the Leadership Training Institute, Minneapolis, Minnesota, September 25-27, 1975.

Meyers, C. E. Myths of measurement infallibility and the medical model. Symposium paper, Division 16, American Psychological Association, Montreal, August, 1973.

Meyers, C. E. Some effects of litigation for psychologists in the schools. Joint Division 16-33 Symposium, American Psychological Association, New Orleans, September, 1974.

Meyers, C. E. Educational need vs. civil rights-the dilemma of special education illustrated with California's EMR students. Paper presented to the University Affiliated Facility, Mental Retardation Research Center, Seattle, October, 1975.

Meyers, C. E. The decertified EMR children of California. Paper presented at the Convention of the California State Federation of Council on Exceptional Children, San Diego, November, 1975.

Meyers, C. E., MacMillan, D. L., & Yoshida, R. K. Decertification of EMR students in the Inner City - A preliminary report. The Council for Exceptional Children, New York, April 14-19, 1974.

Meyers, C. E., MacMillan, D. L., & Yoshida, R. K. Preliminary findings on the decertification of Inner City EMRs. AAMD--AAMR Toronto, Canada 1974.

Meyers, C. E., MacMillan, D. L., & Yoshida, R. K. Evaluation of special education programs. Second Annual Conference and Exhibition on Measurement & Evaluation. Los Angeles County Schools. Pasadena, California, February 20, 1975.

Williams, E., MacMillan, D. L., & Yoshida, R. K. How district personnel evaluated California's Transition Program. Presented at Annual Convention of the American Association on Mental Deficiency. Portland, Oregon, May 20, 1975.

Yoshida, R. K., MacMillan, D. L., & Meyers, C. E. Some behavioral data on the success of California's Transition Program. Presented at Annual Convention of the American Association on Mental Deficiency. Portland, Oregon, May 20, 1975.

Papers in Preparation

Brooke, S. B., Yoshida, R. K., MacMillan, D. L., & Meyers, C. E. In some contempt of court: A review of the empirical basis for legal mandates in special education.

Nystrom, R. K., Meyers, C. E., Yoshida, R. K., & MacMillan, D. L. Standardized achievement testing of mainstreamed learning disordered students.

Yoshida, R. K. Teachers' explanations for the improvement in performance of an EMR student.

Yoshida, R. K., MacMillan, D. L., Meyers, C. E. The decertification of minority group EMR students in California: Its historical background and an assessment of student achievement and adjustment. In R. Jones (Ed.), Mainstreaming and the Minority Child.

Yoshida, R. K., Meyers, C. E., & MacMillan, D. L. Teacher selection of test-level for low-achieving elementary and secondary students.

APPENDIX E

Personnel Roster and Listing of Part-Time Research Associates

Name	Position
C. Edward Meyers	Principal Investigator Research Psychologist III
Donald L. MacMillan	Co-Principal Investigator Research Educationalist I
Roland K. Yoshida	Project Coordinator Asst. Research Educationalist II
Robert Bendel	Asst. Research Biostatistician
Michael Jones	Programmer
Nancy Anderson	Staff Research Associate II
Isadore Breaux	Staff Research Associate II
David Clum	Staff Research Associate II
Gail Coplin	Staff Research Associate II
Carol Davis	Staff Research Associate II
Raymond Destafney	Staff Research Associate II
Katherine Lindenauer	Staff Research Associate II
Richard Quaglino	Staff Research Associate II
Deborah Coates	Staff Research Associate I
Linda Hiser	Staff Research Associate I
Steven Holland	Staff Research Associate I
Catherine Mendenhall	Staff Research Associate I
Mary Ellen Nogrady	Staff Research Associate I
Julio Ponce de Leon	Staff Research Associate I
Richard Shea	Staff Research Associate I
Lavonne Swyter	Staff Research Associate I
Gail Teague	Staff Research Associate I
Karen Hutnick	Laboratory Asst. II

Personnel Roster (Cont.)

Name	Position
Pamila Walthall	Senior Typist Clerk B
Gail Aldredge	Secretary II
Eloise Rangel	Keypunch Operator
Franklin Newman	Laboratory Helper
Mary Tate	Clerk

District Part-Time Research Assistants Employed for Administering
Metropolitan Achievement Test
in Various California District Schools

Name	District
Rosalie Abelson	Los Angeles-Area K
Judie Barke	Los Angeles-Area K
Ed Bitton	Los Angeles-Area C
Vina Brault	Los Angeles-Area K
Ron Brock	Los Angeles-Area C
Carl Cameron	Compton
Lucinda Crawford	Oakland
Irene Czoschke	Los Angeles-Area K
Lance Davis	Los Angeles-Area K
Frank Dodie	Los Angeles-Area K
Evelyn Dolberg	Los Angeles-Area K
Ken Eaton	New Haven
E. Edelson	Santa Ana, & Compton
Harvey Ganza	Los Angeles-Area C
Ann Goulding	Pomona
Dale Halperin	Los Angeles-Area K
Steven Herrick	El Rancho
Maxine Lobben	Los Angeles-Area K
Joan Lynch	Los Angeles-Area K
Marcia Magurie	Santa Ana
Roy McDowell	Oakland
Ben Modeste	Oakland
Barbara Murphree	Los Angeles-Area K

Name	District
Charles Onholt	Los Angeles-Area K
Inez Peterson	Los Angeles-Area K
Charles Porto	Pomona
Thelma Rice	Los Angeles-Area C
M. H. Robinson	Los Angeles-Area K
Donald Ryan	Los Angeles-Area C
J. T. Schmidt	Los Angeles-Area K
Paula Sullivan	Santa Ana
Robert Wajahn	Pomona
Diane Watson	Los Angeles-Area K

APPENDIX F

Published and Unpublished Reports of Project

DECERTIFICATION OF EMR STUDENTS IN THE INNER CITY

A Preliminary Report[1]

CEC New York 1974

C. E. Meyers[2], D. L. MacMillan[3], and R. K. Yoshida[2]

In 1969 California changed the guidelines for admission to special class for the EMR and it also mandated a reassessment of every current EMR placement. These actions were in response to agreements reached in civil rights class action litigation, based primarily upon the claim that biased testing led to the obvious overpresentation of ethnic minority children in special classes. The new guidelines like the old were expressed in psychometric terms: lowered maximum IQ, mandated utilization of nonverbal IQs, and testing in the better language in the case of bilingual children. The decertification and return to regular class and regular program, then, were done pretty much in terms of the simplified popular conception of how a child was to be identified for EMR rather than for his educational need.

The resulting wholesale decertification led probably to one of the largest changeovers from one school program to another ever experienced, by school districts not prepared and sometimes uncomprehending of what happened. Somewhere between 11,000 and 18,000 EMR students were reassigned,

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[2] University of Southern California

[3] University of California, Riverside

in most instances to mainstream, in the period of the 1969 through 1972 school years.

It was obvious from the beginning that the passage of a law could not in itself make a better learner out of one who had experienced classroom failure sometime before. Our study of the educational fate of this group, now in progress, is supported by the USOE. The study seeks to determine what happened to the decertified learners, whether or not they succeeded, whether they are still in school, how the program of transitional help, if one existed, was conducted and whether it was helpful, how the experience affected the regular pupils, how the whole massive episode might feed back upon the system to improve the personalization of educational programming. Our study samples 11 districts representative of the State in ethnicity, size, and geographical distribution. We report here today only upon some limited information in two of the 12 Administrative Areas of the Los Angeles District.

Table 1 presents information on the total District and on the two Areas. Los Angeles is the second largest school district in the USA in enrollment, with a broad representation of SES and ethnic groups. Administrative Area One, with an enrollment of over 50,000 total, kindergarten through 12, is largely Black in ethnicity, so we are studying it for particular inner-city type issues, though the SES level of Area One ranges up into middle class. Administrative Area Two, with an even larger enrollment, characterizes the total District in its spread of SES and ethnicity, though it has a larger proportion of Anglos than the District as a whole. Thus we study Area Two for data which compare ethnic groups in a way which we can generalize to the whole District.

The larger portion of Table 1 develops information on Area Two's decertified children. By a painstaking and expensive probe into the records and alot of cross-checking, we established that there were over 1100 students in EMR lists of the time period 1969-1972. Of these, 154 are not in the study in that their decertification came through parent pressure rather than the mandate of law or was accomplished outside our time limits, or was a case of doubtful EMR authenticity. We are left with 959 pure cases of EMR students who were candidates for mandated reassessment and decertification with reassignment. If you will compare the ethnic proportions in line 3 for total enrollment with those of line 6, you will observe the overrepresentation of the two major ethnic minority children in EMR classes at that time, the differential being more or less true for the whole District and the whole State. (The word "Chicano" used here has become more or less standard for Spanish surnamed people, at least 90% Mexican-American.)

Line 7 indicates that, of the 959 pure cases of EMR students eligible for decertification, nearly half were indeed decertified, while over half were not. However, decertification percent was related to ethnicity, being higher for the ethnic minorities. Line 8 shows that only 37% of the Anglos were mainstreamed while it was 51% for Blacks and 56% for the Chicanos. This result is consonant with a hypothesis which derives from knowing that children have been put into EMR classes for compounded reasons over and above marginal intelligence, such as poor learning plus behavior or other complication -- at least there is a bias in teacher referral for potential EMR placement. Thus the ethnic minority children are more likely than the Anglo to have

experienced compounded cause for class failure and also for low IQs, especially verbal. Such cases are thus more likely to become decertified by application of new guidelines delimited to psychometric scores.

So far as State-wide data on decertification have been gathered up to this time, as reported by the State itself or through our efforts or those of others, the Spanish-named (Chicano) students have the greatest proportion of their numbers decertified, the Blacks next, as we show here. However, we note that decertification did not by any means remove the minority disproportion of the remaining nondecertified EMR students. The reduction is shown by comparing line 6, before decertification, with line 9, those EMR not decertified. For example, the Chicano proportion is down from 39.2% of the total EMR before decertification to 33.3%. It is evident that here, as reported ir general for the State, decertification by mandate has made only a modest reduction in the disproportion.

It has been said that the EMR who is Anglo is more likely to be a so-called "true MR" case. The data here tend to bear that out, but still, over a third of Anglos were decertified. However, we draw attention to another way of perceiving the considerable overrepresentation of Blacks and Chicanos in the original or the reduced EMR lists, lines 6 and 9, at the same time drawing attention to the underrepresentation of Anglos. This becomes apparent if one notes what is either the original or the reduced proportion of EMR for each of the ethnic groups. Thus the 253 Anglo EMR's, in line 6, were only 7/10 of one percent of total Anglos shown in line 3, while the 266 Blacks were 4.6% of their total number and the 131 Chicanos are 2.9% of total Chicano enrollment.

The relationships among the 3 ethnic groups are not much changed if we take the residual EMR's in line 9 as percentages of total ethnic enrollment in line 3. The percentages for Anglo, Black, and Chicano are now 4/10 of 1 percent, 4.2%, and 2.3% respectively. This is in part an SES and housing pattern differential, it is true. But the same thing (the under one percent for Anglos, the over 2% for the minorities) is true in State-wide data.

Not shown in Table 1 is that, of the original list of 959 pure cases of EMR, males were nearly 60%, female students over 40%. Lines 7 and 8 show that the decertification was a little more frequent, proportionally, for the males than the females, reducing the disparity a bit among those left in EMR. This result is consonant with the often stated comment that males, like minority students, have more complex problems on top of any mild mental retardation, than females. The difference reported for minority groups compared with Anglos holds also for males compared with females.

We are gathering the same kind of information shown here for Area One and Area Three of Los Angeles and for 10 other California districts. We are at this moment giving our own achievement tests to small random samples of the decertified in all districts, interviewing teachers, studying drop out and absence records, etc. For each randomly selected decertified, we study two other students of the same sex, ethnicity, and program level.

We also want to gather special information as the local situation permits here and there. We wanted, for example, to study the effects of decertification and reassignment in a Black inner city. Area One of Los Angeles provides one opportunity. As the only possible way to secure

parent permission for special study of the students in this Area was to make a personal home call, the home call itself was utilized for gathering some parent perception and judgment about their child's education. Because the cost was very great, numbers had to be small. We random sampled 15 from among all the decertified in Area One, then selected two matched contrast cases for each such decertified student, one a nondecertified EMR of the same sex and program or age level, the other a regular class classmate of the decertified, also of the same sex and age or placement level. Data for parent interview information are presented in Tables 2, 3, and 4. The tables give in synoptic question form what the interviewer sought. He did not simply ask a blunt question, but conversed and gently probed.

Table 2 pertains only to the decertified. Question 1 gave nothing exciting. Question 2 indicates that the parent knew the return to mainstream had been made, and question 3 that they favored the return to mainstream. We cannot explain the results on question 4, in showing that not a single respondent could say or recall that the school had advised them on how to help the student make the transition.

Table 3 tells about comparative parent response for the decertified and the nondecertified EMR groups. Both groups of parents, in question 6, appeared to appreciate that the student did need special help, and in question 7, that he was apparently learning. Question 8 brings out the one contrast worthy of note between the groups of parents -- the EMR are not perceived to like being in special class, while the parents of the decertified did not now, spring 1974, have a bad opinion of their child's previous placement there. Responses to 9 and 10 are somewhat

disturbing -- the infrequency of visits to special class shows perhaps a need for a District public relations effort. Question 10's responses indicate an inability of the majority of the parents to come up with a fairly positive statement about an educational goal.

Table 4 contains responses to material gathered on all three parent groups. One sharp difference occurred, in the response to the question of whether the child was perceived as liking to go to school. A definite or a qualified yes was given by the decertified and regular class group of parents, but not by the EMR parents. What is reflected for question 11 here is like that for question 8 above about not enjoying special class.

In summary, then, our initial data have shown that the decertification process has lowered EMR rolls considerably, approximately half of the Los Angeles students being decertified in the period following mandation of reassessment with changed guidelines. The decertification, as predicted, favored the ethnic minority more than the Anglos, the males slightly more than the females, but decertification made only a small reduction in the overrepresentation of the residual EMR rolls. The findings here on Area Two are, through extreme care in re-creation of lists and cross-checkings of all information, are solid data, and are consonant with rumored or less carefully gathered reports found elsewhere. We will have other fairly pure lists and certain findings by this time next year in other districts.

As to the Black inner city study of parent responses, we have seen that the parents recognized the need for special help, that the learner was learning in special class, that however they have not for the most

part ever visited the special class nor have concrete suggestions for objectives. One striking matter is that the decertified child is perceived by his parents in about the same way as the parents of the EMR and contrast regular class students are perceived, except that the EMR are seen as not liking special class.

BASIC POPULATION DATA FOR LOS ANGELES SCHOOL DISTRICT PERTAINING TO DECERTIFIED AND NONDECERTIFIED EMR STUDENTS, BY ETHNICITY AND SEX

Total Enrollments	Total	Anglo	Black	Chicano	Other	Male	Female
1. Los Angeles	615,673	283,199	155,020	146,888	30,566		
		46.0%	25.2%	23.9%	4.9%		
2. Los Angeles Are One	50,804	7,065	50,327	2,872	540		
		11.6%	82.8%	4.7%	0.9%		
3. Los Angeles Area Two	57,530	37,617	5,797	13,120	966		
		65.4%	10.1%	22.8%	1.7%		
Area Two							
4. Complete EMR lists for the 1969-72 school year	1,113						
5. Decertified before or after period of mandatory reassessment, or on parent demand, or doubtful authenticity	154						
6. Total EMR population subject to decertification, 1969-72	959	253	266	376	64		
		26.4%	27.7%	39.2%	6.7%		
7. Decertified by mandated reassessment, 1969-72	461	93	135	210	23	282	178[a]
	48.1%	20.2%	29.3%	45.6%	5.0%	61.2%	38.7%
8. Percent decertified of own ethnic or sex group		36.8%	50.8%	55.9%	35.9%	50.0%	45.3%
9. Not decertified	498	160	131	166	41		
	51.9%	32.2%	26.3%	33.3%	8.2%	56.6%	43.3%

[a]Sex of one case undetermined

Table 2 Parent Interview Responses for 15 Inner City Decertified Students

1. How is he doing now, compared with the special class?
   better 6; same 7; more poorly 2; (n.s.)
2. Did you know he had been placed back in regular class?
   yes 12; no 3[a]; (p = .02)
3. Were you in favor of his removal to the regular program?
   yes 10; no and don't know 5; (n.s.)
4. Did the school advise you on how to help make the change?
   yes 0; no and don't know 15; (p = .01[b])
5. Is he learning as much as or less than in special class?
   more 5; same 8; less 3; (n.s.)

Table 3 Parent Interview Responses for 15 Decertified and 15 Matched Non-decertified EMR Inner City Students

		Yes	No[a]	Signif. of Yes-no Diff.[b]	Signif. of Group Diff.
6. Did, do you feel he needed special education?	Decert.	11	4	.06	n.s.
	EMR	12	3	.02	
7. Does, did he seem to be learning in special class?	Decert.	11	4	.06	n.s.
	EMR	13	2	.01	
8. Does, did he seem to enjoy special class?	Decert.	11	4	.06	.06[c]
	EMR	5	10	n.s.	
9. Did you ever visit the special class?	Decert.	4	11	.06	n.s.
	EMR	0	15	.01	
10. What would you like done or to have been done in special class?		Academic subject or other objective mentioned		Vague response, don't know, other	n.s.
	Decert.	6		9	n.s.
	EMR	5		10	

[a] "No" sometimes includes "don't know," etc.

[b] Assuming $p = q = \frac{1}{2}$

[c] Based on a chi square test

Table 4 Inner City Parent Responses for Matched Decertified, EMR, and Regular Class Students.

