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ABSTRACT

For this evaluation, information was gathered from parents of children enrolled in Dade's programs for the hearing impaired, teachers of the hearing impaired, regular teachers, and records of children currently in the program. Information was also gathered from parents of children enrolled at the Florida School for the Deaf and Hard of Hearing at St. Augustine, to obtain a relative comparison of that and Dade's program. The information gathered from these sources was used to evaluate the two basic types of services offered the hearing impaired by Dade County: (1) self-contained services, involving placement of a student into a special classroom, with resourcing into the regular school program as warranted, and (2) itinerant teacher services, provided for those with relatively little hearing impairment for approximately two hours per week. Seven major recommendations were made for program improvement: (1) development of an in-service orientation for regular teachers; (2) increasing availability of appropriate career education and vocational training opportunities for the hearing impaired child; (3) enhancing the communication existing between teachers in the itinerant program and students' parents; (4) provision of more adequate facilities for itinerant hearing teachers; (5) provision of in-service training for teachers of the hearing impaired in certain areas; (6) making available more complete information on incoming students especially for teachers functioning in self-contained settings; and (7) more adequate provision for certain equipment items. (RC)

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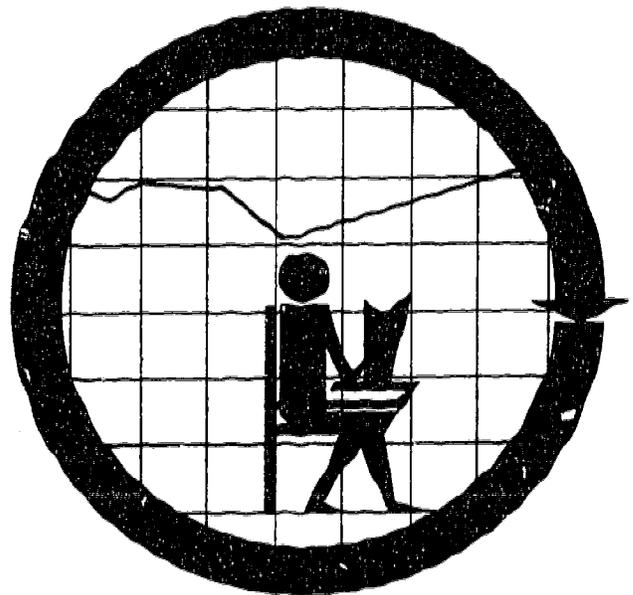
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EVALUATION OF THE DADE COUNTY HEARING IMPAIRED PROGRAM 1975-76

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SUMMARY OF PRINCIPAL FINDINGS AND RECOMMENDATIONS

For this evaluation, information was gathered from parents of children enrolled in Dade's programs for the hearing impaired, teachers of the hearing impaired, regular classroom teachers, and records of children currently in the program. Information was also gathered from parents of children currently enrolled at the Florida School for the Deaf and Hard of Hearing at St. Augustine, to obtain a relative comparison of that, and Dade's programs.

The information gathered from these sources was used to evaluate the two basic types of services offered the hearing impaired by Dade County: (1) self-contained services, involving placement of a student into a special classroom, with resourcing into the regular school program as warranted and (2) itinerant teacher services, provided for those with relatively little hearing impairment for approximately two hours per week.

Parents of hearing impaired children appeared favorably disposed toward most aspects of the program, most noting significant improvement in their children's academic performance and social interaction. Parents of students receiving itinerant services, however, did express a relative need for more information about their children's progress, and assistance in designing appropriate home-instruction, and parents with children in both types of hearing programs expressed relative dissatisfaction with vocational preparation activities.

A substantial proportion of required or suggested screening/placement processes occurred for the majority of hearing impaired students whose records were examined. Additionally, the placement process from the time of initial referral to the time of the placement committee's report appeared to operate within a reasonable period of time. Evidence for home visitation and parental orientation to the program, however, was found in fewer than half the folders examined.

Regular classroom teachers indicated a need for more information concerning the disability and the Hearing Impaired Program, as well as assistance in designing special learning approaches to deal with the hearing impaired who spend part or most of the day in a regular program. In a positive vein, these teachers' perceptions of most other aspects of the Hearing Impaired Program, including staff competency, program impact, and screening/identification processes, were quite positive, indicating significant improvement in students' academic and social behavior as a function of program participation.

Itinerant teachers of the hearing impaired appeared satisfied with the support received by regular school personnel, the number of children assigned to them, and the availability of financial support, but dissatisfied with regular teachers' understanding of their program, the quality of classroom facilities available to them, and information on incoming students. "Self-contained" teachers' responses to those

issues were generally similar with the exception of a greater expressed satisfaction with classroom facilities. Teachers also indicated a need for inservice training in the adoption of other instructional systems for the hearing impaired (itinerant teachers) and basic sign language instructional methodology (self-contained teachers). Both types of teachers expressed dissatisfaction with the availability and appropriateness of career education programs, the adequacy of assistance available to the hearing impaired in vocational shops, and job placement services. Slightly more than half of the responding "self-contained" teachers felt that the fusing of hearing impaired students into the regular program was not occurring with sufficient frequency. In terms of equipment availability the majority of itinerant teachers listed movies and projectors as "never" being available.

Results of a 1973-74 testing of Dade's hearing impaired population with a special version of the Stanford Achievement Test indicated that, with respect to a national hearing impaired population, they were achieving at or above the average in verbal and mathematics skills.

Parents with children enrolled in the Florida State School for the Deaf and Hard of Hearing at St. Augustine indicated dissatisfaction with most aspects of Dade's Hearing Impaired Program. Relatively speaking, St. Augustine's program was given highest marks in the extent to which children were able to participate in athletics and other activities and the extent to which they were exposed to suitable career education/vocational training activities.

Seven major recommendations for program improvement were made, including:

- (1) development of an in-service orientation for regular classroom teachers,
- (2) increasing availability of appropriate career education and vocational training opportunities for the hearing impaired child,
- (3) enhancing the communication existing between teachers in the itinerant program and students' parents,
- (4) provision of more adequate facilities for itinerant hearing teachers,
- (5) provision of in-service training for teachers of the hearing impaired in certain areas,
- (6) making available more complete information on incoming students especially for teachers functioning in self-contained settings,
- (7) more adequate provision of certain equipment items such as auditory training equipment and movies/projectors for "itinerant" teachers, and language masters for teachers in self-contained settings.

DADE COUNTY PUBLIC SCHOOLS

Division of Finance

EVALUATION OF THE DADE COUNTY
HEARING IMPAIRED PROGRAM 1975-76

Prepared by

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June, 1976

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INTRODUCTION

Description Of The Program

The Hearing Impaired Program is one of eleven educational programs directed at the needs of Dade County's exceptional children by the Exceptional Child Program of Dade County Public Schools.

State regulations place the hearing impaired student in the category of the physically handicapped child - one who has severe problems in speech, oral communications, vision, hearing, motor coordination or other health impairment.

In Dade schools, routine audiometric examination is performed on all children in grades one and three by Dade schools and K and six by the Public Health Service. This examination serves as an initial screening device. In all cases where children are identified as deaf or hard of hearing through these procedures, a more intensive examination by a medical doctor or hearing specialist is required prior to placement in the program.

In actuality, most children who entered the various hearing impaired programs, especially those whose impairment is severe, are identified by parents, family physician, or other agencies well before their entry into the Dade school system as a result of the evident nature of their handicap.

According to State incidence figures, hearing impaired students make up 1.50 percent and deaf make up .1 percent of the total school population. Given Dade's current enrollment, this would imply that 3,946 students within Dade County are deaf or hard of hearing. Currently, 433 students are receiving some type of hearing service. The discrepancy between incidence figures and that number currently being served can be attributed to a number of factors:

1. In spite of routine audiometric screening, some mildly impaired students may not have been identified.
2. Some of the mildly hearing impaired but multiply-handicapped students may be receiving other special services (i.e. speech therapy), and may not be

included on hearing rolls.

3. The regular academic programs, especially those which utilize individualized approaches to instruction, are able to successfully meet the needs of many of the mildly hearing impaired.
4. A substantial number of the hearing impaired are being served by other community and state agencies, especially the Florida State School for the Deaf and Blind at St. Augustine.

Dade County maintains a full range of services for the hearing impaired. A student's specific placement is determined by the nature and severity of his or her hearing impairment.

1. Self-Contained Programs For The Hearing Impaired provide half time to full time instruction for that segment of the hearing impaired population which is most extensively involved.
2. Resource Programs are provided for those students with only moderate impairment who can function in the regular program for half or more of their day. Time in the resource program is spent in language development and in procuring additional academic assistance.
3. Itinerant Services are provided for those students who are least involved with their impairment. Students receiving this service are enrolled in the regular program but receive the services of an itinerant hearing teacher for approximately two hours per week.

A more complete description of these and other resources designed to meet the needs of Dade's hearing impaired population can be found in the Dade County Procedures For Providing Special Education For Exceptional Students*

The current evaluation focused on all three programs. Additionally, parents of deaf children currently enrolled in the Florida State School for the Deaf and Blind at St. Augustine were surveyed.

Description Of The Evaluation

For purposes of evaluating Dade's Hearing Impaired Programs, information was obtained from teachers of the hearing impaired, regular classroom teachers, parents of children in the programs, and, as previously mentioned, parents of

*Dade County Procedures for Providing Special Education for Exceptional Students-1975-76. Division of Instruction, Dade County Public Schools (April, 1975)

children currently enrolled at the Florida State School (St. Augustine). Information was also obtained from cumulative and special education folders of a sample of hearing impaired students and from records of a 1973-74 achievement testing of Dade's hearing impaired population.

Screening-Identification Process Adequacy was determined by examining the cumulative and exceptional child folders of 100 randomly selected hearing impaired students for evidence of such required or suggested procedures as medical examinations, placement by committee, parent orientation, etc.

Parent Questionnaires were sent to the parents of all (approximately 400) students currently receiving hearing services of any kind. Items in the questionnaire evaluated the perceived adequacy of communications and information from and about the program; the academic, vocational, and social impact of the program; and the perceived adequacy of program operations. These questionnaires were sent to teachers for distribution to parents via student delivery.

Regular Classroom Teacher Questionnaires were sent to approximately 500 randomly selected teachers at both elementary and secondary levels. Teachers were asked to indicate their understanding of hearing impairment generally and the hearing impairment programs specifically, the quality of their interaction with the hearing impaired staff, the perceived operational adequacy of the hearing impaired program, and their perception of program impact based upon their experience with students who had received hearing services of one kind or another.

Hearing Impaired Teacher Questionnaires were sent to all (approximately 44) teachers of the hearing impaired, serving in both itinerant and self-contained roles. Questions asked teachers to respond to the adequacy of: support received from the school system, professional development opportunities, their programs' social and academic impact, and career educational/vocational training opportunities.

