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ABSTRACT

Developed by the staff of the Albuquerque Integration Model (Project AIM Outreach), the guidelines present a framework for organizing and conducting an integrated classroom for handicapped and nonhandicapped preschoolers. AIM is reviewed in terms of its conception of placement along a continuum of less restrictive environments. Guidelines center on four program aspects: (1) preparation (staffing, curriculum choice); (2) placement (placement of handicapped children and selection of nonhandicapped children); (3) planning and implementation strategies (educational assessment, individualized education plans, classroom rules, the environment, classroom planning, schedules, play, classroom strategies); and (4) parent/professional partnerships. Appended material includes an overview of selected criterion-referenced tests and criteria for integrating mainstreaming handicapped children in the form of a checklist. (CL)

MAKING INTEGRATION WORK

A Guide to Integrating Handicapped and Nonhandicapped Preschool Children

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The Albuquerque Integration Model (AIM)

Project AIM Outreach

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Segments of this Guide were authored by specific individuals, and these are duly noted. The majority of the Guide represents a collaborative effort, and authors have not been designated.

TABLE OF CONTENTS

Introduction

In 1978, Albuquerque Special Preschool in New Mexico received a three year grant to develop a model to integrate handicapped and nonhandicapped preschool children between the ages of two and five. This was a model demonstration project funded by Handicapped Children's Early Education Program (HCEEP) in the Office of Special Education and Rehabilitative Services, U.S. Department of Education. Since 1981, the Albuquerque Integration Model has received outreach funding on an annual basis to provide training and technical assistance based on this model. Making Integration Work is a product that was developed under this program. It provides a framework for organizing and running an integrated classroom. Included are: staff considerations, curriculum information, teaching strategies, and ideas for working with parents.

Rationale for Integration

Research has been done to determine the effects of integrating handicapped children into regular classrooms. One such study was done by Ispa and Matz in 1978 in a mainstreamed, cognitively-oriented program. They found an unexpected surge in developmental growth for both handicapped and nonhandicapped children. Based on normal development (one month developmental gain per calender month), these children gained an average of 2.07 months for each month enrolled. Other researchers found that parents of both handicapped and nonhandicapped children viewed the interactive experience in an integrated classroom as aiding in positive self concepts for their children (Roddy, 1980; Vincent, Brown, and Getz-Shifted, 1981).

Other studies have shown conflicting results. This is not surprising. Research in the educational arena is difficult. To compare different educational programs, one must control variables such as teacher skills, curriculum, school setting, and children's past history, which is close to impossible. In addition, researchers lack the appropriate evaluation procedures to measure the long range effects of integration on many important aspects of a child's development, i.e., self concept, motivation, etc. As a result, when various studies are compared, the results are often conflicting. Given this problem, those who encourage integration must do so for reasons which are based more on developmental theory, humanistic concerns and legal/legislative decisions rather than empirical support.

DEVELOPMENTAL THEORY

Environment

For normal development to occur, it is necessary that the young child explore the environment and that the environment become increasingly demanding (Bricker et. al., 1976). If this is important for a nonhandicapped youngster, then it is equally important for a child who is not developing normally. Placing handicapped and nonhandicapped children together may create naturally a more demanding environment for the handicapped child. It may be filled with more interesting objects and people. Nonhandicapped peers may expect and encourage behavior that would produce a significant difference in the handicapped child's experience, compared to what it would be in a segregated setting (Guralnick, 1978).

Imitation

Children learn by imitating others who are more competent than themselves. This suggests that handicapped children would greatly benefit from the opportunity to imitate other youngsters who display age appropriate play, social and language skills. Nonhandicapped children are not typically "held back", nor do they appear to imitate less desirable behavior by exposure to their handicapped peers (Appoloni & Cooke, 1978; Cooke, Ruskus, Appoloni and Peck, 1981; Bricker and Bricker, 1972; Strickert, 1974).

Adult Expections

Parents of young handicapped children often compensate for their child's problems by doing things for them. Sometimes they do not allow the child to respond to the environment in his/her own way. One can predict that the child will not be motivated to become independent or to learn new things. Parents and teachers may develop more realistic expectations about the potential independence and self-reliance of the handicapped youngster if they have an opportunity to observe normal preschoolers in an integrated setting (Guralnick, 1978).

HUMANISTIC CONCERNS

Attitudes

Peer interaction has the potential to influence a child's attitudes at a very young age (Hartup, 1970). Therefore, for nonhandicapped youngsters to gain knowledge about and accept varying handicapping conditions they need the chance for direct interaction with nonhandicapped peers during their preschool years. Fears about differences can be eliminated by virtue of being thoroughly exposed to them. A study that supports this position was done by Voeltz in 1980. Nonhandicapped children who were provided with an opportunity to interact with handicapped children in the regular school setting showed improved attitudes and more accurate perceptions of the abilities of youngsters with special needs.

It is suggested that when nonhandicapped youngsters, their parents, and interested community members are exposed to handicapped children through an integrated setting, society's fears about differences may be reduced over time. Prejudice is a by-product of misunderstanding and a lack of knowledge that can only prevent the handicapped person from being successful in the mainstream of society.

Segregation

Often times, young handicapped children have many abilities within the normal range. To segregate them into programs according to their disability tends to emphasize the child's weak areas to the exclusion of his/her strengths. Integration into a program that uses a developmental approach allows the handicapped child to expand "normal" skills while working on problems areas (Guralnick, 1978).

LEGAL/LEGISLATIVE DECISIONS

1954 - Brown v.s. Topeka Board of Education
"separate is not equal"

1975 - P.L. 94-142
"every handicapped child has a right to free and appropriate public education in the least restrictive environment"

The Albuquerque Integration Model (AIM)

It is generally agreed in educational circles that more research should be done on integration. However, researchers emphasize that the major question which needs to be addressed at the present time is, "What are the best integration practices?" rather than, "Does integration work?" (Salend, 1984; Cooke, Rushus, Apolloni and Peck, 1981). The Albuquerque Integration Model set out to begin to address this question.

The integration project grew within a traditional special education program, Albuquerque Special Preschool, which had been providing educational and therapeutic services to young developmentally disabled children for 10 years. The staff became increasingly aware of the need to involve these children in less restrictive environments and to capitalize on the powerful effects of peer modeling. Federal funds provided the catalyst.

Mild to moderately handicapped children between the ages of two and five-years-old were grouped in several types of classes with their normal peers, who ranged in age from two (or slightly younger) to four-and-a-half-years old. Eventually, several options were developed to describe placement in less restrictive environments along a continuum:

Level I: - 1:1 Handicapped to nonhandicapped ratio, 10 - 12 children total.

Single teaching or team - teaching using one early childhood and one special education teacher.

Level II: - 1:2 ratio Handicapped to nonhandicapped, 15 - 18 children total.

Team-teaching approach, same as above.

Level III: - 1:3 ratio or greater (number of nonhandicapped), 15 - 18 children total.

Single early childhood teacher approach (after one to three months of team-teaching) with special education teacher follow up.

Generally speaking, younger children often began in the more structured Level I settings; while an older child, not in need of a great deal of individual and therapeutic intervention, would often profit the most from a Level III or mainstream setting. We found it helpful if the nonhandicapped children were chronologically younger than their handicapped peers so that the groups were developmentally similar.

The integrated approach was expected to have a positive effect on all of the participating groups, as well as on the early childhood community, in general:

Group	Anticipated Benefit(s)
handicapped children	- increased language development - gains in socialization/ adaptive behaviors
nonhandicapped children	- increased knowledge of handicapping conditions - increased acceptance of disabled children
administrators	- proof that nonhandicapped children would NOT be held back in interated class
special educators	- increased knowledge of normal development - skill in early childhood strategies
early childhood educators	- skills in dealing with boarder range of children - integrated philosophy (resulting from the cross-training of early childhood and special educators)
families of nonhandicapped children	- greater awareness/ acceptance of people with handicaps
families of handicapped children	- more involvement with child's program - skill in setting realistic goals for their children's progress - decreased sense of isolation
early childhood programs	- interest in replicating aspects of AIM

All of these positive effects were realized in the course of the model project period. Research focused on the developmental growth of both groups of children (using both norm and criterion-referenced instruments) and on their play interactions.

All subsequent recommendations in this Guide are based on our experience with these types of integrated classes during a seven year period. We have not worked with all types of handicapped children nor all types of regular preschool programs. Many leaders in early childhood special education are encouraging professionals to integrate or mainstream the more severely handicapped child (Vincent, 1985). While our own experience has been with a different population, we think that the principles herein are adaptable. We hope that you will feel free to vary our ideas so that they will fit your own program and the children you serve.

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Definition of Terms

DEVELOPMENTAL AGE is an imprecise expression of a child's general overall development. It is derived by summarizing a child's performance in all developmental areas (self-help, cognitive, etc.) and comparing this to what is "normal". For example, we may have a four-year-old child whose speech and language is comparable to that of a normal two-year-old, but because of excellent motor skills, appears to have an overall developmental age of three years.

DEVELOPMENTAL APPROACH describes the orientation of an early childhood program in which staff plan the environment and activities based on the children's developmental, rather than their chronological, ages. (See "Basic Components of an Integrated Class".)

HANDICAPPED describes a child who exhibits noticeable and significant delay(s) in development in at least one of the following areas: selfhelp/adaptive behavior; social/emotional; cognitive or conceptual; speech and language; and fine/gross motor skills; the extent of which is determined by reliable evaluation, and which results in a need for specialized services.

** Labeling children as handicapped or nonhandicapped presupposes a level of differentiation which in reality does not exist. Many handicapped children are normal or above average in some areas of development. Likewise, many children labeled "normal" have subtle learning problems. It should be pointed out that children who are labeled as handicapped, although they are in need of special intervention, are more like other children than not.

** The term "handicapped" was chosen over other similiar terms for this Guide, because it is universally understood and less cumbersome to read than "child with special needs" or "physically/mentally challenged".

INTEGRATION is defined as a joining of two groups that were previously separated, in this case, handicapped and nonhandicapped children.

LEAST RESTRICTIVE ENVIRONMENT is a term which implies that a handicapped child should be educated in a setting which is as close to normal as possible (e.g. in a public school rather than a residential setting). It further implies that there be a variety of opportunities for these youngsters to interact with their normal peers. The nature and extent of the interactions may depend upon each child's ability to benefit from the experience. For example, one handicapped child may spend all day in a regular classroom, while others who are in special classes, may spend lunchtime, outdoor play or fine arts class with their normal peers.

MAINSTREAMING and integration are often used interchangeably. Points made regarding one option can easily apply to the other.

PEER is generally thought to be a child of approximately the same chronological age of another. An effective integration strategy may be to combine children of the same developmental age, thus loosening the definition of peer

CHAPTER ONE

Getting Ready

Basic Components of an Integrated Class

There are several elements basic to any well-organized preschool program. Within the framework of these basics, teachers may operate from a variety of philosophical approaches. According to Anastasiow (1978), federally funded projects to develop model integration programs (Handicapped Children's Early Education Program, U.S. Department of Education) appear to have common dimensions:

1. A developmental framework for assessing and meeting the needs of children is utilized. Staff are knowledgeable of normal child development, and promote children's growth and learning in a logical, sequential fashion.

2. Structure is the planning and organization provided by the teacher, and is based on a consistent curricular approach.

3. Play and the tools of play are the means through which young children learn. Play may be utilized in a curriculum in a variety of ways: teachers may provide a great deal of direction, and actualy work at "teaching children to play' (which may be necessary for children with delays); or, they may take an approach which assumes that children have an inherent ability to play. Play is common in most of these programs, and is considered a useful vehicle for teaching concepts and skills.

4. Rewards or incentives are often used to promote behavior which is consistent with the desired goals of the program or individual children.

5. Staff Training/development may vary in the methods employed, but it is a common factor in model programs. It is important that individual staff receive feedback on their performance; and that subsequent training on techniques and strategies for facilitating child development be provided.

6. A low ratio of children to adults is commonly described as part of a model preschool program. Some programs have adopted such low ratios, however, (sometimes even as low as 1:1) that it is difficult for other programs to replicate them. A common ratio tends to be 1:3 or 1:5 (Anastasiow, 1978).

Other common dimensions of integrated preschool programs include:

7. Nonnandicapped children tend to be approximately one year younger than their handicapped classmates (Guralnick, 1981).

8. Parent involvement is a critical element, which can promote success (Allen, 1981).

9. The Developmental Approach describes the overall orientation of an early childhood program in which staff operate from a developmental framework (above). Not only must teachers and support staff have good backgrounds in normal development, they must also be skilled at observing children and at planning for each child individually (Allen, 1981). They must be able to establish a child's developmental age, and plan opportunities for that child to progress naturally according to the sequence of normal development. Rather than "training" specific skills, the emphasis is on helping the child to consolidate his learning so that the skills acquired can be generalized to other environments.

Staffing an Integrated Class

FROM AN ADMINISTRATOR'S POINT OF VIEW

An administrator who is comtemplating setting up an integrated preschool program or class should be commended. It involves taking on a challenge in response to the national priority of providing services for handicapped children in the least restricitive environment possible. There are possible benefits to any early childhood program which serve to outweigh the tremendous effort involved:

* Integrated classes add to program options.

* Involving staff from several disciplines leads to excellence in programming and curriculum development.

* Staff morale is improved by virtue of the training and cooperative efforts necessary.

Administrative support for an integrated program is a prerequisite. In turn, the administrator may cultivate staff support and/or select staff who are enthusiastic about such a project. Because an integrated class involves the meshing of two philosophies -- special education and early childhood -- staff need additional time for planning during the intitial stages, and they must also be provided with inservice or staff development opportunities. Administrators should provide appropriate recognition and support to the staff -- typical of that which helps to guarantee the success of educational innovation.

The remainder of this section is devoted to several topics which explore staff issues: teacher traits, the ins and outs of team teaching, and the value of a multidisciplinary team approach. Administrators should be well-versed in these areas.

DESIRABLE CHARACTERISTICS OF TEACHERS
(by Ann Hawks)

During the period of developing the Albuquerque Integration Model, project staff arrived at seven desirable characteristics of teachers that wouuld help ensure the success of the class. These traits apply to the teacher's ability to work successfully with parents as well as with the children at school.

1. Realistic Expectations: It is essential that the integrated classroom teacher have a sound understanding of normal child behavior and development if realistic goals are to be set for the developmentally different children in the class. It is equally important to consider each child as an individual with unique strengths and weaknesses. The understanding of a child's handicapping condition is only important as it affects the child's development, and the attitudes of the child's peers, parents and other involved professionals. The teacher must develop realistic expectations of each child's parents who also have unique strengths and needs in order for the child to achieve his/her full potential. Clarity and knowledge of the roles and responsibilities of all

the professionals working with the child are necessary in detering professional conflicts and promoting cooperation as a multidisciplinary team.

2. Positive Attitude: If children are to learn as would be desirable in the integrated classroom and respect each other as unique individuals, it is imperative that the teacher enjoy learning and display acceptance of each child. The teacher is a powerful model in the classroom and can definitely affect the attitudes of the children toward one another. A positive attitude toward working and communicating with each child's parents is also an appreciable trait in order for teacher efforts to be extended into the child's home life.

3. Sensitivity: The ability of the teacher to carry a sensitive "blueprint" of each child's strengths, weaknesses, interests, likes and dislikes is prerequisite for teaching an integrated class if the teacher is to make the most of the many unexpected happenings which are apt to occur. The teacher's awareness of each child's general health, moods, motivation, etc. is also important in considering whether or not to modify expectations for a child in daily learning situations. It is imperative that the teacher be sensitive to different values, needs, and attitudes of parents in order to work with them in planning the child's program.

4. Flexibility: Children are continually changing to such an extent that the teacher must be able to modify an activity, routine, teaching technique, etc. to fit the needs of individual children in an integrated class. In order to make time at school profitable for the child, the teacher must be willing to try new methods of working with the children, continually exploring what works best for the children, individually and in a group. It may also be necessary for the teacher to coordinate the children's daily schedule with the schedule of the other support personnel, so that therapeutic interaction occurs at the best time for the child and the therapist. Flexibility is also important to meet the differing needs and schedules of the parents.

5. Creativity: Finding a meaningful role for each child in the integrated class for the duration of the class day often makes demands on a teacher's creativity. The teacher must be able to create order and sense out of the multitude of encounters each child makes, and be able to answer unexpected questions with replies which will be meaningful to the varied levels of understanding of the children. Teachers must also be able to modify, and at times "invent" teaching techniques, materials, and learning environments which will meet the unique needs of each child and promote positive interaction among children. In essence, the integrated classroom teacher must create success through his/her efforts with the children parents and other professionals.

6. Self-Awareness: It is essential that the teacher be aware of his/her own strengths and weaknesses as well as those of the children. Only through continual self-assessment can the teacher strengthen skills or compensate for weaknesses.

7. Professionalism: A teacher who enjoys learning and working with children and their parents should also display a commitment to the responsibilities of being a teacher, and to self-improvement as a professional. The integrated classroom teacher must cooperate in working with the parents and the multidisciplinary team. Excessive stress may result in a teacher's inability to distinguish between personal and professional needs, and may dilute energy reserves needed in the classrom. Thus, a satisfying personal life is very helpful to the individual who is taking tne challenge of teaching an integrated class.

TEAM TEACHING: SOME HOWS AND WHYS

The combination of a competent early childhood specialist and talented special educator can be a powerful one. If two such individuals were recruited to team teach an integrated class, the potential for an exciting and nuturing classroom environment is great. The Albuquerque Integration Model was developed by virtue of the cross-training which occurred between these two disciplines. Any team teaching situation can be a roaring succes or an unmitigated disaster. It is important for administrators and teachers involved to understand the rationale for team teaching, as well as to set up clear expectations of all the professionals and support personnel involved. They should establish steps to ensure a smooth transition from a teacher's being the sole decision-maker to an equal partner.

Some advantages:

- Shared workload
- Built-in support system
- Parents have increased opportunity for rapport with child's teachers
- Professional challenge
- Opportunity for professional growth
- Skills of one teacher may complement those of the other
- Better organization

Some suggested criteria for teachers:

- Motivation to try such an arrangement
- Flexibility
- Excellent listening skills
- Ability to state one's ideas/needs clearly and positively

When a program has the luxury to offer two professionals the opportunity to team teach (rather than having one teacher assisted by an aide), we highly recommend such an arrangement. At the same time, we have several recommendations for these teams and their administrators:

1. Set up a mechanism for problem-solving in advance.

   Differences of style, opinion and strategy will always emerge. Identify methods to make a choice or reach a compromise. Decide who should be involved in any major conflicts, and set up steps to reach a solution.