		Decert.	EMR	Regular	Significance of Group Diff.
11.	Does your child like being in school?				
	Yes	11	5	11	.04[a]
	No and other	4	10	4	
12.	How does he get along in the neighborhood?				
	Satisfactory, etc.	15	13	14	n.s.
	Other	0	2	1	
13.	How does he work at home and get along with others?				
	Satisfactory, etc.	12	9	10	n.s.
	Other	3	6	5	
14.	Some other placement more helpful?				
	Yes	6	5	5	n.s.
	No, don't know, etc.	9	10	10	
15.	Feel he may have problems functioning on own after graduation?				
	Definite yes, qual. yes, etc.	12	10	11	n.s.
	Uncertain, no, etc.	3	5	4	

[a]Based on Chi square test

Preliminary Findings on the Decertification of Inner City EMRs[1]

C. Edward Meyers[2], Donald L. MacMillan[3], and Roland K. Yoshida[2]

Presented at the Annual Joint Convention, American Academy of Mental Retardation and the American Association on Mental Deficiency, Toronto, June, 1974

This is a preliminary report presenting some data and some methodological considerations of a study of students decertified from segregated EMR classes and returned to regular class or other programs. In 1969, California took several actions in response to civil rights class action law suits which charged that EMR placement was accomplished through the use of biased tests. One action was to change the guidelines for EMR program eligibility. Another was to require prompt and repeated reassessment of every present placement, with removal from EMR if the new guidelines were not satisfied. Another was the mandated utilization of nonverbal instruments and those translated into the more common language of the home in the instance of bilingual students.

The resulting decertifications constituted a wholesale changeover of educational programming in a period of three years for somewhere between 11,000 and 18,000 students in school districts - usually not prepared and sometimes uncomprehending of what had happened. The new

[1] Preparation of this manuscript was supported in part by a grant from the Bureau of Education of the Handicapped, U.S. Office of Education, No. 0-73-5263. The opinions expressed herein do not necessarily reflect the position or policy of the U.S. Office of Education, and no official endorsement by the U.S. Office of Education should be inferred.

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eligibility guidelines like the old were expressed in simplistic psychometric terms, and thus the return to regular class was conducted more or less in the terms of the simplified popular conception of how a child is to be identified for a program, without much mandated regard for his educational needs. It was obvious from the beginning that the passage of a law could not in itself make a better learner out of one who had experienced classroom failure sometime before. We may in passing say that the mandated changes will have good results in the long run for they will eventually focus upon educational need rather than labels, but the changes have produced considerable upset in the short run, including some risk to the students for whom the change was meant to help.

Our study of this group, now in progress, is supported by the Bureau of Education of the Handicapped, U.S. Office of Education. The California situation has provided a huge laboratory for the examination of the effects of such a sudden change upon the educational success of reassigned EMR students and of the many correlates of this success. It is also possible to determine the effect of such an essentially arbitrary change upon the system itself, the teachers, both regular class and special, the instructional resources for individual differences, the practice of school psychology.

The present investigation features the study of correlates of success of the decertified students, in contrast with regular class students who had never been segregated, and with EMR students, who were not decertified in the same time period. Correlates include personal information such as the usual age, sex, and ethnicity, some

details of the initial EMR identification, and at the time of de-certification. We include district size and ethnic density. To the extent possible we study kinds of programs which the districts arranged, if any, to assist the student in transition. We study such outcomes as whether the student remained in school or left early; if in school, what program; whether returned to segregated class or other special program, or a mainstreamed program. For samples of those still in school we secure measures of achievement, teacher description, and cumulative record facts.

The study centers in State-wide districts of different size and ethnic density, including three of the 12 administrative Areas of the Los Angeles district, the second largest in the country, which educates between a fifth and a sixth of all the State's children, thus in effect 13 "districts" in all. Each of the areas of Los Angeles has an enrollment as large as the largest other district of our study and larger than that of any but two other districts in California.

Our first methodological note is illustrated in the attempt to secure the proper sampling base. We have heard of reports of the success of regular programming of former segregated students, about the comparative value of programs, and the like. These have rarely mentioned any sampling bias involved in studying today those to whom something happened a year or more ago, a bias like studying the effects of cancer surgery only on those who lived a couple years. Districts were quite happy to let us evaluate their current so-called transition students, and wondered why we did not pick up our samples in just those

schools which conveniently had the largest numbers. We had to point out to them that we wanted also to know what happened to those who were no longer around and those who were decertified but not in transition lists, and all who came up in the random samples, not just the conveniently available cases. We had to re-create the initial pool of EMR students of the period of decertification, 1969 to 1972, who were subject to the mandated reassessment and possible decertification, eliminating those of doubtful authenticity or whose decertification was due perhaps to parent pressure, etc.

To re-create the lists was difficult. Schools do not keep records the way researchers later want to find them, if they keep them at all, and they do not edit the records to supply missing entries and rationalize inconsistancies. It was expensive but necessary to have a verified sampling basis.

Table 1 gives the State-wide data for two periods, October 1969 and June 1973, to show the special class situation as it was and what it became in California after the decertification period. Line 1 shows the proportions of the three main ethnic groups in the State for total pupil registration in 1969, while line 2 shows the proportion of each ethnic group in EMR then, less than one percent for the Anglos but much higher for the two major minorities. Line 3 indicates the proportion of all EMR contributed by the ethnic groups, to be compared with proportions in line 1. This form of information led to the class action suits and changed guidelines. Line 4 in the table shows that the ethnic disproportion has only been slightly corrected as of the close of last school year. The

mandated reassessment produced a reduction of EMRs more or less across the board as a consequence of lowered guidelines without causing an impressive change in the ethnic disparity.

Tables 2 and 3 give information for the two Los Angeles Areas and for two smaller districts in our study. These data are different from those in Table 1. First, we have reconstructed the EMR lists as of the period of 1969-72 in the districts, to achieve a pure sampling basis, and then we show whether these EMR were decertified or not in the period of heavy mandated reassessment. Thus, what we show are the residual, nondecertified EMR of the 1969-72 list, not the current district EMR totals. Tables 2 and 3 thus show the re-created EMR lists, the proportions decertified and not decertified, and the ethnic proportions. The data are "clean" in that great care was exercised in getting just those covered by mandated reassessment and eligible for decertification, except that in Area One of Los Angeles. The EMR numbers were so great that estimates based on random sampling rather than total counts were taken; for that reason we show no ethnic breakdown of the 1969-72 list in area one.

Ethnic proportions for Los Angeles total pupil enrollment are given first in Table 2, for the current school year, to give some basic idea of the total make-up of the huge district. Line 2 shows Area Two, which is a main sampling base for us, since this Los Angeles area represents the total district and the total State in so many respects in SES and ethnic spread. Line 3 shows the ethnic spread for total enrollment, while line 6 shows the reconstructed EMR list for 1969-72,

eligible for decertification. The ethnic minority overrepresentation is given; for example, there are 10% Blacks in the total enrollment in line 3 but 28% in EMR in line 6. Decertification reduced the numbers left in Area K to about half, while slightly reducing the ethnic imbalance. The greatest reduction was for Spanish surname students.

Table 3 provides information on two smaller districts for which we also have complete data from completely reconstructed EMR lists. We call one "Medium City" and the other "Small City." Medium City has a broad ethnic and SES spread in its total enrollment of over 20,000. Its completely reconstructed, decertified, and residual EMR lists are shown in lines 3, 4, and 5 of Table 3. Again the ethnic disproportion, especially for the Spanish surnamed, is evident. We found that the Spanish surnamed were proportionally more likely to be decertified and mainsteamed in Area Two of Los Angeles; we also find the same phenomenon here in Medium City. Small City is a semi-industrial, semi-rural Los Angeles suburb with Mexican-Americans composing two thirds of total registration as shown in line 2 of Table 3, and four-fifths of EMR enrollment, as shown in line 6.

These three tables, then, show the ethnic overpresentation of the State as a whole and of particular districts in which our efforts have been focused -- here a sampling of 4 out of the 13 we study -- and they show decertification to bring down the EMR numbers by over 40%, depending upon the district, somewhat over half the eligibles not being decertified upon reassessment. Table 1, having current enrollment data, shows the effect of new guidelines in the reduced current totals for EMR. We are not sure what the new guidelines may do in the future by way of leaving many children out in left field who need some kind of funded special

education, but that is another matter.

The data fulfill some minor predictions. First, considering the mandated weight put upon testing with nonverbal and translated scales, it would be expected that the Spanish surnamed, who in California are about 90% Mexican American, would be the chief beneficiaries. Throughout all data, including State-wide, their proportion has been cut the most.

Second, a prediction about sex differentials was made. Although the courts and legislatures appear ignorant about how schools actually operate by delimiting their attention to critical IQs, the fact is that children have to fail the regular program first before they come under the psychometric consideration. Those most like to be referred, it is well known, are not just the very slow learners, but those slow learners who give difficulty in the class by their general behavior.[4] This selective factor in the referred cases should reflect itself, for example, in the proportion of boys who would be declassified when the declassification is based only on IQ. The change of sex proportions is shown in Table 5. Typically the males constitute over 60% before decertification and about 55% afterward. Boys are on the average more noisy, more overtly reactive, and are thus more likely to be referred than girls of equal learning difficulty and possibly to be removed from regular class in part for the sake of that class.

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[4] Ashurst, D. I., & Meyers, C. E. Social system and clinical model in school identification of the educable retarded. In Tarjan, G., Eyman, R. K., & Meyers, C. E. (Eds.), Sociobehavioral studies in mental retardation: Papers in honor of Harvey F. Dingman. Washington: American Association on Mental Deficiency, 1973, pp. 150-163; Mercer, Jane R., Labeling the mentally retarded, University of California Press, Berkeley and Los Angeles, California, 1973.

We randomly sample some students of the recreated decertified lists in each district for careful study of current status for this Spring, 1974. This study includes achievement testing, teacher interview, and a cume record study of certain characteristics. The data of Table 4 show, however, that we are lucky if 50% of the students are still in the same school district at this time. The search is not complete at this hour in all 13 districts, but should be by summer's end. Line 4 of Table 4 shows, for samples of the two Los Angeles areas and for totals of Medium City and Small City, what proportions are still there for our current testing and getting other information. That they are not in the district currently could mean that they moved, dropped out, graduated, were expelled, etc. We expect to sample into these in order to estimate our biases with respect to those for whom we can presently get the desired achievement and other information.

Our study was prompted in part by hearing of terrible things happening to the poor decertified, that they were not making it, that they became "force outs," etc. We have only partial data but they seem to show one consistent pattern when we compare decertified students with those not decertified who were in the same reassessment pool in 1969-1972. Note line 3 in Table 4, "percent in district." In every comparison, more decertified are in school than EMR. Note the incomplete data on line 5 on expulsions, in disciplinary school, jail, etc.; they do not show a consistently poorer or better result for the decertified thus far, but the data will be better after we can begin seriously to trace samples of those not now in their districts. To summarize so far as the data of line 2 go, they are good data, and they do not show the decertified cases

to be worse off on the criterion of remaining in place.

In interpreting what is in Table 4, we are reminded that the data did not compare randomly selected students for decertification and re-assigning vs staying in EMR. Whatever we say about decertification not being so bad must be tempered by remembering that they were brighter students in terms of IQ as data can show. Table 6 shows what we have thus far been able to pull form the psychology files or cume records on the decertified and the EMR, in some cases for total cases, not our random samples -- total cases for Medium City and Small City, fairly large random samples in Los Angeles. These IQs are those taken at the time for EMR identification, not at decertification. Inspection of Table 6 shows that the principal difference between EMRs not decertified and those who were lies in the WISC Performance IQ. With mandation to reassess on performance tests as well as translated ones, it was a foregone conclusion that decertification would heavily depend upon such performance scores (we do not yet have sufficient data on IQs at the time of decertification; they should show even more striking differences).

The study continues, and before completion will show data of the kind already presented for the State as a whole as estimated from the 13 sites of investigation, for size of district, and for the individual districts. We will report data for ethnic and sex comparisons, and to some extent on age and placement differences. We are presently interviewing teachers and administrators on the total decertification experience, on how they coped, whether they had experience with models which were extended to the decertified student or whether they had to try out new models; what models worked and which had to be abandoned --

use of aides, resource teachers, etc. We seek to determine the extent to which decertification was reversed by return to segregated class (as we know it has in some instances). We seek to determine whether the regular program teachers received true "transition" help or whatever it was on paper for the most part, and the extent to which the decertified survived without special transition assistance. It is hoped the entire project can provide a lesson on massive shift and some contribution to principles of mainstreaming, not to mention setting up some basis for considering the educational problems of those new students for whom there is no substitute (yet, in most places) for the special help they probably need but are mandated not to be given.

TABLE 1

STATEWIDE EMR ENROLLMENT, OCTOBER, 1969 AND JUNE, 1973

	Anglo %	Black %	Span. Sur. %	Total
1. Total California public school pupils (1969)	72.4	8.9	15.2	
2. Percent of own ethnic group in EMR (1969)	0.7	3.3	2.1	
3. Percent which ethnic group is in total EMR (1969)	43.1	27.1	28.2	55,519
4. Percent which ethnic group is in total EMR (1973)	50.0	25.0	23.0	35,110

Source: Simmons, Allan, and Brinegar, Leslie. Ethnic survey of EMR classes, 1973. Sacramento, California: California State Department of Education, 1973.

TABLE 2

BASIC POPULATION DATA FOR LOS ANGELES SCHOOL DISTRICT PERTAINING TO DECERTIFIED AND NONDECERTIFIED EMR STUDENTS BY ETHNICITY

Total Enrollments	Total	Anglo %	Black %	Span. Sur. %	Other, Unk. %
Los Angeles Total	615,673	46.0	25.2	23.9	4.9
1. Los Angeles Area One	50,804	11.6	82.8	4.7	0.9
2. Los Angeles Area Two	57,530	65.4	10.1	22.8	1.7
Area One					
3. Total EMR population subject to decertification, 1969-1972	898[a]				
4. Decertified by mandated reassessment, 1969-1972	644	0.2	98.9	0.6	0.3
5. Not decertified	254	0.4	96.8	2.4	0.4
Area Two					
6. Total EMR population subject to decertification, 1969-1972	959	26.4	27.7	39.2	6.7
7. Decertified by mandated reassessment, 1969-1972	461 (48%)	20.2	29.3	45.6	5.0
8. Not decertified	498 (52%)	32.2	26.3	33.3	8.2

[a]Total not found for population in Area One. EMR sample randomly drawn from EMR lists from 1969-1972 (n = 254).

TABLE 3

BASIC POPULATION DATA FOR A MEDIUM CITY AND A SMALL CITY SCHOOL DISTRICTS PERTAINING TO DECERTIFIED AND NONDECERTIFIED EMR STUDENTS BY ETHNICITY

Total Enrollments	Total	Anglo %	Black %	Span. Sur. %	Other, Unk. %
1. Medium city	20,602	50.8	26.7	21.5	1.0
2. Small city	17,422	33.5	0.0	65.8	0.7
Medium City					
3. Total EMR population subject to decertification, 1969-1972	475	32.4	38.7	27.4	1.5
4. Decertified by mandated reassessment, 1969-1972	200 (42%)	22.0	36.5	40.5	1.0
5. Not decertified	275 (58%)	40.0	40.4	17.8	1.8
Small City					
6. Total EMR population subject to decertification, 1969-1972	221	8.6	0.0	78.3	13.1
7. Decertified by mandated reassessment, 1969-1972	96 (43%)	8.3	0.0	82.3	9.4
8. Not decertified	125 (57%)	9.0	0.0	75.5	15.5

TABLE 4

CURRENT LOCATION OF STUDENTS IN SELECTED SCHOOL DISTRICTS

	LA-Area One[a]		LA-Area Two[a]		Medium City[b]		Small City[b]	
	D	EMR	D	EMR	D	EMR	D	EMR
1. Total searched	73	99	168	223	200	275	96	125
2. Percent in-district	53.4%	52.5%	67.3%	62.7%	43.5%	28.0%	49.0%	39.2%
3. Percent not in-district	45.2%	38.4%	11.3%	21.5%	44.5%	44.7%	40.6%	53.6%
4. Percent transfer	39.7%	30.3%	11.3%	21.5%	28.0%	31.6%	27.1%	40.8%
5. Percent drop-out, expulsions, discipline school, jail etc.	5.5%	8.1%	0.0%	0.0%	16.5%	13.1%	13.5%	12.8%
6. Percent other, unknown	1.4%	9.1%	21.4%	15.8%	12.0%	27.3%	10.4%	7.2%

TABLE 5

SEX PROPORTIONS OF DECERTIFIED AND NON-DECERTIFIED IN SELECTED SCHOOL DISTRICTS[c]

7. Total	644	254	461	498	200	275	96	125
8. Percent male	68.6%	56.2%	61.2%	56.6%	60.5%	55.2%	52.1%	52.0%
9. Percent female	30.9%	43.8%	38.7%	43.3%	39.5%	44.7%	47.9%	44.0%
10. Percent unknown	0.5%	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	4.0%

[a]Samples only of D and EMR population
[b]Total population
[c]Total population; sampled only in Los Angeles Area One-EMR.

TABLE 6

MEAN IQs FOR ANGLO, BLACK AND SPANISH SURNAME DECERTIFIED AND EMR STUDENTS IN SELECTED SCHOOL DISTRICTS AT EMR RECOMMENDATION

DISTRICTS	Population											
	D						EMR					
	BINET	LEITER	WISCV	WISCP	WISCFS	WAISFS	BINET	LEITER	WISCV	WISCP	WISCFS	WAISFS
Los Angeles-C	71.2 (5.4) n = 597	71.5 (.71) n = 2	--	--	70.3 (6.5) n = 21	--	67.9 (6.9) n = 205	66.0 -- n = 1	--	--	64.2 (8.3) n = 18	--
Los Angeles-K	70.9 (4.9) n = 255	72.6 (3.7) n = 12	--	--	71.4 (6.5) n = 17	--	66.3 (7.5) n = 375	63.9 (10.0) n = 28	--	--	65.1 (6.4) n = 62	62.0 (9.9) n = 2
El Rancho	66.913 (7.198) n = 23	71.000 (0.000) n = 1	68.927 (7.047) n = 55	78.982 (8.868) n = 55	71.073 (6.828) n = 55	--	65.690 (7.011) n = 29	45.500 (2.121) n = 2	67.138 (7.429) n = 67	70.985 (8.194) n = 67	66.154 (7.007) n = 67	68.333 (0.577) n = 3
Pomona	70.982 (5.924) n = 111	71.600 (6.804) n = 5	74.153 (6.749) n = 66	76.322 (8.316) n = 66	72.864 (5.873) n = 66	--	67.864 (7.896) n = 110	57.182 (8.376) n = 11	69.242 (7.145) n = 125	69.256 (8.987) n = 125	66.256 (7.217) n = 125	63.500 (9.192) n = 2

Evaluation of Special Education Programs[1]

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This presentation will not be an attempt to define the authentic evaluation program for special education. Not only is the time too short, but too much is in the state of flux for anyone to attempt that right now. Rather, from our study of the decertified EMR children who were returned to regular programs we will introduce some issues, problems, and suggestions that will bear upon the evaluation of mainstreaming and of mainstreamed special students, as in the California master plan. We will limit ourselves to that. We do not claim to be the experts in the evaluation of this or any program but we believe we have some things to say, perhaps we raise more questions than we have answers, but we do have some of the latter.