Academic Achievement of the hearing impaired student was determined by randomly selecting scores received by 25 percent of Dade's hearing impaired students on a special version of the Stanford Achievement Test (SAT). As previously mentioned this test had been given to all of Dade's hearing impaired students

during the 1973-74 school year as part of a program to establish national norms. The special norms that were developed allowed a comparison of Dade's hearing impaired population with that of other school districts across the country.

Finally questionnaires were distributed to approximately 100 parents of children currently enrolled in the Florida State School for the Deaf and Hard of Hearing at St. Augustine. Parents were asked to evaluate the Dade and St. Augustine programs along a number of dimensions.

The balance of this report contains (1) a Conclusions and Recommendations section arising from these procedures and (2) a Results section which describes findings in greater detail and displays tabled data. An Appendix to this report contains data descriptive of responding parents and teachers.

CONCLUSIONS AND RECOMMENDATIONS

Conclusions

The following section summarizes the findings of the Hearing Impaired Program evaluation. Findings are summarized for the various respondents or sources from which information was gathered and are divided in terms of the two types of hearing services offered (Itinerant and Self-contained).

Some required or suggested screening/placement processes listed in the procedures manual took place in the vast majority of cases and others did not. Follow-up audiological examinations, provision of input by regular classroom teachers, placement by committee, granting of permission for program entry by parents, and appropriate reporting of progress once in the program took place for the majority of the hearing impaired students whose folders were examined and whose impairment so warranted. However, in fewer than forty percent of the placements examined was there evidence for home visitation by a visiting teacher or parental orientation to the program. This latter finding was borne out by responses of parents of the hearing impaired. (It is possible, however, that information gathered or disseminated during these procedures may have been accomplished via other, undocumented, means). Placement appeared to be carried out with suitable dispatch. In the case of students receiving self-contained services, the average period occurring between initial referral of a student and the placement committee's report was one month. For those less impaired students, receiving itinerant services, the average period intervening between initial referral and action of the committee was 3.5 months.

Parents of children receiving both itinerant and self-contained services appeared favorably disposed toward most aspects of the programs. The majority of parents with children in both types of programs noted significant improvement in their children's academic performance and social interaction with other students. Responses to a number of statements related to various aspects of the program were, in the main, also program-favorable. In a relative sense, however, parents of children receiving itinerant

services felt less well informed of their children's progress and appropriate home instructional methodology than did parents of children in self-contained programs, a not unreasonable state of affairs, given the relatively less severe nature of itinerant students' impairment.

Parents were quite favorably disposed toward the impact of the program on academic and social behavior, but expressed relative dissatisfaction with the adequacy of vocational preparation. Operational aspects of the programs, including such areas as degree of cooperation between the hearing and the regular school programs, teacher qualifications, screening/identification adequacy, and adequacy of the child's exposure to the program were favorably evaluated. Parents' suggestions for program improvement mainly focused on the need for more exposure to the hearing services (parents of the itinerant students) and better physical accommodation to the handicapped ("self-contained" parents) including better hearing aids and other equipment/facilities related to special instruction.

Regular classroom teachers were asked to indicate their understanding of the hearing problem, specifically, and hearing impaired program, generally, the quality of their interaction with the hearing impaired program, the adequacy of hearing impaired program operations and impact, and their observations regarding changes wrought in student behavior as a result of participation in these programs. They were in addition, asked to suggest improvements to the programs from their points of view. Responses of this group of teachers indicate that they may be inadequately informed as to the nature of the program and feel considerable need for assistance in design of special learning approaches to cope with students' hearing impairment. As pointed out in the Results section, however, this finding should not be considered too critical since relatively few regular classroom teachers have contact with hearing impaired students.

In terms of perceived operational adequacy of the program, classroom teachers rated staff competency, availability of services, and timeliness of the screening/identification process quite favorably, and also were favorable with respect to their perception of program impact. Teachers who had contact with the students receiving hearing services indicated that academic performance and their interaction with teachers had improved significantly.

Suggestions most frequently mentioned for program improvement were the spending of more time with the hearing impaired instructor, better hearing aids (and other) hearing equipment for the hearing impaired, and more time devoted to associated emotional problems by professional personnel.

Teachers of the hearing impaired were asked to evaluate the adequacy of support received from other area or county-level professionals, their perceptions of the adequacy of their training and preparation, adequacy of program impact, and the adequacy of vocational training opportunities for their students. Itinerant teachers appeared satisfied with the support received by regular school personnel, the number of children assigned to them, and the availability of financial support. They were however, relatively dissatisfied with how well regular classroom teachers understood the hearing program and considerably dissatisfied with respect to the classroom facilities available to them in their itinerant visitations. Additionally, a substantial proportion of responding teachers felt that the reports received on incoming students were not sufficiently complete. Self-contained teachers' responses were generally less program favorable in terms of support received, especially with respect to knowledge of regular classroom teachers regarding the hearing impaired program and completeness of reports on incoming children. These teachers, however, appeared to be highly satisfied with their classroom facilities. In terms of adequacy of their background and training, both types of teachers (itinerant and self-contained) expressed a need for more inservice training. Of those who indicated such a need, the most wanted training appeared to be in the areas of adoption of other training systems (like the Dade Reading and Math systems) for use with hearing impaired children and, for the self-contained teacher, basic sign language instruction methodology.

In terms of program impact on hearing impaired student behavior, both itinerant and self-contained teachers felt that these students were not able to complete school and graduate with the same level of competence as other, normal, students. In terms of vocational training opportunities, itinerant teachers indicated a great deal of uncertainty regarding their feeling toward the adequacy of career education, possibly due to their lack of contact with operational programs within the school. However, the majority of teachers who did express an opinion were unfavorably oriented toward

availability and appropriateness of career education programs. Responses to statements regarding the adequacy of vocational (skills) training were split--one half favorable, the other half unfavorable. Generally unfavorable ratings were given to the adequacy of in-shop assistance received by hearing impaired students and the adequacy of job placement services. Responses of self-contained teachers paralleled those made by itinerant teachers of the hearing impaired.

In a section of the questionnaire asking for self-contained teachers' perceptions of the reasons why students withdrew from the program, the majority indicated that students withdrew because of program completion and the receipt of a regular diploma. Approximately eleven percent were withdrawn because of parent and/or student request. In terms of instructional methodology utilized, all of the itinerant teachers used the oral method only; slightly more than one-third of self-contained teachers used the oral method only, the remaining two-thirds used a combination of oral and finger spelling sign language.

The placing of special students in a "least restrictive environment" (i.e. the practice of fusing) is generally encouraged. To ascertain the extent to which the practice was occurring with adequate frequency, teachers were asked to respond to this issue. Slightly more than half of the self-contained teachers felt that fusing was not occurring with sufficient frequency. Most popular reasons checked by most teachers included resistance to the practice at the level of the individual school and inadequate facilities/equipment in the regular classroom.

In terms of equipment availability, most itinerant teachers listed auditory training equipment and movies/projectors as never being available. Self-contained teachers appeared more well equipped; the most seriously unavailable equipment being language masters, listed as unavailable by 44 percent of the self-contained teachers.

Using results of a testing of all Dade's hearing impaired population during the 1973-74 school year, with a special version of the Stanford Achievement Test (SAT), an achievement profile comparing the achievement of this group with that of a national sample of hearing impaired students was performed. Results showed the performance of Dade's hearing impaired

population to be at or above the fiftieth percentile on all three subtests of the SAT (Reading Comprehension, Math Concepts and Math Computation).

Responses of St. Augustine parents were split into those of parents who had children enrolled in one of Dade's hearing impaired program and those who had not. As expected, a majority of parents who had children previously enrolled in one of Dade's programs indicated dissatisfaction with most aspects of Dade's hearing program. Greatest amounts of dissatisfaction were directed at aspects related to academic impact and availability of vocational training opportunities. Relatively high marks were given to child/teacher interaction and the social interaction existing between the child and other students. These parents were also asked to evaluate the relative quality of Dade's and St. Augustine's program along a number of dimensions. As would be expected, St. Augustine's evaluation was relatively more favorable along all dimensions. This was especially so for dimensions related to the extent to which children were able to participate in athletics and other activities and the extent to which they were exposed to suitable career education activities. Dade was evaluated most favorably in terms of the child's enjoyment of the program and self-concept development. Parents whose children were never in a Dade program chose to enroll their children in that program because of the perceived "broader range of services" offered by St. Augustine. These parents also identified vocational preparation, opportunity to engage in activities, staff competence, and instructional tactics employed as the reasons for enrollment.

Although the picture was overwhelmingly in favor of the St. Augustine placement, over half (52.5%) of the parents indicated that there were "strongly negative" factors associated with the away-from-home, residential aspects of the program. Loss of contact with the child and travel time/expense consumed in visitations were the most frequently mentioned elaborations.

Recommendations

The following section describes recommendations that the Planning and Evaluation Department feels are warranted based on the findings of this

evaluation. It is recognized that, prior to the adoption of some or all of the recommendations, a determination of their probable costs (as weighed against their benefits) would have to be made, and the mechanisms for their implementation and operations would have to be precisely defined. Recommendations presented below are not necessarily given in order of importance. It should also be noted that, on balance, the results of this evaluation were quite favorable, in an absolute sense, to the hearing impaired program. What recommendations are made are based on data which, in a relative sense, seems to define remediable shortcomings in the program.

1. Regular classroom teachers, as well as teachers of the hearing impaired, seem to feel a need for making available inservice training for regular classroom teachers. This would enable them to understand the hearing impaired problem and related program as well as enable suitable response by the regular classroom teacher in meeting the needs of those hearing impaired students who are fused into their classes or who receive only hearing itinerant services. Similar suggestions were made in recent evaluations of other exceptional child programs (Learning Disabled and Gifted programs). It is recommended that the feasibility of implementing such inservice training be investigated. Decisions concerning this should take into consideration the fact that relatively few (approximately 10%) of the regular classroom teachers who responded to the questionnaire had ever had contact with a hearing impaired student in their class.
2. Although beyond the direct control of the Exceptional Child Program, such steps as are feasible should be taken to encourage increased availability of appropriate career education and vocational (skills) training opportunities for the hearing impaired child. Such steps, if successful, would respond to expressed misgivings of St. Augustine parents regarding what they perceive as a relative lack of "wide range" vocational training opportunities offered by the Dade system as well as

to predominantly negative findings concerning such opportunities as expressed by teachers of the hearing impaired.