2. Team teachers should plan the classroom environment, materials and lessons jointly.

3. Do not divide up the responsibility for children in the classroom.

   Except for the fact that the special educator will probably assume the paperwork burden for the children with special needs, there should be no attempt by the teachers to plan consistently for only one group of the children. Such an arrangement encourages teachers and parents to view the children a distinct groups-- which is contary to the purpose of the class. Each teacher should have a sense of responsibility for all children in the class, and the planning and coordination should reflect this.

4. Be prepared to compromise.

   Each class of children is a unique combination. Sometimes the traditional special education approach is too teacher-directed, while an experiential approach may not provide enough structure for a particular activity. It is not useful to be rigid in one's philosophy.

5. Keep asking yourselves difficult questions, such as . . . .

   - How can I focus on two such different groups of children at the same time?
   - How can we set up a learning activity which meets the various developmental needs of individual children and still promotes interaction?
   - How can we do this better next time? or, what were the factors which made this activity successful, so that we can build them into more parts of the day?

6. Be willing to experiment, to share, change and grow -- the same things we ask of the children.

THE TEAM APPROACH (by Nancy Lewis)

Teachers also need the expertise of such disciplines as speech and hearng, physical and occupational therapy, health care professions, and social workers/counselors to meet the special needs of young disabled children. By incorporating a transdisciplinary team into the integrated program, teachers may access this expertise regularly. A transdisciplinary team may consist of the teaching staff, speech/language pathoogists, occupational therapists, physical therapists, social workers or family counselors, and nurses and pediatricians. (Parents are also considered members of such a team. While they may not meet regularly with other members, the teacher(s) should be in contact with them to the extent that he or she can provide parental input). By working as a team (with some combination of these professionals), all aspects of a child's development and special needs may be addressed.

It may be difficult for a small school or community program to have all these professionals on staff, or even readily accessible. Limitations in funding and shortages of personnel have increased the practice of using these professionals within a consultation model. Rural areas may especially be affected by this trend, and may have to work with ancillary staff on a consultation basis exclusively.

Consultation is a three-person chain of service in which a consultant interacts with a caregiver (consultee) to benefit an individual for whom the caregiver is responsible. For purposes of this guide, a consultant would be any ancillary staff trained in a specific area and the consultee would be the classroom teacher. Consultation provides professional service to the handicapped child indirectly through the teacher. It seeks to enhance both the teacher's and the consultant's understanding of the child's needs in order to effect positive changes in the child's development.

The advantages of a consultation approach are that it can enable ancillary staff to serve a larger population, to provide service in the classroom environment, and to achieve preventive effects.

At least three basic principles are helpful for the consultation model to function effectively. These include:

1) the belief that by working indirectly through teachers, ancillary staff can help children;

2) a commitment to a collaborative rather than authoritarian relationship; and

3) a commitment to the collection and analysis of data for the management of a child's developmental needs.

Inherent in the consultation model is a willingness to work as a team. All members of the team assume equal status with regard to the child's educational programming. In order to have a successful teacher-consultant collaboration, the following procedures should be addressed:

1. Negotiate the working contract. After initial acquaintances are made between the teaching staff and the ancillary staff, a written oral agreement that specifies mutually acceptable roles and responsibilities should be established. Specifics such as time, place, and frequency of meetings, responsibilities of all persons involved, commitment to joint problem solving, and the teacher's option to accept or reject any recommendation should be included. The points of the contract should be stated concretely so all persons understand what their commitment and involvement will be.

2. Active listening. It is important to successful consultation that members of the team be able and willing to express empathy, genuiness and mutual trust. Each team member needs to be able to listen to and understand another member's experience.

3. Getting specific. The description of a problem must be so specific that both the teacher and the consultant have a complete understanding of the problem. As specifics of the problem are discussed, solutions become more clear.

4. Collaborative problem-solving. When a teacher discusses a problem with a consultant, the consultant may choose not to offer an immediate solution. Solutions based on insufficient data are often inappropriate or have already been tried. Unilateral decisions by the consultant do not involve the teacher as an active participant in the problem-solving process, and do not maintain the team approach. Solutions for intervention stategies proposed jointly by the teacher and consultant take advantage of the teacher's and the consultant's expertise and are more likely to be implemented.

5. Consultation time built into the schedule. In order for the consultation model to be successful, time should be alloted at a determined interval for the team members to discuss issues. If consultation is expected to occur only during a teacher's "free" time, it is unlikely to be successful. Team meetings at which all persons involved in a child's program are present may serve as a format for consultation. In addition, individual meetings involving the teaching staff and a particular consultant may be scheduled regularly (Frassinelli, Superior and Meyers, 1983).

In summary, integrated classrooms need support from a variety of disciplines. Optimally, these professionals would work together as a team and may choose to adopt a consultation model to maximize their services. Consultation works best when all team members demonstrate a willingness to share ideas and combine efforts.

Choosing a Curriculum

There are numerous approaches to developing a classroom framework for learning, and each is different in perceiving how children learn. As described by Anastasiow (1978):

> At one extreme is the position that the learner is to be taught by a trainer-teacher who perceives the child as a receptor. Another extreme perceives the child as the discover and inventor of all of his learnings. Somewhere near the discoverer extreme is the position of the child as a transactor within an environment. And, finally, a more moderate laissez-faire group views the child as a receptor who matures at a fixed rate.

In the context of the classroom, the environment is meant to include not only the objects in the physical space and the arrangements of that space, but also the experiences or activities which are provided, and the nature of interactions between children and adults. The point on the continuum at which any child can benefit optimally from the environment is worthy of consideration, especially in light of the range of abilities demonstrated by children in an integrated setting.

A teacher may want to use a curriculum model which best suits the needs of most of the children in the classroom, moving in one direction or antoher as needed to accommodate individual learning styles. The greater the developmental delay of a child. the more the teacher may need to intercede on behalf of the child and take on a more directive role. Nonhandicapped children are likely to be capable discoverers and inventors, thus functioning best within a curricular approach which allows them opportunities to direct their own activities. It is important that teachers have a clear understanding of the approach they are using, and consistently apply it. A summary of the major early childhood curriculum models follows.

CURRICULUM MODELS WITHIN PRESCHOOL EDUCATION

Model Type	Characteristics	Teaching Tools/ Programs
Experiential/ Open-Education	- Based on education philosphy of Dewey and Froebel - Child learns by exploring - Child structures own environment - Child must be self-motivated - Environment offers wide range of materials and activities - Play is principle means of learning - Teacher serves mainly as resource person	- Assessment: informal and observational on an on-going basis to determine what experiences child needs to have through materials and activities. - Major programs: British Infant School, Eliot-Pearson School, at Tufts University
Montessori	- Based on educational philosophy of Maria Montessori - Focuses on sensory training experiences - Makes use of numerous play materials specifically designed to promote sensory discrimination skills - Activities should have a structured motoric component - Older children make good teachers of younger children	- Assessment: Teacher observation and informal assessment to determine child's level in terms of ability to use particular materials. - Major Programs: There are numerous Montessori preschools for regular education across the country but few specifically for handicapped children.

Model Type	Characteristics	Teaching Tools/ Programs
Piagetian/ Cognitive	- Based on Jean Piaget's theories of child development - Emphasizes process of learning rather than product - Children learn by active participation; i.e., motoric experiences, which provide a basis for language development - Children learn through sensory experiences - Thinking moves from concrete to abstract - Play is a major vehicle for learning - Child passes through a specified series of stages - Teacher's role is to choose activities appropriate to child and subtly facilitate child.	- Assessment: selected situations to elicit responses according to operational stages of development. - Assessment in Infancy: Ordinal Scales of Psychological Development (Uzgires & Hunt, 1966) - Curricula: Teacher's Guide: Early Childhood Curriculum (Lavatelli, 1973); An Experimental Curriculum for Young Mentally Retarded Children (Connor & Talbot, 1966) - Major Programs: Cognitively Oriented Curriculum (Weikart, Rogers, Adcock & McClelland, 1971); preschool programs at University(s) of Oregon and Texas.
Information Processing/ Language-Oriented	- Based on Osgood's Theories of learning - Focuses on children using language to structure and guide their - Based on premise of sensory input, process (or integration), then output through verbal or motoric response - Teacher sets stage for child initiation of language - Activities are structured usually in small groups or tutorial sessions following a specified curriculum.	- Assessment: Illinois Test of Psycholinguistic Ability (ITPA) - Curricula: Peabody Language Development Kit (PLDK); DISTAR; Goal: The Language Development Program - Major program: Project PEECH (Colonel Wolfe School), University of Illinois.

Model Type	Characteristics	Teaching Tools/ Programs
Diagnostic/ Prescriptive	- Based on numerous theories of child development, translated into assessment instruments for child progress such as Gesell and Bayley - Based on developmental-maturational theory that maintains that growth is sequential - Developmental "milestones" mark progress of child - An analysis of major tasks to be learned by child is done by teacher to identify sub-steps to be taught - Each child has his own learning objectives, with specific activities, designed by teacher to meet objectives	- Assessment: Criterion-referenced checklists which contain items in 5 areas of development (social, self-help, language, cognitive, and motor). Numerous tools exist, such as Learning Accomplishment Profile (LAP), Portage Project Checklist, and Alpern-Boll Developmental Profile. - Major Programs and curricula: Portage Project, Portage WI; Frank Porter Graham Child Development Center, University of North Carolina.
Behavioral	- Based on Skinner's (and others) theory of learning - Similar to Diagnostic Prescriptive Model in classroom application - Premise that all behavior is observable and measureable; all behavior is learned - Focus on skills that are necessary and functional - Highly systematized environment, including specific objectives for each child, step-by-step sequence of learning activities, and feedback to children on their performance	- Assessment: In addition to above, under Diagnostic/ Prescriptive Model, teacher will also collect data on specific behaviors, including direct counts and graphing of progress. - Major Programs: Teaching Research Preschool, University of Oregon at Monmouth; Preschool in Experimental Education Unit, University of Washington at Seattle; Edna A. Hill Child Development Preschool, University of Kansas.

Throughout the following discussions on getting prepared for and implementing an integrated program, the importance of a child's role as an active participant in his own learning is stressed, as is the role of the teacher as a facilitator. Children are perceived as models for less-capable peers, providing information on the next step in development via the child's use of the environment. Nonhandicapped children can also provide powerful incentives for the handicapped child to make use of his environment through praise and assistance. Operating on the premise that children are not miniature adults, but rather become adults only through a sequential process of learning, it is possible that children can teach each other in a way which is more natural than if modeled by a teacher. It is possible that children are the best teachers of children.

CHAPTER TWO

Placing Children

Placement of Handicapped Children

Programs which have demonstrated success in integration have included children with a wide variety of handicapping conditions, mild through severely impaired. The Albuquerque Integration Model (AIM) has provided service, through a variety of integrated classes, to a population of children with mild to moderate developmental delays. The children have had various handicapping conditions: learning disabilities, communiction disorders, neurological impairments, educable and trainable mental retardation, physical impairments and multiple handicaps. Since the actual intervention time is a relatively small portion of children's lives (anywhere from 10 to 20 hours per week), great care is taken to select the class which will best meet the child's needs - integrated or a traditional special education class. Factors which enter into placement decisions, as well as some corresponding considerations, are listed below:

FACTORS	CORRESPONDING CONSIDERATIONS
developmental test scores	- may fail to account for slow or variable growth rates of some handicapped children
	- may lack necessary reliability and/or validity or require administration by specialized personnel
parental expectations	- may prefer integrated placement since it seems to indicate that child is progressing optimally
	- may fear that integrated placement will accentuate child's delays or impose pressure on the child
opinions of professional staff	- may be discrepant if staff represent variety of disciplines
availability of programs	- options may be limited due to funding, staff capability, transportation, etc.

In response to these considerations and to the need to objectify the placement process, staff from Project AIM have developed an instrument entitled, "Criteria for Integrating/Mainstreaming Handicapped Children," or, simply, the "Criteria Checklist." The Checklist measures the variability to which a child displays a particular skill or behavior, and

assesses skills that professionals consider important in the classroom placement process which other instruments appear to neglect. Through a system of weighting each item, the relative importance among skills required to progress well in an integrated class is considered. (For example, it is helpful if the child does not require constant adult attention due to extreme disruptive behavior.) The Criteria Checklist has demonstrated excellent interrater and interitem reliability; and the item analysis indicates that each item has good discriminating power. In addition, the high correlations between the Checklist and three developmental instruments have confirmed its content validity. See the Appendix for copies of:

* The Criteria Checklist
* Guide to Administering the Checklist
* Letter re: limitations of Checklist
* Report of Research on the Checklist

The actual placement of children must take into account all of the factors listed above. The Checklist may simply be added to the assessment battery in order to make up for some of the shortcomings of other developmental tests. It is vitally important to consider the opinions of parents and multidisciplinary staff within the framework of an individual program's capability. Parents and staff often have a sensitivity to children -- their abilities, personalities and interests -- which cannot be measured empirically, but which provides unique information to these kinds of decisions.

Selecting Nonhandicapped Children

You may not have any choice in the selection of normal peer models if you are planning to mainstream young handicapped children within a regular preschool program. There are still some considerations in selecting the appropriate class for this model, all of which would also apply to a special education program which is actually "recruiting" nonhandicapped children. Keep in mind that most traditional preschool classes encompass a wide range of ages and abilities.

1. Chronological Age: It is advisable that the nonhandicapped children be slightly younger than their handicapped peers. This results in a group of children who are developmentally similar, and more apt to interact with one another appropriately.

2. Appropriate Models: It is helpful if the nonhandicapped children are good language models and have good play skills. Also, if the teacher is dealing with some very young children with delays, he or she may be freed up considerably if the nonhandicapped children are already toilet-trained. While we certainly don't want to discriminate with regard to sex, any good preschool program attempts to have a good mix of boys and girls. The same holds true for an integrated class; and you may find that a particular opening, say for a 3-year-old, should really be filled by a girl, rather than a boy, depending on the composition of the class.

3. Family Attitudes: All integrated class placements should be done with the consent of families involved. If a parent (or child) voices opposition, an alternate placement should be found. We recommend that parents visit an integrated class (even if it is located in another program) prior to requesting such a placement for their child. If one does not currently exist, the staff should share all pertinent information with the parents regarding the size, nature, goals of the class, etc.

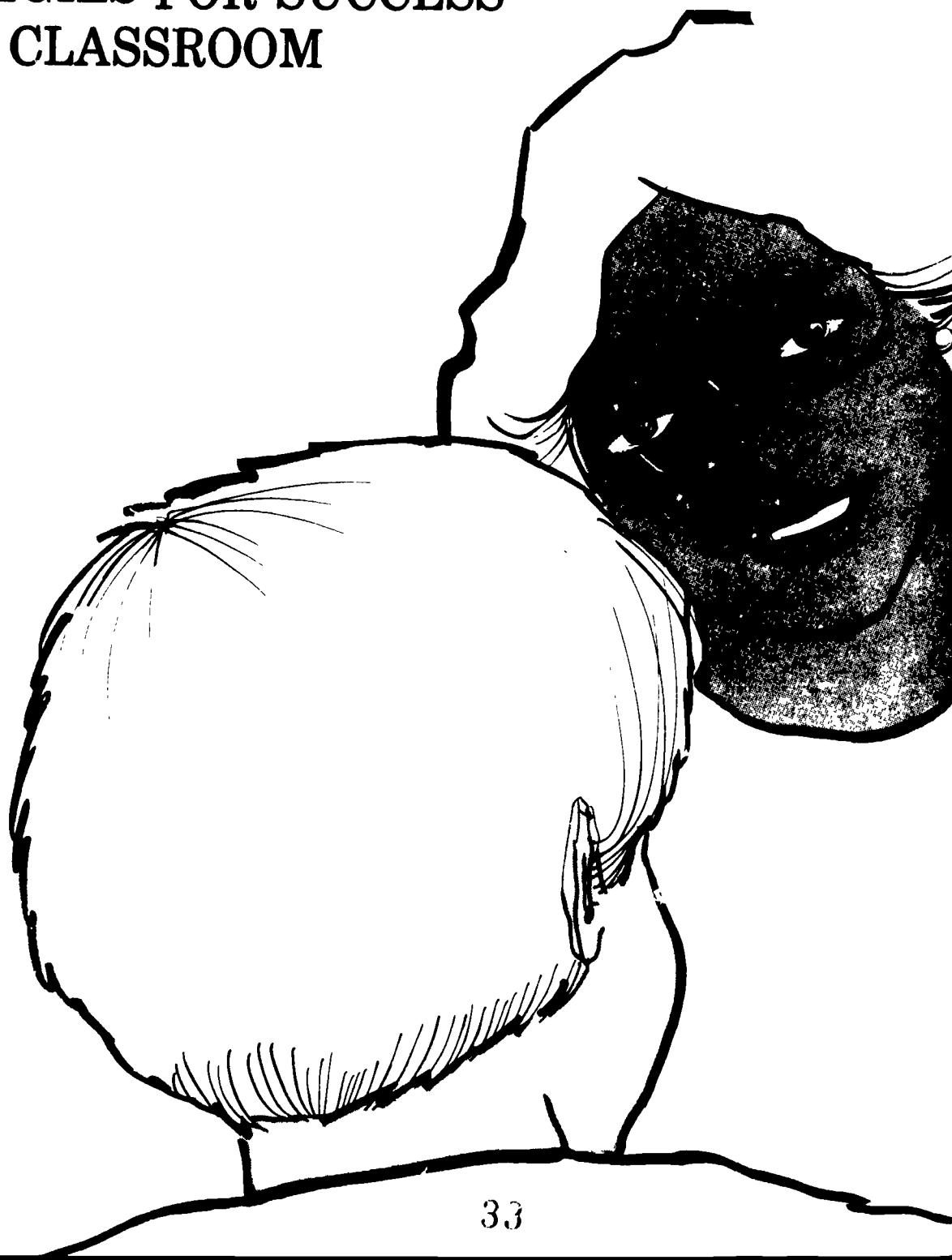
4. Recruitment of Nonhandicapped Children: Once you've determined the ages appropriate for the class, you might post notices of openings in your program around the neighborhood -- in public schools, pediatric clinics, bakeries, churches, etc. You might even want to put an ad in the daily newspaper or shopping news. Parents often want to enroll the siblings of their handicapped child. Once your program gets underway, maintain a waiting list for future years.