Historical Context of Mainstreaming Movement

Mainstreaming is here to stay, at least for a while. It is well to recognize that it is part of an historic imperative which is also represented in the current civil rights activity of several kinds, in the normalization push for all handicapped, in the deinstitutionalization of handicapped children and mentally ill adults, in the fight for complete women's rights. Mainstreaming is a piece of this same change in public philosophy, in contrast with what prevailed a dozen years ago, when the Zeitgeist required us to segregate the handicapped so that they could be more effectively educated. Mainstreaming is a new Zeitgeist which will endure for a while, nobody knows how long, and we all hope it works, but regardless, we are mandated to evaluate it as a system and for its effects upon the affected learners. Mainstreaming gives us a new ball game, and the very basis of evaluation is necessarily in the same state of evolution as the special education program itself. In California the Master Plan will cause mainstreaming of many learners formerly not included in the typical evaluation and accountability catchments.

Our project began when a group of us, interested in the social and educational welfare of the handicapped and the increasing acceptance of them in the community via normalization, observed that thousands of EMR learners were being decertified in California without any provision for monitoring the process. Here was therefore a natural laboratory for the study of the consequences of a rather vase and sudden change. What happened to these learners? Were they accepted by peers and teachers? Did they become pushouts? Did transition programs really work? We were quite aware of two

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[2]Also at the University of Southern California

[3]Also at the University of California, Riverside

incompatible aspects: first, changes in legal guidelines or definitions were ordered and program modification was accelerated in large degree as a consequence of civil rights activity; this activity asserted that many children should not be labeled, they were legally normal, by new definitions; at the same time we knew that they had all been regular class failures of a sort to start with. Regardless of whether adequate psychological examination had been used, the reality was that the children first had been failures in the regular program. How, then, would they fare upon return to it?

We applied for and received a grant from the Bureau of Education of the Handicapped, U.S. Office of Education, for two years of study of the fate of these learners. The study will be briefly described later. The study terminates this coming May. In its pursuit we learned quite a bit, not only about problems of assessing the educational status of such learners by means of standardized achievement measures, but also about larger, philosophically framed issues of accountability and evaluation in several respects. The significance of this California decertification movement became more apparent as time went on. State after state though not all of them had their civil rights fun and games. What happened here was likely to be felt elsewhere. What we could find out might be of some interest generally.

General Evaluation Issues In Mainstreaming

Given new legislation, the topic of evaluation of special education programs is difficult to delineate. With the transition programs resulting from SB33 and the impact of the California Master Plan for Special Education, one is left to ponder which children remain the responsibility of special education. Clearly, transitional children persist as learning and/or behavior problems when returned to regular classes. Does special education retain responsibility for transitional, or mainstreamed, children? Is this responsibility shared with general education? Or, are special educators absolved of responsibility? It should be assumed that special education must accept at least partial responsibility; mainstreaming should indeed be considered in any evaluation of special education programs. Thus, several issues must be addressed in evaluating special education programs, including the kinds of data needed, criteria for differentiating between programs and services, and the function to be served by evaluation. These will be first touched upon from the broad perspective to be followed by comments on specific problems.

Administrative vs. Child Perspective. Evaluation of special education programs may be undertaken from two different perspectives. Unless these are delineated, confusion will result in attempting to determine whether or not a program is working effectively. For purposes of discussion these will be referred to as the administrative and the child perspective.

The administrative perspective originates in the organizational world and is epitomized by a Director of Special Education at the state, county, and local level. The individual holding such a position is typically concerned with certain elements of programs, such as cost and numbers of children receiving services, since these are the kinds of data for which he is held accountable. Many forces operate on the person in such a position. These include demands for resources, control of budget, compliance with legal guidelines, and the need to maintain a positive public image.

Given the demands of the job on the administrator, it is reasonable that he be concerned with dollars and numbers of children. However, these aspects constitute only one dimension of evaluating the effectiveness of a program. When the State Director of Special Education states that X hundred children are receiving services through the program for deaf youngsters at a cost of X dollars to the state or district, the question which remains unanswered is, "How good are the services delivered to the X hundred children for X dollars?"

Examples of evaluation from the administrative perspective may be easily found among the recent transitional programs. Here, these kinds of data were reported at the state level while no funds were allocated for evaluation of data from the child perspective. For example, a report came out in which the reduction of children in EMR classes state-wide was presented; furthermore, the change in the percent of EMRs by ethnic status was documented. Somehow, there is a presumed goodness where it can be shown that a large number of EMR children were decertified and returned to regular classes.

The child perspective must supplement the administrative perspective if we are to get a true reflection of the effect of such programs. The numbers of children served and the number of dollars spent are both valid indices with which to evaluate programs, but unless supplemented with qualitative data in terms of the changes in children that can be observed and measured the evaluation picture is incomplete. This sounds very easy and in the past has been treated as though it is easy. However, it should be noted that qualitative evaluation presents a number of problems including: limited measuring instruments which are appropriate for handicapped children, problems in administering these instruments due to the nature of the handicaps, and problems in analysis due to the plaguing problems pertaining to interpretation of gain scores. The point to be made is that if evaluation of the effects of programs on children is to be seriously undertaken, investment must be made in instrumentation, time to administer these once they are developed, and considerable expertise in order that results be handled properly.

Program vs. Services. Some of the problems inherent in evaluating mainstreaming programs have surfaced in the work with our BEH/OE project. As the literature is surveyed, it is easy to identify the models being advocated for facilitating the shift of EMR children from special into regular classes. First, and most commonly recommended is some variation of a resource room teacher model. On an abstract level, a cogent case may be made for the feasibility of this model. However, problems become apparent when attempts are made to characterize this model in practice. For example, while some resource teachers work primarily in the role of diagnosticians, others work directly with children as remedial specialists, and others serve as curriculum consultants who work directly with teachers. Hence, the role of the resource room teacher is not well defined and it is probable that there is as much variability within this model as between this and some other model.

Another problem which arises with resource teachers is that they deliver services (diagnostic, remedial, curricular) but do not offer a complete program in the sense of having goals and objectives. Rather, they work within the regular class program which has its own set of goals. Hence, the resource teacher assists either the regular teacher or child (or both), but because a resource teacher model is not a program in and of itself, it is not a typical target for evaluation.

Timing of Data Collection. Accountability has become a by-word in both special and regular education. Much has been written about objective-referenced vs. normative referenced testing, but one question which has received less attention is that of when data should be collected in order to be of the most benefit.

In California, considerable sums of money are spent to do statewide testing of achievement, and yet the value of the data collected is unclear. What decisions are altered as a result of a district learning that achievement is above, at, or below the average for the state? Clearly, it is too late to do anything about the program for that year as the data are collected after the year is completed. Hence, it might be argued that the time for testing and the type of data to be collected should be determined on the basis of when decisions must be made and the kinds of information which will allow for the decisions to be made wisely. For special education it might be suggested that data should be collected at the time of A&D committee meetings, and that the kinds of information gathered should relate to the types of decisions which must be made by this committee.

Student Goals. Considering the question of goals a little further, when a mildly retarded child was placed in a special class, he was put into a program which had goals of vocational, occupational, and social competence, with less emphasis placed on academic achievement. However, when the child is moved back into the regular program the objectives are different and reflect a more cognitive/academic emphasis. An important question is, which goals are more appropriate for this child? If the less academic emphasis is more fitting, can this be incorporated into the regular program? The point is that before a child is mainstreamed, the A&D committee needs to deal directly with these questions in order to avoid placement with inappropriate goals.

In view of changes taking place in special education programs, evaluation should be a priority responsibility to be shared by special educators. In evaluating programs, awareness of the need for thorough and sophisticated techniques must be maintained, as well as the need for both quantitative and qualitative data. Finally, the major purpose of evaluation should be that it facilitates attainment of the goals of special education programs.

Evaluation Issues Under State Master Plan for Education

From the general issues of evaluation raised above, let us explore specific problems associated with evaluation under AB 4040 or the State Master Plan for Education. One of the major objectives set forth in AB 4040 which very likely will become a part of the final plan is the general provision to conduct an annual evaluation of special education and mainstreaming programs (Articles 1, 2, and 3). Specifically, Section 7026 of the State Education code which resulted from the enactment of AB 4040 states:

This evaluation shall include:

a) The degree to which the responsible local agency has served all individuals with exceptional needs.
b) The degree to which the responsible local agency has integrated individuals with exceptional needs into the general school population, and the impact of such integration on individuals with exceptional needs and the rest of the student body.

c) The extent to which individuals with exceptional needs meet the objectives set for them in written instructional plans.
d) A general assessment of the relative effectiveness of programs conducted under this chapter compared to special education programs not conducted under this chapter.

These provisions relate directly to the administrative and child perspective discussed earlier. No doubt, frequencies of returning EMR students to regular class or some alternative mainstream placement will be acceptable evidence for the success of the program. However, Section 7026 (c) focuses on child data with respect to assessing gains vis a vis certain stated objectives for each student. It appears incumbant upon us to begin to think in terms of child-centered evaluation.

Objectives. Before any evaluation can proceed, it is necessary to state clearly and operationally the objectives for individuals or groups of students. Section 7026 leaves this question unanswered; no mention is made throughout the text to define the goals of the mainstreaming action. We know of very little effort made at the state or local district level to define objectives which are amenable to measurement. However, let us assume that the special students by virtue of their placement in regular programs must be evaluated within the regular classroom context. This situation does not reduce the importance of the traditional goals of the EMR program, those of occupational, vocational and social competence. But cognitive objectives become salient; mainstreamed students become just as liable as regular class students for being assessed on academic objectives such as mastery of reading, arithmetic, spelling and so forth. The question for this discussion becomes the state of measurement field in terms of testing special students on cognitive variables.

Reliability and Validity Problems In Mainstreaming Measurement. A myriad of problems arise in assessing these cognitive objectives. The evaluator may decide to construct a local test or may select an available standardized achievement test to avoid the steps in test construction and the generalization restrictions of a specially constructed test. Both approaches, however, suffer from the same limitations; that is, we usually do not know the reliability and validity estimates of tests with special education students. The locally made tests are usually developed for a singular purpose with obvious drawbacks of unknown reliability and validity and incomparability of scores to other groups. The standardized test does not escape these same problems. The published group achievement test was typically standardized and normed on students of average ability. The most popular achievement tests (Stanford, Metropolitan, etc.) do not include special students in their standardization sample. As a result, the reliability and validity measures presented in the respective manuals are not applicable to the special child. We further reduce the attractiveness of the achievement test by modifying the test in response to the handicapped student's limitation to handle the testing situation by various means as extended time limits, etc. Nevertheless, the achievement test has the overriding advantage of having its items developed over a series of trial testings together with magnificent content validation with the curriculum of the regular program. It can be argued that group achievement tests are a good starting point for developing instruments to assess cognitive progress of special students.

Testing Procedure of the EMR Transitional Study

Our BEH/OE project tested a large sample of students which we believe were representative of that group of students who would be primarily involved in the mainstreaming efforts under the State Master Plan for Special Education. Our experiences in testing these students will be summarized according to certain key topics in test administration. Nevertheless, we present no final solution. The modifications we introduced were experimental; the achievement tests must ultimately be restandardized to include special students before interpretations are made of that group. The lessons presented here will illustrate the work before us if standardized achievement tests become appropriate for evaluating mainstreamed students.

The Subjects. Subjects were tested as part of a larger project whose purpose was to study the degree of success of the re-evaluation and subsequent decertification of EMR students in California pursuant to AB 1625 & SB33, the Karabian and Burgner bills, respectively, which commenced during the 1970 academic year to the present. Thirteen school districts participated in the study of which 12 allowed the testing of students with the Metropolitan Achievement Test (MAT). Three groups of students were identified: a) the decertified EMR student (D) - those EMRs enrolled in 1970 and who were placed in regular class based upon the new state guidelines; b) EMR students (EMR) - those retained in EMR classes because of low IQ and/or for other reasons or who were placed in EMR classes under the new state guidelines and c) regular class students (RC) - those enrolled in the same regular class, usually the English or Reading, as the decertified student and who were said by their teachers to be in the bottom half of the class in academic achievement (these students were randomly selected from the group of students nominated by the regular class teachers). These students attended the elementary, junior high and senior high school level but were predominately at the junior high school level. Other than those students who were not tested because of parent refusal or chronic absenteeism, over 85% of those students (850 or more in all) who attempted the MAT completed it.

Procedure. Table 1 presents the procedures suggested for test administration in the MAT manual and those which were employed by our project. Suggested guidelines are given based upon our experience. (They are of course experimental; we are currently in the process of testing the effects of these methods.) Modifications were made primarily to maximize motivation and test-wiseness of the examinees without sacrificing the standardization procedures of the test proper. For example, students were told that they were not being evaluated for placement in any special program, were asked to respond to all questions even if they had only partial comprehension of specific questions, responded only in test booklets to eliminate errors due to unfamiliarity with separate answer sheets, were given extended rest periods to counter fatigue and frustration caused by a novel situation. Within the test proper, no suggested procedure was modified; time limits for completing the subtests were followed strictly, test batteries were administered whenever possible on separate days, especially at the lower levels of the MAT. The major deviation in procedure occurred with the selection of the level to administer to the students. Given the very small number of D, EMR and RC who read at grade level, the teachers of those students selected the most appropriate level of test after they had been presented with the various forms.

We believe that most of our changes did not violate the standardized procedure given for the MAT. Some of them were, however, experimental which raises the same crucial question concerning the reliability and validity of the test instruments posed earlier, that of using a test normed on regular students with special or mainstreamed students. If we accept the need for assessing cognitive growth in special students by a standardized method, then one of the alternatives is the standardized achievement test. Research must begin to cope with the psychometric problems of including special students in the norming sample along with the procedural changes required to assure maximum performance by these students.

Summary

The significance of our MAT experience is evident if you are reminded that none of the nationally standardized achievement batteries has included special students in its norming and in the development of its administrative procedures. There is frankly nothing with which one can start. Our experience with the MAT will lead to some hopefully useful adaptations to mainstreamed and perhaps other special students with that instrument. Incidentally the MAT was chosen over others because it appeared to be most adaptable for marginal learners in its general make-up and also because it was being used in a large study in Texas (Project Prime) of the mainstreaming process and results.

Our present situation is this. The legislature has said, let there be mainstreaming in the Master Plan, and let there be evaluation. But the legislature delivered no guiding goals and objectives, implying however that they should exist, presumably to be determined at the district level. If therefore the state does not come through in reasonable time, the district will have to set forth its own, and the state must then respect them. Without waiting for some adaptation of a norm referenced battery, except for what modifications we might be able to effect in the MAT, the district might go to banks of performance objectives and the associated instructional and evaluative devices which are available. To judge students who have been mainstreamed and to judge the mainstreaming effort only on norm referenced measures is guaranteed to disappoint the most ardent true believer. On the other hand, to determine realistic objectives specifically for the mainstreamed and to avoid overly assuming they are somehow supposed to be at class average and to assess by objective-referenced means will likely be fairer both to the learner and the program.

To close, you have observed that we have had no time to address the assessment of affective objectives, or even to detail what we have had to do to assess the transition program in terms of whether students stayed in school after being decertified. Assessment of any mainstreaming should be alert to the effect upon the pupil for having now to compete with regular class peers, and to note whether it resulted in early school leaving and other unwanted consequences.

Another set of variables is not polite to talk about. We have in mind the unspoken purposes of taking certain students out of the regular class and placing into the special. The spoken and primary purpose was to provide a better education; the unspoken ones were the relief of the regular class students and of the regular class teacher. The marginal student is now back; evaluation may implicitly have to take note of the potential impacts upon the regular students and their teacher.

TABLE 1

Comparison Between the Standardized Procedure for Administering the Metropolitan Achievement Test (MAT) With Those Modified by the EMR Transitional (EMRT) Project

Procedure Variable	MAT Recommended Procedure	EMRT Project Procedure	Guidelines
1. Motivational Preparation of examinee.	Assure students that test may be difficult; encouragement is given to do well on the test.	Encouragement given to do well; subjects were told that they were not being evaluated for special class placement.	Follow recommended procedure; be sensitive to the emotional condition of the students and explain clearly the nature of the testing program.
2. Selection of Test	Administer test whose range includes the grade level of the students of interest.	Given the large number of decertified and EMR students who were reading below grade level, teachers were asked to select the most appropriate level of the test.	The EMRT procedure is highly experimental; research must be conducted to determine whether one can assume unidimensionality of the various levels of the test.
3. Test-wiseness	Students are told to respond to all questions.	Students were told to respond to all questions; they were further instructed to respond if they only partially understood the question.	Practice sessions should be conducted with sample items from test to illustrate strategies of responding to questions.
4. Response mode of MAT	Students may respond either in the test booklet or on separate answer sheets.	Students responded only in test booklets. In pilot studies very few were able to mark answer sheets properly even after brief instruction.	Given the unfamiliarity of EMR or decertified students with formal testing, we attempt to minimize error variance caused by response mode.
5. Time limits of subtests	No deviation from time limits given in manual.	No deviation from time limits given in manual.	Until studies are conducted on extended time limits, standard procedure should be followed.