3. The communication existing between parents of children receiving itinerant services and the teachers of this program should be improved in terms of the conveyance of information regarding the child's progress and appropriate home instructional methodology.
4. Although, again, not directly controlled by the Exceptional Child Program, attempts should be made to provide itinerant teachers of the hearing impaired with more suitable in-school quarters within which to hold their instruction.
5. Itinerant teachers as well as those teaching in a self-contained setting indicate a strong desire for more inservice training. The feasibility of developing and disseminating such inservice training, especially in areas such as the adoption of other instructional systems, and (for the self-contained teachers) basic sign language methodology, should be investigated.
6. To the extent possible, more complete information on new or incoming students should be provided to teachers of the hearing impaired.
7. Equipment, such as auditory training equipment, and movies/projectors should be made more accessible to itinerant teachers of the hearing impaired. Language Masters should be made more available to teachers in self-contained settings.

RESULTS

The following section presents detailed findings of the evaluation of the Hearing Impaired Program.

Initially presented are results of an evaluation of the adequacy of screening/identification processes, listed as required or desirable in the Procedures manual. Following this, responses of parents of children enrolled in Dade County's Hearing Impaired programs are presented. Next, data from teachers of the hearing impaired, and regular classroom teachers regarding various aspects of program adequacy are presented. Achievement data based on a 1973-74 administration of a special version of the SAT are then displayed. Finally, responses of "St. Augustine" parents are discussed.

Evaluation of Screening/Placement Processes

To determine if processes took place which were required or suggested by the "Procedures" manual as part of the screening, identification, and placement of hearing impaired students, descriptive data were collected for approximately 100 randomly selected hearing impaired students in grades K-12. Roughly two thirds of the students selected were served in self-contained classes, the others were served by itinerant hearing teachers, approximating the ratio of services received by the entire Dade hearing impaired population. Data presented in Table 1 are separated according to type of service received. Since some of the suggested procedures are more applicable to one type than another. Indications of time lag occurring between chronologically ordered procedures are also presented.

Data indicate that, in all but a few cases, for both types of students, a follow-up audiological exam was performed by a physician or other qualified professional prior to the student's receiving hearing services. Appropriateness of program placement was indicated in most cases, with the majority of those in the self-contained program exhibiting severe impairment and the majority of those in the itinerant program exhibiting low or moderate impairment.

TABLE 1
DESCRIPTION OF SAMPLED STUDENTS

(n = 88)

	NUMBER	PERCENT
Type of Services:		
Self-Contained	57	64.7
Itinerant	31	35.3
Grade Level:		
K - 6	61	72.6
7 - 9	15	17.9
10 - 12	8	9.5
Sex:		
Male	44	50.0
Female	44	50.0
Ethnicity:		
Black	23	26.1
White	35	39.8
Spanish	30	34.1
Months in Program: (median)	40.5	
EVALUATION OF SCREENING/IDENTIFICATION PROCESSES	SELF CONTAINED	ITINERANT
Evidence of Audiological Exam by M.D. or Clinic:	98.2	93.5
Decibel Loss:		
Low	0.0	31.0
Moderate	21.8	51.7
Severe	78.2	17.2
Evidence of Classroom Teacher's Note of Problem:	N/A	86.6
Evidence of Placement by Committee:	84.2	35.5
Identification of Committee Members:		
Principal	7.1	0.0
Assistant Principal	0.0	0.0
Classroom Teacher	0.0	6.3
Area Directors of Special Education	57.1	25.0
Guidance Counselor	7.1	0.0
Teacher of the Hearing Impaired	10.7	6.3
Months Between Initial Referral and Committee Report	1.0 (mo.)	3.5 (mo.)
Evidence of Home Visit by Visiting Teacher	21.6	33.3
Evidence of Parental Permission for Program Entrance	84.2	56.7
Evidence of Parental Orientation to Program	37.5	32.3
Evidence of Progress Report	93.0	83.9
Median Months Since Last Report	10.0	10.0
Evidence of Psychological Evaluations	65.5	51.6
Tests Used:		
Intelligence (WISC)	86.1	100.0
Psychological Processing (ITPA)	25.0	6.3
Achievement	72.2	100.0
Personality/Projective	27.7	12.5
Interest/Aptitude	0.0	0.0
Additional Hearing Tests	8.3	0.0

Evidence of placement by a committee was noted in the vast majority of self-contained placements (84.2%), but for only slightly more than one third of the itinerant placements (35.5%). The identification of the specific disciplines or functions represented on the committee was difficult to accomplish--the most frequently identified member being the Area Exceptional Child Director for both programs.

Months between initial referral and report of the committee averaged 1.0 months for self-contained placements and 3.5 months for itinerant placements--a reasonable relative difference given the differing extent of impairment of those students.

Evidence was also collected to determine if other suggested pre-entry processes had been carried out. Evidence for home visitation by a visiting teacher (to collect information regarding the potential student's social and emotional "surround") was available for about one third (32.3%) of the itinerant placements, and slightly more than one fifth (21.6%) of the self-contained placements. It may be that such information could have been obtained through other mechanisms (parent phone interviews, etc.) by other personnel and not documented. Nonetheless, the obtaining of this information is seen as important for proper program operation, especially in the case of the more severely impaired students.

Evidence of written parent permission for program entry was noted in the majority of cases (parent responses to a similar questionnaire item indicated a higher percentage of compliance for both types of program). Evidence for parental orientation to the program was found for one third of both types of placement, however, this may have been informally accomplished and never documented.

Evidence of progress reports on children who were in the program was noted in the vast majority of cases. The median period of time since the last progress report was 10.0 months.

Evidence for the occurrence of a psychological evaluation (an optional process, contingent upon results of initial screening) was found in 51.6% of itinerant placements and 65.5% of self-contained placements. Instruments most frequently used in these evaluations tested intelligence and achievement.

Parents' Evaluation of the Program

Questionnaires were sent to parents of all (over 400) hearing impaired children. Two hundred and twenty (fifty-five percent) of those surveyed returned completed questionnaires.

Data descriptive of hearing impaired students whose parents responded to the questionnaire are presented in the Appendix to this report. Respondents' children are approximately evenly split between males and females, having ethnic origins approximating those for the entire Dade student population and are represented more heavily at the elementary levels and successively less heavily at junior and senior high school levels than the general Dade student population.

The first evaluative question asked parents the extent to which, while in the program, changes in the child's behavior along a number of dimensions had been noted. The dimensions along which the behavioral evaluations were made, and the changes noted by percentages of responding parents are displayed below in Table 2 for parents of children receiving itinerant services as well as those in self-contained programs.

TABLE 2 CHANGES IN BEHAVIOR NOTED BY PARENTS DURING PERIOD OF ENROLLMENT IN THE HEARING IMPAIRED PROGRAM	Mean Response	PERCENT RESPONDING *				
		1 Worse than before	2 No worse than before, but still a problem	3 Was never a problem, or don't know	4 Slight improvement	5 Significant improvement
Academic performance	4.1	0.0	15.0	12.5	17.5	55.0*
	4.1	1.2	9.8	15.9	17.1	56.1*
Social interaction with fellow students	4.0	0.0	8.6	28.6	14.3	48.6*
	3.9	0.0	7.6	34.8	19.7	37.9*
Interaction with teachers	3.8	0.0	5.7	42.9*	14.3	37.1
	3.7	3.1	6.2	44.6*	6.2	40.0
Tardiness/absenteeism	3.4	0.0	0.0	77.4*	3.2	19.4
	3.4	1.9	0.0	73.1*	3.8	21.2

* = modal responses

Response of parents of children receiving itinerant services

Response of parents of children in self-contained or resource programs

Over half of the responding parents indicated that they felt that "significant improvement" had taken place in their child's academic performance. A lesser, but still substantial percentage felt that "significant improvement" had occurred in their child's social interaction with other students. The next two dimensions (interaction with teachers and tardiness/absenteeism) referred to behaviors which the parents appeared not in a position to evaluate (as indicated by the modal response of: "was never a problem, or don't know"). Most of those who did evaluate these behaviors as a problem felt that "significant improvement" had taken place during the tenure of their children in the program.

The next few items in the questionnaire dealt with the adequacy and time-lines of pre-entry screening and identification processes.

For these items especially responses are meaningful only if split into those given by parents of children receiving itinerant services and those receiving services in a full-time, self-contained, program. Children enrolled in the latter situation, more seriously involved with the disability, would likely have been identified well before their entrance into the public school system. Screening/identification processes would, therefore, likely have been carried out by other agencies or personnel. Some of the items in this section would, therefore, not be relevant to that class of respondent.

Table 3, below, illustrates responses made by parents to the items in this section of the questionnaire.

Table 3
 "Itinerant" & "Self-Contained" Parents' Responses to
 Screening/Identification Items
 (n=50 "Itinerant" Parents, 94 "Self-Contained" Parents)

	% "Itinerant"	% "Self-Contained"
I requested that my child be given a hearing test.	47.6	69.2
Prior to my child's receiving hearing services, a visiting teacher came into our home for an interview.	17.4	22.1
My child was given a medical examination (in addition to a hearing test) prior to his receiving hearing services	83.3	85.7
I gave written permission prior to my child's receiving hearing services.	91.3	81.5

As illustrated by the Table, "self-contained" parents took the active role in requesting a hearing test for their children in a substantially greater proportion of cases than itinerant parents, no doubt because of the early and substantial appearance of related symptoms in their children. Relatively low percentages of both types of parents reported that a visiting teacher had come into their home for an interview prior to placement. This low percentage is especially significant in the case of the "self-contained" child whose problem severity and full-time program involvement would appear to warrant the gathering of any information regarding the social and emotional environment characteristic of the home situation.

More optimistically, however, the great majority of responding parents indicated that their children had received medical examinations prior to receiving hearing services, providing an evaluation of the possible underlying physiological correlates to the impairment. Additionally, the great majority of respondents indicated that they had given written permission for their children to receive hearing services.

Table 4 illustrates responses of parents to a number of evaluative statements in the questionnaire. Parents were requested to indicate agreement or disagreement to each statement on the basis of a five point numerical scale. Means and standard deviations, as well as percentages of parents responding with each numerical option are displayed. On the questionnaire, parents were asked to indicate the type of program (itinerant, self-contained, etc.) in which their children were enrolled. Although a total of 220 parents completed and returned questionnaires, approximately seventy of them gave confused responses to that question. Some, for instance, indicated placement in both itinerant and self-contained programs, an obvious impossibility. These parents were eliminated from the analysis. Table 4 below, illustrates responses of ninety-five parents of children in full-time (self-contained) programs and fifty parents whose children receive itinerant services.

To simplify the discussion of results, related statements were grouped together in three titled clusters. These are: (1) parent-program communication, (2) program impact, and (3) program operational adequacy.