5. Funding Spaces for Nonhandicapped Children: For those programs which serve primarily disabled children and which receive public (federal, state, United Way, etc.) funds, we suggest that you clarify with these funding sources that you will support the nonhandicapped children by other means. We also suggest that you charge the standard tuition and fees for these children to attend. Usually, integrated classes are much larger than traditional special needs classes because they have added a number of nonhandicapped children. Thus, it is very important to emphasize to funding sources and the general public that your program has not REDUCED the number of spaces available for handicapped children in setting up an integrated class.

CHAPTER THREE

Planning and Implementing:

STRATEGIES FOR SUCCESS IN THE CLASSROOM



Educational Assessment

(by Patricia Krchmar Lilley, reprinted from Guide to Screening and Assessment Tools and Individual Program Development for Handicapped Children, with permission.)

INTRODUCTION

This portion of the guide will focus on educational assessments used by classroom teachers and trained paraprofessionals. The focus will be on assessment for individual program planning, periodic assessment of progress and evaluation of programming. Assessment of all children enrolled in early childhood/special education programs is necessary. There is a great range of handicapping conditions which occur in young preschool children. An overview of the assessment tools is provided to assist the early childhood/special educator in selecting an instrument appropriate for each individual child. Information from ancillary support staff (Occupational Therapist, Physical Therapist, Speech/Language Therapist) and other methods of assessing children, combined with the educator's assessment findings will facilitate the development of a high quality Individual Education Plan.

WHAT IS AN EDUCATIONAL ASSESSMENT?

"Assessment in educational settings is a multifaceted process that involves far more than the administration of a test. When we assess children, we consider the way they perform a variety of tasks in a variety of settings or contexts, the meaning of their performances in terms of the total functioning of the individual, and likely explanations for those performances." (Salvia and Ysseldyke, 1981).

Assessment is more than administering a test. A variety of methods and procedures are used to collect information. This information must be carefully interpreted and then used to develop a comprehensive and specific educational plan. This plan can then be used for day to day programming for the child. (Cross, Goin 1977).

WHAT IS THE PURPOSE OF ASSESSMENT?

"The purpose of assessment is to identify the child's skills, behaviors, and repertoires. Assessment allows the teacher to know where the child should be placed in the curriculum and exactly what behaviors should be taught. When skillfully performed, assessment results in specific goals and instructional objectives for each individual in the classroom." (Van Etten, Arkell, and Van Etten, 1980, p.82).

The assessment process uses formal and informal measures in an effort to identify a child's strengths and weaknesses, so that appropriate educational and/or therapeutic intervention can be planned and implemented. Educational assessment is a continuous process of data collection which lets teachers and parents know what skills the child is learning, what skills he has mastered and whether new skills are being learned. This process provides information used in making judgments regarding whether or not the instructional program is producing the desired results.

WHAT SKILLS NEED TO BE ASSESSED?

Skills in the following developmental areas need to be assessed:

1. Gross motor - large muscle movement (e.g. sitting, crawling, walking).
2. Fine motor - small muscle movement (e.g. stacking blocks, scribbling with crayon, cutting with scissors).
3. Cognitive - problem solving skills, perceptual skills (e.g. completing puzzles, finding hidden objects)
4. Language - receptive/expressive (e.g. understanding simple commands, using single words, combining two words in simple sentences).
5. Social/ Emotional - self concept; interaction with enviornment, peers, adults (e.g. parallel play, turn-taking, participating in group games).
6. Adaptive/Self Help skills (e.g.self-feeding, dressing, potty training).

HOW CAN CHILDREN'S SKILLS BE ASSESSED?

There are several methods to assess a child's skills in order to gather information regarding current level of functioning and enabling the development of an appropriate Individual Education Plan (IEP). Assessment techniques can include the gathering of information (e.g. developmental history); observations (e.g. teachers observations) and tests. It is important to remember that testing is only one component of the assessment. However, a further look at two types of tests, norm-referenced and criterion-referenced, will be the focus of this discussion with added emphasis on criterion referenced measures.

Norm-referenced tests are usually non-educational tests which compare a child's performance on selected tasks in comparison to his peers or to previously established norms. The emphasis is on absolute mastery of content (Salvia and Ysseldyke, 1981). Norm-referenced tests are standardized on selected populations and typical performances for children are obtained. The child's test score is then compared to the performance obtained from others (the population on which the "norms" were derived). Most norm referenced tests are useful in diagnosis and in making placement decisions. Many of these tests require that trained professionals (e.g. psychologist, diagnostician) administer the test. Some familiar norm-referenced tests include:

Bayley Scales of Infant Development

McCarthy Scales of Childrens Abilities

Criterion-referenced tests measure a child's mastery of skills. Rather than comparing a child to other children, she/he is compared to a set of standards. Criterion-referenced tests determine mastery by the individual on a particular task or criterion within a sequence of developmental skills. Therefore, criterion referenced tests provide specific information on a child's developmental skills. Some familiar criterion-referenced tests include:

Brigance Diagnostic Inventory of Early Development

Learning Accomplishment Profile

The standards or skills used to compare children on criterion-referenced tests are usually selected from items on standardized (norm-referenced) developmental tests. Criterion-referenced tests developed in this way generally cover sequences in development within basic developmental areas. This allows the teacher to determine the level at which the child is functioning, and to measure the child's progress periodically, not using overall scores (as in norm-referenced devices), but in terms of developmental skills (Harbin, 1977).

WHY ARE CRITERION REFERENCED MEASURES ESPECIALLY USEFUL?

A summary of important elements which make criterion referenced tests useful includes the following:

1. Criterion referenced tests are designed to facilitate daily programming.

2. Criterion referenced tests are objective. If administered properly, they are designed so that the examiner's attitudes and opinions do not affect the way the test is scored.

3. The test gives the teacher a specific profile of skills that a child can or cannot do. This allows the teacher to know at what point to begin instruction and the sequence to follow in the curriculum or individual educational plan. This information is useful in writing specific instructional objectives.

4. Criterion referenced tests focus on measuring the child's growth and progress, instead of comparing her to others her own age. While some provide age scores, which serve to compare, others do not.

5. Criterion referenced tests usually cover many developmental areas. Normative tests are generally limited to measuring one specific area of development such as cognitive skills.

6. Criterion referenced tests usually have more items than norm-referenced tests, which results in a more comprehensive review of abilities within a developmental area.

7. Criterion referenced tests can give information about the underlying developmental concepts which a child needs to master in order to perform specific tasks.

WHO SHOULD GIVE A CRITERION-REFERENCED ASSESSMENT?

In the administration of criterion referenced assessments, the classroom teacher is the ideal evaluator. The classroom teacher may be an early childhood specialist, or special educator. In some instances, if the classroom teacher is a paraprofessional who has been specifically trained in teaching techniques (e.g. the child development associate - CDA program), he or she can administer the assessment. Classroom aides and volunteers who have been trained may be able to administer portions of criterion referenced assessments, if supervised. The test manual may suggest personnel and/or training needs required for administration of the instrument.

Certainly, other trained professionals, such as therapists, who are members of the multidisciplinary intervention team, can assist in the administration of criterion referenced tests in addition to performing their own specialized tests and procedures.

WHAT ARE SOME OF THE LIMITATIONS OF CRITERION REFERENCED TESTS?

The following overview of the limitations of criterion referenced measurements can be found in Cross and Goin (1977). These should be kept in mind when using the tests and interpreting the information they provide.

1. Many criterion referenced devices are designed for use with certain groups of children. In trying to use the device with a group of children other than those intended, the teacher may discover that the device is inappropriate or of little value because it does not measure skills of concern for his/her children.

2. Criterion referenced devices are often specific. Consequently, they tend to measure what some people call "splinter skills." They concentrate on parts of a larger skill area. The use of a criterion referenced assessment device, therefore, does not yield a total picture of the child.

3. Children go through two stages in developing skills: acquisition and generalization. Criterion referenced devices tend to measure only acquisition. For example, a child who is able to hold his spoon and eat food of a particular texture in one setting has acquired a skill; when he is able to use his spoon in other settings and eat foods of various textures, his skill has become generalized. The item on the criterion referenced assessment device, "Is able to use spoon," depends for an accurate assessment on the teacher's cognizance of the two stages.

WHEN SHOULD CRITERION-REFERENCED TESTS BE ADMINISTERED?

Assessments should be done at regular intervals. End of year summaries should be based on follow-up testing on the criterion referenced tests to provide an objective measure of developmental and behavioral changes. It is suggested that testing should occur a minimum of two times per year.

The early childhood/special educator should also be prepared to assess when special circumstances require it. For example, when a childs' behavior or performance suddenly changes. Re-assessment will provide an objective measure of possible progress or regression in development to confirm the teacher's or parents' perceptions.

SHOULD ADAPTATIONS OF CRITERION REFERENCED TESTS BE MADE FOR HANDICAPPED CHILDREN?

When a child is handicapped, the handicapping condition may necessitate changes in the way test items are administered. For example, a severely physically handicapped child may not be able to point to a picture or object, but may be able to correctly identify the item in question as indicated by a steady gaze at the correct stimulus. The type of handicap should be kept in mind during the assessment process; and, appropriate adjustments should be made with caution. If adaptations are made, they should not change the item such that the actual skill being sampled has also changed.

The results obtained from an assessment which has been adapted should be used with caution. Once a standardized assessment has been adapted to promote a response, the norms under which the assessment items were developed may no longer apply. Therefore, any score expressing a developmental age, which has been obtained by making adaptations, cannot be compared to the normative sample with any degree of assurrance that the findings are accurate. In addition, the evaluator should record the nature of the adaptation on the test form. This enables a subsequent evaluator to assess under similar conditions, and anyone reviewing the child's progress to better understand the findings.

Many criterion-referenced tests allow for flexibility in administration. When adaptations are made carefully, they should not affect the validity and reliability of the test. There are some criterion-referenced tests which have several adaptations for handicapped children, which will not affect their validity or reliability.

WHAT OTHER INFORMATION AND ASSESSMENT TECHNIQUES CAN BE USED TO SUPPLEMENT DIAGNOSTIC AND EDUCATIONAL ASSESSMENT FINDINGS?

An overview of a variety of observation techniques follows. It is important to remember that a combination of these provide information to supplement norm referenced and criterion referenced tests. They will ensure the development of an appropriate IPP.

1. Parent report

   Information from parents (e.g., daily routine, likes/dislikes, social information, medical information).

2. Anecdotal records, logs

   Teacher observation with anecdotal accounts.

3. Videotape and/or audiotape recording

   These provide evidence for the aquisition of developmental skills such as motor coordination, social interaction skills, etc.

4. Work samples

   When children are old enough, samples of their artwork and other products may be useful for analyzing the progress made and to show their parents.

5. Photographs

   These can provide a sample of a child's reaction or record of involvement in activities.

6. Activity lists

   The child's selection of activities and participation in activities, will provide a record of the variety and level of involvement she has within the classroom.

7. Checklists and rating scales

   These may be used to specify what behaviors are being observed.

8. Clinical observations

Clinical observations by ancillary staff, such as speech pathologists and motor therapists, will provide in depth information not usually assessed by early childhood specialists. This includes observation of qualitative aspects of motor and language development (e.g motor planning, tone, pragmatics of language).

9. Data collection

Teacher or therapists' systematic observations of behavior. Techniques used can vary. (e.g. frequency counts, timed samples).

10. Other

Information and observations made by baby sitters, daycare, home, etc. Also observation of child in different environments can provide information.

GENERAL CONSIDERATIONS WHEN ASSESSING CHILDREN

The following considerations apply to the administration of norm-referenced tests, but can be generalized to the use of criterion-referenced measures administered in the classroom.

1. Establish rapport with the child. If test administration procedures allow the presence of parents, this is one way to put the child at ease. When it is required that a child be tested alone, let the child spend a few minutes with both the parent and examiner. Do not actively engage the child in social interaction, unless it is initiated by the child. Conversation with the parent during this time may enhance the child's acceptance of the examiner.

2. Avoid wearing white, uniform-type clothing when adminstering the test.

3. The child should be comfortable. If he is tired, sick, or hungry, reliable results will not be obtained.

4. Make note of any unusual test conditions or adaptions made.

5. Have test materials prepared before you test the child. Know your test well, read the instructions and practice before you start. Follow the standardized procedures.

6. If a briefcase is needed for test administration, keep the materials where they are easily accessible to you but out of reach (and preferably out of sight) of the child.

7. Do not address test activities as a game, refer to them as work, or school-like activities. If the child is old enough to understand, you may tell the child she may miss a few items, but that she should do the best she can.

8. Sit at the child's eye level.

9. Keep verbal directions uncomplicated. Some tests require that directions be read to the child exactly as they are printed in the manual.

10. Record your general impressions of the child and her performance.

The IEP

What is an IEP?

An individualized education plan (IEP) is described for parents by Stevens (1979) as:

> An IEP is an individualized education program. It is individualized in that is it written specifically for your child and not for a class or group of children. Education refers to those parts of your child's education that require special education or related services.... Program means what will actually be provided for your child. An IEP is not a lesson plan as lesson plans are only part of the educational program. After reading your child's IEP, you should have a clear picture of what your child will be learning for the next few months.

The IEP is a teaching tool and a guide for the professionals who work with the child. It is not intended to be a contract or an accountability measure, but rather an overall plann from which daily or weekly lesson plans will be developed.

Who Should be Involved in Writing an IEP?

The following individuals should communicate with one another before the IEP goals and objectives are put in writing to provide information from their own points of view about the individual child:

- the teacher
- the parents
- support personnel who are involved in the child's educational program, such as the speech/language pathologist, physical or occupational therapist, or nurse
- administrative personnel who are knowledgeable re: funds available for special services, equipment, transportation, etc.
- professional(s) who performed the diagnostic evaluation of the child

These communications may be in written form as long as any of these individuals can make personal contact to clarify questions, etc.

What Are the Contents of an IEP?

An individual education plan should contain the following elements:

1. A statement of the child's present level of performance, primarily obtained from diagnostic and assessment information and form this, a summary of strengths and weaknesses.

2. A statement or other record of the parent's major concerns or goals desired for their child, as part of their involvement in the IEP process.

3. A statement of the long-range goals that are subsequently broken down into short-term objectives which include the following parts:

   - who?
   - will do what? (target behavior)
   - when--or in what setting? (condition)
   - how well or at what level? (criterion or standard)
   - how will progress be measured? (evaluation) (Stevens, 1979)

4. A statement of specific educational services to be provided, which include a placement recommendation and type and amount of involvement in a regular education program.

5. The projected date of initiation and anticipated duration of services, and the date for review of the IEP.

6. A statement of the standard by which the child's program will be reviewed to determine whether instructional objectives are being achieved.

7. Designation of person(s) responsible for implementing each goal and/or objective; with their signatures acknowledging their participation/agreement on the IEP.

Many different styles of IEPs have been developed which cover these basic components, and comply with the intent of Public Law 94-142, the Education for All Handicapped Children Act. Within this framework, an agency can develop an IEP format which works best for them. An example of an IEP is included in the Appendix.

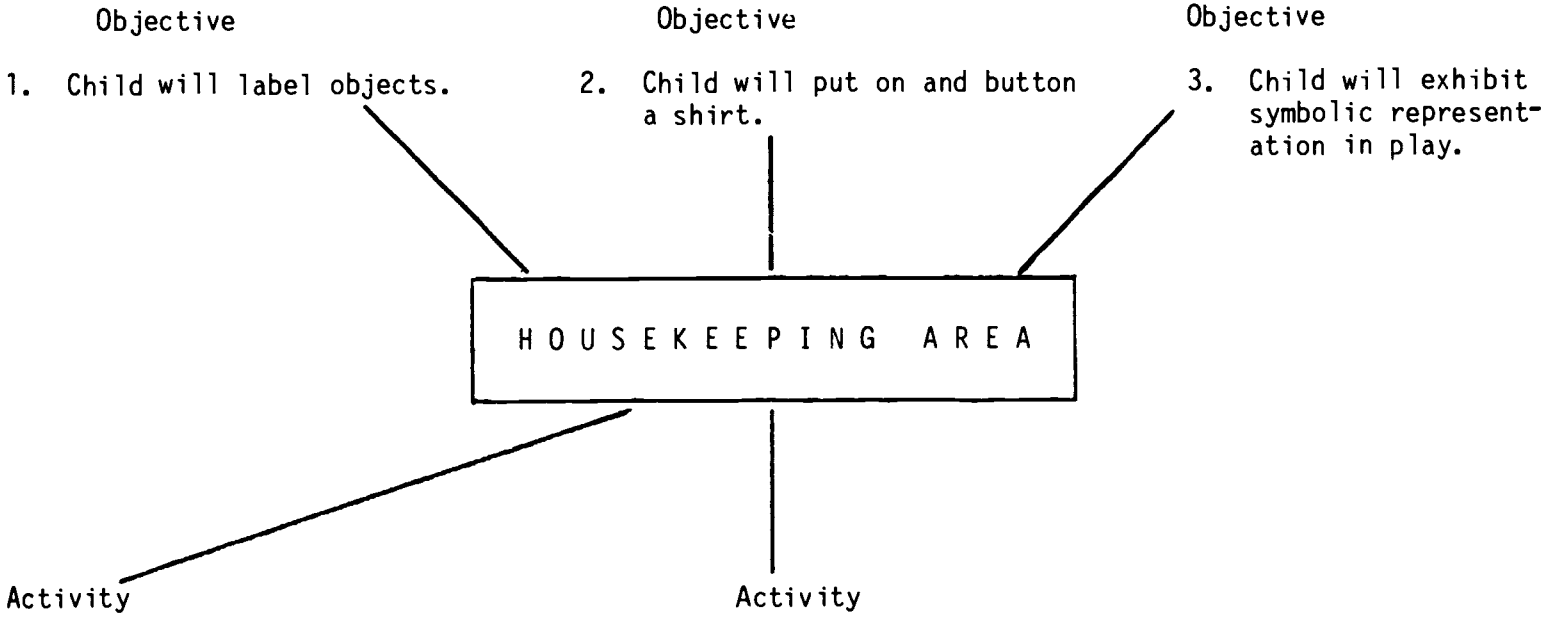
Who Does What . . . And When?