TABLE 1 (Continued)

Comparison Between the Standardized Procedure for Administering the Metropolitan Achievement Test (MAT) With Those Modified by the EMR Transitional (EMRT) Project

Procedure Variable	MAT Recommended Procedure	EMRT Project Procedure	Guidelines
6. Group size	Classroom Unit as available on testing date.	Test groups varied between 1 and 6. This variability was caused by the nature of testing students as part of this research project.	Groups should be as small as managerily possible. Given the need to motivate and instruct special students throughout the test session, small groups appear essential.
7. Rest Periods	No deviation from times given in test manual.	The duration of rest periods between subtests was increased at the discretion of tester. Our rationale was based on the motivational research on exceptional students which consistently show fatigue and stress caused by unfamiliar situation.	Rest periods should be managed at the discretion of the tester. This does not violate the standardized procedures within the subtest time limit and helps insure maximum performance.
8. No. of subtests per test session	Test should be divided into two sessions (if possible), especially at the lower levels.	MAT recommendation followed; 90% of tests completed within two sittings; the remainder constituted problems in scheduling.	Testing on separate days is highly desirable because of fatigue and frustration caused by the testing situation for special students.

Out-of-Level Testing of Special Education Students with a Standardized Achievement Battery[1]

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Abstract

The present study analyzed the feasibility of using teacher recommendation rather than a student's chronological age-grade placement for selecting the level of a standardized achievement test. 359 former and current educable mentally retarded students were tested with either the Primary I, Primary II, or Elementary level of the Metropolitan Achievement Test (MAT) selected by their current teachers after copies of test booklets for all MAT levels were presented to them. The results indicated that: a) most of the sample responded above chance levels on all subtests of the MAT, b) KR-20 reliability coefficients were comparable with those of the standardization sample and c) generally moderate to high positive point-biserial correlations were found for all subtest-level combinations. It was concluded that the teacher selection method for out-of-level testing appears to be an appropriate one for selecting a reliable instrument to assess academic performance for this group of students.

OUT-OF-LEVEL TESTING OF SPECIAL EDUCATION STUDENTS WITH A STANDARDIZED ACHIEVEMENT BATTERY

There is an accelerated movement toward educating special education students in the regular class setting. The students are said to be "mainstreamed," which refers to the temporal, social and instructional integration of eligible special students with normal peers (Kaufman, Gottlieb, Agard, & Kukic, 1975). The implementation of "mainstreaming" requires the reanalysis of appropriate performance objectives and assessment measures for these special students. Although the traditional goals of the educable mentally retarded (EMR) program, occupational and social competence, need not be neglected, cognitive goals such as reading and mathematical skills become more salient. The most definitive type of cognitive measure is the standardized achievement test, Stanford, Metropolitan, and others.

However, the use of these tests raises questions of appropriateness on several grounds. Special education students were not included in the norming; there are no separate reliability and validity estimates for such students; and most importantly, there is an issue of what level of test to administer -- the "mainstreamed" student is placed at or near his chronological age-grade, but his achievement may be many grade-levels lower. Current experience in California with mainstreaming of former special class retarded and other learning disabled students

indicates that the preponderance of such students are overwhelmed with the difficulty of the level of the test administered to their regular class peers, considerable numbers of them refusing to quitting, running from the room, crying, etc. Nevertheless, the use of the standardized achievement test has the overriding advantage of having items developed over a series of trial testings together with content validation of the regular program curriculum. It may be argued that these tests are a good starting point for assessing the academic progress of "mainstreamed" students who are placed in the regular setting.

The usual procedure for selecting the most appropriate level of the standardized achievement test is based upon chronological age (CA) grade placement, that is, grade 5 students are administered the test whose range includes that grade level. However, Kirk (1964) reviewed a series of studies which found that the reading achievement of mentally retarded children in special classes was generally below the achievement expected for their mental age. Assigning tests to these mainstreamed EMR students who read two or more grade levels below the class appears inappropriate. A test becomes more unreliable at the extreme ends of its distribution of scores (Nunnally, 1967) because of the chance factor with fewer appropriate items or because of non-responding. An alternative procedure is out-of-level testing, a system of selecting the level of test for a student by previous test performance (Ayrer & McNamara, 1973) or by some other means such as teacher assignment (Meyers, MacMillan, & Yoshida, 1975). Ayrer and McNamara (1973) reported that out-of-level testing with the Iowa Test

of Basic Skills significantly decreased but did not completely eliminate chance responding of inner city students when compared with their previous age-grade placement test performance. However, their mean out-of-level grade equivalent (GE) score was lower than that earned in the CA-grade placement condition. This difference was attributed by Ayrer and McNamara (1973) as probably due to those students who responded at the chance level in either testing situation which resulted in higher GEs assigned to chance level scores on tests of higher levels than those given in the out-of-level test situation. Nevertheless, out-of-level testing significantly reduced chance responding.

Given the complementary problems of the lack of research on testing special students and the below-CA grade placement in reading and mathematics performance of these students, the present study analyzed the feasibility of using teacher recommendation rather than the student's age-grade placement for selecting the level of a standardized achievement test. Specifically, EMR students and EMRs who recently returned to regular class (some of the target groups of the "mainstreaming" movement) were tested in order to determine the appropriateness of this out-of-level assignment procedure with the Metropolitan Achievement Test (MAT). The method employed by Ayrer and McNamara (1973) was not available as an alternative because special education students have not been included in any group achievement testing in California. Also, test level estimations based upon achievement test scores earned during regular class placement were tenuous at best because most of the sample was previously tested at least two years before the present study. In short, only teacher recommendation could be employed as a

suitable method.

This paper reports on the experience of using teacher-selected test level and on the item statistics for testing which was done on two groups of special students. A series of item analyses were conducted on the reading and mathematics subtests scores of the Primary I (PI), Primary II (PII) and Elementary levels of the MAT in order to determine on each subtest: a) the Kuder-Richardson internal consistency reliability coefficient, b) the percentage of students who responded above the mean chance level, as defined by K/A, where K is the number of questions and A is the number of options (Gulliksen, 1950), c) the distribution of item difficulty values, and d) the distribution of point-biserial (PB) correlation coefficients.

Subjects and sampling design. Subjects were tested as part of a larger project whose purpose was to study the degree of success of the re-evaluation and subsequent decertification of EMR students in California. Twelve unified school districts were selected to be representative of the state as a whole according to district size, geographic location, wealth, and ethnic representation.[3] Within each district, two groups of students were identified and randomly selected to participate in the larger project: a) the decertified EMR student - those EMRs enrolled in special class during the 1969-72 academic years and who were reassigned to regular class according to the new state EMR guidelines, and b) EMR students - those retained in EMR classes because of low IQ and/or for other academic or adjustment reasons or who were placed in EMR classes under the new state guidelines. They were matched as far as possible in order of priority by program level (elementary, junior high, senior

high school), ethnicity and sex. For the purposes of this study the two samples were combined because they were thought to be representative of that group of special education students who would be currently prime candidates for the "mainstreaming" to regular class.

The 359 subjects were tested between April and June, 1974 with a complete battery of either the PI, PII, or Elementary level of the MAT. The sample consisted of predominately minority students (21.4%, Anglo; 35.1%, Black; 40.2%, Spanish-surname; 3.3%, Other non-white) whose mean CA at the time of testing was 15.02 years (standard deviation (SD)=2.11). The sample consisted of 54.0 percent males and 46.0 percent females. The mean Stanford-Binet IQs for 179 of the students was 68.21 (SD=6.16); the mean Full Scale WISC IQs for 149 of the subjects was 66.81 (SD=7.05) with 31 students having no record IQs.

Procedure. Each teacher was presented copies of test booklets for all MAT levels and was asked to choose the level most appropriate for the student. Students were then grouped according to the selected level and administered the complete reading and mathematics subtests for that level. The number of students in a testing group ranged from 1 to 6. The standard procedures given in the test manual were strictly followed except for extended rest periods given between individual subtests.

RESULTS AND DISCUSSION

Tables 1, 2, and 3 present for each level-subtest combination of the MAT the mean and standard deviation of the raw scores, the Kuder-Richardson reliability coefficient, the percentage of students exceeding the guessing level scores of the subtests, the distribution of item

difficulty values and the distribution of PB correlations.

The out-of-level assignment procedure for the sample of special education students did not appear to lower the reliability estimates significantly when a comparison is made with coefficients obtained on the standardization samples. The publisher reports KR-20 coefficients ranging from .89 to .97 for these subtests at the three levels (see Teacher's Handbook for each MAT test battery). Although 12 of 16 KR-20 coefficients of the special education sample were lower than those of the normative sample, the greatest difference of .07 was found in the Reading subtest of the Elementary level with differences less than .03 being more typical. The KR-20 coefficients ranged as follows: a) PI, .903 to .946; b) PII, .888 to .937; and c) Elementary, .860 to .926

In terms of minimizing random responding by the subjects as defined as a score at or below K/A, the percentage of students exceeding that score on any subtest ranged from 82.8 to 99.3. Judged with this criterion, out-of-level testing appears successful in presenting test

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Insert Tables 1, 2, & 3

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items to special education students in a way which effectively controls guessing and increases the likelihood of scores based upon how much students comprehend. For most subtests the distributions of the raw scores reinforce this interpretation because the values at two standard deviations below the mean are usually greater than the corresponding mean chance levels indicating that less than 3 percent of the

raw scores are expected to be less than the K/A value.

The distributions of item difficulty values indicated that most items were neither too easy nor too difficult, ranging between .30 to .70, the usual range given for the optimal discriminability of the items. Although PI contained a majority of items with discriminability values greater than .70, PB correlations for that level and those for the PII and Elementary levels were positive and greater than .20 without exception. The percentage of PB correlations above .50 for each subtest ranged from 15.5 (Elementary, Reading) to 77.1 (PI, Word Knowledge). In short, the items of the three MAT levels were not only homogeneous within a subtest but also discriminated between high and low scores for this group of special education students.

The major findings in the present study were that teacher selection of test level resulted in: a) most of the sample of currently and formerly enrolled EMR students responding above chance levels on all subtests of the MAT, b) KR-20 reliability coefficients comparable with those of the standardization sample and c) generally moderate to high positive PB correlations for all subtest-level combinations. Furthermore, inspection of the means and standard deviations of the students on each subtest-level combination does not indicate a ceiling effect. The moderate to high positive PB correlations reinforce this interpretation because on the average, students with low total scores responded incorrectly on the average to individual items while the opposite was true for students with high total scores.

These results are meaningful because they indicate that the judgements of the teachers were accurate and did not underestimate the test

level for this group of special students even though the disparities between the age-grade placement of the students and out-of-level test selected were as great as 10 grades in some cases. However, such variability in a given classroom may lead to some practical problems in implementing this out-of-level testing method. In the case of the MAT and other popular standardized achievement tests, students must be grouped by each level because the levels differ in both administration time and instructions. This condition precludes the testing of all students in a given classroom during a single session. Perhaps students can be assigned to groups on a grade or school building basis. Specific scheduling questions must be answered and solutions will vary according to the realities of each school building site.

Another issue concerns the appropriateness of using standardized achievement tests with EMR students as opposed to alternative forms of measurement such as criterion-referenced. The latter type may be more suited for assessing specific cognitive and non-cognitive objectives and individually prescribed sequences of instruction for EMR students. Nevertheless, norm-referenced tests are informative because they rank individuals on a common scale for comparative purposes, especially in evaluating academic achievement. The results of the present paper suggest that the teacher selection method for out-of-level testing with a standardized achievement test appears to be an appropriate one for selecting a reliable instrument to assess academic performance for this group of students, while at the same time the selection results in a technically acceptable utilization of an already available instrument for the assessment of achievement.

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Footnotes

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[3]A more detailed description of the sample design will be provided upon request.

TABLE 1

Summary Statistics of the Item Analysis for Selected Subtests of the Primary I MAT Battery

Variable	Subtests N=130				
	WORD KNOWLEDGE	WORD ANALYSES	READING	MATH CONCEPTS	MATH COMPUTATIONS
Number of Items	35	40	42	35	27
Number of Alternatives	4	4	3	6	0*
Mean Raw Score	26.63	29.35	26.17	24.50	19.88
Standard Deviation	8.01	8.47	10.94	7.06	6.41
KR-20	.936	.922	.946	.903	.929
Percentage of students exceeding guessing level scores of test	96.1	95.3	86.1	99.2	-------*
Range of item difficulty values	.46-.95	.43-.95	.39-.90	.31-.98	.26-.94
Percent Below .30	0.0	0.0	0.0	0.0	3.7
Percent .30 - .70	34.2	37.5	73.8	42.9	25.9
Percent Above .70	65.8	62.5	26.2	57.1	70.3
Range of point-biserial correlations of the items	.41-.72	.26-.65	.29-.72	.13-.69	.36-.79
Percent Below .20	0.0	0.0	0.0	3.0	0.0
Percent .20 - .50	22.9	40.0	19.0	48.5	18.5
Percent Above .50	77.1	60.0	81.0	48.5	81.5

*Item format was open-ended; no alternatives presented to examine

TABLE 2

Summary Statistics of the Item Analysis for Selected Subtests of the Primary II MAT Battery

Variable	Subtests N=142					
	WORD KNOWLEDGE	WORD ANALYSIS	READING	MATH CONCEPTS	MATH COMPUTATION	MATH P. SOLVING
Number of Items	40	35	44	40	33	35
Number of Alternatives	4	4	3	5	5	5
Mean Raw Score	27.94	23.49	28.33	23.97	20.63	20.25
Standard Deviation	7.91	7.21	10.59	8.31	7.87	8.52
KR-20	.906	.888	.937	.909	.921	.925
Percentage of students exceeding guessing level scores of test	99.3	98.6	85.2	95.1	95.1	91.5
Range of item difficulty values	.38-.96	.43-.93	.41-.92	.16-.93	.21-.91	.17-.81
Percent Below .30	0.0	0.0	0.0	12.5	9.1	8.6
Percent .30 - .70	52.5	62.9	65.9	50.0	48.5	62.9
Percent Above .70	47.5	37.1	34.1	37.5	42.4	28.5
Range of point-biserial correlations of the items	.30-.70	.26-.65	.08-.71	.22-.64	.21-.66	.27-.66
Percent Below .20	0.0	0.0	2.3	0.0	0.0	0.0
Percent .20 - .50	67.5	62.9	34.1	50.0	30.3	31.4
Percent Above .50	32.5	37.1	63.6	50.0	69.7	68.6

TABLE 3

Summary Statistics of the Item Analysis for Selected Subtests of the Elementary MAT Battery

Variable	Subtests N=87				
	WORD KNOWLEDGE	READING	MATH CONCEPTS	MATH COMPUTATIONS	MATH PROBLEM SOLVING
Number of Items	50	45	40	40	35
Number of Alternatives	4	4	5	5	5
Mean Raw Score	28.20	21.63	16.93	23.92	15.53
Standard Deviation	10.63	7.61	7.85	9.04	8.04
KR-20	.926	.860	.887	.925	.913
Percentage of students exceeding guessing level scores of test	93.1	92.0	86.2	90.8	82.8
Range of item difficulty values	.12-.86	.14-.91	.08-.93	.03-.94	.06-.86
Percent Below .30	12.0	28.9	32.5	7.5	31.4
Percent .30 - .70	60.0	51.1	57.5	55.0	57.2
Percent Above .70	28.0	20.0	10.0	37.5	11.4
Range of point-biserial correlations of the items	-.01-.70	.06-.60	.13-.62	.16-.66	.15-.65
Percent Below .20	6.0	6.7	5.0	2.5	2.9
Percent .20 - .50	48.0	77.8	72.5	35.0	45.7
Percent Above .50	46.0	15.5	22.5	62.5	51.4

Some Behavioral Data on the Success of California's Transition Program[1]

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In response to civil rights litigation California modified the criteria for EMR placement and reassessed all EMR students. Over 11,000 decertifications with some mainstreaming assistance took place during the 1969-72 academic years. The experience of educating these children in regular class constitutes valuable data for mainstreaming in general. The focus of this BEH-funded project was on the effects of these changes on the decertified (D) students, in contrast with EMRs not decertified (EMR) and regular class (RC) counterparts as well as their teachers and curriculum. A multi-dimensional approach served to measure the success of decertification which resulted in a number of dependent variables, some of which are as follows: a) current status--the proportion of students who remained in school or graduated, dropped-out or whose whereabouts are unknown, b) academic achievement of students available for study--the Metropolitan Achievement Test (MAT), teacher marks, teacher comments as recorded in "cum" files and in a questionnaire, state mandated achievement scores, and c) adjustment variables--cooperation (discipline) grades, attendance in school, teacher remarks. In short, the success of decertification was evaluated from a wide range of viewpoints to yield a comprehensive picture of the success of D students in their transition to regular class.

This paper reports on two of those behavior outcomes, namely, the current status of the students and the MAT scores in reading and mathematics of those available and selected for current study. Specifically, data will be presented which: a) compared populations of D and EMR

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students in terms of their latest known status according to school district records and analyzed where possible ethnic breakdowns within each student group, and b) analyzed MAT reading and mathematics subtest scores for the D, EMR, and RC students in each districts. In short, success of the decertified student was studied by current status of the samples of D and EMR students, and for those who remained in school, their achievement scores as compared with those of RC students.

Method

Subjects

Twelve California unified school districts representing a wide variation in ethnic density, community SES and enrollment size were selected by a purposive stratified sampling design developed by Keogh, Becker, Kukic and Kukic (1972). We compiled lists in nine districts of all EMR students during the 1969-72 academic years from which Ds and EMRs were then randomly selected in sufficient size to reflect that district's experience with decertification. It was possible in three districts (Nos. 2, 5, 9) to secure only samples of the current Ds and EMRs because: a) the EMR population during the 1969-72 period was too large, estimated at over 5,000 in one district, b) political problems plagued another, and c) a teacher's strike in the third. Table 1 presents the population of Ds and EMRs, their ethnic and sex composition and their chronological age at the time of this study, spring 1974.

Current study samples of Ds were then randomly selected. An EMR was matched to the D on the basis of program level (elementary, junior high, senior high), ethnicity and sex. The D student was also paired with a RC student of the same ethnicity who was randomly selected from the same classroom as the D student and said by his teacher to be in the bottom half of his class in achievement. Table 2 presents the composition of those samples as well as their demographic characteristics.