TABLE 4

RESPONSES OF PARENTS OF CHILDREN RECEIVING ITINERANT SERVICES, AND CHILDREN IN FULL-TIME (SELF-CONTAINED) PROGRAMS TO EVALUATIVE STATEMENTS

(N = 50 "ITINERANT" PARENTS, 95 "SELF-CONTAINED" PARENTS)

		PERCENTAGE RESPONDING WITH EACH OPTION (* = MODAL RESPONSE)						
			STRONGLY DISAGREE	DISAGREE	UNDECIDED	AGREE	STRONGLY AGREE	
		M	S.D.	1	2	3	4	5
C	I UNDERSTAND MY CHILD'S PROBLEM (ITS EXTENT AND ITS EFFECT ON ACADEMIC ACHIEVEMENT, ETC.)	4.43 4.38	.65 .83	0.0 1.2	2.2 2.4	2.2 8.5	45.7 34.1	50.0* 53.7*
	I FEEL THAT THE HEARING TEACHER KEEPS ME ADEQUATELY INFORMED OF MY CHILD'S PROGRESS.	3.85 4.23	1.16 .89	2.1 3.5	19.1 1.2	4.3 5.9	40.4* 47.1*	34.0 42.4
	THE HEARING TEACHER HAS PROVIDED ME WITH ADEQUATE SUGGESTIONS FOR HOME INSTRUCTION OF AN ACADEMIC AND/OR SOCIAL NATURE.	3.50 3.82	1.22 1.12	6.5 6.3	21.7 7.5	6.5 12.5	45.7* 45.0*	19.6 28.8
	I UNDERSTAND THE TECHNIQUES AND GOALS WHICH DEFINE MY CHILD'S HEARING PROGRAM.	3.90 3.78	.88 1.15	0.0 6.0	9.1 10.7	15.9 10.7	50.0* 44.0	25.0 28.8*
I	I AM GENERALLY SATISFIED WITH THE EXTENT TO WHICH HEARING SERVICES HAVE MET MY CHILD'S ACADEMIC AND SOCIAL NEEDS.	4.00 4.00	.90 .95	2.1 2.3	4.3 5.7	14.9 14.8	48.9* 44.3*	29.8 33.3
	MY CHILD APPEARS TO ENJOY HIS/HER PARTICIPATION IN THE HEARING IMPAIRED PROGRAM.	4.34 4.38	.76 .78	0.0 1.2	2.2 1.1	10.9 8.9	37.0 35.6	50.0* 53.3*
	MY CHILD IS GIVEN AS MANY OPPORTUNITIES FOR VOCATIONAL EDUCATION AS CHILDREN WITHOUT A HEARING IMPAIRMENT.	3.50 3.55	1.21 1.16	9.5 6.7	11.9 9.3	16.7 30.7*	42.9* 28.0	19.0 25.3
	THE VOCATIONAL EDUCATION OPPORTUNITIES GIVEN MY CHILD BY THE SCHOOLS ARE ADEQUATELY MEETING HIS NEEDS.	3.41 3.65	1.14 1.12	7.7 5.3	10.3 9.3	33.3* 25.3	30.8 34.7*	17.9 25.3
OA	I FEEL THAT THERE IS ADEQUATE COOPERATION BETWEEN MY CHILD'S HEARING TEACHER AND THE REGULAR SCHOOL TEACHERS.	4.11 3.98	.95 .80	4.4 0.0	2.2 2.8	6.7 23.9	51.1* 45.1*	35.6 28.2
	I FEEL THAT THE HEARING TEACHER IS SUFFICIENTLY QUALIFIED AND SKILLFUL TO SERVE MY CHILD ADEQUATELY.	4.43 4.45	.77 .66	0.0 0.0	4.3 1.1	4.3 5.7	34.8 39.1	56.5* 54.0*
	I FEEL THAT THERE ARE SUFFICIENT (IN TERMS OF QUALITY AND AVAILABILITY) SERVICES TO ADEQUATELY MEET THE NEEDS OF HEARING IMPAIRED CHILDREN.	3.36 3.34	1.20 1.34	9.1 12.8	15.9 17.4	20.5 14.0	38.6* 33.7*	15.9 22.1
	MY CHILD WAS ENROLLED IN DADE SCHOOLS FOR ONLY A SHORT TIME BEFORE A HEARING PROBLEM WAS IDENTIFIED.	3.02 2.13	1.38 1.35	15.8 43.1*	31.6 32.3	0.0 1.5	39.5* 13.8	13.2 9.2
	I BELIEVE THE AMOUNT OF TIME MY CHILD SPENDS IN THE REGULAR PROGRAM IS ADEQUATE TO MEET HIS NEEDS (FOR PARENTS OF CHILDREN WHO ARE PLACED PART TIME IN A SPECIAL HEARING CLASS).	3.85 3.65	.85 1.26	2.4 9.4	2.4 6.3	22.0 25.0	53.7* 28.1	19.5 31.3*
	I FEEL MY CHILD RECEIVED SERVICES FOR HIS/HER HEARING IMPAIRMENT WITHIN A REASONABLE AMOUNT OF TIME.	4.04 3.85	1.03 1.03	6.8 5.6	0.0 5.6	9.1 9.9	50.0* 54.9*	34.1 23.9

Response of parents of children receiving itinerant services.

Response of parents of children in self-contained or resource programs.

LEGEND: C = PARENT-PROGRAM COMMUNICATION, I = PROGRAM IMPACT, OA = OPERATIONAL ADEQUACY OF PROGRAM

The Parent-Program Communication cluster contains three statements regarding the extent to which parents understood their child's problem, his program, and his progress in that program. Also included was a statement related to whether or not the hearing teacher had provided the parent with suggestions for home instruction of a social or academic nature. Responses to these statements were quite similar and largely "program favorable" for both types of parents with the majority of the parents agreeing or strongly agreeing to the adequacy of the program in areas tapped by these statements. What differences exist seem to indicate that parents of children receiving itinerant services feel less well informed of their children's progress and appropriate home-instructional methods than do parents of children in self-contained programs. Of course, the mild impairment of children served by the itinerant program may make these communications less necessary than in the case of the more severely impaired child receiving full-time services.

Program Impact - statements comprising this cluster touched on such issues as parents' satisfaction with the extent to which the program was meeting the academic, social, and vocational needs of their children, and their perceptions of the extent to which their children enjoyed the program. Responses for both types of parents are, again, quite favorably disposed toward the program in terms of meeting the academic and social needs of their children, as well as their children's enjoyment of the program experience. Responses to the two statements regarding the adequacy of vocational programming are, however, less favorable for both types of parents. This appears to be due primarily to the larger proportion of "undecided" responses to these statements rather than any real increase in strongly negative responses. In the main, responses to these two statements are still on the "program favorable" side of the response continuum, however.

Perceived Operational Adequacy of the Program is measured by six statements related to such operational aspects of the program as degree of cooperation between the hearing and regular school programs, teacher qualifications, screening/identification adequacy, and adequacy of the child's exposure to the program. Responses to this group of statements, with the ex-

ception of those to one or two items, were also "program favorable" and essentially the same for both types of parents. Especially favorable responses were given to the statement regarding the qualifications and skill of the hearing teacher--with 90 percent or more of the parents responding favorably. Statements to which more unfavorable responses were given related to the amount of in-school time that transpired before identification of the child's hearing impairment was made. Strangely enough, more parents whose children were enrolled in self-contained programs and, therefore, were more seriously impaired, indicated dissatisfaction with the length of time their child was in school before the problem was identified. It is likely that this statement was confusing to many parents, since a more directly worded statement (the last one in the table) received overwhelmingly favorable responses by both types of parents.

The last two items in the questionnaire: (1) asked parents how their children had become enrolled in the hearing program and, (2) requested suggestions for improvement of the hearing impaired programs.

Tables 5 and 6, present responses to these items.

Table 5
Mechanisms through which Children were Enrolled
in Hearing-Impaired Programs
(n=50 "Itinerant" Parents, 95 "Self-Contained" Parents)

	"Itinerant" Parents		"Self-Contained" Parents	
	N	%	N	%
I went to the school and requested testing and services in reaction to hearing problems that I had noted.	4	8.2	8	9.1
The school informed me that a hearing deficit was noted and requested permission for testing and later placement.	25	51.0	9	10.2
A family physician noted a hearing problem and suggested that I have further testing done.	10	20.4	32	36.4
Other	10	20.4	39	44.3

Table 6
 Parents' Suggestions for Improvement of
 Hearing Impaired Programs
 (n=50 "Itinerant" Parents, 95 "Self-Contained" Parents)

	"Itinerant" Parents		"Self-Contained" Parents	
	N	%	N	%
More time per day with the instructor of the hearing impaired	15	38.5	13	16.5
More time per day in the regular classroom	2	5.1	12	15.2
Better qualified instructors of the hearing impaired	3	7.7	6	7.6
Better physical accommodations to the handicapped (better hearing aids, etc.)	8	20.5	17	21.5
More time devoted to the emotional handicaps by professional personnel	3	7.7	9	11.4
Other	8	20.5	22	27.8

Responses displayed in these tables indicate that, for more than half of the itinerant parents, identification took place through in-school diagnosis of the problem. Only eight percent of these parents indicated that they had initiated testing and diagnosis of the problem. For self-contained parents, the most frequently noted identifying mechanism was note taken of the problem by a family physician. A large percentage of "self-contained" parents responded using the "other" category. Most of the written explanations of this response indicated that the problem had been evident to the parents long before enrollment in Dade's Hearing Impaired Program.

When asked to check the "one best suggestion" for program improvement, the most popular choice for "itinerant" parents was that the child should spend "more time per day with the instructor of the hearing impaired". For the "self-contained" parent, the most popular response (besides "other") was a request for better physical accommodation to the handicap (in terms of better hearing aids, etc.). For those parents responding with "other", written comments indicated satisfaction with the program, and desire for greater interaction between their child and hearing children.

Regular Classroom Teachers' Evaluation of the Program

Data descriptive of the responding teachers, and the extent of their exposure to hearing impaired children is presented in the appendix to this report. The majority (76.2%) of respondents taught at the elementary level and had a wide range of teaching experience (29.7% had more than fifteen years of experience). Ten percent of these teachers had hearing impaired students resourced into their classes at one time or another and 12.9% indicated that some of their students had received itinerant hearing services.

Table 7, below, illustrates respondents' evaluations of the hearing impaired program along a number of dimensions. For purposes of discussion, questionnaire items were grouped into three categories: (1) Teacher Understanding of the hearing problem and program, (2) perceived Quality of program-teacher/program-parent Interaction, (3) program Operational Adequacy, and (4) Program Impact adequacy.

It should be noted that only those teachers who indicated that they had either resource students or students receiving itinerant hearing services were instructed to respond to these items. Teachers were requested to indicate their agreement/disagreement with statements by selecting an appropriate number from the scale provided them.

Teacher Understanding of Problem/Program - Responses to the three statements in this cluster indicate that teachers personally feel that their understanding of their students' hearing problems and the impact of these problems on their learning ability is adequate. Respondents feel, however, less convinced that regular classroom teachers as a group are adequately informed as to the nature of the program. The mean response to the first two statements was on the favorable side of the response continuum (3.34 and 3.55 respectively); that for the last item was on the "unfavorable" side (2.55).