An IEP is the collaborative effort of teachers, parents and support personnel who form a multidisciplinary team to plan and implement the child's program. These are some suggested time frames and responsibilities:

WHO	WHAT	WHEN
Parents	Provide information regarding their goals for the child (See Statement of Annual Goals in IEP form, Appendix.).	At the child's enrollment, or within 10-15 days
Teacher	Performs educational assessment.	Within 30 days
Therapists	Perform assessment(s) for ancillary service needs.	Within 35 days
Multidisciplinary Team	Meets to draft the IEP; Parents may be included at this time, although professionals are often still sorting out much information.	Within 40 days
Multidisciplinary Team, including Parents	Meet to discuss/revise and eventually approve the IEP.	Within 45 days
Multidisciplinary Team	Reviews child's progress.	Monthly
Multidisciplinary Team	Updates/revises IEP.	Semi-Annually
Teacher (Key Team Members may be included)	Meets with parents to discuss IEP update.	Semi-Annually
Multidisciplinary Team	Meets with Parents to review child's progress during the year.	At the end of the school year

The IEP should be useful -- it should be a BLUEPRINT for instruction. As such, it requires continous reassessment of children. As goals and/or objectives are achieved, they should be revised. Although annual goals may be set at the outset of the school year, work to meet them may begin at different times during the year. For an IEP to be functional, its objectives must be linked to the development of activities in the classroom on a daily basis. Often, a single activity can target numerous objectives. See the following example:

SCHEMA FOR LINKING OBJECTIVES TO ACTIVITIES



Classroom Rules

The first part of the school year is the ideal time to establish classroom rules of order and safety. The teacher will need to provide more supervision while the children are learning these rules. It is also necessary to provide fewer choices of activities during the first few weeks or months. Children can learn the rules faster if the routine is kept simple. After the youngsters learn the rules, they will be able to handle greater freedom and more choices within the classroom.

Example of Rules

- put away materials after you have used them
- finish what you begin
- take turns or share materials with another child
- no throwing
- no running inside

Depending on your own classroom environment and situational needs, additional rules may be essential for a smooth operation.

The Environment

Arranging Spaces

The appropriate type of space and arrangement of the classroom environment affects the likelihood of:

- correct use of materials
- ideal number of children able to participate in an activity
- positive interaction among children

Considerations

* Provide the opportunity for children to extend one play/learning experience into another. This happens when some play areas are situated together.

  Example: Place the block area near the playhouse. The blocks can be used to add on another room or be used as props in the playhouse, such as an iron or food.

* Provide separate, ample space for quiet, noisy, active and passive activities. Children need to be able to participate in one type of activity without interference from others doing something which requires a different energy level.

  Example: The block area (noisy, active) should not be placed by the quiet reading area (quiet, passive).

  The block area could be placed by the house area (noisy, active).

* Provide clear pathways. Children shouldn't have to go through one activity to get to another. Make sure pathways are not overly large or spacious, because this encourages running.

* Consider the surface. Put a rug or a mat in the block area to soften the sounds.

* Allow enough space for two or more children in each activity area to promote interactive play.

Arranging/Displaying Materials

* Display materials at child height.

* Store materials intended for use (such as arts and crafts items and fine-motor manipulatives) in tubs or transparent containers. Tubs may display a picture or label of the appropriate item to be stored in the container. Child should be able to handle and carry containers easily.

* Arrange the shelves so that materials or containers can be easily replaced. A picture of the item placed on the shelf would indicate where it belongs.

* Make available at one time materials of various ability levels, particularly in the fine-motor manipulative area and arts and crafts area.

* Make available two or more of the same kind of material in full or partial sets.

* Remove from children's reach the materials and equipment for which they do not have the skills to use - such as the record player or popcorn popper.

* Rotate items in the activity areas, so that everything is not out at once.

* Promote parallel and cooperative play through the arrangement of materials. The side by side placement of two similar items will promote parallel play. The necessity of sharing material will promote cooperative play.

  Example: Two easels and two paint pots can be placed side by side to promote parallel play. One paint pot can be placed between two easels to encourage cooperative play. The same idea can be used with pegboards.

Providing Areas

There are a variety of environmental structures and spaces which have a great potential for promoting interaction between children. These are:

* Loft and Play House: Designed separately or in combination with each other, such a space can be used to define a quiet area, housekeeping area, dress-up clothes area, puppet stage, or numerous other activities.

* Block-Building: Placed on a quiet surface such as smooth indoor/outdoor carpet or a mat, this area can be particularly important in promoting sustained play from day to day. Often, several children can be involved in extending the blockbuilding structure from one area to another.

* Arts and Crafts: With a shelf or counter which displays a variety of arts and crafts material, this area should be basic in any classroom. Along with basic materials which should always be available, such as crayons and paper, a variety of novel, stimulating materials can be rotated in and out of this area regularly. This promotes the interest of several children.

* Fine-Motor Manipulatives: This area should contain a number of standard items which are always available, such as puzzles or small-block building material, and should rotate novel items to stimulate interest. A shelf or storage area for display of materials, as well as a table for their use, are needed.

* Quiet Area: An area large enough for at least two children could be designed using a large box with pillows, a couch, or even the space under the loft. Appropriate use of this area can be stimulated by placement of a selection of books nearby, a record player or even a pet area.

* Large Group Area: With enough space for getting the entire group of children together at once, this area may simply be a rug or floor space for making a large circle. Carpet squares for each child may be helpful in defining individual spaces. These are used to carry out large group activities such as music, language development games and activities, and movement activities.

Activities, Materials and Equipment for Integrated Classrooms

Activities: Teacher presence at some activity centers will help stimulate and assist handicapped and nonhandicapped children's participation.

* Make-believe play - preparing a meal, dressing up like adults or favorite TV characters
* Puppets - puppet shows
* Water play table - fill with cornmeal, styrofoam, and other new textures
* Painting - two children side-by-side at easel, or large piece of paper on table (for murals)
* Playdough - baking cookies, building a structure as a group effort (for exploring, pulling, pounding, sharing)
* Games - Ring Around the Rosy, pulling/riding a wagon, taking walks with a partner
* Block play - designing and building a miniature town, extending make-believe play into block area
* Lunchtime
* Tape recording of voices, stories, in small group
* Play music of action songs, games
* Mime activities
* Children choose partners to go places

Environmental Modifications and Equipment

* Build a loft for classroom use
* Make a playhouse for "housekeeping" including dishes and other utensils
* A large block area
* Ample room around tables for group projects
* Tire swings for two or more children (suspend tire horizontally)
* See-saw

* Slide wide enough for two or more children

* Parachute (needs many hands to hold and lift)

* Innertube trampoline large enough for two or more children

* Play telephones - at least two

* Dress-up clothes, hats, etc.

* Large cardboard boxes which will hold at least two children

* Private space large enough for two children, such as cubby or small rug with books

* Sandbox (outdoors) with many shovels, toys, etc.

* Rocking boat for two or more children

* Clay, mud, fingerpaint and other messy substances

INTEGRATED ENVIRONMENTS CHECKLIST

The items on this checklist are suggestions for providing an environment which is beneficial to promotion of interaction and cooperation between children -- and, in particular, between handicapped and nonhandicapped in an integrated setting. Any item to which you respond negatively when viewing your own classroom is one which you should consider for possible modification of the environment.

Space and Arrangement	Yes	No
1. The room is arranged to define separate activities which can be identified by a sample of children.	____	____
2. An area is defined for large block-building activity which has blocks of at least 6-12" and space for building which is at least 1 sq. ft. per block.	____	____
3. Floor space for large block-building is covered with indoor/outdoor carpet, mats, or other material to reduce noise.	____	____
4. An area is defined for large-group activities.	____	____
5. An area is defined for arts and crafts activities, with basic items accessible to children (see materials section) by the physical location of items.	____	____
6. An area is defined for quiet activity or rest which contains some items for comfort (such as pillows, couch, or mats) and which is accessible to children at all times.	____	____
7. An area is defined for housekeeping activities which includes the items shown in the materials section.	____	____
8. An area is defined for fine-motor manipulatives activity which contains materials accessible to children, including the items in the materials section, at all times.	____	____
9. The playground is directly accessible from the classroom.	____	____
10. The bathroom is directly accessible from the classroom.	____	____
11. The bathroom contains 1 or more sinks where children can independently reach the faucets.	____	____
12. Storage areas (cubbies or other containers) are identified for each child to keep personal belongings, artworks, etc.	____	____
13. Tables which will seat 4 or more children at once are present in sufficient quantity to allow seating all children at once.	____	____

	Yes	No
14. Entry and exit doorknobs are located within reach of children.	____	____
15. Materials in each activity area are displayed at child-height.	____	____
16. Materials which are available for use by children can be stored in a location specifically identifiable to children.	____	____
17. Surface area (such as bare wall or corkboard) is available for displaying children's artwork, stories, etc.	____	____
18. Washtubs, sink, or other water container is accessible to children for clean-up of messy activities nearby.	____	____
19. Children can obtain access to the housekeeping area directly from the block-building area (without crossing another area).	____	____
20. Children can obtain access to books directly from the Quiet Area without crossing another area.	____	____
21. Noisy activities such as a workbench are not located next to the Quiet Area.	____	____
22. Visual access can be obtained to all areas of the room by standing in any one area.	____	____
23. A divider or other portable structure to screen off an area is available.	____	____
24. Pathways provide access to each activity area without crossing other areas.	____	____
25. All space in the room is being utilized.	____	____

____ Number Yes answers

____ Percent Yes (divide Yes answers by 25)

Materials

A. The following materials are available at all times:

	Yes	No
1. Dolls		
2. Doll clothes		
3. Books (for children)		
4. Records		
5. Record player		
6. Large blocks		
7. Small blocks		
8. Puzzles		
9. Assorted manipulatives (such as Legos)		
10. Large paper		
11. Writing utensils		
12. Scissors		
13. Paint/brushes		
14. Tape and glue		
15. Miniaturized cars, people, or animals		
16. Dress-up clothes for male, female, and some job roles		
17. Mirror		
18. Empty, unbreakable containers		
19. Housekeeping utensils such as pots, cups, eating utensils		

B. The following materials (equipment) are available at some time during the year:

20. Real plants		
21. Real animals		
22. Water table, tub, or pool		
23. Sand table, tub, or box		

C. Materials are arranged as follows:

24. Materials are stored in containers which clearly define their contents.		
25. Storage containers are available for small items which are multiple in quantity, such as crayons, blocks.		
26. Storage containers are nonbreakable.		
27. Materials in the fine-motor manipulative area are suitable to a variety of ability levels in children.		

	Yes	No
28. Materials in the fine-motor manipulatives area and in the arts/crafts area contain several items which are duplicated ir full or partial sets.	____	____
29. Materials or equipment for which children do not have the skills to use are out of reach (such as the record player or electric skillet).	____	____
30. Materials are being rotated on regular basis between storage and display for use by children.	____	____

Comments/Recommendations:

Classroom Planning

Let's assume you already have some framework within which your class will be structured, including such parameters as the length of the school day and external factors such as regularly scheduled events: lunch, openings, and closings of the day. In addition, let's assume you already have some ideas about scheduling group activities, music or whatever type of activity is in harmony with your philosophy, teaching and your knowledge of the children enrolled.

What are some planning considerations that you might want to make if you are integrating handicapped with nonhandicapped children? This section provides suggestions on planning a schedule and an environment for this kind of an experience.

One of the primary goals of teaching an integrated class is to plan for the class as a whole group and yet meet individual needs. The daily schedule and activities planned will influence how this goal is met.

Writing out lesson plans within the time blocks of a daily schedule helps set a routine for the children and adults. Following this routine allows for the children to know what to expect and to learn the sequence of events. For the adults in a classroom, lesson plans assure the smooth organization of the class day. Teachers, aides, volunteers, and substitute teachers are presented with a plan and can determine their responsibilities for the day.

Lesson plans consist of the programmed arrangement of time, materials, and tasks. The children in a class actually determine the lesson plans as the teacher assesses strengths, needs and interests, planning activities that correspond to the goals set for each child. For example, children learn from discovery experiences; thus, the teacher plans opportunities for these to occur.

Lesson plans guide the teaching process and assist with organization. These plans also provide the teacher with some accountability: they can function as a way to check that what is planned is purposeful and appropriate. From this, teachers can determine future plans which ensure that children can progress at their own rate. This will foster success and positive self images.

The Daily Schedule

In the planning process, the daily schedule is usually set up with a consistent sequence of events which are repeated daily. These events are blocks of time which are given labels defining the time. An example is:

9:00 - 9:10	Arrival/Introduction of self selection activities
9:10 - 10:00	Self selection
10:00 - 10:05	Clean up and toileting
10:05 - 10:30	Snack/clean up
10:30 - 10:45	Large group activity
10:45 - 11:05	Small group activity/committees
11:05 - 11:30	Outside activity
11:30 -	End of session

These blocks of time should be set up at the beginning of the year and tried out on a tenative basis to determine:

- the best length of time for each event
- possible re-grouping of activities
- whether additional events are needed
- whether longer or shorter transition time is needed between events
- whether the sequence of events is suitable for the particular group; for example, a gross motor time followed by a freeplay time may lead some children into the latter activity in an inappropriately active and high-strung state, so that a different later activity should be chosen which could help the chidren to become calm and focused on a different task.

When the "bugs" are worked out of a schedule, one should plan on using the same schedule every week. This way, it provides routine experiences and common expectations for the children. As they begin to anticipate the next event on a daily basis, their concept of sequential relationships develops. For example, the child will begin to recognize that after snacktime, a specific event, such as music, will occur.

Knowing what comes next allows children the opportunity to initiate activities within the regular sequence and to take responsibility toward the completion of the present activity. For example, the teacher's statement of "It's almost time for snacks" can stimulate the children to clean up their present activity, and wash their hands for the next one. Also, a consistent schedule can help make it easier for a child to separate from a favorite activity, because he is assured that the activity will appear again at a regularly scheduled time.

Another consideration which supports the importance of a consistent daily schedule is that it helps children learn and feel a sense of order. Within that sense of order for children, as with most adults, there is usually a subsequent sense of security. Of course, a schedule has to be flexible when needed. We can all recall those snowy days when outdoor play (or even school altogether) was cancelled. In such cases, children are entitled to an explanation of the reason for the change in the schedule.

The Weekly Schedule

Given the daily schedule, activities should be planned for each event (or block of time) at least a week ahead of time. This lesson plan of activities takes into account the individual needs of children. With planning, the teacher can choose activities to fit within each event of the schedule on the following basis:

- consider children's strengths, needs and interests
- energy levels of children and adults in the class
- the activities for each block of time (event)
- which children are expected to participate
- specification of individualized work (or specific goals for individual children)
- adult reponsibility for activity
- length of time
- environment of classroom and physical space available
- materials needed for activity

This information may be recorded in more than one place, that is, not only a weekly lesson plan, but also in supplementary material, such as:

- individualized card file
- charts of each child's goals
- individual goal data collection forms on a clipboard

Whatever method the teacher chooses for keeping track of this information, it is important that a system be developed which will provide all of the information needed for anyone to work with a child or carry out an appropriate activity.

Planning should take into account previous teaching strategies and activities which have worked well with a particular child or the group. The following are some things to consider in planning a weekly schedule:

- The adult: child ratio is a factor, because some activities require more supervision than others.
- Pick activities which fit realistically into time slots for events, or plan to carry out activities in two or more days.
- Within each part of the daily schedule, balance something new to the children with something that is familiar.
- Plan according to the emotional and energy needs of the children. When children need to slow down, plan an activity which is quiet, such as story telling.
- Consider the pace which the children demonstrate - that is, whether they tend to be fast or slow in completing certain tasks.

The Importance of Play

The preschool child is an avid observer and learns through watching, listening and interacting with the environment. In a preschool setting, playing provides children an opportunity for this learning process to take place. All children spend a great deal of time playing. It is an important aspect of their lives and has been investigated by anthropologists, developmental psychologists, educators, and other researchers. In past years, play was described as an activity that occupied a child's time when the child was not being productive. A more current view is that play is a critical part of a child's learning process. It is vital to a young child's development and should be emphasized in any early childhood program. Play should be thought of as a way to consolidate learning.

Piaget's description of cognitive development (Piaget, 1952) generated studies which determined some of the cognitive processes that occur in young children's development. The functional use of objects, occuring between 11 and 15 months (sensorimotor period) indicates the onset of the capacity to generate ideas for specific situations. The emergence of pretend or symbolic play skills, between 18 and 24 months, indicates the development of mental images and the transition from the sensorimotor to the symbolic or representational thought period.

There are many different types of play. Manipulative play includes behaviors ranging from a simple scheme, such as banging or mouthing toys, to more refined behaviors such as turning pages of a book. Relational play ranges from the association of two objects based on some similar characteristics (e.g. color, size, shape). Symbolic play includes a variety of play behaviors which are thought to parallel the progressive development of a child's underlying cognitive structures. This progression allows a child to move from simple play behaviors to those of a more complicated nature.

Symbolic play develops as the child acquires the ability to make something, such as an object or a word, stand for or represent something which is not present. This ability accounts for the cognitive capacity to represent ideas symbolically. There are two important aspects of symbolic play. The first is understanding that one thing can stand for something else. Both play and language have symbolic values. In symbolic play, a block or a doll can stand for a baby. In language, different words in different langguages can represent the same item or concept, i.e. "gato" in Spanish and "cat" in English represent the same animal. The second aspect of symbolic play is the ability to change what is presently happening. With this ability, the child is able to draw from the past, hypothesize about the future, and apply it to a current situation.

As children develop, their symbolic play skills will change. These changes can be observed through the ages of 15 months to 5 years in at least four areas:

Ability to Distance From Reality

This refers to the level of the child's dependence on the immediate context to carry out a play sequence. Toddlers require actual physical, life-size props, while three-year-olds can use objects that are smaller than life-size. At the four year old level, language may take the place of props, thus representing a greater ability to distance from reality.

The Context of Play

Toddler's play is focused on daily activities, such as eating or sleeping. For older children, the content may involve less common events and evolves to include activities which have not been experienced. This is demonstrated with the "presence" of firefighters, police officers, space people, and monsters during most preschool play sessions.

Duration and Elaboration of Each Content Area

This changes as a child grows. The toddler typically is involved in isolated schemes. An event occurs, such as feeding a baby, and it is over. By age three, there are sequences and subsequent events in a child's play schemes. Four year olds may use language to announce the sequence of the upcoming scheme.

Distinction Between Self and Others

Toddlers typically pretend with theselves -- they pretend to eat or to drink. Later, a doll may be the object of the action. By three, the child will act as though the doll has a personality of its own. This demonstrates the ability for the child to take multiple roles within pretend play. (Westby, 1984)

All aspects of play are important to any preschool curriculum. The integrated classroom environment should include a number of play options to accomodate the different developmental levels of th children in the class. Sym' ic skills may be facilitated by classrooms which have a variety of play schemes available. Houses, kitchens, restaurants, doctor's offices, beauty salons, and clerical offices are a few suggestions for play environments. The self-selection time of day lends itself particularly well to symbolic play. By understanding the importance of play, we can help children learn, grow and develop in ways which are natural to them.