Procedure and Data Analysis

Current status. We searched the population of the Ds and EMRs except in a large district and in those which only sampled currently enrolled students (Nos. 2, 5, 9) as to their most recent status as of the 1973-74 academic year. We recorded information such as whether the student had dropped-out, graduated, and so forth, from the student's cum or attendance record; we collapsed data to create categories of status used to define successful adjustment to school as follows:

1. Positive adjustment--In a district school, or graduated, or in a private school.

2. Neutral adjustment--Transferred to other school districts.

3. Negative adjustment--Dropped-out, and unknown status in those

who were 16 years of age or younger. (These students were under compulsory attendance obligation and therefore should have been enrolled in a school program.)

4. Unknowns--Unknown status of students older than 16 years.

The frequencies in each category were tabulated and chi-square tests of independence were used to test whether relationships existed between statuses and the D and EMR students. Furthermore, chi-square tests were used within the D and EMR categories to test whether differences occur by ethnicity. An alpha level of .05 was adopted to test the significance of each statistical hypothesis.

Metropolitan Achievement Test (MAT). Within each district, the selected D, EMR and RC students took one of six levels of the MAT. Given the disparity between these subjects' chronological ages and their academic achievement level, an experimental procedure for selecting the level of test was instituted. Each teacher of the selected students was presented copies of test booklets for all MAT levels and was asked to choose the level most appropriate for the student. Students were then grouped according to these levels, yielding groups ranging from 1 to 6 students. An item analysis of this procedure reported by Yoshida (1975) and Yoshida, Meyers, and MacMillan (1975) showed that the teacher-selection procedure controlled random guessing, yet maintained discriminability of the items for all three types of students.

The grade equivalents (GEs) for total Reading and Math from all levels of the MAT were selected as the achievement measure because they were assumed to be comparable across levels (see Teacher's Handbook of the MAT). For each district, the data were analyzed with a one-way analysis of covariance involving three levels of student type (D vs. EMR vs. RC) with program level (elementary, junior high, and senior high) as the covariate in the ANCOVA. An ANOVA was used for district 8 because subjects were located at a single program level. A Scheffé test determined whether there were significant differences in the adjusted means of the MAT reading and math for two comparisons of interest, D vs. RC and D vs. EMR. An alpha level of .05 was adopted to test the significance of the overall F-tests and the Scheffé post-hoc test.

Results and Discussion

Current status. Table 3 presents the comparative frequencies of D and EMR students in the four adjustments: positive, neutral, negative, and unknowns. Two separate analyses were conducted on each district. The frequencies of the positive and neutral adjustments were combined and compared with the negative adjustments. Since the students in the neutral classification have transferred to another district, they may be assumed to be enrolled in that district's program thereby having a positive status. However, a second analysis considered only the positive versus the negative adjustments. The transferred students may not have continued with their education or at least not in the same program as in the former district. In both analyses, students of unknown status were eliminated because of their small ns in most districts.

The results reported in Table 4 comparing the positive-neutral against the negative with chi-square tests of independence revealed a significant educational group by adjustment relationship in district 12 only ($\chi^2 = 5.17$, df = 1, $p < .05$); a significant relationship was found for positive versus negative analyses for districts 4 ($\chi^2 = 6.17$, df = 1, $p < .05$) and 12 ($\chi^2 = 13.16$, df = 1, $p < .01$). An examination of the frequency distributions showed that a greater proportion of Ds were said to have had positive adjustment than EMR students in both districts 4 and 12.

For analysis of ethnic interactions within either the D or EMR group, only the Ds from districts 3 and 4 and the EMRs from district 3, 4, and 12 were considered because they were the only district-group combinations having sufficient numbers of more than one ethnic group. Table 5 presents the comparisons of interest. Only the positive versus negative comparisons of the Ds in district 4 ($\chi^2 = 8.15$, df = 2, $p < .05$) and the EMRs in district 12 ($\chi^2 = 7.64$, df = 2, $p < .05$) showed any significant relationships. In district 4, the Anglo Ds appeared to drop-out in greater proportions than those of the Blacks and Spanish-surname students whereas Anglo and Black EMRs appeared to leave more than the Spanish-surname students in district 12.

The above findings clearly indicate that D students did not have higher rates of droppings-out of school than EMR students. In most districts, the proportions were not significantly different; however, in two districts, EMRs were found to have left in greater proportions. Perhaps unique situational variables to the two districts may have caused the EMR students to leave school in greater proportions. The EMR program may have been perceived as ineffective by the special learner and/or his parents, causing a decision to leave school. However, non-educational explanations such as changes in the labor market, and the economy of the area may have added pressures to move into other regions or jobs which forced these students to leave school without reporting these changes to their former or prospective school district. Finally, EMR students may qualitatively differ from the D student in terms of commitment to an educational program. Nevertheless, these data suggest that D students did not leave school in greater proportions than their non-decertified counterparts; this interpretation is reinforced by the high percentage of D students who remained in their district's regular education program.

7. Metropolitan Achievement Test (MAT). Tables 6 and 7 present the adjusted means and unadjusted standard deviations as well as the F-tests for the one-way analysis of covariance for the MAT total Reading and Math subtest grade equivalent (GE) scores. The GEs of D and RCs attest to the internal validity of the sampling design. We asked teachers to nominate students whom they considered in the bottom half of their class in achievement. Considering that the model student in the sample was in the eighth or ninth grade, the means and standard deviations indicate that low achieving RCs had been selected for the sample. This interpretation is further reinforced by teacher responses to a questionnaire which found that over 75% of the classes were considered low ability on the average with the majority at or below the average of those classes.

In all districts reported in Tables 6 and 7 except district 8--Mathematics, significant differences were found among the three types of students for the adjusted means of the MAT Reading and Math total subtests. The rank order of the means was with one exception, the RC student highest, followed by the D and EMR. Scheffé tests were used to test two pair-wise comparisons, RC versus D and D versus EMR. Although other pair-wise and combinations of comparisons could have been made, the logic of the study focused on the performance of the D relative to his RC counterpart as well as to the non-decertified EMR students who were in special classes at the same time as the D. The results reported in Table 8 show that: a) for the Reading subtest, the RCs scored significantly higher than the Ds in districts 3, 4, 6, 10, and 11 and the Ds were higher than the EMRs in districts 11 and 12 and b) for Math, the RCs were higher than the Ds in districts 3, 4, 6, and 11 with the Ds higher than the EMRs in districts 3, 4, 6, 7, 11, and 12.

The most consistent finding was the almost invariant rank order of the three groups of students in terms of performance on the MAT. RCs were found to have significantly higher scores than the D students in 9 of 18 comparisons. The failure to reject the null hypothesis in the remaining instances may be explained in two ways. The sample sizes in districts 2, 8 and 10 were quite small which reduced the power of the Scheffé test to detect mean differences such as those (about one grade equivalent) for Reading and Math in those districts. The performance of the Ds in district 7 was higher than the RCs in Reading and relatively the same for the Math subtest. This result may be due to the type of student who was selected as the contrast subject in district 7. The placement for decertified students in most districts was the regular class; however, in district 7, a sizeable proportion of Ds (approximately 40%) were placed into educationally handicapped (EH) classes. The EH contrast students are typically referred to special class because they perform at least two grades below what should be their normal chronological age grade placement level. Selection biases may explain the reversal of the rank order in terms of Reading for the RCs and Ds in district 7; the same contention may be argued for the relatively small absolute difference in the Math scores.

As far as the D versus EMR comparison is concerned, differences appeared as frequently as those for the D versus RC. Perhaps the same arguments presented above for nonsignificant findings may be applied here because the mean scores of the Ds on the Reading and Math sections were greater than those for the EMRs in all cases with absolute differences for some nonsignificant comparisons as much as one grade equivalent. In short, the D students on the whole appeared to have higher GEs than the EMRs.

Our main finding of an invariant rank order in the scores of the RC, D, and EMRs raises some important points. The Ds are not a completely distinct group from the RCs. Even though significant differences were found between the D and RC students, the absolute difference between the two groups was typically less than the standard deviation for the RC group in any district-subtest combination, indicating some overlap in

the distributions of the two groups. Some Ds may be doing as well as if not better than many of their regular class counterparts. Furthermore, they scored higher than EMRs who were not decertified. Although the Ds are not achieving at grade level in Reading and Math, some appear to be succeeding when compared with the RCs and EMRs.

It must be noted, however, that Ds were typically found in low achievement reading classes. In response to a questionnaire, 59% of the teachers of the Ds stated that very few students read at grade level for the class with an additional 16% stating that under half of the class read at grade level. Also, as requested, the teacher selected the RCs from students judged to be in the bottom half of the class in achievement. The upshot of the above arguments is that we must temper the conclusion of the Ds success in the regular when we compared the D student with the expected grade level achievement for his class.

Finally, there are Ds who are markedly below the achievement of the RCs. The question must be raised of whether this difference affects the educational programming for those students and more importantly their acceptance by teachers and peers. In other words, are these students obtrusive, are they perceived to constitute a distinct group of students? Questions such as these will be asked of other types of data which will add to our interpretation of the decertification process.

Summary. This BEH-funded project sought to determine the success of students decertified under mandated reassessment in California, according to two measures: a) a common sense definition by which current status of the Ds were compared with the EMRs and b) achievement measured by the Metropolitan Achievement Test. We found that Ds did not leave school or were otherwise unaccounted for more often than the EMRs; in two districts, the EMRs had higher proportions of negative adjustments which was attributed to district specific variables. According to MAT total Reading and Math subtest scores, an invariant rank order of RCs highest, followed by Ds, and EMRs was found in all but one district. It was concluded that Ds did not drop-out of school more often than non-decertified EMR students and that some Ds were succeeding relative to low achieving RC students as well as non-decertified EMR students.

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TABLE 1

BASIC POPULATION DESCRIPTION FOR STATEWIDE SCHOOL DISTRICTS PERTAINING TO DECERTIFIED AND NON-DECERTIFIED STUDENTS

	DISTRICTS											
	2	3	4	5	6	7	8	9	10	11	12	13
Complete EMR Lists for 1969-72 School Year	1234[a]	1123	539	178[b]	241	189	98	160[b]	129	160	473	15
Students Unsuitable for Study	347	301	213	14	88	50	32	2	30	37	141	6
Total EMR Population Subject to Decertification, 1969-72	887[a]	822	326	164[b]	153	139	66	158[b]	99	123	332	9
Decertification by Mandated Assessment, 1969-72	678[a]	424	134	52[b]	70	36	30	41[b]	20	76	146	4
% Anglo	0.0	21.5	18.7	0.0	12.9	8.3	43.3	2.4	40.0	35.5	4.8	50.0
% Black	97.9	26.4	39.6	90.4	0.0	77.8	6.7	90.2	40.0	5.3	6.8	0.0
% Spanish-Surname	1.0	45.0	41.0	5.8	82.9	8.3	43.3	0.0	20.0	57.9	57.5	50.0
% Unknown (other)	1.0	7.0	0.7	3.8	4.3	5.6	6.7	7.3	0.0	1.3	30.9	0.0
% Male	68.1	60.8	56.0	53.8	55.7	55.6	63.3	73.2	65.0	47.4	58.2	100.0
% Female	31.1	39.2	44.0	46.2	44.3	44.4	36.7	26.8	35.0	51.3	41.8	0.0
% Unknown	0.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.3	0.0	0.0

TABLE 1 (Cont.)

	DISTRICTS											
	2	3	4	5	6	7	8	9	10	11	12	13
Chronological Age												
Mean	14.50	15.02	15.79	15.73	14.83	13.83	15.13	14.07	16.00	14.11	15.19	16.25
SD	1.77	1.93	1.87	1.92	2.19	2.07	1.96	1.90	1.52	2.51	2.07	1.70
Not Decertified, 1969-72	209[a]	398	192	112[b]	83	103	36	117[b]	79	47	186	5
% Anglo	1.0	32.4	38.5	0.9	19.3	18.4	55.6	5.1	21.5	44.7	10.2	100.0
% Black	74.6	25.6	43.2	95.5	0.0	47.6	2.8	86.3	55.7	2.1	12.9	0.0
% Spanish-Surname	3.3	33.9	17.2	1.8	73.5	14.6	38.9	0.9	16.5	48.9	40.9	0.0
% Unknown (other)	21.1	8.0	1.0	1.8	7.2	19.4	2.8	7.7	6.4	4.3	36.0	0.0
% Male	57.4	57.8	55.7	55.4	51.8	54.4	50.0	78.6	58.2	51.1	64.0	40.0
% Female	42.6	42.0	44.3	44.6	47.0	44.7	50.0	20.5	41.8	48.9	36.0	60.0
% Unknown	0.0	0.3	0.0	0.0	1.2	1.0	0.0	0.9	0.0	0.0	0.0	0.0
Chronological Age												
Mean	15.17	14.76	15.02	15.60	14.68	14.32	14.67	14.20	14.70	14.28	14.83	12.60
SD	2.15	2.24	2.22	2.00	2.52	2.43	2.56	1.86	2.37	2.25	2.25	1.04

[a]The decertified students in this district were only those who received funded transitional aid; the non-decertified EMRs were randomly selected from the available pool of EMRs from 1969 to 1973 academic years.

[b]Both the decertified and non decertified EMRs in these two districts were randomly selected from the available decertified and EMR students, not from the 1969-73 pools.

TABLE 2

SAMPLE DESCRIPTION FOR STATEWIDE SCHOOL DISTRICTS PERTAINING TO DECERTIFIED, NON-DECERTIFIED EMRs AND REGULAR CONTRAST STUDENTS

	DISTRICTS[a]										
	2	3	4	5	6	7	8	10	11	12	13
Decertified N	15	58	35	40	25	18	8	9	28	38	2
% Anglo	0.00	27.59	5.71	0.00	28.00	11.11	25.00	33.33	28.57	13.15	0.00
% Black	100.00	34.48	48.57	95.00	0.00	77.78	12.50	44.44	14.29	26.31	0.00
% Spanish-Surname	0.0	37.93	45.71	5.00	72.00	11.11	62.50	22.22	57.14	60.52	100.00
% Male	53.33	63.79	48.57	52.50	40.00	66.67	62.50	77.78	42.86	65.79	50.00
% Female	46.67	36.21	51.43	47.50	60.00	33.33	37.50	22.22	57.14	34.21	50.00
EMR N	15	58	35	40	25	18	8	9	28	38	7
% Anglo	0.00	27.59	20.00	2.50	32.00	5.56	37.50	11.11	46.43	15.79	100.00
% Black	100.00	34.48	54.29	95.00	0.00	77.78	12.50	66.67	3.57	18.42	0.00
% Spanish-Surname	0.00	37.93	25.71	2.50	68.00	16.67	50.00	22.22	50.00	65.79	0.00
% Male	46.67	55.17	48.57	50.00	44.00	61.11	62.50	66.67	46.43	65.79	42.86
% Female	53.33	44.83	51.43	50.00	56.00	38.89	37.50	33.33	53.57	34.21	57.14
Regular Class Contrast N	15	58	35	40	25	18	8	9	28	38	2
% Anglo	0.00	27.59	11.43	0.00	28.00	5.56	25.00	33.33	25.00	15.79	0.00
% Black	100.00	34.48	57.14	100.00	0.00	88.89	0.00	55.56	10.71	15.79	0.00
% Spanish-Surname	0.00	37.93	31.43	0.00	72.00	5.56	75.00	11.11	64.29	68.42	100.00
% Male	60.00	63.79	54.29	52.50	40.00	66.67	87.50	77.78	39.29	73.68	50.00
% Female	40.00	36.21	45.71	47.50	60.00	33.33	12.50	22.22	60.71	26.32	50.00

[a]District 9 not included in current study sample.

TABLE 3

Status of Decertified and EMR Students,
Academic Year, 1973-74

District	Adjustment									
	Total		Positive		Neutral		Negative		Unknown	
	D	EMR	D	EMR	D	EMR	D	EMR	D	EMR
3	354	292	190 (53.7)	132 (45.2)	60 (16.9)	81 (27.7)	77 (21.8)	60 (20.5)	27 (7.6)	19 (6.5)
4	134	192	82 (61.2)	75 (39.1)	30 (22.4)	69 (35.9)	16 (11.9)	35 (18.2)	6 (4.5)	13 (6.8)
6	70	83	48 (68.6)	42 (50.6)	17 (24.3)	37 (44.6)	4 (5.7)	2 (2.4)	1 (1.4)	2 (2.4)
7	36	103	29 (80.6)	51 (49.5)	5 (13.9)	48 (46.6)	2 (5.6)	4 (3.9)	0 (0.0)	0 (0.0)
8	30	36	17 (56.7)	19 (52.8)	5 (16.7)	11 (30.6)	4 (13.3)	5 (13.9)	4 (13.3)	1 (2.8)
10	20	79	10 (50.0)	60 (76.0)	4 (20.0)	14 (17.7)	2 (10.0)	3 (3.8)	4 (20.0)	2 (2.5)
11	76	47	54 (71.1)	35 (74.5)	10 (13.2)	10 (21.3)	12 (25.5)	2 (4.3)	0 (0.0)	0 (0.0)
12	146	186	96 (65.8)	65 (35.0)	13 (8.9)	46 (24.7)	27 (18.5)	51 (27.4)	10 (6.9)	24 (12.9)

TABLE 4

X^2 Values of Positive-Neutral vs. Negative Adjustment and Positive vs. Negative Adjustment in Comparing Success of Decertified and EMR Students[a]

District	Comparison	
	Positive-Neutral vs. Negative	Positive vs. Negative
3	0.20	0.30
4	2.68	6.17**
6	1.07	0.38
7	0.18	0.02
8	0.01	0.02
10	1.93	2.30
11	3.83	3.38
12	5.17*	13.16**

Note: All significant differences favored the decertified.

[a]Excluding students of unknown status.