Quality of Program-Teacher/Parent Interaction - Responses to the three statements related to this concern indicate a strong need for assistance to the regular classroom teacher in designing special learning approaches

TABLE 7
REGULAR CLASSROOM TEACHERS' EVALUATION OF HEARING PROGRAMS
(N = 35)

		PERCENTAGE RESPONDING WITH EACH OPTION (* = MODAL RESPONSE)						
			STRONGLY DISAGREE	DISAGREE	UNDECIDED	AGREE	STRONGLY AGREE	
		M	S.D.	1	2	3	4	5
TU	I AM GIVEN AN ADEQUATE UNDERSTANDING OF THE EXTENT OF MY STUDENTS' HEARING PROBLEMS.	3.34	-1.51	20.0	14.3	2.9	37.1*	25.7
	I AM GIVEN AN ADEQUATE UNDERSTANDING OF THE IMPACT OF MY STUDENTS' HEARING PROBLEMS ON THEIR LEARNING ABILITY.	3.55	1.44	13.9	16.7	0.0	38.9*	30.6
	IN GENERAL, REGULAR CLASSROOM TEACHERS HAVE BEEN GIVEN AN ADEQUATE EXPLANATION OF THE NATURE OF THE HEARING IMPAIRED PROGRAM.	2.55	1.27	27.8*	22.2	22.2	22.2	5.6
QI	I HAVE BEEN GIVEN ADEQUATE ASSISTANCE IN DESIGNING SPECIAL LEARNING APPROACHES TO COPE MORE EFFECTIVELY WITH THESE STUDENTS' HEARING PROBLEMS.	2.61	1.37	30.6*	19.4	16.7	25.0	8.3
	THE HEARING IMPAIRED PROGRAM IS AN INTEGRAL PART OF THE GENERAL SCHOOL PROGRAM.	3.19	1.39	16.7	19.4	8.3	38.9*	16.7
	THE WORKING RELATIONSHIP BETWEEN THE HEARING IMPAIRED AND REGULAR CLASSROOM TEACHERS CAN GENERALLY BE DESCRIBED AS "GOOD"	3.25	1.25	13.9	13.9	16.7	44.4*	11.1
OA	THE HEARING IMPAIRED TEACHER APPEARS TO HAVE SUFFICIENT TRAINING TO WORK WITH THE CHILDREN OF THEIR PROGRAM.	3.85	.94	2.9	0.0	34.3*	34.3*	28.6
	MOST OF THE CHILDREN WHO ARE IN NEED OF HEARING SERVICES ARE NOW BEING SERVED BY THE HEARING IMPAIRED PROGRAM.	3.14	1.07	11.8	5.9	47.1*	26.5	8.8
	CHILDREN WHO ARE RESOURCED FROM THE HEARING IMPAIRED PROGRAM (ON A PART-TIME BASIS) APPEAR TO BE SPENDING AN ADEQUATE AMOUNT OF TIME IN THAT PROGRAM.	3.17	1.08	5.9	20.6	35.3*	26.5	11.8
	IT IS MY PERCEPTION, THAT STUDENTS WITH HEARING PROBLEMS ARE IDENTIFIED AND PLACED IN A SPECIAL PROGRAM WITHIN A REASONABLE PERIOD OF TIME.	3.30	.92	5.6	8.3	41.7*	38.9	5.6
PI	IN GENERAL, PARENTS OF CHILDREN IN THE VARIOUS HEARING IMPAIRED PROGRAMS ARE SATISFIED WITH THE RESULTS OF THE PROGRAMS.	3.38	.60	0.0	0.0	67.6*	26.5	5.9
	IN GENERAL, REGULAR CLASSROOM TEACHERS ARE SATISFIED WITH THE RESULTS OF THE HEARING IMPAIRED PROGRAMS.	3.31	.79	5.7	0.0	54.3*	37.1	2.9
	I FEEL THAT STUDENTS WITH HEARING PROBLEMS ARE EFFECTIVELY REMEDIATED BY THE HEARING IMPAIRED PROGRAMS.	3.25	1.02	8.3	8.3	41.7*	33.3	8.3

LEGEND: TU = TEACHER UNDERSTANDING OF PROBLEM/PROGRAM
 QI = QUALITY OF PROGRAM - TEACHER/PARENT INTERACTION
 OA = PROGRAM OPERATIONAL ADEQUACY
 PI = PROGRAM IMPACT

to students' hearing impairment. This must be interpreted, however, in light of the relatively infrequent contact between these teachers and deaf or hard of hearing students. The working relationship between program and regular teachers as well as the integration of the hearing program within the general school program is favorably perceived.

Program Operational Adequacy - The four statements in this cluster were included to measure the extent to which the program was perceived as operating adequately in terms of staff selection, availability of services, and timeliness of the student screening/identification process. Average responses to these items were all "program favorable" with the highest marks in this case (3.85), given to "perceived adequacy of hearing impaired teacher training". It should be noted, however, that the modal response in the case of all four statements was "undecided", perhaps indicating a feeling on the part of most respondents, that they were not in an adequate position to evaluate these features of the program.

Program Impact - As with the responses given to "operational adequacy" statements, above, average responses to the three items related to this concern were slightly "favorable". The modal response in the case of all three statements was "undecided" perhaps also reflecting a view on the part of this group of teachers that they were not in an adequate position to evaluate the impact of the hearing program; and perhaps additionally had not received any input from parents regarding their evaluation of the program.

Perceived Behavioral Impact of Program - Table 8 illustrates the impact of the hearing program on students' behavior as perceived by the responding regular classroom teachers. The responses appear to indicate that academic performance and interaction with teachers were the two behaviors most positively improved. Tardiness/absenteeism did not appear to be a problem behavior according to the great majority (71%) of the responding teachers.

Suggestions for Program Improvement - The final item on the questionnaire asked teachers to select suggestions for improvement of the Hearing

Impaired program from a list offered. Table 9 presents the response pattern to this item. Responses suggest that teachers perceived a need for more student involvement in the program, a greater degree of material support, and professional help for related emotional problems.

TABLE 8 PERCEIVED IMPACT OF PROGRAM ON STUDENTS' BEHAVIOR (PERCENTAGE OF REGULAR CLASSROOM TEACHERS RESPONDING) (N = 36)	1 WORSE THAN BEFORE				
	2 NO WORSE THAN BEFORE BUT STILL A PROBLEM	3 WAS NEVER A PROBLEM OR DON'T KNOW	4 SLIGHT IMPROVEMENT	5 SIGNIFICANT IMPROVEMENT	
Academic performance	0.0	9.1	48.5	24.2	18.2
Social interaction with fellow students	0.0	12.1	51.5	15.2	21.2
Interaction with teachers	0.0	6.3	50.0	15.6	28.1
Tardiness/absenteeism	0.0	9.7	71.0	12.9	6.5

Table 9
Classroom Teachers' Suggestions for Program Improvement
(n=35)

	N	%
More time per day with the instructor of the hearing impaired	10	28.6
More time per day under my direct classroom supervision	1	2.9
Better qualified instructors of the hearing impaired	2	5.7
Better equipment (hearing aides, etc.) to assist in overcoming the hearing impairment	9	25.7
More time devoted to associated emotional problems by professional personnel	9	25.7

Teachers' of the Hearing Impaired Evaluation of the Program

The following section presents evaluative responses made by thirty-seven teachers of the hearing impaired. Of the thirty-seven teachers, seven served mildly hearing impaired children enrolled in the regular program on an itinerant basis and thirty served children enrolled in the Exceptional Child program in special classrooms on a full or almost full-time basis. Some of these children are resourced into the regular program for part of the day when to do so appears in their best interests.

Data descriptive of these teachers and their students is presented in the appendix to this report. Approximately two-thirds of the respondents teach at the elementary level. The vast majority of both itinerant and self-contained teachers are appropriately certified (71% and 86% respectively) and the median years of experience teaching the hearing impaired is 6.0.

Table 10, below, presents responses of itinerant and self-contained teachers to statements regarding a number of program dimensions. Some of the statements are more applicable to the full-time (self-contained) situation than to the itinerant situation. As a consequence of this, although responses to all statements are provided in the table for both classes of teacher, the narrative focuses only upon those items most appropriate to the class of teacher being discussed. For purposes of simplifying the discussion, statements pertaining to similar dimensions and program functions have been placed together in titled groups. These groupings describe (1) adequacy of support, (2) perceived adequacy of teacher training, (3) adequacy of program impact, and (4) adequacy of vocational preparation opportunities for students.

Adequacy of Support - This grouping includes six statements related to adequacy of information on incoming students, adequacy of financing and facilities, reasonableness of student load, and awareness and support of the program by regular teachers. For itinerant teachers, responses to these items were mixed, with teachers indicating satisfaction with the support received by regular school personnel, the number of children assigned to them and the availability of financial support, and dissatisfaction

TABLE 10
ITINERANT AND SELF-CONTAINED TEACHERS OF THE HEARING IMPAIRED
RESPONSES TO PROGRAM EVALUATION STATEMENTS
 (n = 7, n = 30)