Classroom Strategies

This section describes blocks of time upon which to build a daily schedule for an integrated class. Although five blocks of time in the daily schedule have been chosen to describe the program (self-selection, snack, small group, large group, outside/therapy time), other arrangements could be developed, depending on the emphasis of a particular program or time available. Suggestions for activities which will alllow children to work on individual areas of need within groups of various size are offered.

These strategies are suggested for settings where handicapped and nonhandicapped children are together and fully integrated throughout the day, except for individual therapy when necessary. Examples are taken from classrooms of ten to fifteen children where one-half or one-third of the children are handicapped, as well as from larger classrooms where just a few of the children are handicapped.

SELF-SELECTION

Self-selection is an ideal time to incorporate play into the preschool classroom. It must be very well planned because it has the potential to provide children with the opportunity to grow in all six developmental areas: fine and gross motor; language; cognitive; social; and self-help. Through careful preparation on the part of the teacher, instruction on the children's IEP goals can occur at this time of day. A self-selection time provides an ideal setting for integration between the handicapped and nonhandicapped children. In addition, the handicapped can model the behavior of the nonhandicapped children. Self-selection provides the opportunity to extend previous experiences as well as introduce new concepts. Children must use skills to initiate and choose activities during self-selection time. For the teacher, self-selection can be a time to probe and assess the skill level of each child.

The role of the teacher during this time is to see that planned activities are carried through, but also allow for unplanned events to take place. The teacher plans one or more activities for each day which will require different types of intervention and direction as well as some which will need little or no teacher guidance. Teacher supervision of self-selection activities can be provided in two ways:

> A teacher-initiated activity is one in which the adult brings attention to an activity, then removes self as the children become involved and start initiating play on their own. This type of supervision can also be used to promote play between handicapped and nonhandicapped and to direct children who are having trouble initiating and choosing an activity. Examples of common teacher-initiated activities include block building, easel painting, and playing at a water play table.

A teacher-directed activity is one in which the adult initiates and continues to supervise an activity. This type of supervision can be used to direct children, help them learn to initiate and attend to an activity, and to provide reinforcement for their participation. The teacher can guide an activity so that it involves children at a variety of skill levels, thus promoting the integration of handicapped and nonhandicapped children. Individualized instruction can be provided in these activities when the needs of a child warrant such attention. Examples of teacher-directed activities include lotto games, writing stories told by children, and cooking.

Child can direct themselves and therefore create a new activity during self-selection time:

A self-initiated activity is one in which a child makes his own choice to work a puzzle, look at a book, or build with blocks, with little or no intervention by another child or adult. Therefore, materials which can be used independently should be available.

A peer-initiated activity is one in which a child becomes involved through observation of a peer engaged in play or through invitation by that peer. A common example would be a child who becomes interested in house play while watching other children play with dress-up clothes. Another example would be one child asking a friend for assistance in block building.

The self-selection time enables the children to choose from a variety of new or old activities. Children often need to repeat activities to master a task. Therefore, materials and activities which should usually be available include: some form of block building (unit or hollow core); housekeeping and dress-up play; some manipulatives (including puzzles and a variety of fine motor materials); books and records for browsing and listening; and art materials (markers, paper, and scissors, etc.) so children can incorporate their use in other activities. Aside from these activities, the teacher may plan and structure activities depending on:

- the recently expressed interest of children;
- IEP goals and objectives for individual children;
- availability of adults for supervision;
- the need to maintain a balance between noisy and quiet activities, messy and quick-clean-up ones;
- whether the variety of activities will provide an ample opportunity to explore in several sensory and skill areas.

This time of day is not to be confused with the common concept of free play. Self-selection time requires a great deal of planning, careful attention to environment and choice of materials, and involvement of the adults. The teacher must develop a careful balance between the need for planning and supervision and the spontaneity with which children create their own activity.

Suggested Activities

A. Purpose: To provide tactile stimulation

Ideas:

1. chalk drawings on a mat (described below)
2. using water or sand table (corn meal also works well)
3. finger painting (try it directly on a table)
4. using play dough
5. mystery feeling box (touch things without looking)

Chalk drawings on a mat: Have children draw on carpet scraps with chalk and then "erase" it with their hands, feet, or any other body part. Make sure it is not dustless chalk. Some handicapped children are not very tolerant of tactile stimulation and need to learn to experience it in a way that is not threatening. The activity will also help children develop a pencil/crayon grasp. As a self-selection activity it will be enjoyed by the nonhandicapped children as well because it is so open ended and provides a time to make complex drawings. Therefore, it lends itself well to use within an integrated setting, since it can easily accommodate chidlren of many developmental abilities and provide an enjoyable social experience. (Contributed by Erin Moody-Robinson).

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B. Purpose: To develop symbolic representation and factiliate representational play

Ideas:

1. re-create a field trip (described below)
2. use new and different housekeeping equipment
3. set up a play store using empty food containers
4. make mud pies in the sand table
5. take an imaginary hike in the classroom

Recreate a field trip: After a visit to the fire station, the children can use the large block area to recreate the site of the trip. A fire station, engine, and sleeping quarters can all be built. A teacher (or nonhandicapped peer) will have to help direct the activity of the handicapped children at first. The use of props and

dress-ups is important so that the activity does not become too abstract, thus too difficult for involvement of some handicapped children. This type of play will be easily integrated because it allows for any level of imagination. Children can be assisted in elaborating on their ideas by drawing pictures or writing stories. (Contributed by Patricia Krchmar Lilley.)

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C. Purpose: To develop self-help skills in dressing and feeding

Ideas:

1. use clothespins and clothesline for hanging paintings and dressups (described below)
2. cut up vegetables to serve for snack
3. make available new and different dress-up clothes with zippers and snaps
4. provide dolls with eay-to-put-on clothes
5. spread cream cheese on crackers

Use clothespins and clothesline for hanging pictures and dress-ups: Have a box of clothespins available (the squeeze/clamp type that are not too difficult to open) alongside a rope clothesline. When children are finished painting at an easel or drawing a picture, they can hang up their work to dry. The same type of line can be found in the dress-up area. This activity will help the children develop hand and finger strength, which are prerequisites for dressing and feeding skills. All of the children will enjoy the independence of taking their own pictures to dry and being able to neatly put away clothes in the house area. (Contributed by Erin Moody-Robinson.)

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SMALL GROUP ACTIVITIES (by Peggy Sheldon)

Planning activities for a small group allows for a different type of interaction and involvement than that which occurs in a large group setting. Small groups typically consist of 3 - 6 children. Working with this number of children, adults may give more individual attention. The size of any group affects the type of interaction that will occur. With more than two children, the amount and types of possible interaction are increased. These interactions may be more easily structured, monitored, and evaluated within a small group. When two or more children engage in an activity together, the opportunity for peer modeling is present. Teachers may also set up small groups to ensure that specific children have the chance of interacting. If the group is kept small, interaction is likely to be increased.

An integrated class requires open-ended activities that challenge children with different abilities and levels of interest. Open-ended activities enable children to participate on several levels. This is especially important to the sucess of activities planned for children with delays or handicaps. In a small group, more time may be allotted for the activity to take different directions and be open-ended enough to meet the wide range of abilities exhibited by the children in the group. For example, if children are encouraged to discuss an issue, there is more opportunity for each child to speak up in a smaller group. Some children may also feel more comfortable and therefore be more likely to speak up in this setting.

Typically, younger children demand more attention and assistance, another good reason to use small group work within the preschool classroom. Small group times can provide the children with opportunities to practice a skill that requires teacher direction. Children must be able to focus on and practice skills up to the satiation point for successful learning and generalization to occur. Since children have varied attention spans, small groups are nice because a child may not have to wait so long for a turn to speak or for adult assistance.

In summary, the challenge for a teacher in an integrated class is to plan activities that meet a variety of children's needs all within a brief class day. Small groups provide an avenue for creative scheduling. For example, targeting the development of specific skills during a small group time can allow a teacher time for individualized instruction to specific children, while being with other children at the same time. Peer modeling can be planned and structured more readily in a small group. For a child with a delay, the flexibility of a small group activity is beneficial. The direction and assistance available in a small group is often more conducive to a child's participation. Small group time is a valuable part of the preschool day.

LARGE GROUP TIME

Large group is usually a gathering of the entire class for a 10 - 20 minute block of time, and includes any or all of the following elements: a musical activity, a movement activity, and opportunity for children to share an experience or some information through language and imagination, and the expectation that each child respond to and follow direction. Large group can be one of the most structured times of the day because many considerations are necessary for it to run smoothly.

Organization of both physical space and content are important in planning the large group time. Initially, it is preferable to conduct large group events in the same physical space so that children become accustomed to sitting in this area for this activity. Also, it may be helpful to have each child sit on the mat of her choice. Mats can be made of small squares of rug, straw, cardboard, or other materials. Assigning a child to a mat can help locate a space within the group and serves as a concrete reference point for the child who begins to wander from the group. In addition to identifying the child's space, this organized placement of children within the group helps assure that each child has a good view of the activity. Ideally, mats should be phased out as children develop skills to sit within a group unassisted.

The content of a large group time should vary from day to day so that it is new and stimulating. Yet, there should be some common elements to help children follow directions easily and remember what is expected of them. It is important to keep in mind the following considerations when planning activities for large group time:

- begin with a highly stimulating activity;
- provide many short activities and vary them frequently; when children are accustomed to attending well, one long imaginative storytelling activity is possible;
- balance something new with something familiar;
- plan the sequence so that lots of action is followed by a quieter activity;
- make note of children's attention span and plan activities which are timed within this span or only slightly longer.

The potential for large group activities is very great. Language development can be considered of primary importance; however, instruction on cognitive goals as well as motor goals may take place at this time. The socialization that takes place as a group of children participate and share together is quite valuable. It is a natural time for the integration of handicapped and nonhandicapped children to take place. Careful planning of activities for the large group will ensure that children with varied skill levels can all participate. One must be especially concerned with holding the interest of and stimulating the nonhandicapped children while including all handicapped children at the same time.

Suggested Activities

A. Purpose: To imitate verbal and motor movements

Ideas:

1. the clapping orchestra (described below)
2. follow the leader march
3. "Simon Says"
4. mirror images to music
5. call and response records

The clapping orchestra: One child at a time is chosen as the orchestra leader, after an initial demonstration by the teacher. To a fast tempo record, the leader claps, indicating that all children clap. When the leader stops, everyone does. When the leader points to an individual child, only that child claps. This can be done with rhythm instruments or vocalizations. Most children love being the leader and learn to take turns. They will "lead" at whatever level is comfortable for them, some using only one direction, others changing directions quickly and frequently, managing to confuse even a teacher.

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B. Purpose: To promote imaginative and symbolic thinking

Ideas:

1. "Guess what I am doing?" (described below)
2. flannel board stories
3. children tell an imaginative story "in the round"
4. dance activities (i.e., imitate animal movements)
5. take an imaginary trip to future field trip site

"Guess what I am doing?" The teacher can whisper a direction to a child (such as "pretend you are swimming" or "pretend you are hopping like a rabbit"). The other children take turns guessing what the child is doing. This activity enables children to think symbolically in response to another child as well as to make their own bodies move in an imaginary fashion. The more sophisicated child can provide his own ideas for representation. At the same time, a child who needs assistance can receive helpful ideas from the teacher and still be successful in the group activity.

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C. Purpose: To increase expressive language abilities

Ideas:

1. "What do you do with it?' (described below)
2. show and tell
3. classification games (colors, shapes; use the classroom environment)
4. discuss vacations, weekends, holidays, families, etc.
5. ask questions to stimulate a discussion about a story recently read

"What do you do with it?": Have a bag full of common items (brush, scissors, can opener, egg beater, tape). Pass the bag around the group so that each child can reach in and choose an object. Take turns describing the function or purpose of the item each child holds. Children of varying abilities will respond with answers ranging from simple to quite complex, thus developing skills at his/her own level. For example, one child may answer to "What do you do with a brush?" simply with the word "hair," whereas another child will explain how you fix your hair in the morning so that it will look neat. Both children are participating - that is what counts.

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SNACK TIME

In an integrated classroom, it is important to utilize every opportunity for the growth and development of all children. Therefore, the snack should be prepared with child participation or observation, rather than in advance.

Snack preparation provides an excellent time for language development by engaging children in conversation about new food, taste, and concepts in cooking. It is a perfect time to work on concept development such as wet/dry, hot/cold, cooked/raw, and simple counting (i.e., amounts of food needed for the group). Children can enjoy a sense of responsibility and confidence when passing out food to their peers. Snack time is a natural setting for socialization. A group of four or five children involved in food preparation is an ideal situation for social skill building since there is need to take turns mixing, share jobs in cooking while enjoying making something good to eat for the rest of the group. Fine motor skills can be developed through activities such as mixing, pouring, spreading, cutting, kneading dough, and even using an egg beater. Finally, making snack as an activity during or at the close of self-selection time allows for the extension of previous activities such as learning about flowers and making flower shaped cookies, playing store and selling vegetables, or visiting a dairy and using milk for shakes the next day.

At times, children may be hesitant to try certain snacks. Here are some tips on helping children to eat new foods:

- "selling" food as a part of playing store;
- combine a preferred food with a new food, such as cheese (familiar) with celery;
- give food a new name, such as "ants on a log" (raisins on peanut butter spread on celery sticks);
- give food a special quality, such as "magic tomatoes" (made magic with a sprinkling of salt).

Generally, when children take part in food preparation they are less suspicious of new foods and more eager to try a taste. Sometimes, "licking the bowl" is in order when helping a child try something new and different. Seating an eager eater beside a reluctant one will usually encourage better eating habits.

Some adult expectations that will help children:

- stress that everyone needs to taste each food;
- begin by serving small portions, then children can request more if they like;
- encourage children to serve themselves and pass food to friends;

Snack time is more than an eating experience; it is a valuable opportunity for building skills, particularly in language and social development, in a natural setting.

Suggested Activities

A. Purpose: To develop the ability to sequence and recall events

Ideas:

1. make carob chewies (described below)
2. recall the events in food preparation while eating
3. make juice popsicles to freeze for the next day
4. clean tables before and after snack; rinse cups
5. keep a pictorial list of each week's snacks

Carob chewies: Make a pictorial recipe for ease in "reading."

Melt in a pan: 1 cup butter
1 cup honey
1 cup sifted carob powder

Remove from heat. Add: 1 cup peanut butter
3 cups oats (toast at 400 F for 10 minutes first)
2 cups raisins or coconut
1 - 2 teaspoons vanilla

Thoroughly mix all ingredients and place by heaping teaspoons on a greased cookie sheets or wax paper. Freeze. (Contributed by JoAnne Bates.)

Any cooking activity allows the teacher to point out to children the order and sequence within the activity. This particular recipe is good because it involves several steps: toasting; melting, mixing, freezing. Cooking activities are excellent for an integrated classroom because all children are generally interested in making and eating a special, nutritious snack. Children can take turns adding ingredients, mixing, making chewies, etc. All levels of ability can be addressed. The teacher can talk about who is doing what, what is being added, or what we do next. Concept awareness of wet/dry, hot/cold, melt/freeze, sweet/sour can all be included. Clean-up should be done with all children helping because it encourages independence, self-help skills, and brings closure to an activity.

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B. Purpose: To encourage socialization, turn-taking, listening

Ideas:

1. use snack time helpers to pass out food (described below)
2. choose recipes which require a lot of mixing for turn-taking
3. have children pour juice for others at their table
4. eat snack in small groups; i.e., 4 - 5 children, with 1 adult to facilitate conversation
5. have a "picnic" outside in small groups

Snack time helpers to pass out food: In the integrated classroom, it is important to have more than one helper per specific task so that the children have greater opportunity to socialize and depend on each other. One child can pass out apples as another follows with crackers and a third gives out cheese. Changing helpers and deciding who passes the food will help children learn to take turns and cooperate as a team or small group. passing out food to a friend requires an otherwise shy child to make social contact. Oftentimes, a child who is reluctant to eat a snack can be encouraged by being a snack helper. When everyone has an equal turn at this job, it helps develop self-esteem in individual children and points out that everyone is capable of helping the group.

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C. Purpose: To develop fine motor dexterity and strength

Ideas:

1. make "ants on a log" (described below)
2. knead and shape pretzels
3. make cinnamon toast, press down toaster, spinkle sugar
4. make peanut butter eating clay (1 cup peanut butter with 1 tablespoon honey and 2 tablespoons milk)
5. cut up a variety of fruits for fancy fruit salad

Make "ants on a log": Cut celery into medium size pieces, fill and spread the inside with peanut butter, and decorate with raisins. Each aspect of this activity will help improve fine motor strength for children of all levels. Cutting celery with a sharp knife is quite difficult and must be carefully overseen by the teacher. Holding the child's hand as you cut together may be a good idea, at least initially. Spreading the peanut butter in wet celery requires a great deal of concentration. Decorating with raisins will conclude the activity and will provide skill development for those who need to work on devleoping their pincer grasp. (Contributed by Marc Wunder.)

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OUTSIDE/THERAPY TIME

The outdoor playground and use of a large indoor room such as an occupational therapy room or indoor gym is meant to be more than an unstructured playtime in the integrated setting. It is a time for physical exercise and a change of pace, allowing children to do things that are not feasible or appropriate in the classroom--yell, run, and climb. In an integrated classroom, this can be a time of day when differences may be less apparent between the handicapped and nonhandicapped children if they have comparable gross motor skills. A child who has difficulty communicating verbally, for example, may be able to play a running game without any problems. Of course, for children who need individual attention for development of gross motor skills, it is an ideal time to work in this area, make use of peer modeling, and carry out physical excercises prescribed by the therapist.

Although tricycles, wagons, jungle gym, slides, and swings are all essential, outdoor play experiences do not need to be confined to a playground and its standard equipment. Many activities that are usually done indoors can take on new and special qualities outdoors--such as mural and easel painting. Sand and water play are natural activities for an outside time and can provide an ideal setting for imaginative play. Taking a walk as a group is an excellent opportunity to generalize language learning to real experiences. Children can practice directional prepositions (in front of, behind, beside) while holding hands with a partner. It is an ideal time to pair children who can offer each other something. For example, a nonhandicapped children will gain confidence by helping another, or a handicapped child will benefit from modeling the behavior of a peer who follows directions well.