*$p < .05$; $X^2 = 3.84$, df = 1

**$p < .01$; $X^2 = 6.64$, df = 1

TABLE 5

Frequencies and χ^2 Values of the Relationship Between Ethnicity and Adjustment Within the Decertified and EMR Groups in Selected Districts[a]

District-Group	Adjustment					
	Positive-Neutral	Negative	χ^2	Positive	Negative	χ^2
District 3-Decertified						
Anglo N	50	24	3.47	35	24	5.92
Black N	69	19		59	19	
Spanish-Surname N	111	31		95	31	
District 3-EMR						
Anglo N	79	16	1.98	45	16	0.55
Black N	60	20		42	20	
Spanish-Surname N	62	19		44	19	
District 4-Decertified						
Anglo N	8	5	8.15*	18	5	4.13
Black N	42	3		48	3	
Spanish-Surname N	32	8		45	8	
District 4-EMR						
Anglo N	26	15	1.03	53	15	0.76
Black N	35	14		62	14	
Spanish-Surname N	14	5		28	5	
District 12-EMR						
Anglo N	4	9	7.64*	9	9	4.36
Black N	6	8		9	8	
Spanish-Surname N	39	19		39	19	

[a]For Anglo, Black and Spanish-Surname students only; unknown statuses excluded.

*$p < .05$, $\chi^2 = 5.99$, df = 2

TABLE 6

Adjusted Means and Unadjusted Standard Deviations and the Results of the Univariate F-Tests for the Total Reading Grade Equivalents (GEs) for the Decertified (D), Non-decertified EMR (EMR) and Regular Class Match (RC) Students with Program Level as Covariate

Districts	Total Reading GEs							F
	RC			D		EMR		
	N	M	SD	M	SD	M	SD	
2	45	4.059	1.830	3.026	.874	2.413	1.077	7.112**
3	137	3.550	1.230	2.770	.733	2.310	.697	20.700***
4	78	4.790	1.586	3.646	1.283	2.788	1.466	12.666***
6	65	4.586	1.880	2.984	.678	2.642	.743	15.892***
7	48	2.749	.756	2.833	.737	2.157	1.036	3.55*
8	21	4.570	1.190	3.490	.546	2.590	.996	7.69*
10	24	4.549	1.480	3.260	.550	2.268	.943	11.784***
11	66	4.284	1.516	3.253	.939	2.323	.717	19.179***
12	45	3.688	1.310	3.307	1.143	2.112	.618	10.669***
13	6	4.750	.354	2.300	----	2.766	.635	a

[a]F-Test not calculated due to small ns
[b]ANOVA run on District 8 only because subjects were located at one program level.
*p < .05
**p < .01
***p < .001

TABLE 7

Adjusted Means and Unadjusted Standard Deviations and the Results of the Univariate F-Tests for the Total Math Grade Equivalents (GEs) for the Decertified (D), Non-decertified EMR (EMR) and Regular Class Match (RC) Students with Program Level as Covariate

Districts	Total Math GEs							F
	RC			D		EMR		
	N	M	SD	M	SD	M	SD	
2	45	4.153	1.868	3.273	.696	2.333	.609	10.222***
3	137	3.760	1.310	3.070	.981	2.230	.846	24.100***
4	78	4.479	1.618	3.582	.927	2.525	.710	17.023***
6	65	4.578	1.575	3.540	.793	2.406	.810	18.879***
7	48	3.129	.517	2.720	.891	2.002	.977	8.961***
8	21	4.140	.716	3.310	.939	2.860	1.390	2.68
10	24	4.805	2.349	3.582	1.129	2.301	.901	4.530*
11	66	4.418	1.206	3.464	1.273	2.536	.728	15.491***
12	45	3.753	1.563	3.427	.803	2.302	.744	6.950**
13	6	3.700	1.414	1.600	----	2.100	.529	a

[a]F-Test not calculated due to small ns
[b]ANOVA run on District 8 only because subjects were located at one program level
*p < .05
**p < .01
***p < .001

TABLE 8

Summary of Scheffé Test of Selected Pair-wise Comparisons on Adjusted Mean Scores of Regular Class (RC), Decertified (D) and Non-decertified EMR Students for the MAT Reading and Math Subtest Grade Equivalents (GEs)[a]

District	Reading Subtests GEs	Math Subtest GEs
2	----	----
3	RC > D	RC > D; D > EMR
4	RC > D	RC > D; D > EMR
6	RC > D	RC > D; D > EMR
7	----	D > EMR
8	----	----
10	RC > D	----
11	RC > D; D > EMR	RC > D; D > EMR
12	D > EMR	D > EMR
13[b]	----	----

[a]Only the RC vs. D and D vs. EMR pair-wise comparisons were tested. All reported differences are significant at .05 level.

[b]Comparisons not calculated due to small ns

THE IMPACT OF CHANGING SOCIALLY IMPOSED ENVIRONMENTS: ON HOW COURTS DO GOOD FOR THE WRONG REASONS[1]

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[1]Invited address at USC Early Childhood Education Symposium, "The Adaptive Child and Environmental Influences," Margaret Smart, E. D., Chairman, May 28, 29, 1975, University of Southern California. Preparation of this manuscript was supported, in part, by OEG 0-73-5263. The opinions expressed herein do not necessarily reflect the position or policy of any agency and no endorsement of the positions taken should be inferred

News flash: Dateline San Gabriel Valley February 1975

Mother booked for child abandonment. Mrs. Gloria Chicano was charged with leaving two of her seven children at an orphanage with a note requesting they be taken in. She could not get relief or food stamps because some of her children were not born in the United States.

News item: Spring, 1975, Los Angeles City School District threatened with loss of $100,000,000 in federally funded projects in dispute over integration.

This is an address on the nature of some imposed environments and their consequences upon the education and welfare of children. It is meant to share some observations gained in the study of the programming of children, especially exceptional children. This programming has ping ponged at the mercy not of the professionals who are held accountable but at the mercy of persons in courts and state boards and legislative committees who themselves do not have to be held accountable. These experiences have so impressed myself and colleages in our research endeavors over recent years that we have found ourselves attending to the larger sociopolitical and legal forces affecting child welfare rather than to developmental science and instructional method.

Simultaneously I have experienced at home a daily vicarious review of the problems of setting up 200-minute kindergarten programs in a school district with the on-again off-again legislation, and then the same things with the attempt to develop the early childhood program. The principal if not the exlusive place where these problems have occurred has been California, but those who come from elsewhere might keep in mind that

what happens in California education seems to spread like smog to the east, and further that a lot of what happened occurred in federal court, thus tending to be interstate.

A current example might be given. This is in special education but it serves the purpose. My colleagues and I are completing a project which has reviewed the educational success of samples around California of over 11,000 students decertified from their segregated special classes for the educable mentally retarded (EMR) and reassigned to the regular program, with or without transition assistance. Inasmuch as there is a nation-wide passion to "mainstream" most if not all of the handicapped learners, it was of interest to the Bureau of Education of the Handicapped of the U.S. Office of Education to finance us to determine from this event just how these mainstreamed learners fared. The changes in California and elsewhere in the definition of the educable mentally retarded or EMR were occasioned by class action civil rights lawsuits which charged that black and Spanish-surnamed students were labeled wrongfully and were segregated into an inferior education by biased means, this referring to the use of allegedly culturally unfair intelligence tests. I refer to the Diana, the Larry P.vs Wilson Riles, the P.A.R.C. type of case.[1]

These were federal cases, which sought relief from the alleged denial of equal educational opportunity guarenteed under our U.S. Bill of Rights. In each case the federal court produced mandates or agreements to remedy the situation. As a consequence we had large numbers of former EMR students suddenly returned to regular class, without readiness by the school districts. The court declared the children by law to be normal learners; ergo, they should succeed in regular class. So far as the court seemed to care, that

[1]These cases are listed in the references.

was the end of the matter. A civil rights violation had been corrected. Children had been wrongfully labeled. Remove that label, go your way and sin no more. The court was finished, and for all practical purposes was not accountable for the fact that the action was a sledgehammer solution to a complex educational problem based upon, we are certain, an intentionally delimited presentation of issues. Let us take a rather careful look at what happened. We had good reason to ask some questions about whether the courts secure the whole, balanced story. We did ask the lawyers in the Diana and the Larry P. cases, State Department personnel, and a professor of law of the handicapped and we determined that no, the court does not in these cases get a complete picture. Inquiring further, we determined that in English and American jurisprudence, the court maintains an essentially passive posture, delimiting itself to the evidence which plaintiff and defense have elected to present. This is the typical way our courts act. It is our contention that in the case of the massive fall-out which such a mandate provides, the court should have investigated thoroughly so a better mandate could ensue, one not so demanding for sudden adjustment.

First of all, one may inquire why the complaints in Diana, Larry P., Whitlow, PARC and others were not defended. The reason is simple: the defendents themselves had wanted change. For years the California Association of School Psychologists had worked with special education and other groups, lobbying the legislature for a better program for the marginal learners, something better than a choice of segregated class and regular class. They got nowhere. Meantime the civil rights interpretation came into the picture when it was shown that the minority children were seriously overrepresented in the allegedly degrading segregated program. Thus the

matter was taken out of the hands of those who attempted to show the empirical basis for change in special education and became a misleading civil rights matter, which had of course its own right to attention.

So a sort of change in special education was effected not for reasons of the best education for the child but for other reasons. The change was sudden, massive, and inherently abusive to many. Our project was intended to show the lessons which might be learned from this ill prepared-for experience in mainstreaming for use in further mainstreaming efforts. I will not share those results, for the concern here is with how change was made and its effects.

These mandates are instances then of how powerful forces can impact education on grounds often not germane to education itself. A little further exploration of what happened is worth our attention. Certainly we must inquire, why did not the school or institutional officials defend themselves in such lawsuits? They wanted change, but having exhausted themselves in legislative halls and at the ballot box, abandoned themselves to the lawsuits, pleading in effect nolo contendere, as though truly guilty, for the purpose of effecting change. What would have they contended had they wanted, about special class?

First, they would have noted that there were system variables in segregating children, not just IQs and labels. The EMR child had had his two or three years of trial in regular class before referral to a psychologist and the mental test. It was not a question of IQ to start with. Psychologists do not go around to find children with low IQs. It is well known that many slow learning children, never referred by teachers because they are getting along well enough, would if tested get IQs which would

qualify. The state does not word the EMR law to provide that children with low IQs will go to regular class, but rather that (it has always been assumed) a child who is not learning adequately may be placed in EMR provided he has a qualifying IQ.

Third, they would have found that the medical model use of IQ was in fact used by psychologists to keep children out of special class (Ashurst, & Meyers, 1973) as well as to make sure they fit state guidelines in putting them in. It is ironic at this very moment that under the State Board's current response to continued Larry P. litigation, mental tests are banned for EMR placement; the psychologists now complain that they have been denied the best way to prevent railroading (as one put it) the child into EMR by the principal and teacher.

Further, the court could have determined the following. In the absence of alternative provisions for marginally successful students, in the presence of the fact that special educational programs are delimited to the categorial medical-model type of labeled condition, it became necessary to deprive a child of his rights to get him a better education than he was getting in regular class, if putting him into EMR may be said to deprive him of his rights. Thus we charge the passive court could have moved itself to a more complete assessment of the situation.

It is certainly true that the courts if they looked far enough could have secured reports of misuse of tests, of attempts to fill empty EMR desks to get more special education money (note again a built-in evil of that system), of psychologists whose working conditions permitted only testing, never making case studies, of excessive placement of minority students. That kind of abuse was not common. More common was the easy and unscreened referral by a teacher

who had not tried to cope with a slow learner, or who was being given no assistance to do so by the system.

There was available to the court a considerable body of empirical information for a more thorough determination of what changes they should have required of the State Board or State Department. The law appears to remain invicibly ignorant of this information. We know for a matter of fact that the repeated failures to replicate the Rosenthal and Jacobson Pygmalion effect do not appear to be known or to want to be known by the lawyers involved.

Since such overriding decisions made by courts as well as state boards and legislatures are founded upon the current public philosophy rather than empiricism, it is quite possible to expect the decision makers to express major changes of their minds in the years to come as public philosophy should seem to require. Ten years ago it was proper and popular to have armed forces in Viet Nam. Today it is anathema. Ten years in the future will we change our values in child development? It is easy to fantasize a news flash:

> Dateline San Francisco, 1984. Learning disabled children petition federal court for equitable educational opportunity, claiming equal education in mainstream puts them at unfair disadvantage; seek damages against mainstream perpetrators.

Or another, based upon a Portland Oregonian (1975) editorial. This editorial questioned the wisdom of bilingual education, claiming it prolongs disadvantage:

> Dateline San Diego, 1994. Spanish-surnamed students sue U.S. Civil Rights commission for damages, contending that the 1974 rule requiring their parents receive bilingual educatior

caused a perpetuation of their disadvantage in educational and economic competition.

The nonempirical base for court or legislative order for change, made for reasons of current Zeitgeist interpretation of the constitution and law, is thus capable of mischief if seen for its consequences. It happens that today's paper brings a further example. Coleman (Los Angeles Times, 1975) who made the famous Coleman report on equality of educational opportunity told the American Educational Research Association, as noted in today's paper, that the court in racial de-segregation did not effect integration anywhere except perhaps the South, but only caused a white depopulation of to-be-integrated areas. What is distressing is that all these years many good and bad ways of integration had been identified in patient research, and the Supreme Court and other courts could have long ago learned that mere desegregation not only would not automatically bring integration, but might set it back.

Before going on with early childhood education and how it was caught up in Sacramento's labor pains, I have a couple more news items:

> Dateline Sacramento, anytime. Professor charges use of results of mandatory state testing forces teachers to teach to the test; claims teachers instructed to emphasize test content. Also claims mandatory testing puts excessive weight upon cognitive objectives.
>
> Dateline West Los Angeles, 1975. Parents indicted for murder. Alleged to have permitted newborn babe to starve to death. Husband out of work, family denied relief on technicality.

It is interesting that the State has been officially concerned with the statewide assessment of reading, writing, and arithmetic but appears not to be interested in the helpfulness, the character, the wholesome adjustment of our children, nor even of technicalities which would permit people to starve. That one about the baby starving was the second actual news event in the past couple months where tiny bureaucratic impediments keep families from being sustained as families. Could it be that we shall have to go to court orders to effect everything good, even if the courts will do good for the wrong reasons? The forced decertification of EMR students, done by methods using sledgehammers, will in the long run effect the kind of changes which thoughtful professionals had appealed for in vain in Sacramento, but a lot of damage was done in the process To give you a minor example, when the decertified child now in mainstream is given state mandated achievement tests with his regular class age-placement mates, he is very likely to cry, to throw the test across the room, to run out of the building, because he is confronted with an intolerable assault on his self-respect in being given a test which, say, calls for some algebra, while he cannot yet cope with short division.

Early education in California has not yet suffered or enjoyed the same kind of court-ordered hurry-up found in special education. It has its own history of mischievous offs and ons to the distress of many and the impairment of progress and good will toward teachers and schools Did you ever see a mean little boy tease a dog with a piece of goody hich he offers, denies, offers again, denies again, and then perhaps eat it himself or destroys it?

Sincere program developers have had that kind of experience. Whether planned or not, the route to effecting a program for early childhood has

been frustrating. We started about eight years ago with what was called the extended or the 200 minute kindergarten. The legislature wisely decided it better to prevent learning handicaps in the earlier years than to correct them later. An appropriate route would be to change the kindergarten staffing pattern from two groups per teacher, a morning and an afternoon, each having only a short period to a single, longer session per teacher. The remainder of the teacher's time was to be given over to individual study, home visits, identification and correction of readiness problems. The legislation provided for (those from outside California, note this) not support money for changing over to the more costly new model of kindergarten, but for a penalty if it were not done.

The districts invested heavily in appropriate reorganization, often putting a person half time for a year getting ready and employing more teachers, because the number would double. It was obvious that there should be planned utilization of that portion of the teacher's time not given to the group as a whole. Late in the season, after plans had been made and new teachers were found, the governor vetoed the bill. The acquisition of new teachers, load allocation, the involvement of specialists to instruct teachers in identification of problems, seemed to be for a lost cause, except in those districts financially able to sustain the costs. A year later the governor did sign a similar bill and the program went into effect pretty much around the state. It anticipated the more sweeping and current Early Childhood Education legislation.

The implementation of current ECE legislation leaves something to be desired, from the standpoint of issues we have been raising here. The legislation provided on its face for the lowering of the school age to

four years. It provided for districts to set forth their plans and policies on a school-by-school basis. This was a step forward, for instead of local district office consultants writing a general program for a heterogenous district, here the local neighborhood would be invited to present its own. And there would be gradual evolution not revolutionary panic.

Notice the wisdom in the law's specification that the State Board of Education is not to approve a plan unless it was developed with active cooperation of parents, community, and teachers in all its stages of planning and implementation. Further, the law provided that no district could initiate classes for the prekindergarten year (the four-year-olds) unless it had demonstrated that it had successfully restructured and used the program for kindergarten through third grade. This could have been an excellent carrot-and-stick means of improving the existing program at the very least. The law further implied promises of great things with the use of such words as allowing the Board to take all actions necessary to reach objectives, making provision for special needs, group care, preschool, children's centers, social services, fully meeting the unique needs, talents, interests and abilities of each child, and other designed-in-paradise promises or implications.

One brave sentence in the law states: "The objectives of this plan will include assurance that each child will have an individualized program to permit the development of his maximum potential and that all pupils who have completed the third grade . . . will have achieved a level of competence in the basic skills. . . (lines 24-29, California SB 1302, page 5). The carrots included extra allotment from the state per pupil attendance for employment of aides, purchase of enrichment materials, and administrative costs.

It was presumably the finest hour in the history of California school code enactment. A whole parcel of ideal changes could be progressively developed, with intensive community-parent-teacher communication and involvement. The stage was set for a high attainment of mutuality

The districts pushed forward. They identified community councils and parent representatives, they got lots of evening hour meetings of these people with the involved teachers. The planning had its ups and downs Many parents put forth phonics as a "behavioral objective" but lots of teachers discovered they had no monopoly of professional wisdom. Some teachers who fought the change became ardent supporters of it.

The program was to start modestly, then phase into the entire district in not more than five years. You know what happened. The excellent early start, 1972-73 school year, was followed by gradual bringing in of other school units and their neighborhoods, and the work went forward in good faith. But it is time for another news flash:

> Dateline Sacramento, May 1975. State Director of Finance says money for extension of ECE program not likely to be made available.

I wonder what kinds of feelings they expect all those involved parents and community council workers to have, not to mention the teachers and others who gave so much of their emotion and time

One supposes that some lessons can be learned from this kind of experience. One is tempted only to be cynical and point out again how power corrupts. Those who make the watershed decisions much too frequently have the particular arrogance that goes with not being accountable for the consequences. Bettye M. Caldwell (1975) is particularly emphatic about this.