			PERCENTAGE RESPONDING WITHIN EACH OPTION (* = MODAL RESPONSE)						
			STRONGLY DISAGREE	DISAGREE	UNDECIDED	AGREE	STRONGLY AGREE		
			M	S.D.	1	2	3	4	5
S	I IN GENERAL, REQUIRED REPORTS AND INFORMATION (TEST RESULTS, PSYCHOLOGICAL EVALUATION, SOCIAL CASE HISTORY, ETC.) ON IN-COMING CHILDREN ARE SUFFICIENTLY COMPLETE.	3.28 2.68	1.25 1.33	0.0 20.7	42.3* 34.5*	0.0 10.3	42.9* 24.1	14.3 10.3	
	I FEEL THE NUMBER OF CHILDREN ASSIGNED TO ME IS REASONABLE.	4.00 3.93	1.41 1.20	14.3 0.0	0.0 23.3	0.0 3.3	42.9* 30.0	42.9* 43.3*	
	I IN GENERAL, REGULAR CLASSROOM TEACHERS HAVE AN ADEQUATE UNDERSTANDING OF THE NATURE AND PURPOSE OF MY HEARING IMPAIRED PROGRAM.	2.71 2.00	.95 1.01	0.0 33.3	57.1* 46.7*	14.3 10.0	28.6 6.7	0.0 3.3	
	I FEEL THE AMOUNT OF MONEY AVAILABLE TO ME FOR PURCHASE OF CURRICULAR AND OTHER MATERIALS IS ADEQUATE.	3.57 3.09	1.13 1.32	0.0 20.0	28.6 10.0	0.0 20.0	57.1* 40.0*	14.3 10.0	
	I FEEL THE FACILITIES IN WHICH MY CLASSES ARE HOUSED ARE ADEQUATE.	2.50 3.79	1.64 1.54	33.3* 17.2	33.3* 6.9	0.0 3.4	16.7 24.1	16.7 48.3*	
	I IN GENERAL, REGULAR SCHOOL PERSONNEL ARE SUPPORTIVE OF MY HEARING IMPAIRED PROGRAM.	4.14 3.69	.37 1.02	0.0 3.3	0.0 10.0	0.0 20.0	85.7* 46.7*	14.3 20.0	
T	I FEEL I HAVE HAD SUFFICIENT TRAINING TO WORK EFFECTIVELY WITH HEARING IMPAIRED CHILDREN.	4.42 4.19	.53 1.12	0.0 3.3	0.0 10.0	0.0 3.3	57.1* 30.0	42.9 53.3*	
	I FEEL THAT THERE IS A NEED FOR MORE INSERVICE TRAINING PROGRAMS FOR TEACHERS OF THE HEARING IMPAIRED.	3.71 3.81	1.38 1.13	0.0 9.1	28.6 4.5	14.3 4.5	14.3 59.1*	42.9* 22.7	
I	I AM GENERALLY SATISFIED WITH THE RESULTS OF MY PROGRAM.	4.14 3.76	.37 1.22	0.0 6.7	0.0 13.3	0.0 6.7	85.7* 43.3*	14.3 30.0	
	(FOR RESOURCE AND ITINERANT TEACHERS ONLY). I AM GENERALLY AWARE OF THE IMPACT OF MY SERVICES ON THE PERFORMANCE OF MY STUDENTS IN THEIR REGULAR CLASSROOM SETTINGS.	4.42 3.77	.53 1.20	0.0 0.0	0.0 22.2	0.0 11.1	57.1* 33.3*	42.9 33.3*	
	IT HAS BEEN MY EXPERIENCE THAT STUDENTS SERVED BY THE VARIOUS HEARING IMPAIRED PROGRAMS ARE ABLE TO COMPLETE SCHOOL AND GRADUATE WITH THE SAME LEVELS OF COMPETENCE AS OTHER STUDENTS.	2.85 2.00	1.06 1.06	0.0 40.9*	42.9* 31.8*	42.9 13.6	0.0 13.6	14.3 0.0	
V	I FEEL THAT CAREER EDUCATION PROGRAMS ARE AS AVAILABLE TO THE HEARING IMPAIRED STUDENTS AS THEY ARE TO OTHER STUDENTS.	2.33 2.50	1.21 1.31	33.3* 32.1*	16.7 17.9	33.3* 25.0	16.7 17.9	0.0 7.1	
	I FEEL THAT THE TYPES OF EXPOSURE (TO CAREER AREAS, ETC.) GIVEN THE HEARING IMPAIRED STUDENT IN CAREER EDUCATION PROGRAMS ARE APPROPRIATE.	2.33 2.50	1.21 1.14	33.3* 23.1	16.7 26.9	33.3* 30.8	16.7 15.4	0.0 3.8	
	I FEEL THAT VOCATIONAL TRAINING PROGRAMS ARE GENERALLY AS AVAILABLE TO THE HEARING IMPAIRED STUDENTS AS TO OTHER STUDENTS.	2.66 2.55	1.03 1.15	16.7 22.2	16.7 25.9	50.0* 29.6*	16.7 18.5	0.0 3.7	
	I FEEL THAT VOCATIONAL TRAINING PROGRAMS IN WHICH HEARING IMPAIRED STUDENTS ARE ENROLLED:								
	A. STRESS SKILLS WHICH THE HEARING IMPAIRED STUDENT CAN REASONABLY BE EXPECTED TO MASTER.	3.00 2.82	.63 1.30	0.0 21.7	16.7 17.4	66.7* 26.1*	16.7 26.1*	0.0 8.7	
	B. ARE ORIENTED TOWARD SKILLS WHICH ARE IN DEMAND IN TODAY'S JOB MARKET.	3.00 2.65	.63 1.15	0.0 17.4	16.7 26.1	66.7* 39.1*	16.7 8.7	0.0 8.7	
	C. EMPLOY SUPPORTIVE MATERIALS (BOOKS, MANUALS, ETC.) THAT ARE AT AN APPROPRIATE LEVEL FOR THE VERBAL SKILLS OF THE HEARING IMPAIRED.	3.00 2.43	.63 1.12	0.0 21.7	16.7 34.8*	66.7* 26.1	16.7 13.0	0.0 4.3	
	D. ADEQUATELY MEET THE NEEDS OF THE HEARING IMPAIRED STUDENT IN TERMS OF ASSISTANCE IN THE OPERATION OF SHOP EQUIPMENT, ETC.	2.50 2.65	.83 1.22	16.7 21.7	16.7 21.7	66.7* 34.8*	0.0 13.0	0.0 8.7	
	E. PROVIDE ADEQUATE JOB PLACEMENT SERVICES FOR THE HEARING IMPAIRED.	2.83 2.37	.40 .96	0.0 25.0	16.7 20.8	83.3* 45.8*	0.0 8.3	0.0 0.0	

Response of parents of children receiving itinerant services.

Response of parents of children in self-contained or resource programs.

LEGEND: S = SUPPORT ADEQUACY, T = TRAINING ADEQUACY, I = PROGRAM IMPACT, V = VOCATIONAL TRAINING ADEQUACY

with what they perceive to be the extent of understanding of their program by regular classroom teachers, and especially with the classroom facilities available to them. Also, interesting to note is the bimodal distribution of responses to the statement pertaining to adequacy of reports and information. Apparently equal sized groups agree and disagree with the proposition that such reports are sufficiently complete.

Responses made by "self-contained" teachers were generally less "program favorable" than those given by itinerant teachers, with one exception — their evaluation of facility adequacy. Whereas a majority of the itinerant teachers felt strongly that their facilities were inadequate, the majority of "self-contained" teachers felt that theirs were quite adequate. This response is no doubt due to the fact that hearing impaired students receiving hearing services, in a self-contained classroom, do so in "special education" wings, or buildings in special school centers, all of which are more than adequate in terms of physical accommodations.

Although the mean numerical response to most other items in this group was slightly below that for the itinerant teachers, the pattern of responses made to individual items and the relative evaluation of support adequacy was essentially similar, i.e., most teachers felt that regular classroom teachers were supportive of their program, but felt that they needed better understanding of the nature and purpose of the Hearing Impaired Program. Most felt satisfied with the number of children that they were expected to serve. It should be noted that there was a greater dissatisfaction with the completeness of required reports and information on incoming children than was the case with the itinerant teachers.

Adequacy of Training - Two statements were included to ascertain the extent to which teachers felt their preparation for instructing the hearing impaired was adequate. Responses indicate that the itinerant teachers feel that they have sufficient training to work effectively, but also feel a strong need for more inservice training programs.*

* Specific suggestions for appropriate inservice training are given in response to another item in the questionnaire, reported later in this section.

Responses to these statements by "self-contained" teachers were similar to those given by itinerant teachers. Most felt that they had sufficient training to work effectively with hearing impaired children but felt a strong need for more inservice training.

Adequacy of Program Impact. Three statements (one included especially for itinerant teachers) dealt with teachers' perceptions of program impact. Responses indicate that itinerant teachers feel aware of the impact of their services on their students' regular classroom performance, are satisfied with the results of their program, and yet, relative to normal students, see hearing impaired students suffering a continuing handicap in respect to completion of schooling with acceptable levels of competence.

"Self-contained" teachers' responses indicate a generally less favorable view of program impact than that given by the itinerant teachers. This finding appears reasonable, given the relatively more serious nature of the impairment with which self-contained teachers work. Responses indicate that these teachers are generally satisfied with the results of their program but "strongly disagree" with the proposition that hearing impaired students are able to complete school and graduate with the same level of competence as other students.

Adequacy of Vocational Training Opportunities - Eight statements regarding the adequacy of career education (orientation) programs as well as vocational (skills) training programs for the hearing impaired were included in the questionnaire. More than for any other item grouping, itinerant teachers' responses to these statements indicated a great deal of uncertainty (indicated by a large number of responses in the middle or "undecided" response category) based, perhaps, on a lack of contact of itinerant teachers with existing vocational programs. Responses from the bulk of other teachers regarding availability and appropriateness of career education programs were on the unfavorable side of the response continuum. Responses to statements regarding the adequacy of vocational training (in terms of appropriateness of skills taught and appropriateness of supportive material used) were evenly split about the modal "undecided" response. Responses to the final

two statements regarding the adequacy of assistance received by the students in the operation of shop equipment, and the adequacy of job placement services were on the "unfavorable" side of the response continuum. So many of these responses were "undecided" that no strong conclusions about the adequacy of the vocational program for the hearing impaired can be drawn.

For "self-contained" teachers, responses parallel those of itinerant teachers. Responses seem to indicate that self-contained teachers feel that career education programs are not as available to the hearing impaired student as to the hearing student and that the content (career areas) presented are inappropriate. Most of these teachers make similar, unfavorable comments about the vocational (skills) training occurring at the secondary level.

Preference for In-Service Training Opportunities - To determine precisely what kinds of inservice training programs teachers felt would be most helpful, a question relating to this issue was placed in the questionnaire. As previously indicated some 80% of self-contained teachers and 57% of itinerant teachers agreed with the proposition that there was a need for more inservice training. Table 11, below, illustrates the number and percentage of teachers selecting the inservice options presented.

TABLE 11

PREFERENCE FOR IN-SERVICE TRAINING PROGRAMS AS INDICATED BY ITINERANT TEACHERS (n = 7) AND SELF-CONTAINED TEACHERS (n = 30)	ITINERANT TEACHERS		SELF-CONTAINED TEACHERS	
	N	%	N	%
Basic sign language instructional methodology.	2	28.5	19	63.3
Instructional methodology in various other systems of sign language.	1	14.2	12	40.0
Piagetian learning theory	1	14.2	10	33.3
Language development (grammar, syntax, etc.)	4	57.1	17	56.6
Speech development	4	57.1	12	40.0
Auditory training	4	57.1	10	33.3
Adoption of other instructional systems (for example, Dade Reading and Math Systems) for use with hearing impaired children.	5	71.4	16	53.3
Other	3	42.3	7	23.3

From the results displayed above, it appears that, for the itinerant teachers, inservice courses in the adoption of other instructional systems for use with hearing impaired children would be most highly desired, followed by courses in language development, speech development, and auditory training. For "self-contained" teachers, courses in basic sign language methodology, language development and adoption of other systems were desired by over half of the respondents.

Reasons for Student Withdrawal from Program - Two items in the questionnaire dealt with the reasons students withdrew from the program. Since only those students in self-contained or resource class situations can properly be considered "in the program", only responses from self-contained teachers are treated. Table 12 illustrates responses to these items.