In an indoor gym, many activities can promote interaction between handicapped and nonhandicapped children, such as several children on a teeter-totter, a group of children playing under a parachute, and circle games. An occupational or physical therapist can suggest activities for specific motor development goals and needs of individual children. All children can be challenged by such activities if they are designed to accommodate many skill levels. The opportunity to socialize, take turns, learn rules of games, and play together must not taken for granted during outside or occupational therapy time. Adults can assist children with forming friendships when necessary, as well as provide the children with encouragement for independent accomplishments.

Suggested Activities

A. Purpose: To encourage an awareness of group effort

Ideas:

1. parachute play (described below)
2. play tug of war with long rope
3. fantasy chase game (e.g., the teacher is a witch)
4. build a sand castle together
5. use dress-up and make-up faces as clowns to have a parade

Parachute play: Everyone stands in a circle holding onto the edges of a parachute (or large sheet). The parachute is alternately raised and lowered slowly by everyone's cooperation in raising and lowering his/her arms. One, a few, or all children can run under it (must be well supervised) when it is up in the air. This activity depends heavily on a group effort, providing good gross motor exercise and promoting motor-planning skills. It will appeal to and challenge all members of a classroom. (Contributed by Erin Moody-Robinson)

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B. Purpose: To learn to follow rules

Ideas:

1. set up an obstacle course (described below)
2. play "Duck, Duck, Goose" or other circle games
3. taking walks, understanding safety rules, partners, etc.
4. limit the number of children to use a piece of equipment (i.e, tire swing, sandbox)
5. sharing tricycles, wagons, taking turns in setting up a "highway"

Obstacle course: In setting up an indoor or outdoor obstacle course, many types of equipment can be used: scooter boards; rocking boats, swings; teeter-totters; slides; hills; whatever is available. Children can take turns moving through an obvious sequence of activities, bound by limits and rules for use. For example, slide down the slide, then walk across the balance beam, then climb to the top of the monkey bars--following the person in front of you. This type of activity will promote peer modeling as the entire group will be involved. It will require close adult supervision for safety and assistance.

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C. Purpose: To develop strength in gross motor abilities, balance, and coordination

Ideas:

1. play follow the leader on the playground using a fantasy theme (described below)
2. find an open space for running, rolling down hills
3. "blindfolded" walk with partners (older children)
4. pinata party (break the pinata with a bat)
5. find or create stairs on walks

Follow the leader: Create the game with children or adults as the leader. A fantasy theme may help involved children who are hesitant to join in. Some themes might include going on a trip to another planet, walking through the forest and seeing trees and lakes, tiptoeing through the jungle so as not to wake the wild animals. All playground equipment, bushes, grassy areas, or whatever can be used. Making a game of it will encourage children to try out new equipment they have not used. All children can be included, although care must be taken to see that activities are not so difficult that some children are unable to try them.

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GROUP MANAGEMENT AND TRANSITIONS

Working with the group of handicapped and nonhandicapped children as a whole is important and, at times difficult. Interruptions and disruptions will occur--such as the inappropriate use of materials by children, their difficulty in understanding directions or coping with transitions, their inability to attend to a group or to an activity or motor problems which may result in children bumping into or knocking over things in the classroom.

It is vital to notice whether or not the child with special needs has the skills to function in this particular classroom. It is helpful to start, very basically, in developing new skills and becoming aware of others' differences, so that the handicapped child can be assisted in becoming a member of the group.

The next step is to take a careful look at the classroom. Did the year begin with a fairly simple enviornment in the classroom? Any child can easily be "overlooked" by too many interest areas, too many components in an area, and too many brisk changes throughout the day. If the classroom progresses from simple to complex, it can be observed more clearly whether or not the children have appropriate play and attending skills. Next, it is imporant to be sure that all of the rules and expectations for the children are set forth clearly and maintained consistently. For example, one child may need to be told repeatedly not to play with the record player. It will take much longer for that child to learn if the rule is not enforced consistently.

Another environmental consideration in the management of a large group of children is to notice the placement of areas within the room. If, for example, the workbench or block area is adjacent to an area where quiet activity is expected, there will undoubtedly be problems. It simply does not make sense to ask a child to hammer quietly. Finally, it is essential to scan pathways in the classroom environment. A child who has difficulty moving his body through space will be doubly confused if there are unclear pathways in the room. A child should be able to make his way from an art activity area to the housekeeping area without having to negotiate a maze of narrow pathways or to disrupt carefully-built black structures, causing a chain reaction of frustration by tripping over something or someone.

One of the major points to remember in managing a large group of children is to anticipate! The teacher needs to anticipate and to plan for coping with it. For example, when making masks with a group of children, the teacher should expect loud, scary sounds and rambunctious behavior. Because this activity can easily get out of control, the teacher must plan ways to deal with it, direct it, or end it.

Second, anticipate the child who wanders aimlessly so that the day doesn't end before the teacher realizes that the child has done nothing. It is easier to spot the "invisible child" when such behavior has been noticed previously. Waiting can be especially difficult for some children. Anticipate how long an activity will take to set up, so that children do not have to wait too long. Better yet, have everything at hand before the

children arrive for a given activity. If we expect that what happened yesterday or last week might happen again today, then half the battle of group management is won. New crises will always come up, but experience should assure better preparation.

In overseeing a large classroom, the teacher should be sensitive to the varying abilities of children. If the activities encompass many levels of development, then children will be more likely to succeed. A classroom full of children having successful experiences will run quite smoothly. When problems occur, several factors may be considered:

- Are there enough materials to share?
- Is there an environmental problem?
- What preceded the difficulty?
- Was there an uneasy transition?
- Does the schedule need changing?
- Was an activity too taxing, too difficult for some children, or was it unchallenging for a group or an individual?
- Are children given enough time to function independently?
- Do some children seem to spend a lot of time waiting between activities?

Careful observations by the teacher or others can help answer these questions.

One area of potential difficulty in an integrated classroom is the transition from one activity to the next. A child with special needs may have problems with internalizing rules, sequencing, or simply remembering what comes next. A child with auditory processing problems may not understand what is being requested and may need visual cues to understand a direction. Sometimes, coping with a change in activities will take longer for the handicapped child.

The adults in the classroom must also plan for the transition by readying materials for the next activity. For example, if puppets will be used during the large group activity, they should be gathered in advance. Prior notice to the children about transitions always helps. Verbal reminders--such as, "We'll start cleaning up in five minutes," or "You have time to do one more puzzle," or "After we go outside it will be time to go home"--can really help a child anticipate a transition. Reassurances of what comes next are very helpful to the child who finds it hard to remember.

When children play a role in the logical order of activities, they understand the rationale for change. For example, when the children set out their mats for large group time, they are physically involved in the transition. When it is nearly snack time, it makes sense to involve the children directly by having them clear the tables. Another important aspect of transitioning is flexibility on the part of the teacher and a

sensitivity to children's needs. When an activity loses its appeal, the teacher should be sensitive to the need to change it, extend it by adding a new dimension, or simply end it. If the teacher is comfortable with that, the children will also be comfortable. Finally, one transitioning technique which can be helpful is to develop a game or routine for ending an activity. An example of this is asking all children who are wearing red to leave the group. Games in which children can leave the group one at a time to get their coats, go to the bathroom, or sit at the table are recommended. With this, the children will not exit at once in chaos. Games such as these require attention from children, help them understand sequence, and help prevent behavior problems during a transition.

With experience, a teacher will develop a repertoire of techniques for managing a large group of children and making smooth transitions. The most important points to remember are to observe the children within the environment, to anticipate difficulties or problems, and to utilize techniques, materials, and activities that will make transitions and change easier.

OTHER SPECIAL LEARNING ACTIVITIES

An integrated program should make an effort to take advantage of specialists in the community who can offer particular strengths to the program. The Albuquerque Special Preschool was able to offer two special learning activities within its integrated program.

A movement, or dance class, held for one-half hour every other week proved to be an excellent vehicle for targeting all areas of development for the children. The class was designed so that the children were asked to make use of their ability to imagine, follow single-step and a series of directions, recall stories and songs used for movement activity, all within the context of gross motor activity. One exercise, for example, involved the children acting out the song "Eensy Weensy Spider." The group was divided into three smaller groups: the spiders; the rain; and the sun. As the children sang, each group moved when the time came for its part. This "sophisticated choreography" required that the children recall a familiar song, coneptualize all of its components, follow directions as to where to go, when and how, and finally to use their bodies with some imagination along with other members of a group.

Some activities during dance class were designed to improve individual motor skills. These included leaps across the floor, hopping in step with a partner, or jumping over a doll. A favorite challenge was to imitate a "dinosaur walk" with both hands and feet flat on the floor, requiring quite a stretch of muscles. Aside from helping to improve skills in particular areas, the dance class is an enjoyable change of pace for the children, one to which they all look forward. From week to week, children noticed each other's progress.

Another very successful special learning activity is a sig anguage class. This is particularly valuable if one or more handicapped children in the class are learning to sign. It enables all other children to understand some of the "special" language they see adults and children use. The sign vocabulary that is acquired need not be extensive - foods, colors, family members are all useful signs to know. The important point is that the child who signs, especially if he is the only one in class, will feel more comfortable using signs at school if there is familiarity on the part of the other chidlren. Furthermore, the children realize it is a useful language and gain appreciation of a child who signs.

Dealing with Differences

At first glance, integration seems easy. Simply place nonhandicapped children with handicapped children and they'll play and learn together. In reality, it is much more complex. Several things are at risk when integration is left to chance:

* Interactions may be negative - what may seem like playing together could be manipulation of one child.

* The nonhandicapped child could model undesireable behavior.

* Individual needs of handicapped and nonhandicapped children may not be met.

PLANNING

Planning is necessary for successful integration to take place.

1. Provide activities which can accommodate all age and developmental levels within a particular classroom.

   Suggestions

   * An open ended activity can be planned to allow for a variety of levels of cutting abilities to accomplish the same goal.

   * A certain game during large group can be geared to the individual needs of the handicapped children and be made interesting to the other children as well. With the use of a large cardboard refrigerator box, the children can imagine they are playing in a castle. One at a time, they can be asked to go to the top of the castle (to visit the princess), or to go under the box, downstairs in the castle (the dungeon), or to go beside the castle, on the sun porch (to have tea with the king and queen). For the handicapped child who may have difficulty understanding spatial relationships, it is a great exercise in the prepositions -- on top of, under, and beside. At the same time, the game can keep the interest of nonhandicapped through the use of fantasy, imagination, and the introduction of new words and concepts (e.g. "A dungeon -- what's in there? What does it look like? Is it scary?"). All children are involved, challenged, and integrated in an activity like this. To have a successful integration program, all activities should be planned with this in mind.

2. Explore ways to encourage peer modeling.

Suggestions

* Seat competent children next to one who will need help at snack or large group time.

* Pair children together as partners for walks and field trips, so the more able child can assist the one who may have difficulty.

* Play a simple game saying, "Let's see how quickly John and Joe can trade places." Doing this at group time will enable one child to sit close to another who will be a good model.

* Handicapped, as well as nonhandicapped children, will imitate the behaviors to which adults give favorable attention. If comments are made on how well a child cooperates or puts the play dough away, the handicapped child is more likely to notice the appropriateness of the particular behavior and model that behavior.

3. Promote interaction between handicapped and nonhandicapped children.

Suggestions

* Teacher makes a comment like, "It looks like you might need another sister in you family to help cook the dinner..."

* Limit the number of children in some small group activities by the nonhandicapped children.

* Structure situations that will require more than one child. This will encourage children to depend on each other and see the value in each of their peers. For example, we might ask two children to help clear an animal cage, or hold up a mural so it can be taped to a wall. Instead of dwelling on the traditional one helper, make it two or three -- handicapped with nonhandicapped.

4. Promote good feelings among the children.

Suggestions

* Notice the developmental gains of a handicapped child and bring that awareness to the child, in front of the group. For instance, stating "I like the way John is sharing," when John is just learning this skill will help the other children feel positively about John. It is more valuable for everyone to notice what a child <u>can</u> do instead of what a child can't do!

5. Choose activities that develop empathy in nonhandicapped children.

Considerations

* Some children may need more information than others, with some needing or wanting very little information at all. Therefore, each activity should provide options for all children to end the activity or expand it in other directions.

* Some children may have a greater interest after they have spent some time in the presence of a child with a noticeable differrence, but have no interest in the subject prior to the actual experience. Activities which provide understanding and information can be provided before a handicapped child joins the group, but it depends on your group. Usually, the information is more interesting and relevant to presschool children after the handicapped child has joined the group.

* Consider whether or not the handicapped child's presence is appropriate during some of these activities.

* Very young children may not be able to make the association between their own experience in relation to what it is like for another child to have a similar experience.

KNOWING WHAT TO SAY

Children often have comments and questions about differences between themselves and others. It is important to understand how the child has formalized the though behind the comment or question in order to respond appropriately.

Some Developmental Characteristics of the 3-6 year old child

* Learns through repetition and practice
* Begins to discriminate, differentiate, and categorize objects and events
* Perceptions usually based on the here and now and what is seen, versus reasoning
* Often act and react on their emotions rather than from a logic base
* Egocentric point of vie ; doesn't clearly understand others' needs and desires
* Thoughts are concrete rather than abstract
* Naturally curious
* Influenced by the attitudes of the significant adults in their lives (parents, relatives, teachers)
* Uses descriptive language, e.g. size, shape, color, location, function
* Play is a major avenue of learning
* Understands "who", "what", "where" questions
* "Why" questions are used by 3-4 year olds primarily to gain information; "why" questions aren't yet used in a hypothetical sense - e.g. "Why wouldn't we... if..."

Adults need to respond to comments or question children have about others. Listed are some general considerations, most of which are recommended in New Friends (Heekin & Mengel, 1983):

Adult Responses

* Be brief and factual.

* Give the child undivided attention and observe his/her response.

* Show interest in the question or comment.

* Use simple concrete words and metaphors the child understands.

* Remember that the attitude you convey in your discussion is as important as the content.

* Be respectful of the child's comments or questions. Laughing, shaming, or interrupting may discourage more questions.

* Avoid arguments or dogmatic statements. Simply state what you know or think.

* Be empathic. Try to understand and identify with the childs' concerns.

* Be sure your content and attitude are consistent. Laughing at child's clever, though rude, remark as you reprimand him/her does give a mixed message.

* Reflect on the underlying thoughts and feelings as well as the content of the child's questions. (p. 131, Heekin & Mengel).

* Look at the handicapped child's ability to respond on his own:

  - The child may need some adult help in responding.

  - Adults need to respect the child's ability and need to answer on her own.

Remember that children emulate what adults models.

Respond to the child's comment or question with an example that is relevant to their own experiences, e.g., "When you were younger you need help using the bathroom too."

Typical Comments and Questions Children Have Concerning Differences and Suggested Adult Responses

1. "Why does he leave the room with that lady everyday?"

   Suggested Adult Responses: Explain that the child is leaving for therapy to work on a specific skill, such as "learning to talk better." Give nonhandicapped children the opportunity to go to the therapy with a peer. In this way, the handicapped child is not singled out as needing special help, and at the same time, has a peer model for therapeutic purposes. The nonhandicapped child can gain a very special awareness of the handicapped child's needs through this experience, though it may not be conscious.

   It is important to remember that handicapped children should not be removed from the group frequently for therapy or individual work, as they would not have an equal opportunity to establish friendships and to be considered a regular part of the group. Make every effort to carry out therapy within the classroom setting during the course of teacher-planned activities.

2. "She talks like a baby."

   Suggested Adult Response: Provide examples of how it is difficult for all of us to say some words, for example, "spaghetti."

3. "She never talks to me when I talk to her."

   Suggested Adult Response: Direct nonhandicapped child to try again and demonstrate suggested vocabulary to use (in simpler language).

4. "He is messy when he eats."

Suggested Adult Response: Explain that the child has a difficult time eating, but that he is trying very hard to do a good job.

Expand on this comment in large group. Ask each child to name something they can do easily and something that is difficult for them to do. Explain that all of us have a difficult time doing some things.

5. "What happened to his hands?"

Suggested Adult Response: Provide a simple, true explanation, "He was born that way. He uses an artifical hand in order to pick up crayons or button his shirt. he can do most of the same things you can do with your hands."

6. "He talks funny. I can't understand him."

Suggested Adult Response: Ask nonhandicapped child to try a little harder to listen more carefully. Observe for possible need to assist.

7. "She always knocks my blocks down."

Suggested Adult Response: Observe situation for possible cause of behavior; ask peers why it might be happening; suggest to nonhandicapped child that he tell handicapped child how he feels about behavior.

8. "Why isn't he ever here?"

Suggested Adult Response: Discuss reasons, such as illness, with a reminder that handicapped child is still a part of the class.

9. "I don't want her in my group, she's too slow."

Suggested Adult Response: Discuss the fact that people are slow and fast at different things. Teacher may want to assist in directing the handicapped child in this activity.

10. "I'm helping him paint. he can't do it very well."

Suggested Adult Response: Provide simple explanation such as, "He can do it if we let him. You know how much you like doing things all by yourself."

When planning for the integrated classroom, keep in mind that activities in which children succeed usually foster a positive self-image. This will, in turn, create positive feelings toward others who are trying to have a successful learning experience. The teacher can take advantage of such learning activities by shaping and encouraging helpful behavior. There can, however, be a problem when helpful behavior becomes maternal or even condescending. One needs to be observant of this behavior, especially in the older nonhandicapped child.

11. "Pay attention! Don't play with that!"

Suggested Adult Response: Make a special effort to comment on the positive behaviors of handicapped children so that the others will also notice it.

12. Nonhandicapped child imitates handicapped child's speech or walking.

Suggested Adult Response: Suggest that the nonhandicapped child can make it easier for the handicapped child to learn "good talking" or "walking," etc. if we show him how to do it by our example. Be careful not to produce a feeling of guilt for such behavior.

13. "He's always falling and bumping into things. He's clumsy."

Suggested Adult Response:

Focus on characteristics -- such as poor coordination, partial hearing loss, tunnel vision, tactile oversensitivity, to name a few -- through activities which build a functional understanding of these characteristics, Participating children may then place less emphasis on the labels often associated with handdicapped children. The process of demystifying labels associated with handicapped conditions can do a great deal in helping children understand the child behind the label, and to see how frustrating a physical disability may be for that child; and finally to see what that disabled child does to accomplish various tasks.

Example of activity: Have nonhandicapped children walk on balance beam wearing large shoes.

14. "She can't keep up with us."