Addressing not practical educators but her developmental psychology colleagues in the Division of Developmental Psychology of the American Psychological Association, she tells how fate had put her in a position of being a school principal as well as project director, and confesses to having made collossal mistakes and misjudgments in applying psychological theories such as token economies in the real world. Her account in the Division newsletter is worth a TV show or a movie. She sums it up to her theoretical and experimental child psychology colleagues with some emp atic preachment worth quoting: "The schools do not need any raw theoretical olutions to their problems; only battle-tested products can hope for acceptance and adoption. Until an idea reaches that stage, the develo ers themselves should be working right now in the schools to learn some important facts about how their idea will be received and what problems a s likely to be encountered in the implementation. The last thing we need now is more critics of education who have not spent a significant amount of time in the schools working with children and teachers; not do we need critics who have spent their time in the schools only in observation and consultation" (Caldwell 1975, p. 52).

What she begs for, in California terms if you will, is that we be permitted to identify our goals, and then put into action a planned program with plenty of try-out time and a progressive expansion guaranteed to occur rather than dependent upon the flip-flop of Sacramental priorities. We need to have legislators and boards who will not sit around till forced by court order to behave themselves The court, we saw, is not expert outside its own field and does not intend to become so. We look for better ways.

But I wonder whether we have not as an adult society chosen to let others do our thinking for us, or whether we have a real commitment to the rearing of children and to their welfare and eduction--enough not to let people starve, for example and invite others to go to crime. Perhaps we are utterly insecure in adult values so that we want others to set the educational paces for our children. And perhaps it is wise to take a look at another culture or two, not to copy, but perhaps to borrow some perspective. As a matter of fact, many have insisted that we have, compared with other cultures, shrunk away from first line responsibility for children. Bronfenbrenner tells of the cab driver who bragged about this being his second job, so that he could earn money to buy his children some game equipment. Bronfenbrenner wondered whether the cabby's children would not more enjoy their father at home on week-ends.

He and others believe we have indeed asked others to do our job for us. Figure 1 relects the thinking and opinion also of Coleman, Hollingshead, and many others. It is my own figure to demonstrate the American system in contrast with some other places which they have made. Consider a birth cohort. The children born in 1970 are in the fifth year of their life and in fall (which is to say, in simple annual terms, next year) they will be in kindergarten The 1970 cohort will march through the age levels and the grades together, a completely horizontal banding in the social structure in school, with social promotion and age-grade placement being the agents by which age cohorts are kept together. With few exceptions such as the accelerates and problem learners and early school leavers, that is how we do it. Those who graduate or leave early typically have no role in the adult society yet except more school, for the labor union

The cohort born this year:	Graduates 17 years later:
1975	1992
1974	1991
1973	1990
1972	1989
1971	1988
1970	1987
1969	1986
1968	1985
1967	1984
1966	1983
1965	1982
1964	1981
1963	1980

The 1975 cohort will be in this grade:	This year:
kindergarten	1980
first	1981
second	1982
third	1983
fourth	1984
fifth	1985
sixth	1986
seventh	1987
eighth	1988
ninth	1989
tenth	1990
eleventh	1991
twelfth	1992

Figure 1. The cohorts go marching on, horizontally arranged. Or, How to guarantee peer attachments and discourage vertical ones.

and insurance policies will tend to exclude them. There is of course an ethnic complication in this effect.

Now add something. The typical program provides for a single teacher a year, sometimes two in a year. What manner of attachments of child to adult leaders can form here? We contrast this with the situation of the old country school where several of the grades come into the same one or two rooms and the children are provided a continuity of teachers across years. Such guarantees fewer agonies of finding each other out as persons. It has been argued that if the teacher is good, this is a good system but that it is not if the teacher is not good. But if one places a high priority upon good emotional attachments with adult leaders, then all children are better served by the continuity. The American system, then, conspires to force an age-peer loyalty on our children through its cohort promotions while denying continuity of the adult attachments with teachers. And as Bronfenbrenner (1970) brings out, the great increase in working mothers, producing many more latchkey children, has recently accentuated the effect. The peer (and the TV) become surrogate authorities. I much prefer Boy Scouts and Little League organizations in which adult values to some extent are transmitted through the association of parent and child.

We may contrast the situation with German, English, and other cultures. We find them doing more mixing across age levels and we find continuity in teaching personnel, the British in particular being avowedly serious about teacher-child interaction and attachment formation. The advantages of such attachments are known to you, apart from being emotionally good for both teacher and student. (a) The need for peer attachment is reduced somewhat in having adult attachments. (b) As the child identifies with the adult, he more readily accepts the adult's cognitive and moral

values. And finally, so the child does not need to re-establish a working emotional security with the new power figure every new school year, but can go about his cognitive business.

We found in Germany another side to this, where one ten month stay and a later shorter one provided a basis for this observation. It may be true in Britain but we did not stay there long enough to tell, and it may be true in lots of places. This feature is that, during the school day, to see a youth out in the street is so strange as to invoke wonder. Now the Germans do not try to make their secondary school a baby sitter with extra and specious holding power. Formal education for half or more of the youth will terminate at around age 13 to 15, after completing 8th or 9th class. But one finds that many steps are taken to induct the teenager into adult life -- pubic rites in the industrial society, one might say -- through governmental and school responsibility till maturity is reached. The youth if he leaves school goes to a trade school, or is apprenticed, or takes a trainee job in the Volkswagenwerke under school supervision. There is no vacuum of responsibility by the society. It is an extension and expansion of the ancient apprenticeship, in which the adult not only provides training but exercises a responsibility for the physical and moral development of the youth. Thus we have verticalization in contract with our extended horizontal method.

This verticalization is evident in some festival scenes taken in Germany, mostly in the school year 1966-1967. What fascinated us in the Oktoberfest in 1966 in Munich, and later in the Fasching season in two other cities, was the involvement of all ages and both sexes in the parades and other festivities. We found this in striking contrast with our Pasadena Rose Parade and other similar rituals which feature almost exclusively the lovely young female with her air-brushed centerfold flesh. Just last week a writer for

the Portland Oregonian (1975), anticipating Portland's imminent Rose Festival, wondered when we males would secure equal opportunity for hairy legs and pot bellies to be on display.

Observe a few slides, of the Oktoberfest and then of Fasching, not taken for this purpose, but happening to catch the family in action, young, old, hairy legged, single, and one presumes the gay as well as the straight. (Slides were shown.) Often the conditions were less than ideal--we had to record the events regardless of the weather. You can see all ages involved, like the dancing after a Greek or Filipino wedding.

Travel can be broadening, even if done only by reading and looking at pictures. Among cultures having some basis of comparability with our own in terms of industrial wealth is the Soviet Union. The Soviets have placed a far higher priority upon the rearing and the education of children than we. This is true not only in terms of allocation of recources but, according to Bronfenbrenner and other observers, in terms of the total emphasis given child rearing and schooling, the planned use of leisure time which becomes acculturational rather than strictly leisure. They overdo it, from the standpoint of the value systems most of us have, in that they make the family and the teacher the agent of the imposed national philosophy. What I emphasize is the priority given to the achievement of acceptable goals like helpfulness in group activity, responsibility for one's peer, aiding the little brother and sister.

In 1961 I was profoundly affected by a beautiful color film produced by a soviet teacher group on education in the USSR. Besides the many views of classrooms and playgrounds, the film illustrated some of the means by which objectives were reached. The first contrast with our education which forcibly

struck the viewer was the high priority given to what in the US we call affective objectives -- the cognitive were not deemphasized but the affective -- that is, behaving one's self and being helpful -- were not taken for granted but planned for. The second was that these affective objectives, stated or implicit, were group goals, of course not group-determined, but determined for the group from on high -- being courteous, conforming, helpful to little ones and grown-ups, not letting down your peers. The third and most striking contrast -- though through reading I should have known better--was the unabashed, openly avowed utilization of any form of interpersonal pressure or influence (not harsh punishment but hard use of friendship and loyalty) to help any deviant back into the main channel, a frank, an open use of any positive psychological pressure. The film showed how the school pressured parents for conformity, how teachers made conformity a feature of any classroom day, but most significantly, how the total "collective" or peer group was made to feel a loss if any one member failed to give his best. Accomplishment of the collective's high competitive level with other collectives (never competition between peers as such) was achieved in part by the commonly used peer tutoring in spare time. Apart from questions about the source of such objectives, and apart from the totality of involvement with group goals, we marvel at the high priority given to achievement of humanity and helpfulness in children.

A further feature which makes a sharp contrast with America on the rearing and the education of children is the extent to which the adult-oriented influence pervades non-school time as well as the school. The soviet method illustrated in the film showed that, in the so-called summer vacation from school, every possible child (the scenes showed hundreds at a time on hikes)

were taken to youth camps of one kind or another. Bronfenbrenner's (1970) recent classic, Two Words of Childhood, has richly illustrated the points made here. He describes how some group responsibility is found for nearly every age of child, nearly all hours except those few at home during mealtimes. There are few latchkey children, and there are few conditions which could permit a peer society to form on its own terms as a counter culture. These slides made from colored pictures in an edition of Bronfenbrenner's book (slides shown here) illustrate posters of the Pioneers, a sort of Boy Scout organization. Each poster attends to a Pioneer virtue. One would quarrel with none of them except the last:

(1) Likes to work and takes care of public property.

(2) Respects those who gave their lives for the mother-land (shows a patriotic march).

(3) Loves and protects nature and the environment.

(4) Health, body building.

(5) Is a good example to all children.

(6) Courage in helping others.

(7) Helps little ones and grown ups (shows helping a younger child with lessons).

(8) Studies diligently.

(9) Is a friend to the children of all nations (shows youthful faces of a Black, Oriental, and Caucasion).

(10) Tells on his friend for spoiling state property (shows one indicating another who has just carved into his desk.

This presentation was not designed to sell the soviet objectives but rather to demonstrate how a modern industrialized society committed to material gain has demonstrated a serious sense of responsibility for the character growth of its young people by asserting confident adult principles into youthful organization.

In contrast, one wonders whether we mistrust our own principles and are reluctant to propagate them, or whether we have a naive trust in the immanence of goodness in our children so that we do not need to concern ourselves with it. Some speculate that our preoccupation with separating church and state has apparently mandated separation of moral--ethical principles and state

Some educators have returned from invited visits to the schools of Maoist China. They report many likenesses to the Soviet emphasis upon morality and culture. I have tried to read all the available reports, including Caldwell's and Kessen's. I had not noted that the said anything about an enforced system of between-group competition, soviet style, but otherwise they report the same degree of peer pressure for conformity, at least to the extent that nobody boasts about how good he has been, everybody helps others including the doing of some peer teaching, and everybody seems happy. I quote from Kessen:

> . . . children are to be educated 'morally, intellectually, and physically'; they must 'be organized to take part in the class struggle and the struggle for scientific research' (Kessen, 1974, p. 43).

Here and other statements is the emphasis upon morality first, but also upon joining the state in its purposes. I personally do not care to buy the state purposes, but they have demonstrated, as have other countries, that they can make character education work. To quote further from Kessen:

> . . . we were even more impressed by the apparent absence of disruptive, hyperactive, and noisy children. . . The docility did not seem to us to be the docility of surrender and apathy; the Chinese children we saw were socially gracious and adept. . .

They were emotionally expressive and full of fun in their games, and they typically showed rapt attention to their work

I have read at least five such accounts of these visits to Maoist schools, one by Bettye Caldwell, who would be as difficult to fool as Kessen, and all noted the excellent morale of the children. This culture, then, like others, has shown the consequences of a first rate commitment in national priorities to the growth of the children To put it another way, they believe enough in their system to take some steps guaranteed to produce loyalty to the beliefs.

What is the lesson of all this? I really don't have a confident message, or even a conclusion. I am going to leave it all hanging in mid-air and instead show you some more slides of children and families, these taken in Guatemala this past Easter season.

But perhaps we can start a club which will lead to a movement. How would you like to be charter members? You would first have to swear by Margaret Smart and Bettye Caldwell eternal love and devotion to children, to a confidence that we can help children especially by love but also socialization, that we shall not fear character education just because so many have, that we shall reconstitute some virtues like responsibility and helpfulness; particularly that we shall let Sacramento know and also the State Board and some judges just what are the increasingly serious educational facts of life, but chiefly that we shall be firm in our own resolution and shall model best behavior; we shall provide a change in American priorities; urther we take the posture that being with children as their friends is just as much fun as being with our own age peers, and that we have attachments and loyalties and helpfulness and all good things like that.

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How District Personnel Evaluated California's Transition Program[1]

Eddie H. Williams[2], Donald L. MacMillan[3], Roland K. Yoshida[2], and C. Edward Meyers[2]

During 1969 California changed the guidelines for admission to special classes for the educable mentally retarded and mandated a reassessment of EMR placements. These major changes in EMR identification and placement were brought about as a direct result of litigation and legislation regarding evaluation, re-evaluation, and placement of pupils under new criteria specified in the California Education Code (Chapters 43 and 69 of the 1970 Statutes). Under these changes over 11,000 California pupils were reclassified from EMR status and returned to regular educational programs.

The new guidelines were expressed in psychometric terms: lowered maximum IQ, mandated utilization of nonverbal IQs, and testing in the better language in the case of bilingual children. The decertification and return to regular class and regular programs was done in terms of how a child was to be identified for EMR certification rather than on his educational need (Meyers, MacMillan, & Yoshida, 1974). The programs which developed for well over 10,000 decertified EMR students were commonly called "transition programs." Districts could receive supplemental

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support funds under transition legislation but were given wide options for specifics of program implementation.

During 1971 the Division of Special Education and the Division of Instruction of the California State Department of Education suggested six innovative and exemplary models of transition programs: 1) resource learning center, 2) consulting teacher, 3) ancillary teacher assistant, 4) inservice training programs, 5) pupil personnel consultants, 6) bi-lingual consultants. All of these models could be funded under the California Education Code (Keogh, Levitt, Robson, & Chan, 1974).

In a study sponsored by the State Department of Education, Britton (1972) found five different models utilized in the six districts studied. These were: 1) transition class, 2) individual tutorial, 3) itinerant teacher, 4) learning disability group, 5) resource learning center. These findings suggest that a variety of models for reintegrating previously EMR labeled pupils have been implemented in school districts. While for the most part transitional models have not been systematically monitored, Britton's study did indicate a general positive evaluation by pupils, teachers, and parents, but his sample of districts may be considered intentionally "biased" because he sought out those rumored to be effective.

Efficacy studies of transition programs have been difficult to conduct because of the dearth of systematic data. However, study of the models employed to achieve reintegration may lead to a better perspective in establishing a viable model for mainstreaming mildly handicapped children in general--a trend under the California Master Plan as well as similar plans in most states.

The focus of this particular study, which is a component of the U.S.O.E. project studying EMR decertification, was to determine the kinds

of models which evolved out of the entire "transition" period. Since placement procedures were based on the single psychometric criterion rather than educational assessment, it might be assumed that the models which proved successful for this large group may also hold promise as a means of "mainstreaming" other students with mild learning impairments.

This particular component of the research project was concerned with gathering descriptive data on the transition models employed in six southern California school districts. An earlier study by Keogh, Levitt, Robson, and Chan (1974) had focused on delineation of the kinds of programmatic modifications developed by districts to provide supplemental services, the procedures and methods used to identify and review pupils for eligibility for programs, the kinds of staff development utilized, the techniques of evaluation of program effectiveness, and the recommendations and suggestions of district personnel as to ways to improve services for pupils in transition status. Their study was based on interviews with administrators responsible for identification of pupils and "transition" programs in their districts.

The present study utilized six school districts (those in southern California from the larger sample in the decertification study) and was based on interviews with district personnel directly involved with day-to-day instruction with the transition program. Personnel interviewed were not administrators nor were they directly responsible for identification and/or placement of students.

The main objectives of the study were to determine:

a) The types of mainstreaming programs in operation before the transition program,

b) Individual district's concept of integration and/or mainstreaming before the transition program,

c) The types of mainstreaming models utilized,

d) Instructional and behavioral procedures utilized within the models,

e) The criterion measures for success in the mainstreaming programs,

f) The effect of the transition program on the regular classroom.

It was assumed that all school districts funded for transitional programs employed some type of instructional model in order to facilitate the transfer from special class placement to the regular class. Data were obtained relative to the design of the model, physical arrangements, staffing patterns, curriculum and accountability, social adjustment, and criterion for success in the regular program.

Interviews were conducted with personnel responsible for the transition programs in six school districts from a sample of eleven districts representative of the state in ethnicity, size, and geographical distribution. The larger sample is described in both previous project reports (Meyers, MacMillan, & Yoshida, 1974). Personnel selected for the interviews were those persons most closely involved with the transition students, i.e., transition teacher or coordinator of the transition program.

Procedures

In order to provide descriptive data from a sample of models developed for transition programs in school districts, a comprehensive interview instrument was developed. Interviews were conducted with district personnel directly involved with the instructional program for the transition program for the period 1969-74. Findings in this report are confined to data from the interviews in the six districts.

Six districts were selected from the original sample of eleven which comprised the sample for the large EMR Decertification study of Meyers, MacMillan, and Yoshida. The larger sample had been chosen on the basis of district size, community SES, school district organization, and ethnicity of the school population. The districts ranged in size (ADA) from 5,200 to 32,000. There were two large, three medium, and one small district in the sample. Interview respondents held a variety of titles; however each performed essentially the same function in that they were directly responsible for the instructional program for the transitional pupils. The respondents were in either teaching or coordinating roles. No district refused to cooperate.

The interviews were conducted in April and May, 1974, by the Investigator in the project. Each interview lasted approximately two hours and covered details of the transition model employed by the district. The interviews were conducted according to a preconstructed interview instrument (Appendix A). Interviews required short, factual answers and/or choices; however the procedure encouraged additional elaboration on most items. "Open-ended" items were included particularly in reference to actual model descriptions. The respondents were given an instrument to follow during the interview and were allowed to read the copy completed by the investigator.