TABLE 12
METHODS OF STUDENT WITHDRAWAL FROM PROGRAM
ACCORDING TO "SELF CONTAINED" TEACHERS' RECOLLECTIONS
(MEDIAN PERCENT WITHDRAWN BY METHODS INDICATED)

	(n = 30)	%
Withdrawn because of parent and/or student request.		11.0
Supposed financial need.		6.7
Perceived inappropriateness of program.		66.7
Parent's desire for a residential setting.		13.3
Problems in social interaction.		6.7
Completion of available education of programming.		6.7
Completed program and given a regular diploma.		80.0
Administratively terminated.		10.0

The table indicates that the most prevalent method of withdrawal was "completion of program and receipt of a regular diploma". For those (11%) who withdrew because of parent or student request, the most frequently perceived underlying reason was a perception of program inappropriateness on the part of the parent or the student.

Instructional Methodology Utilized - The next item in the questionnaire provided a survey of instructional methodology currently being used by the teachers of the hearing impaired.

TABLE 13
INSTRUCTIONAL METHODOLOGY CURRENTLY USED
BY TEACHERS OF THE HEARING IMPAIRED

Instructional Method Used	ITINERANT TEACHERS		SELF-CONTAINED TEACHERS	
	N	%	N	%
Oral only	7	100.0	11	36.7
Oral and finger spelling/sign language	0	0.0	19	63.3
Sign language only	0	0.0	0	0.0

One hundred percent of itinerant teachers report using an oral method only. Slightly more than one-third (36.7%) of "self-contained" teachers use the oral method only, the remainder use a combination of oral and finger spelling/sign language.

Perceived Adequacy of Fusing - An item was included to assess the extent to which self-contained teachers felt that fusing of their students into the regular program was occurring with sufficient frequency. As indicated in Table 14, below, slightly more than half of these teachers (53.6%) felt that this was not occurring with adequate frequency. All reasons provided in the questionnaire for this phenomenon were felt to be reasonable explanations for this occurrence.

TABLE 14

SELF-CONTAINED TEACHERS' REACTION TO THE ADEQUACY OF FUSING (n = 28)		
Fusing into regular programs is occurring with sufficient frequency:		
	<u>N</u>	<u>%</u>
YES	13	46.4
NO	15	53.6
If no, what obstacles are standing in the way of more frequent fusing (check as many as apply):		
	<u>N</u>	
Resistances to the practice at the level of the individual school.	<u>7</u>	
Inadequate facilities/equipment in the regular classroom.	<u>7</u>	
Inadequate support for the practice from area or county levels.	<u>5</u>	

Equipment Availability - As with many of the other exceptional child programs, adequate remediation of the hearing impaired is dependent upon the availability of required equipment items. As illustrated in Table 15, itinerant teachers listed "auditory training equipment" and "movies and projector" as items which were "never" available when needed. Teachers in the self-contained program provided a generally more favorable view of equipment availability, however, a substantial percentage (44.8%) indicated that language masters were "never" available when needed.

TABLE 15
EQUIPMENT AVAILABILITY
(PERCENT OF TEACHERS INDICATING EXTENT OF AVAILABILITY)

	ITINERANT TEACHERS (n = 7)			SELF-CONTAINED TEACHERS (n = 30)		
	ALWAYS	SOMETIMES	NEVER	ALWAYS	SOMETIMES	NEVER
Auditory Training Equipment	20	20	60	57.1	17.9	25.0
Phonograph	20	80	0	72.4	13.8	13.8
Language Master	0	66.7	33.3	31.0	24.1	44.8
Film Strip and Projector	0	60	40	75.9	17.2	6.9
Movies and Projector	0	40	60	69	31	0
Overhead Projector	0	60	40	75.9	20.7	3.4
Tape Recorder	50	33.3	16.7	58.6	20.7	20.7

25

Student Problems Noted at Time of Entry to Program - Providing a "problem profile" of entering students, results in Table 16 indicate that, in the case of both itinerant and self-contained students, "most" exhibited academic problems, whereas only "some" exhibited problems in the other areas listed.

TABLE 16

STUDENT PROBLEMS NOTED BY TEACHERS AT TIME OF ENTRY
(MEDIAN PROPORTION CHECKED)

	Proportion of Students ITINERANT				Proportion of Students SELF-CONTAINED			
	None	Some	Most	All	None	Some	Most	All
Academic			X				X	
Getting along with peers		X				X		
Getting along with teachers		X				X		
Absence, tardiness		X				X		

Achievement of Hearing Impaired Students

Presentation of achievement data for special populations is customarily dependent upon the presence of suitable norms or standards against which to compare the performance of the special sample. There are those who would defend the legitimacy of comparing the achievement of "exceptional" children with that of a normal population. The assumption made is that the special program goals should be to remediate deficits to the point where achievement approximates that of the normal population. Other views would hold that this expectation is excessively optimistic and that norms against which the performance of special groups should be compared ought to be derived from those groups solely.

Prior to this evaluation, no routine achievement testing (comparable to the Countywide Achievement Testing Program) of Dade's hearing impaired students was performed. Occasionally, mildly impaired students enrolled in the regular program and receiving itinerant hearing services would participate in the countywide programs along with their non-impaired classmates, but not in sufficient number to constitute an adequate sample from which to draw inferences about this population. Additionally, the performance of these students was comparable only to standards derived from (and for) the normal population.

Two years ago, a special version of the 1973 edition of the Stanford Achievement Test was developed by Harcourt Brace Jovanovich (now the Psychological Corporation), in cooperation with the Office of Demographic Studies at Gallaudet College, a Washington D.C. institution of higher learning for the deaf and hard of hearing. Dade's hearing impaired population (both those enrolled in the Exceptional Child Program full-time as well as those in the regular program but receiving itinerant hearing services) were tested with this instrument as part of a program to establish national norms for this special test. Approximately 7,500 hearing impaired children, spanning the continuum of impairment and in all kinds of programs, including residential schools for the deaf, private day schools and public school day classes (self-contained, resource, and students in regular programs receiving itinerant services) were tested as part of this effort. For purposes of this report, data from that testing is

presented. Additionally, there will be a special testing of the entire Dade Hearing Impaired population in the late spring of this school year (1975-76) to provide a contemporary evaluation of this group's achievement. The results of this testing will be presented in a postscript to the current evaluation early in the 1976-77 school year. Mounting of this testing effort required lead time that was excessively long for inclusion of results in this report.

Table 17, below, presents average percentile scores of 100 of the hearing impaired students who were part of the 1973-74 norming sample. The sample was selected randomly, to include the same relative proportion of "self-contained" and "itinerant" students as exist in the Dade population.

As illustrated by Table 17, Dade's hearing impaired population ("All Hearing Impaired") scored at or above the fiftieth percentile on all three subtests.

Separate means were also computed for achievement of students receiving itinerant services, and those receiving services in self-contained or resource settings. As would be expected, the less impaired "itinerant" students show a relatively better achievement record than the more severely impaired "self-contained or resource" students.

Table 17
Average (1973-74) Achievement of a Sample of Dade's Hearing Impaired Students
Expressed in Terms of Percentile Ranking
(n=100)

	Reading Comprehension		Math Concepts		Math Computation		Math Application	
	Mean %ile	Std. Dev.	Mean %ile	Std. Dev.	Mean %ile	Std. Dev.	Mean %ile	Std. Dev.
All Hearing Impaired	53.4	30.1	53.0	29.7	50.3	29.8	49.7	28.1
Itinerant	64.8	31.2	62.0	27.5	58.2	29.9	68.2	22.6
Self-Contained or Resource	47.7	28.1	48.4	29.9	45.4	29.1	49.7	28.1

Responses of Parents Whose Children Are Currently Enrolled at the Florida State School For the Deaf and Hard of Hearing (St. Augustine)

Approximately 100 questionnaires were sent to parents of school-age deaf children currently attending the Florida State School for the Deaf at St. Augustine. Some of these children had been enrolled in Dade's pre-school and elementary programs and others had not. The comments of both classes of parents who perceived St. Augustine as a superior alternative to the Dade program were of interest. Information gathered included a description of their child's history in the Dade system, reasons for enrolling the child in St. Augustine, and evaluation of the relative merits of the St. Augustine and Dade hearing programs along a number of dimensions (where appropriate). Tables 18 through 21 present the results of this survey.

Data descriptive of the children of responding parents is included in the appendix to this report. St. Augustine students from Dade County, unlike those enrolled in Dade's Hearing Impaired program are predominantly (66.0%) white and the majority (71.7%) are at the junior or senior high school level. 87.5% of these students were previously enrolled in a Dade County school and 76.7% were previously enrolled in one of Dade's Hearing Impaired programs.

In reviewing evaluative responses of these parents, it should be borne in mind that they withdrew their children because, in an absolute sense, they thought critical aspects of the Dade program to be lacking or, in a relative sense, they felt that the St. Augustine program had more to offer. Responses from these parents should not, therefore, be interpreted as a general evaluation of the program but rather as a compilation of reasons why a rather select group of parents saw fit to remove their children from the system.

Table 18 on the following page indicates the degree of satisfaction or dissatisfaction with aspects of the Dade Hearing Impaired program as indicated by parents of children previously enrolled in a Dade hearing impaired program. In reviewing this table it can be noted that the mean of responses to individual program dimensions are all on the "dissatisfied"

TABLE 18

SATISFACTION/DISSATISFACTION WITH DADE'S HEARING SERVICES
PARENTS OF CHILDREN PREVIOUSLY ENROLLED IN A DADE PROGRAM

(N = 33)