Suggested Adult Response:

Nonhandicapped children can be encouraged to assist; pair nonhandicapped with handicapped on walks to hold hands and assist. Pace activities so that the handicapped child can keep up in an acceptable fashion -- such as, by riding in a wagon on a long walking field trip.

CHAPTER FOUR

Making Partners of Parents

All educators should strive to become the partners of parents. Programs which lack parent participation are not necessarily failures; rather, the quality of any program with a strong parent component is greatly enhanced. This is especially true of integrated situations where participation presupposes a basic understanding of human differences, and includes an exposure to a wider variety of people, in general.

When any program or school includes children with special needs, the staff should demonstrate knowledge in several areas and competency at two levels:

STAFF KNOWLEDGE

1. Knowledge of one's own values and beliefs (something not usually confronted) helps education personnel become sensitized to their own interactions wih parents. Methods by which professionals can heighten their awareness of such behaviors have been described by Kroth and Krehbiel (1982) and Guralnick and Richardson (1980).

2. A corralate to #1, above, is the understanding of attitudes. Although it is often difficult to assess attitudes toward special populations (and there are no proven ways to effect attitudinal change), it is important for people to gain a high level of awareness of their own attitudes (Fishbein & Ajzen, 1975; Kroth, 1985).

3. It is vital to understand the dramatic effects which a child with special needs has on a family (Haggerty, 1980; Kroth and Krehbiel, 1982; Seligman, 1979). It is only through a broad understanding of famly dynamics that teachers and staff can provide the support needed by families with special children.

4. Parents of handicapped children have long elaborated on their desire to lead as normal a life as possible. Having a special child should not imply to a school or program that the family is to be regarded as a "patient", a "client", or a "sick family". Research has shown that special families are, in fact, exceptionally adept at problem-solving, reframing, and handling life stress, in general. The staff should keep this notion in mind.

   The school staff should treat families of special children as they do <u>all</u> families by:

   a) reinforcing the positive aspects of each parent's child-rearing abilities;

   b) teaching parents to recognize and respond to the strengths of their children;

   c) helping them gain trust in their own competencies and expectations for their child's growth.

STAFF COMPETENCIES

1. Integrated program staff should gain an understanding of how the child (handicapped or nonhandicapped) fits into the larger setting of the family (Foster, Berger, McLean, 1981; Krehbiel, 1985; Rehab Brief, 1984).

   * For example, who are the main adults that have an impact on the child?

   * How do families generally communicate?

   * What is their level of adaptability to change; how close are they in relationship to one another?

   * What other stresses do families have to deal with -- financial, job loss, developmental stages of other children?

   * What is the family's method of coping?

   * What is the structure of the family· married, divorced, reconsitituted; age and number of other children; extra family members living in the home; major child care providers; parents working outside the home?

   * What is the cultural style which provides the family with its identity?

2. Even when the staff are knowledgeable about handicapping and medical conditions and have positive attitudes toward children, they may still feel ineffective in communicating with parents. Systematic and informal training in effective listening skills is encouraged (Gordon, 1973; Kroth and Krehbiel, 1982; Krehbiel, 1985; Seligman, 1979). These training programs also use role-playing situations to teach communication and successful conferer ng skills.

Most of the knowledge and competencies alluded to above are necessary for working with all families, not just those with special children. It is recommended that a brief meeting be held at the beginning of each year to give parents of the nonhandicapped children an overview of handicapping conditions, research on integration, and possibly family dynamics. (Some provision should be made for providing "newcomers", who arrive late in the year with the same information.) Ideally, parents of special children should contribute much of the information to this orientation. Following the initial awareness meeting, no further distinction between parents of handicapped and nonhandicapped children should be necessary.

Finally, schools and centers should take a close look at what parent involvement means -- the types of involvement, and the time the staff must spend with parents who participate. Some parents feel they are involved as partners when they read weekly newsletters; others may wish to attend all field trips; and still others may only consider themselves involved if they attend all parent education workshops offered at the school. The level at which parents become involved depends on the time, interest, strengths and needs of each family. Professionals should consider this carefully when planning to make partners of parents. (Krehbiel & Sheldon, 1985; Kroth, 1985).

What Parents of Nonhandicapped Children Tell Us

Parents have shared their views regarding the benefits of an integrated class to their nonhandicapped children.

Quality of the program

- The reduced pupil:teacher ratio is desirable.
- The emphasis on individual needs leads to emphasis on individual children, rather than just on the total group.
- Special learning activities are often available (e.g., swimming, dance, or sign language class).
- Teachers plan the program to target all developmental areas, creating opportunities for growth in a rich and varied environment.

Social gains

- Children who are given the opportunity to help other children may develop leadership abilities or confidence.
- Sometimes these children show greater patience with siblings or other children.
- Children are able to accept differences among their peers.

General Benefits

- Parents are able to appreciate the strengths of handicapped children, realizing that the handicapping condition is not the most significant thing about a child.
- Parents feel more comfortable meeting and talking with parents of handicapped children; and, are glad to know that some of the problems they face are similar.
- Parents may be able to recreate many experiences of a good preschool program within their own homes (if they have lots of time), but they have said that they could never fabricate an intimate setting with handicapped peers which an integrated class offers.
- Parents are given the challenge of developing age-appropriate explanatins when their children have questions about handicapping conditions.
- Families, in general, feel that they gain much insight into their own and other children.

APPENDIX

References

Books for Integrated Classes

Criteria for Integrating/Mainstreaming Handicapped Children

Guide to Administering the Criteria Checklist

Letter re: Checklist Limitations

Report of Research on Checklist

Criterion-Referenced Tests

Sample IEP

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Albuquerque Special Preschool

Criteria for Integrating/Mainstreaming Handicapped Children

Child's Name_____ C.A. (Express in months)_____

Evaluator_____ Date_____

The Criteria for Integrating/Mainstreaming Handicapped Children contains 32 items. Each statement is scored on a continum from 0 - 4, indicating the extent to which the child has mastered a skill, or the amount of time a skill is exhibited. In addition, each item has been weighted (1 - 6) with 1 being the least important and 6 most important. Their weight factors are indicated on the score sheet. For objectivity, DO NOT USE WEIGHTS (or consult the score sheet) when filling out the Checklist on a child. The specific scoring criteria are explained below.

General Instructions:

1. Place a check in the approriate column for EACH statement. If the child is not given the opportunity to demonstrate the skill or behavior, answer the question to the best of your knowledge of the child's ability.

2. Do NOT look at each statement as an indication of a child's appropriateness for integration. The total score of the checklist will be reviewed. No ONE statement would be used to decide a child's placement.

3. After completing the Checklist, line up the double line on each page with the corresponding dotted line on the score sheet. To score each item, multiply the number in the column you checked on the Checklist by the weight factor for that item which is indicated on the score sheet. (e.g. If you checked "Occasionally" in column 2 for item #6 "Child shares toys," you multiply #2 by the weight factor 3 to obtain a score of 6 for that item.)

Items 1 through 27 should be scored according to how often the particular behavior is observed in the classroom.

0 - Indicates that the child does NOT exhibit this behavior.

1 - Indicates that the child exnibits the behavior infrequently (20-30% of the time).

2 - Indicates that the child exhibits this behavior occasionally (40-60% of the time).

3 - Indicates that the child exhibits this behavior often (65-80% of the time).

4 - Indicates that the child consistently exhibits or has mastered this behavior (85-100% of the time).

Items 28 through 32 should be scored according to how well a child demonstrates mastery of a particular skill. Check the appropriate column (0 - 4) for each statement, indicating the extent to which the child has mastered the skill.

0 - skill is not observed

1 - child demonstrates some prerequisite skills or an interest in learning the skill

2 - child can perform isolated tasks associated with the skill

3 - child demonstrates skill although skill may not be well coordinated or observed consistently

4 - child has mastered skill

Child's Name _____

Item Number	Skill/Behavior	Not at all 0%	Measure of how often child exhibits the skill: Infrequently 20-30%	Occasionally 40-60%	Often 65-80%	Consistently 85-100%
1	Child attends school	0	1	2	3	4
2	Child initiates simple actions at appropriate time during class routine	0	1	2	3	4
3	Child engages in parallel play	0	1	2	3	4
4	Child engages in interactive play	0	1	2	3	4
5	Child understands taking turns	0	1	2	3	4
6	Child shares toys/belongings	0	1	2	3	4
7	Child's communicative behaviors are meaningful and appropriate with a specific intent (not repetitive, random utterances)	0	1	2	3	4
8	Child uses 20 word vocabulary (expressive language)	0	1	2	3	4
9	Child engages in small group games	0	1	2	3	4
10	Other children respond positively to this child	0	1	2	3	4
11	Child can follow simple directions	0	1	2	3	4
12	Child requires little adult attention due to disruptive behavior	0	1	2	3	4

Child's Name _____

Item Number	Skill/Behavior	Not at all 0%	Measure of how often child exhibits the skill: Infrequently 20-30%	Occasionally 40-60%	Often 65-80%	Consistently 85-100%
13	Child provides self with sensory input by exhibiting an interest in people, events, and objects rather than focusing on in-appropriate self-stimulating behaviors	0	1	2	3	4
14	Child participates actively in large group (attends, listens, or contributes)	0	1	2	3	4
15	Child participates in and focuses on self-selection activities	0	1	2	3	4
16	Child can attend to teacher-directed task in a small group	0	1	2	3	4
17	Child shows an interest in what another child is saying	0	1	2	3	4
18	Child initiates play with other children	0	1	2	3	4
19	Child can retrieve previously learned information consistently	0	1	2	3	4
20	Child seeks adult attention at appropriate times and in appropriate situations	0	1	2	3	4
21	Child uses WH questions to gain information about his or her environment	0	1	2	3	4
22	Child demonstrates reasoning abilities by responding appropriately to WHY, HOW, or WHAT IF questions	0	1	2	3	4
23	Child is able to acquire new skills through imitation, i.e speech, gross or fine motor movements	0	1	2	3	4

Child's Name_____

Item Number	Skill/Behavior	Not at all 0%	Measure of how often child exhibits the skill: Infrequently 20-30%	Occasionally 40-60%	Often 65-80%	Consistently 85-100%
24	Child displays well-coordinated movement in classroom and outdoors	0	1	2	3	4
25	Child tolerates tactile input well	0	1	2	3	4
26	Child tolerates movement in space well	0	1	2	3	4
27	Child displays a variety of visual/ perceptual skills	0	1	2	3	4
		Not at all 0%	Measure of extent to which child has the skill: Infrequently 20-30%	Occasionally 40-60%	Often 65-80%	Consistently 85-100%
28	Child is toilet trained	0	1	2	3	4
29	Child eats independently	0	1	2	3	4
30	Child engages in pretend play connected sequence	0	1	2	3	4
31	Child dresses independently	0	1	2	3	4
32	Child walks independently with reciprocal arm swing	0	1	2	3	4

1. Based on this child's scores on the Checklist, and other developmental assessments, which classroom placement is most appropriate? Why?

_____

_____

_____

_____

2. What are the parent's desires for this child's placement? Why?

   a. Non-integrated: _____

   b. Integrated: _____

Criteria for Integrating/Mainstreaming Handicapped Children - SCORE SHEET Child's Name:_____

Instructions: After completing the Checklist, line up the double line on each page with the corresponding dotted line on the score sheet. To score each item, multiply the number in the column you checked on the Checklist by the weight factor for that item which is indicated below. (e.g. If you checked "Occasionally" in column 2 for item #6 "Child shares toys," you multiply #2 by the weight factor 3 to obtain a score of 6). Subtotal each column;then add all 3 subtotals to derive the final score.

Item Number	Weight factors Page 2	Item Number	Weight factors Page 3	Item Number	Weight factors Page 4
1	x 3 =	13	x 3 =	24	x 1 =
2	x 5 =	14	x 3 =	25	x 1 =
3	x 4 =	15	x 6 =	26	x 1 =
4	x 2 =	16	x 4	27	x 2 =
5	x 3 =	17	x 4 =		
6	x 3 =	18	x 3 =		
7	x 3 =	19	x 4 =	28	x 3 =
8	x 5 =	20	x 3 =	29	x 3 =
9	x 3 =	21	x 1 =	30	x 6 =
10	x 2 =	22	x 1 =	31	x 2 =
11	x 4 =	23	x 5 =	32	x 1 =
12	x 6 =				Subtotal this column_____

Subtotal this column_____ Subtotal this column_____ Grand Total_____

Guide to Completing the Criteria Checklist

(Criteria for Integrating/Mainstreaming Handicapped Children)

by Debbie Maier, M.S.

Albuquerque Special Preschool

I. Administration and Scoring:

The Criteria for Integrating/Mainstreaming Handicapped Children contains 32 items. Each statement is scored on a continuum from 0 - 4, indicating the extent to which the child has mastered a skill, or the amount of time a skill is exhibited. In addition, each item has been weighted (1-6) with 1 being the least important and 6 most important. These weight factors are indicated on the score sheet. The specific scoring criteria are explained below.

General Instructions:

1. Place a check in the appropriate column for EACH statement. If the child is not given the opportunity to demonstrate the skill or behavior, answer the question to the best of your knowledge of the child's ability.

2. Do NOT look at each statement as an indication of a child's appropriateness for integration. The total score of the checklist will be reviewed. No ONE statement would be used to decide a child's placement.

3. After completing the checklist, line up the double line on each page with the corresponding dotted line on the score sheet. To score each item, multiply the number in the column you checked on the Checklist by the weight factor for that item which is indicated on the score sheet. (e.g. If you checked "Occasionally" in column 2 for item #6 "Child shares toys," you multiply #2 by the weight factor 3 to obtain a score of 6 for that item.)

Items 1 through 27 should be scored according to how often the particular behavior is observed in the classroom. Refer to the first page of the Checklist for specific criteria. For example, a 3 indicates that the child exhibits the behavior "often" or 65-80% of the time.

Items 28 through 32 should be scored according to how well a child demonstrates mastery of a particular skill. Refer to the first page of the checklist for specific criteria. For example, a 4 indicates that the child has mastered the skill.

II. Item Explanation:

1. Child attends school. Explanation: Answer this question according to the percentage of time the child is physically present in the classroom.

2. Child initiates simple actions at appropriate times during class routine. Explanation: Simple actions might include: bringing chair to group, washing hands before snack, cleaning table after snack. Teacher may direct the child verbally but does not need to prompt the child physically. On this item, the variety of actions performed should be considered.

3. Child engages in parallel play. Explanation: The child plays with toys that are similar to those that other children are using. In short, the child plays beside, rather that with, other children.

4. Child engages in interactive play. Explanation: The child plays with other children. The child touches an object in common with another child and exchanges objects. The child engages in verbal communication during play with another child.

5. Child understands taking turns. Explanation: Examples of taking turns might include: passing toy/object/picture to another child at group time, sitting and waiting during group time until name is called, or responds to "Whose turn is it?".

6. Child shares toys and belongings. Explanation: Examples of sharing behaviors might include: playing with other children without fighting or offering toys, etc. to other children during interactive play. (This would not include a child's merely being passive when a toy is taken away.)

7. Child's communicative behaviors are meaningful and appropriate with a specific intent. Explanation: Child does not engage in repetitive, random utterances. Rather, the child demonstrates communicative behaviors for specific purposes such as requesting, greeting, questioning, commenting, and labeling.

8. Child uses a twenty word vocabulary. Explanation: Child has a repetoire of at least twenty words which he/she uses frequently in the classroom. "Uses" is the key word in this item. Some children may indeed have been observed to utter twenty different words at some time, but may not have a functional vocabulary of twenty words which they use frequently.

9. Child engages in small group games. Explanation: Examples of small group games are: Ring-Around-The-Rosey; London Bridge; Button-Button, Who's Got the Button?; Duck-Duck-Goose. On this item, the complexity and variety of games a child is able to participate in should be considered.

10. Other children respond positively to this child. Explanation: Child's actions and demeanor encourage other children to communicate, play, and interact with him or her.

11. Child can follow simple directions. Explanation: Examples of simple directions might include: pointing to objects, food, or persons when requested; carrying out commands such as, "get the ball, go outside, or look at the book."

12. Child requires little adult attention due to disruptive behavior. Explanation: A score of four would indicate that the child almost never needs adult intervention because of behavior. A score of 0 or 1 would indicate that a child is in constant need of adult intervention due to disruptive behavior.

13. Child provides self with sensory input be exhibiting an interest in people, events, and objects rather than focusing on inappropriate, self-stimulating behaviors. Explanation: This item looks at a child's ability to interact with his/her environment through purposeful play, eye contact with others, active attending to happenings in room, physical or communicative contact with others.

14. Child participates actively in large group. Explanation: Child stays in large group of six to twenty children, and listens well or contributes.

15. Child participates in and focuses on self-selection activities. Explanation: Self-selection is a time in which the child is free to choose from a variety of materials and activities provided in the room. During self-selection a child makes an active choice as to how he/she wants to be involved. This selection of activities or toys differs from when the young child chooses toys on the basis of physical proximity.

16. Child can attend to a teacher-directed task in a small group. Explanation: Chil stays in a teacher-directed task in a small group.

17. Child shows an interest in what another child is saying. Explanation: Child may respond with actions to another child's verbal directions, or a child may respond with a verbal statement indicating he/she understood what another child has said.

18. Child initiates play with other children. Explanation: Child can initiate play by asking another child to join him in play, "Let's play cars." A child can also initiate play by assigning roles or tasks to another child, "You be the mommy, and put the baby in the car." Nonverbally, a child can initiate play by taking a child by the hand and leading him to the play area or by offering a child a toy similiar to his own.

19. Child demonstrates ability to apply new or previously learned information to a variety of situations. Explanation: Child has the ability to take information learned in one setting and apply it to other situations. Examples: Child learns the concept of "big" as applied to balls, and is then able to use "big" to describe a wide variety of objects. Child learns to use to toilet at school and then is able to use it during field trips or in other places.

20. Child seeks adult attention at appropriate times and in appropriate situations. Explanation: Examples of this might include: seeking adult assistance to operate a toy or overcome an obstacle to participation in an activity, i.e. opening a jar of paste or putting on a record. Child also seeks adult attention to have physical, social and emotional needs met in an appropriate manner.

21. Child uses WH quesitons to gain information about his/her environment. Explanation: Child uses the folowing types of WH questions; what, where, who, when, and why.

22. Child demonstrates reasoning abilities by responding appropriately to WHY, HOW, or WHAT IF questions. Explanation: Examples of these types of questions might include; "Why do we wear a hat when its cold outside?. How do you make cookies?, What would happen to the pile of blocks if I took the bottom one away?"