Results

Interviews conducted with district personnel directly responsible for the instructional program for transitional EMR students covered these major topics: district's philosophy on mainstreaming, transition models employed, model descriptions, procedures advocated by special and regular teachers, effect of transition on regular class teachers and students. Each district had offered district-wide transition programs for the

transferred students. Specifics relating to the method of transition varied by district. Questions and a summary of responses are found in Appendix B.

District's philosophy on mainstreaming. Self-contained classroom for EMR students had been the common practice in the districts interviewed. In all cases the self-contained room was viewed as "home-base"; however in the two districts reporting a partially-integrated plan, students were integrated into classes in remedial reading and math. Students with borderline IQs and some in the high EMR range were sometimes maintained in regular classes through individual tutoring by the regular classroom teacher, special federally funded reading and math teachers, and other resource specialists. When transition programs were started, mainstreaming was accomplished in five districts. One district placed all transition EMR students in EH classes which were basically self-contained with some partial-integration. The general finding indicates that districts moved from the self-contained model when students were reclassified and no longer eligible for special EMR placement and that in most cases the transition program was not physically removed from the mainstream of regular education.

Transition models employed. Five of the districts interviewed used the regular classroom as "home-base" for transition students. Supplemental services were provided in order to support the student in making the adjustment to the regular program. This supplementary education usually involved instruction and counseling. Three of the districts used para-professional tutors, under the supervision of credentialed personnel, to provide both instruction and counseling. Two districts utilized special education teachers who served as resource teachers to both the regular

classroom teacher and the transition student. One district used educationally handicapped (EH) classroom placement and therefore did not offer an original model. Generally, the regular classroom was used as the primary base of operation for transition students. Additional support personnel was used to aid the regular classroom teacher and to provide direct services to transition students.

Model descriptions. The findings indicate that in most cases the transition models were originated by the school district and generally incorporated a mainstreaming philosophy. Tutoring in regular class subjects, individual counseling, and remediation of basic skills were components of all the models. Districts with large bilingual populations also included instruction and counseling by bilingual paraprofessionals.

Staffing patterns varied greatly from district to district. The four districts using paraprofessionals assigned each tutor from 7 to 12 students. In these four districts one teacher-supervisor was responsible for the over-all instructional program. The one district using resource teachers assigned five teachers to 135 students and services were provided to the regular classroom teachers involved. Transition personnel varied widely in training and background, ranging from special education (EMR) credentialed teachers to untrained persons from the community who were employed as paraprofessionals. Personnel employed in the transition programs performed a variety of roles including those of itinerant teacher, resource teacher, teacher's aide and tutor. Most of these instructional roles performed by transition personnel resulted in one-to-one tutorial situations.

Responsibility for the curriculum and achievement accountability of transitional EMR students was found to be that of the regular classroom teacher in four of the districts. It was the responsibility of the

paraprofessional tutor in one district and obviously the responsibility of the EH teacher in the case where students were placed in those classes.

Student behavior was seen as the responsibility of the regular classroom teacher in four districts. One district gave this responsibility to the teacher-supervisor, the tutor, and the regular classroom teacher in combination. The EH teacher was responsible for student behavior in the case where students were placed there. The behavioral management system most often employed was behavior modification with either individual student contracts or contingency management. One district utilized affective techniques and adjustment of medication as necessary and one district used only the regular school counseling processes.

Provisions for social adjustment were seen as a function of the regular school counseling program in four districts. One district using paraprofessional tutors depended upon the counseling done by the tutors for social adjustment programs. The district utilizing EH placement relied on minimum day, counseling, and partial integration. Students who were not able to function in the transition program were returned to EMR, placed in EH, placed in Learning Disability Groups, or sent to continuation high school in five of the districts. The district utilizing the EH placement sent transition students to private schools if they could not function in the program. Other than behavior and social adjustment, the criterion measure for success in the program was passing grades in regular classes in four districts, the Wide Range Achievement Test in one district, and individual behavioral objectives in one district.

All six districts utilized a work-study program and vocational rehabilitation counselors for the major part of the vocational education program.

Procedures advocated by teachers. Regular classroom teachers who had transition students in their classes were reported to have advocated special procedures in five of the districts. These were generally basic remediation skills in reading and math, bilingual programs, experience and language approaches to teaching reading. The most commonly reported were programmed remediation procedures in reading and math. Special education teachers had suggested special procedures such as diagnostic inventories, developmental curriculum, individual learning plans, basic academic skill development, special remediation in reading and arithmetic, bilingual programs, structured classrooms, behavior modification, individual student contracts, and programmed reading materials.

Effect of transition students on regular classroom. None of the districts reported any changes in achievement scores of regular classes since the transition program began. There were, however, some changes in the social climate of the classes. Four districts reported changes in the social climate of the regular class--three were positive and one was negative. Those that were positive reported more one-to-one counseling, more positive interactions between students and adults, and a general incidental effect from having bilingual tutors in the classroom who interacted with non-transition students. One district reported some negative effects in social climate generally but no specific examples were noted. In questioning 252 regular teachers who had transitional EMR students in their classes, Meyers, MacMillan, and Yoshida (1974) found evidence of a positive social climate in the regular classroom in that 66% of the teachers reported that the EMR transition student's social adjustment was average or above. Disciplinary problems were not reported in any greater frequency for the EMR transition students than for other students.

In terms of regular classroom teachers' allocation of time for individual instruction, preparation of materials, in-service education, etc., there were no changes reported in the six districts interviewed. That is, there were no reports of teachers making significant changes in their allocation of time. In the teacher questionnaire Meyers et al. found that almost 60% of the teachers reported that having these students in class had had no impact upon their instruction for the remainder of the class. The 29% who reported that having the EMR transition students in class had affected their instruction indicated that this had occurred for one or more of the following reasons:

(1) Extra assistance had to be provided,

(2) Special instruction took more time and energy,

(3) Class disruption through the student's behavior,

(4) Other students picked on the EMR transition student,

(5) Materials had to be prepared especially for the transition student,

(6) More time was required to work with aide, tutor, volunteers.

The integration of transition EMR students was reported to have had some effect on the regular classroom teacher. During the interviews, five districts reported that there had been more:

(1) Referrals for special instruction,

(2) Referrals for disciplinary reasons,

(3) Requests for remedial materials and/or other assistance,

(4) Concern about accountability

(5) Concern about adequate time for planning,

(6) Concern about adequate time for individualized instruction,

(7) Concern about adequate time for instruction for total class,

(8) General negative comments about having EMR transition student in class.

However, when regular classroom teachers were questioned (Meyers et al.) a majority indicated that having the EMR transition student in class did not have an impact upon instruction for the remainder of the class. Only 29% reported that it did. Also, 70% of the regular teachers questioned reported that they had made no referrals for disciplinary problems involving transition students. The 30% making referrals and reacting to the effect of the EMR transition students in class may have accounted for the types of referrals and concerns indicated in the interviews.

In summary, the transition program had generally neutral or positive effects on the social climate of the regular classroom. The social adjustment of EMR transition students was average compared to other students. The integration of EMR transition students into regular classes did not change the teachers' allocation of time nor did it have a significant impact upon their instruction for the total class.

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INTERVIEW GUIDE PERTAINING TO INSTRUCTIONAL MODELS UTILIZED

DURING THE TRANSITION OF DECERTIFIED EMR'S TO REGULAR CLASSES

1. Name of Interviewer _____

2. Name of School District _____

3. Title of person(s) being interviewed _____

_____

4. ADA Information

Total ADA _____

EMR ADA _____

Transition ADA _____

5. Number of Special Classes in District

EMR _____

EH _____

Transition _____

Other Learning Handicapped _____

6. Before the Transition Program was started in the Distirct,

Were EMR students in: Self-Contained _____ classrooms.

Integrated _____

Partially Integrated _____

If partially integrated, what classes _____

_____

7. Before the decertification movement (1969) and the Transition Program, what was the District's general policy or philosophy concerning high EMR and Borderline students?

Special classes for intensive special ed. and remedial work _____

Regular classes with special assistance and instruction provided _____

8. Would you describe the EMR program before Decertification and Transition as generally

self-contained and operating as a unit _____

integrated into the mainstream of the school _____

other _____

9. Before the Decertification and Transition Program, were any special provisions made for maintaining EMR students in regular classes? _____

If yes, what were the procedures:

Individual tutoring _____

Special instructional materials _____

Itinerant personnel _____

Resource teachers/or rooms _____

Paraprofessional aids _____

Peer tutoring _____

Other _____

10. When the District established the Transition Program what types of programs were approved?

self-contained special classes _____

individual tutoring (cert. staff) _____

individual tutoring (vol. staff) _____

paraprofessional aids _____

peer tutoring _____

itinerant teacher (resource teacher) _____

resource room _____

crisis intervention team _____

specialized techniques, prescriptive teaching, behavior modification, precision teacher, etc. (utilized by regular teacher) _____

partial integration (special ed. teacher responsible for achievement) _____

other _____

11. Give a description of the types of programs employed during the Transition Period.

12. What kinds of programs were tried during the Transition Period and have now been discarded due to lack of efficacy or difficulty in implementation.

13. What kinds of programs are still being utilized in the transition program?

14. Did the District or School design an original model _____

or replicate and/or modify a demonstration model _____

If original model, describe:

If replication, identify:

15. Descriptive information on the Model employed:

original _____ replication _____

Title: _____

Physical Arrangements: _____

Staffing Arrangements: (Ratios) _____

_____

Who is responsible for the curriculum? _____

Who is responsible for accountability? _____

Who is responsible for student behavior? _____

What behavioral management system is employed _____

_____

What provisions are made for social adjustment? _____

_____

What provisions are made for vocational education? _____

_____

What is the criterion measure(s) for success in the program? _____

_____

What provisions are made for students who can not function in the Transition Program? _____

_____

16. Have special education teachers advocated a special set of procedures for use in the Transition Program? _____

If so, generally what methods are suggested?

17. Have regular classroom teachers (with transition students) advocated the use of a special set of procedures _____

If so, generally what methods are suggested?

18. Has the integration of decertified EMR students into regular classes had any discernible effect on the regular classroom teahcer? _____

referrals for psychological testing _____

referrals for special instruction _____

referrals for disciplinary reasons _____

counseling referrals _____

requests for remedial materials and/or other assistance _____

requests for more materials in general _____

concern about accountability _____

concern about adequate planning time _____

concern about adequate time for individualization of instruction _____

concern about adequate time for instruction of total class _____

general negative comments about having transition students in class _____

general positive comments about having transition students in class _____

other _____

19. Have achievement scores for regular classes changed significantly since transitional students were integrated into the mainstream?

positive _____ negative _____ none _____

20. Has the integration of transitional students into regular classes caused any discernible differences in the social climate of the classes?

positive _____ negative _____ none _____

21. Do regular classroom teachers report any changes in their allocation of time for individual instruction, preparation of materials, in-service education, etc. since the integration of transitional students? _____

If so, describe.

Tables on the Interview Instrument

Question		Frequency
Before the transition program was started in the district, were EMR students in:		
	self-contained classrooms	4
	integrated	
	partially integrated*	2
*If partially integrated, what classes		
	Basic remedial subjects	2
Before the decertification movement (1969) and the transition program, what was the district's general policy or philosophy concerning high EMR and Borderline students?		
	Special classes for intensive special education and remedial work	6
	Regular classes with special assistance and instruction provided	
Would you describe the EMR program before Decertification and Transition as generally		
	self-contained and operating as a unit	6
	integrated into the mainstream of the school	
Before the decertification and transition program, were any special provisions made for maintaining EMR students in regular classes?		
	YES*	4
	NO	2
*What were the procedures		
	Individual tutoring	2
	Itinerant personnel	1
	Resource teachers	1

When the district established the transition program, what types of programs were approved?

Resource teachers	2
Paraprofessional tutors	3
EH class placement	1

Give a description of the types of programs employed during the transition period

Mainstreamed, resource teachers, tutoring, counseling, basic subjects	2
Mainstreamed, paraprofessionals, tutoring, counseling, basic subjects	3
EH resource room, partially integrated, remedial procedures	1

What kinds of programs were tried during the transition period and have now been discarded due to lack of efficacy or difficulty in implementation? 0

Did the district design an original model or replicate and/or modify a demonstration model?

Original model	6

DESCRIPTION OF THE MODEL EMPLOYED

What were the physical arrangements?

Regular class placement	5
Special class placement	1

Individual Instruction	2
Small group Instruction	4

What were the staffing arrangements?

1 teacher/12 students	1
5 teachers/135 students	1
1 tutor/8 students	1
5 tutors, 1 teacher supervisor/ 60 students	1
9 tutors/64 students	1
7 tutors, 1 teacher supervisor/ 80 students	1

Who is responsible for the curriculum?		
	Regular classroom teacher	4
	Special classroom teacher	1
	Tutor (paraprofessional)	1
Who is responsible for accountability?		
	Regular classroom teacher	4
	Special classroom teacher	1
	Tutor (paraprofessional)	1
Who is responsible for student behavior?		
	Regular classroom teacher	4
	Special classroom teacher	1
	Tutor, Teacher-supervisor, and regular classroom teacher	1
What behavioral management system is employed?		
	Behavior modification, individual student contracts	3
	Regular school counseling programs	2
	Affective techniques, adjustment of medication	1
What provisions are made for social adjustment?		
	Regular school counseling	4
	Minimum day, counseling, partial integration	1
	Counseling by tutors	1

What provisions are made for vocational education?		
	Work-study program, vocational rehabilitation counselor	6
What is the criterion measure for success in the program?		
	Passing grades in regular class	4
	Individual behavioral objectives	1
	Wide Range Achievement Test	1
What provisions are made for students who can not function in the transition program?		
	Return to EMR, Place in EH, Place in L.D.G., Continuation High School	5
	Private school placement	1
Have special education teachers advocated a special set of procedures for use in the transition program?		
	YES*	5
	NO	1
*Generally what methods are suggested?		
	Diagnostic inventories, developmental curriculum and diagnostic procedures, learning plans	1
	Basic academic skills, special remediation in reading and math	1
	Basic academic skills, bilingual programs, remediation in reading and math	1
	Basic academic skills, programmed reading materials	1
	Structured classroom, behavior modification, contracts	1

Have regular classroom teachers advocated the use of a special set of procedures?

YES*	5
NO	1

*Generally what methods are suggested?

Basic remediation skills in reading and math	3
Basic remediation skills in reading and math, bilingual programs	1
Experience and language reading programs, use of camera and newspaper in reading	1

Has the integration of decertified EMR students into regular classes had any discernable effect on the regular classroom teacher?

YES*	5
NO	1
* Referrals for special instruction	1
Referrals for disciplinary reasons	1
Requests for remedial materials	2
Concern about accountability	3
Concern about adequate planning time	3
Concern about adequate time for individualized instruction	3
Concern about adequate time for total class instruction	3
General positive comments about having transition students in class	3
General negative comments about having transition students in class	2

Have achievement scores for regular classes changed significantly since transitional students were integrated into the mainstream?

YES.	
NO	6

Has the integration of transition students into regular classes caused any discernable differences in the social climate of the classes?	
YES*	4
NO	2
*Positive	3
*Negative	1
Positive, more one-to-one counseling, more positive interactions with adults	1
Bilingual tutors have counseled some regular students along with the transition students with positive effects	1
Positive, regular class students benefit from counseling	1
Some negative effects	1
Do regular classroom teachers report any changes in their allocation of time for individual instruction, preparation of materials, in-service education, etc. since the integration of transition students?	
YES	
NO	6

Fortran IV Program to Determine the Proper Sequence of Records in Datafile[1]

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Abstract

This FORTRAN IV program executes an editing procedure which determines whether a datafile contains an equal number of records (cards) per case which are also in the intended sequential order. The program requires very little background in computer programming and is designed primarily for the user of packaged statistical procedures.

Fortran IV Program to Determine the Proper Sequence of Records in Datafile

In the preparation of datafiles for analysis, various types of errors arise which violate the requirement of a sequentially ordered file with an equal number of records (cards) per case. The purpose of this paper is to describe a program that is designed to identify two common difficulties: (a) the existence of too few or too many records for a case and (b) the improper sequencing of cards. This program is especially useful for researchers who have relatively little background in computer languages and who rely primarily upon packaged statistical programs such as SPSS (Nie, Hull, Jenkins, Steinbrenner, & Bent, 1975) and BMD (Dixon, 1973).

Input Information

There is no limit on the number of records in the datafile of interest; input source may be from card image, disk, or tape. Case and card numbers may be located in any column of a record and two inclusive ranges of card numbers may be searched such as 1-9 and 15-23.

The routine, which is written in FORTRAN IV, requires these control cards:

1. PARAMETER CARD: (mandatory) Format (2A4, A2, I2, 1X, 4(I2, 1X))

   Col 1-9 Code PARAMETER

   Col 11-12 (mandatory) Identifies the input source. Any unit number (right justified) from 1-99 except 6 and 7 is valid (5 = card reader only).

Col 14-15 (mandatory) Identifies the beginning card number of the first sequence (right justified).

Col 17-18 (mandatory) Identifies the ending card number of first sequence (right justified).

Col 20-21 (optional) Identifies the beginning card number of the second sequence (right justified).

Col 23-24 (optional) Identifies the ending card number of second sequence (right justified).

2. FORMAT CARD: (mandatory) Format (2A3, 18A4)

Col 1-6 Code FORMAT

Col 7-80 Code FORTRAN input format for case number and card number.

The data cards follow the format card. If the input source is disk or tape, insert the proper FT statement corresponding to the unit coded on the PARAMETER card.

Limitations

The following limitations apply to the card order program:

1. Case IDs, which must be numerical, may not exceed 9 characters in length.

2. Card numbers must range between 1-99

3. Case numbers are not searched for sequence, duplication, or inclusion in the datafile.

Output

For each datafile, the output specifies the card numbers of each case which violates the sequence and the range of card number values

given on the parameter card and gives the total number of cards for the datafile of interest.

Availability of Program

A listing and write-up of the card order program along with sample input and output can be obtained by writing to Roland K. Yoshida, Neuropsychiatric Institute-Pacific State Research Group, P.O. Box 100-R, Pomona, California 91766.

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Footnotes

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[2]Also at the University of Southern California