	PERCENTAGE OF PARENTS SELECTING EACH RESPONSE OPTION (* = MODAL RESPONSE)						
	M	S.D.	EXTREMELY DISSATISFIED 1	DISSATISFIED 2	NEITHER SATISFIED Nor DISSATISFIED 3	SATISFIED 4	EXTREMELY SATISFIED 5
A. PERSONAL INTERACTION OF MY CHILD WITH HIS/HER TEACHER(S).	2.93	1.33	20.0	20.0	16.7	33.3*	10.0
B. EXCELLENCE OF INSTRUCTION.	2.36	1.22	30.0*	30.0*	16.7	20.0	3.3
C. OPPORTUNITY FOR PARTICIPATION IN ACTIVITIES.	2.53	1.13	16.7	43.3*	13.3	23.3	3.3
D. OPPORTUNITY FOR PARTICIPATION IN ATHLETICS.	2.37	1.17	27.6	31.0*	20.7	17.2	3.4
E. STAFF TRAINING/COMPETENCE.	2.41	1.20	29.0*	25.8	22.6	19.4	3.2
F. OPPORTUNITY TO LEARN ABOUT THE WORLD OF WORK.	2.0	1.00	38.7*	32.3	19.4	9.7	0.0
G. OPPORTUNITY TO ACQUIRE SALEABLE, VOCATIONAL SKILLS.	2.0	.96	38.7*	29.0	25.8	6.5	0.0
H. IMPACT OF THE PROGRAM ON MY CHILD'S ACADEMIC ACHIEVEMENT.	1.93	1.03	45.2*	25.8	19.4	9.7	0.0
I. QUALITY AND EXTENT OF MY CHILD'S SOCIAL INTERACTION WITH OTHER DEAF CHILDREN.	2.80	1.25	19.4	22.6	22.6	29.0*	6.5
J. QUALITY AND EXTENT OF MY CHILD'S SOCIAL INTERACTION WITH HEARING CHILDREN.	2.79	1.13	13.3	30.0	23.3	30.0*	3.3
K. OPPORTUNITY FOR DEVELOPMENT OF AN ADEQUATE SELF-CONCEPT.	2.09	1.04	32.3	38.7*	19.4	6.5	3.2
L. MY CHILD'S ENJOYMENT OF THE PROGRAM.	2.26	1.28	36.7*	26.7	16.7	13.3	6.7
M. ADEQUACY OF INFORMATION GIVEN ME CONCERNING THE DADE PROGRAM.	2.25	1.29	33.7*	25.8	9.7	22.6	3.2
N. ADEQUACY OF INFORMATION GIVEN ME CONCERNING MY CHILD'S HEARING IMPAIRMENT BY DADE SCHOOLS.	2.44	1.37	37.9*	13.8	20.7	20.7	6.9

side of the scale, i.e., are 2.99 or lower, a largely expected finding. In examining both the relative size of the means and the percentages of parents selecting individual response options for a specific dimension, it appears that the greatest amount of dissatisfaction was felt for the impact of the hearing impaired program on the academic achievement of the child (h), followed closely by dimensions related to vocational training (dimensions f and g). Relatively high levels of satisfaction were attributed to the personal interaction existing between the child and his/her teacher (a), and the child's social interaction with other deaf, as well as hearing, children (i and j).

Table 19, on the following page, displays parents' relative evaluation of the Dade and St. Augustine programs along a number of dimensions.

Assuming that previously discussed qualifications are kept in mind, the results appear to indicate a relatively favorable evaluation of St. Augustine along the dimensions listed. Universal agreement that the St. Augustine program was better was indicated for "activity participation" and "career education" dimensions (items 3 and 6). Relative to other dimensions, Dade was evaluated most favorably in terms of the child's enjoyment of the program (item 11) and self-concept development (10).

Table 20 illustrates reasons given by parents whose children were never in the Dade program for enrolling them in St. Augustine. Parents were instructed to check three of the most important reasons in the list.

The most popular reason for enrollment was the perception that St. Augustine offered a "broader range of services". Relatively many parents also identified vocational preparation, opportunity to engage in activities, staff competence, and instructional tactics as reasons for enrollment.

The next item in the questionnaire asked parents to indicate if there were any "strongly negative" factors associated with the residential aspect of the St. Augustine program. Table 21 illustrates responses to this item. Responses by parents were evenly split on this question with slightly more than half (52.5%) indicating that there were negative factors associated with their children living away from home. Negative factors most frequently identified were loss of contact with the child, and travel time/expense consumed in visitations.

TABLE 19

RELATIVE EXCELLENCE OF THE DADE AND ST. AUGUSTINE
HEARING PROGRAMS ALONG A NUMBER OF DIMENSIONS AS
PERCEIVED BY PARENTS OF CHILDREN PREVIOUSLY ENROLLED
IN A DADE HEARING PROGRAM (n = 33)

	ST. AUGUSTINE BETTER 1	DADE BETTER 2	SCHOOLS ARE EQUAL 3	NO BASIS FOR COMPARISON 4
1. Personal interaction of my child with his/her teacher.	88.2*	0.0	0.0	11.8
2. Excellence of instruction.	97.0*	0.0	3.0	0.0
3. Opportunity for participation in activities.	100.0*	0.0	0.0	0.0
4. Opportunity for participation in athletics.	97.0*	0.0	3.0	0.0
5. Staff training/competence.	91.2*	0.0	2.9	5.9
6. Opportunity to learn about the world of work.	100.0*	0.0	0.0	0.0
7. Opportunity to acquire saleable, vocational skills.	97.0*	0.0	0.0	3.0
8. Impact of the program on my child's academic achievement.	97.1*	0.0	2.9	0.0
9. Quality and extent of my child's social interaction with other children.	84.8*	3.0	0.0	12.1
10. Opportunity for development of an adequate self-concept.	90.9*	3.0	6.1	0.0
11. My child's enjoyment of the program.	94.1*	2.9	2.9	0.0
12. Adequacy of information given me concerning the program.	91.2*	0.0	6.8	0.0
13. Adequacy of information given me concerning my child's hearing impairment.	81.8*	0.0	15.6	3.1

* = Modal response

TABLE 20 NUMBER OF PARENTS SELECTING REASONS FOR ENROLLING THEIR CHILDREN IN THE ST. AUGUSTINE HEARING PROGRAM (CHILDREN NEVER ENROLLED IN A DADE PROGRAM n = 10*)	
	N
a. I felt that St. Augustine offered a broader range of services.	17
b. I felt that my child would not feel "different" if he/she were in a residential setting populated by other hard-of-hearing children.	6
c. I felt that the competence/training of the staff at St. Augustine was superior to that of the Dade staff.	12
d. I felt that my child would have greater opportunity to engage in sports and other activities at St. Augustine.	9
e. I felt that my child would be more able to acquire saleable vocational skills at St. Augustine.	12
f. I felt that the instructional tactics employed at St. Augustine were superior to those employed in Dade's programs.	11
g. I felt that my child would enjoy the program more at St. Augustine.	3
h. I felt that my child could make more friends at St. Augustine than in one of Dade's programs.	2
i. Other	2

* Only those parents who had children not previously enrolled in one of Dade's hearing programs were directed to respond to this item--obviously, a significant number of those who had children enrolled in a Dade program also responded.

TABLE 21

PERCEIVED NEGATIVE FACTORS ASSOCIATED WITHIN THE RESIDENTIAL ASPECT OF THE ST. AUGUSTINE PROGRAM. (% OF PARENTS SELECTING EACH OPTION).

29.1 My loss of contact with my child.

8.3 My child's lack of interaction with a "normal" world.

16.6 My role of parent being assumed by "house-parents" and other staff.

20.8 Travel time/expense consumed in visitations.

14.6 Other

The last item in the questionnaire asked parents to indicate whether or not their child had adequate numbers and quality of relationships with other children in the neighborhood prior to their entry into the St. Augustine program. Slightly more than two-thirds of the respondents (68.7%) indicated that they had.

APPENDIX
DESCRIPTION OF RESPONDENTS

CHARACTERISTICS OF DADE HEARING IMPAIRED STUDENTS WHOSE PARENTS RESPONDED TO QUESTIONNAIRE	HEARING IMPAIRED SAMPLE	
	N	%
<u>Number</u>	220	55
<u>Sex:</u>		
Male	120	55.3
Female:	97	44.7
<u>Ethnic Origin:</u>		
White	97	45.1
Spanish	71	33.0
Black	45	20.9
Asian/Pacific Islander	2	.9
<u>Grade Level:</u>		
Pre-School	28	13.6
Elementary	131	63.6
Junior High	30	14.6
Senior High	17	8.3
<u>Age:</u>		
0 - 5	16	8.0
6 - 10	73	36.5
11 - 15	82	41.0
16 - 20	29	14.5
<u>Services Received:</u>		
Full-time (self-contained class)	110	50.0
Part-time (resourced into regular class)	79	35.9
Itinerant (placed in regular class)	62	28.1
Speech Therapy	98	44.5
<u>Severity of Hearing Loss:</u>		
Mild	21	11.2
Moderate	68	36.2
Severe and profound	99	52.7
<u>Length of Time Enrolled in Program:</u>		
0 - 2 years	72	34.1
3 - 4 years	44	20.9
More than 4 years	95	45.0

INFORMATION DESCRIPTIVE OF "SELF-CONTAINED" AND ITINERANT HEARING TEACHERS AND THEIR CLASSES (n = 7 Itinerant; 30 Self-Contained)	RESPONSES	
	Itinerant	Self-Contained
Administrative Area of Assignment		
Northeast	1	0
Northwest	2	7
North Central	1	9
South Central	2	5
Southwest	1	7
South	0	2
Distribution of Students Served by Grade Level (percent of teachers)		
K - 2	13.2	28.4
3 - 4	19.8	16.6
5 - 6	31.1	22.4
7 - 12	35.8	31.5
Ethnicity of Students Served (median percent category)		
White	21-40%	21-40%
Black	0-20%	0-20%
Spanish	41-60%	41-60%
Students' Involvement with Other Handicaps (median percent involved)		
Mental Retardation	10.0%	30.0%
Physical Handicap	6.0%	25.0%
Emotional Disturbance	11.0%	30.0%
Vision Handicap	6.0%	16.0%
Percent of Teachers Certified in Exceptionality Areas		
Hearing Impaired	71.0%	86.0%
Speech-Language Impaired	14.0%	23.0%
Degrees Held (percent of teachers)		
B.A. or B.S.	85.8	53.3
M.A. or M.S.	42.8	60.0
Ph.D. or Ed.D.	0.0	3.3
Years of Teaching Experience (median)	5.0	8.0
Years of Teaching Experience in Currently Assigned exceptionality area (median)	2.0	6.0
Years of Experience Teaching the Hearing Impaired (median)	5.0	6.0
Median Number of Children Served	16.5	8.0

DESCRIPTION OF HEARING IMPAIRED (DEAF) CHILDREN
OF RESPONDING "ST. AUGUSTINE" PARENTS

(n = 48) *

	N	%
<u>Sex:</u>		
Male	28	59.6
Female	19	40.4
<u>Ethnic Origin:</u>		
White	31	65.0
Spanish	10	21.3
Black	6	12.8
<u>Child's Current Grade Level:</u>		
Pre-school	0	0.0
Elementary	12	26.1
Junior High School	19	41.3
Senior High School	14	30.4
<u>Extent of Hearing Impairment:</u>		
Mild (30 to 40 db loss)	0	0.0
Moderate (50 to 60 db loss)	5	10.9
Severe (70 db plus greater loss)	41	89.1
Median years attended school at St. Augustine?	<u>3.0</u>	
Previously enrolled in a Dade County School?	<u>Yes</u>	42 87.5
	<u>No</u>	10 23.3
Median years ago enrolled:	<u>4</u>	
Median age now:	<u>15</u>	
Median age when left Dade County Schools:	<u>11</u>	
Previously enrolled in a hearing impaired program in Dade?	<u>Yes</u>	33 76.7
	<u>No</u>	6 12.5
<u>(If yes): hearing services received:</u>		
Self Contained	23	71.9
Resource	5	15.6
Itinerant Services	4	12.5

*This n-count represents all St. Augustine parents who responded to the questionnaire. Tabled data displayed in the body of this report displays responses made by subsets of this sample.