23. Child is able to acquire new skills through imitation, i.e. speech, gross or fine motor movements. Explanation: This item examines a child's ability to see a modeled behavior and immediately imitate that behavior with a reasonable degree of accuracy.

24. Child displays well-coordinated fine and gross motor movement in classroom and outdoors. Explanation: Child is able to maintain balance over a variety of surfaces. The child can utilize playground equipment with minimal supervision. Child also demonstrates control of pencil and other writing implements.

25. Child tolerates tactile input well. Explanation: Child participates in sand or water play, finger painting, etc. and does not avoid physical contact.

26. Child tolerates movement in space well. Explanation: Child enjoys being picked up and moved around by an adult. Child utilizes moving playground equipment such as swings.

27. Child displays a variety of visual/perceptual skills. Explanation: Examples might include putting together puzzles, reproducing drawn shapes and letters, and reproducing block designs.

The next five items (#28-32) should be scored according to how well a child demonstrates mastery of a particular skill. Check the appropriate column (0 - 4) for each statement, indicating the extent to which the child has mastered the skill.

0 - skill is not observed

1 - child demonstrates some prerequisite skills or an interest in learning the skill

2 - child can perform isolated tasks associated with the skill

3 - child demonstrates skill although skill may not be well coordinated or observed consistently

4 - child has mastered skill

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28. Child is toilet trained. Mastery = child initiates all toileting needs and requires no assistance.

29. Child eats independently. Mastery = child has acquired use of utensils and cup with no spilling.

30. Child engages in pretend play in connected sequences. Mastery = child represents play events such as housekeeping or grocery shopping in a series of logical sequences i.e. child mixes cake, bakes it, sets table, and eats cake.

31. Child dresses independently. Mastery = child can take off and put on all articles of clothing and do simple fasteners.

32. Child walks independently. Mastery = child walks in an adult-like manner with reciprocal arm swing, maintaining balance.

albuquerque special preschool

Dear Colleague,

Thank you for requesting a copy of Criteria for Integrating/Mainstreaming Handicapped Children. This instrument was developed by the staff of the Albuquerque Integration Model (Project AIM Outreach) in order to provide additional objective information about children who might do well in integrated settings.

At the Albuquerque Special Preschool, where mild to moderately handicapped children receive educational and therapeutic services, we use the instrument to assist us in making appropriate class placements for the children who are 2-5 years old. In addition to the Checklist score, we also weigh heavily: parent requests, opinions of multidisciplinary staff, and scores on both criterion-referenced and norm-referenced measures. Our placement options include:

Special Needs Classrooms	-	traditional special education class; 7 children; 1 teacher and 1 aide
Level I Integrated Class	-	1:1 ratio of handicapped to non-handicapped children (12 children total); 1 teacher and 1 aide
Level II Integrated Class	-	1:2 ratio of handicapped to non-handicapped children (15-18 children total); 2 teachers and 1 aide
Level III Mainstream Setting	-	varies according to preschool program

To date, our research indicates that the Checklist provides unique information in discriminating between successful and unsuccessful placements. We are still seeking ways to improve the instrument and to make it more sensitive. Because of limited numbers of subjects, we have not been able to determine its success in predicting the appropriate level of integration.

Usually, we find that the special needs class placements are very successful when using the factors mentioned above. We sometimes find that we have placed a child in a Level II or Level III setting when he or she would have progressed better in the more structured Level I class. While these children's scores may be high on the Criteria Checklist, their behavior problems have necessitated a more structured placement.

We caution that the Checklist should be completed by someone who knows the child fairly well. This individual should complete several observations of the child in a setting where s/he is involved with other children. If a professional from a special education program needs to complete the Checklist on a child who is on a waiting list for services, he or she should involve the child's current teachers or day care providers in making the assessment.

Gail C. Beam

Gail C. Beam, Project Director

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Report of Research

The Criteria Checklist

by Debbie Harrington, Ph.D.

When an early intervention program offers a variety of preschool classes to a population of children with varied developmental delays, placement of these children in the most appropriate classes is an important and sometimes difficult task. All too often, the placement decision hinges on developmental tests that have some serious shortcomings. For instance, most developmental tests fail to account for the slow or variable growth rates of some handicapped children. Further, many instruments developed for preschool-aged children lack the necessary reliability and validity studies and/or are intended to be administered by a speech therapist or occupational therapist. The latter shortcoming is particularly problematic for programs that do not have a speech or occupational therapist who is available regularly.

In response to these shortcomings of developmental instruments, the staff at the Albuquerque Special Preschool has been in the process of developing an instrument entitled "Criteria for Integrating/ Mainstreaming Handicapped Children (Criteria Checklist)." The Criteria Checklist measures the variability in which a child displays a particular skill or behavior, and assesses skills that professionals considered important in the classroom placement process which other instruments appeared to neglect. Through a system of weighting each item, the relative importance among skills required to progress well in an integrated class is considered.

Several versions of this instrument have been administered to children at the Preschool over the past several years. Prior to the October/November 1983 developmental testing period, the Criteria Checklist was again revised. The purpose of these revisions was to increase the predictive validity of the Criteria Checklist by including only those items assessing behaviors that are important for successful integration. In addition, it was desirable to maintain the high interrater reliability of the instrument by assuring that professionals understood how to administer and interpret the instrument. During this revision process, some items were rewritten or eliminated, the weighting of items was re-evaluated, the rating scales associated with four items were changed, and a booklet was developed to provide instructions on how to administer the Criteria Checklist, as well as to explain each item on the instrument.

Because of the above revisions in the Criteria Checklist, it was necessary to conduct the appropriate reliability and validity studies on this instrument. This included an assessment of the extent to which different raters (i.e., speech therapist, occupational therapist, and teacher) agreed on the scoring of the instrument (i.e., interrater reliability), the extent to which items on the Criteria Checklist were related (i.e., interitem reliability), the extent to which each item on the instrument discriminates between low and high scorers (i.e., item analysis), and, finally, a measure of the degree to which the instrument allowed accurate inferences about development (i.e., construct validity).

Method

Subjects and classroom placements. Forty mild to moderately handicapped children from the Albuquerque Special Preschool served as subjects. Handicapping conditions included: mental retardation, communicative disorders, motor dysfunctions, neurological or other health impairments, or a combination of these. Placement options consisted of toddler classes for the two to three year olds, and either a traditional special education class or an integrated program for children from three to five years of age.

The toddler class is the only placement option for handicapped children in the two to three year age range. There were 14 children in the toddler classes and their average age was 30.9 months with a standard deviation of 10.2 months. The special education or special needs classes consisted of 14 children whose average age was 48.6 months with a standard deviation of 8.9 months. The integrated settings included two separate classrooms that differed in the ratio of handicapped to nonhandicapped children. One class had a 1:1 ratio of handicapped to nonhandicapped, and the other class had a 1:2 ratio of handicapped to nonhandicapped. While it is of future interest to investigate the influence of the ratio of handicapped to nonhandicapped, the small sample sizes precluded such an analysis. There was a total of 12 handicapped children in the integrated classes and the average age was 50.3 months with a standard deviation of 6.2 months.

Criteria checklist. The Criteria Checklist contains 32 items that are weighted according to professionals' judgment of their importance in making placement decisions (for a copy of the instrument, see the Appendix). These weights range between one and six. For the first 27 items, raters must indicate the extent to which a child exhibits a particular skill or behavior. The rating scale is as follows: zero denotes that a child does not exhibit a skill; 1 indicates that a skill is observed infrequently (approximately 20-30 percent of the time); 2 indicates that a child exhibits a behavior occasionally (approximately 40-60 percent of the time); 3 indicates that a behavior is displayed often (approximately 65-80 percent of the time); and 4 indicates that a child consistently exhibits a skill (approximately 85-100 percent of the time). On the last 4 items of the Criteria Checklist, raters indicate the extent to which a child has a skill and the rating scale is the same as that described for the first 27 items. The Criteria Checklist is scored by multiplying the weight associated with each item and the score obtained on that item. The product for each item is then summed to produce a total score. In general, the items are intended to assess the stability of self help, social, language, play, motor, and cognitive skills important in the classroom.

Test administration. The Criteria Checklist was administered in the fall of 1983. Three raters evaluated each child on the instrument at this time. The raters included a teacher, a speech/language pathologist, and an occupational therapist. An exception to this was one toddler class of seven children where the Speech/Language Pathologist also served as the teacher. In this class, only two raters evaluated each child, and consequently, data from

this class were not included in the calculations of interrater reliability. The Criteria Checklist was administered again in the spring of 1984 and, at this time, only one rater evaluated each child on this instrument.

Results and Discussion

The following results should be interpreted with some caution due to the small sample sizes associated with many of the analyses. Unfortunately, this problem generally exists in applied research settings. Secondly, unless otherwise stated, most of the reliability and validity studies are reported for the fall 1983 test administration period. However, similar results were obtained for the spring 1984 test administration period.

Reliability. The interrater reliability on the Criteria Checklist was quite high, alpha = .96, which indicated that the speech/language pathologist, the occupational therapist, and the teachers were in high agreement, on the average, about the total scores on the instrument. Moreover, an analysis of variance showed that there was no difference among raters in the average Criteria Checklist total score, $F(2.64)<1$, $p>.05$, which suggested that, on the average, raters tended to adopt a similar criterion about the extent to which behaviors were exhibited. Thus, one advantage of the Criteria Checklist over many developmental instruments is that it can be reliably administered by teachers, speech/language pathologists, and occupational therapists.

Due to the high interrater reliability coefficient, the average score on the Criteria Checklist was calculated for each item. The total score on the Checklist was then derived by the

method described earlier. An interitem reliability analysis on the average item scores for the fall 1983 administration of the Criteria Checklist was high, alpha = 98, which demonstrated that the instrument was internally consistent, or in other words, the average correlation among items was high. Similarly, the interitem reliability analysis of the spring 1984 Criteria Checklist scores also showed that the items were internally consistent, alpha = .97.

Item analysis. An item analysis was performed to determine whether each item discriminated between children who scored in the lowest and highest 25th percentile on the Criteria Checklist during the fall 1983 test administration period. The children in the lowest 25th percentile had total scores lower than 139 while the children scoring in the highest 25th percentile had total scores higher than 265. A series of ANOVAs revealed that all 32 items significantly differentiated between these two groups, p .05. This finding indicated that each of the 32 items on the Criteria Checklist discriminated well between children who scored in the lowest and highest 25th percentile.

Validity. The Criteria Cnecklist correlated significantly with three developmental instruments: the Alpern-Boll, the LAP, and the Westby, $r = .86$, $p < .001$; $r = .88$, $p < .001$; and $r = .82$, $p < .001$, respectively. This demonstrated that the Criteria Checklist was measuring some similar skills or developmental content of the other three instruments (i.e., content validity); however, since these correlations were not perfect, the Criteria Checklist clearly assesses something unique to these other instruments.

Summary

To summarize, the Criteria Checklist demonstrated excellent interrater and interitem reliability, and the item analysis showed that each item on the instrument had very good discriminating power. In addition, the high correlations between the Criteria Checklist and three developmental instruments showed that this instrument has high content validity. These findings suggest that the Criteria Checklist may be preferable to some developmental instruments for several reasons. First, the high interrater reliability coefficient found for the instrument this year is a replication of the findings from two previous years and, therefore, can be interpreted as solid support for the conclusion that the instrument can be reliably administered by speech/language therapists, occupational therapists, and teachers. This is an important advantage of the Criteria Checklist since in many preschool settings the teacher must administer developmental instruments, most of which have not demonstrated interrater reliability. Second, since the Criteria Checklist is an observational instrument it can be readministered any number of times without concern about children learning the items rather than their learning the general conceptual skills the items are intended to reflect. Third, the Criteria Checklist may prove to be more sensitive in measuring skills of handicapped children since the stability of a behavior is assessed rather than the presence or absence of a behavior. Finally, while the Criteria Checklist has high content validity which indicates it is measuring skills important in development, the instrument is the only one of which we are aware that assesses skills which are important for the

successful placement of a handicapped child in a less restrictive environment (i.e., integrated classroom setting). Since more importance is being placed on integrating and mainstreaming handicapped children, it is critical to have an instrument for this purpose to be used in conjunction with professionals' judgments.

APPENDIX

(Reprinted from Guide to Screening and Assessment Tools and Individual Program Development for Handicapped Children, with permission of Albuquerque Special Preschool and the Author)

OVERVIEW OF SELECTED CRITERION-REFERENCED TESTS

Adaptive Performance Instrument

Authors:	D. Gentry, D. Bricker, E. Brown, Hart, K. McCartan, C. Vincent and O. White.
Ages:	Birth to 2 years.
Administered by:	Teachers, therapists and psychologists.
Description:	A.P.I. was intended for use with children functioning developmentally under the age of 2. It is useful for children who exhibit sensory and/or motoric handicaps or with children who have been identified as severely or profoundly handicapped. It assesses the child's performance on developmental sequences of behaviors and on functional behaviors. The areas include: physical intactness, reflexes/ reactions, gross/fine motor, self care, sensori-motor, social and communication. Adaptations are provided for children with motoric and/or sensory handicaps.
Training:	Recommended use of one day training program and half day of supervised assessment of children.
Time to Administer:	Not specified.
Ordering and Cost Information:	CAPE Project Special Education Department University of Idaho Moscow, ID 83843 208-885-6761 $30.00

Brigance Diagnostic Inventory of Early Development

Author:	A. Brigance
Ages:	Up to 7 years.
Administered by:	Teacher or trained para-professional with professional supervision.
Description:	Criterion-referenced and normative referenced inventory which provides developmental levels in areas of psychomotor, self-help, general knowledge, communication, comprehension, cogntive skills. Includes developmental record books, and results are easily translated into sequential, individualized lessons. Available in Spanish. Training videotapes for program introduction are available.
Training:	Does not require specialized training in testing. Specific instructions for administration are provided in the inventory.
Time to Administer:	Not specified.
Ordering and Cost Information:	Curriculum Associates, Inc. 5 Esquire Rd North Billerica, Mass. 01862-2589 1-800-225-0248 $57.95

Callier-Azusa Scales

Editor:	R. Stillman
Ages:	6 - 60 months.
Administered by:	Classroom teachers and other professionals. No specific testing expertise is required, other than good observational skills and knowledge of the child's repetoire of behaviors.
Description:	A developmental scale designed to aid in the assessment and development of an individualized program for deaf-blind and multihandicapped children. Five subscales assess the following areas: motor development, perceptual development, daily living skills and socialization. Administration is based on observation of behaviors which typically occur in conjunction with classroom activities. It can also by administered in other settings (e.g. home), with judicious interpretation of findings. Reliability data are available from the editor on request.
Training:	Specific instructions for administration are provided in guide.
Time to administer:	Not specified.
Ordering and Cost Information:	Callier Center for Communication Disorders University of Texas/Dallas 1966 Inwood Rd Dallas, Texas 75235 (214) 783-3004 $7.00

Hawaii Early Learning Profile (HELP)

Authors:	S. Furuno, K. O'Reilly, C. Hosaka, T. Inatsula, T. Allman and B. Zeisloit
Ages:	Birth to five years.
Administered by:	Teacher(s) with consultation with therapists.
Description:	Criterion-referenced developmental checklist which assesses cognitive, expressive language, gross/fine motor, socio-emotional, and self-help development. The activity guide portion of the HELP is a practical task-analyzed curriculum and parent activities guide. Developed using several growth and developmental scales.
Training:	Not specified.
Time to administer:	Not specified.
Ordering and cost information:	Vort Corporation PO Box 60552 Palo Alto, CA 94306 $18.00

Learning Accomplishment Profile (LAP) and Early Learning and Accomplishment Profile (E-LAP)

Authors:	A. Sanford, J. Zelman (LAP)/ M. Glover, J. Preminger, A. Sanford (E-LAP)
Age:	The Early-LAP assesses development from 0-36 months. The LAP assesses development from 36-72 months.
Administered by:	Teacher or trained paraprofessional.
Description:	Criterion-referenced developmental checklist which assesses language, cognitive, self-help, gross/fine motor.
Training:	Not specified.
Time to administer:	Not specified.
Ordering and cost information:	Kaplan School Supply 600 Jonestown Rd Winston-Salem, NC 27103 1-800-334-2014 $4.50 each

Vulpe Assessment Battery

Author:	S.G. Vulpe
Ages:	Birth to 6 years.
Administered by:	Teachers, therapists and other professionals.
Description:	Criterion-referenced developmental checklist which samples development in the following areas: gross/fine motor, language behaviors, cognitive processes and specific concepts, organizational behaviors, activities of daily living, environment. Includes a sequential teaching approach. May also be used as a screening tool. Information on interpretation and report writing is included. A system for enviornmental assessment and presentation of adaptations for handicapped children is provided.
Training:	A detailed description of the test and its administration is provided in the guide.
Time to Administer:	Approximately 1 hour, and can be divided into separate blocks of time.
Ordering and Cost Information:	National Institute on Mental Retardation Kinsmen NIMR Bldg. 4700 Keele St Downsview, Ontario M3J 1P3 Canada $20.00

Uniform Performance Assessment System (UPAS)

Authors:	O. White, E. Edgar, N.G. Haring
Ages:	Birth to 6 years.
Administered by:	Teachers and other professionals.
Description:	Criterion-referenced test which supplies developmental skills in the following areas: gross motor, social/self-help, pre-academic, and communication. Has specific adaptions for specific handicapping conditions. Items can be used as instructional objectives. A computer-generated IEP based on UPAS is being developed.
Training:	Specific directions for administration are described in the manual.
Time to administer:	Not specified. Many regularly scheduled classroom activities can provide opportunities for testing many UPAS items at once.
Ordering and Cost Information:	Experimental Education Unit WJ-10 ChildDevelopment&Mental Retardation Center University of Washington Seattle, Washington 98195 $15.00.

Individualized Education Program (IEP)

Child's Name_____ In effect_____to_____

Date of Birth_____ Review date(s)_____

Current Placement (Class)_____ Teacher_____

SUMMARY OF SERVICES

From the attached pages, the following responsibilities have been designated:

Teacher (Case Manager)_____

_____

_____ _____
Signature Date

Speech Therapist_____

_____

_____ _____
Signature Date

Occupational Therapist_____

_____

_____ _____
Signature Date

Aide/Support Teacher_____

_____

_____ _____
Signature Date

Parent_____

_____

Other (Specify Guardian, etc)_____

_____

_____ _____
Signature Date

I/We agree with the goals set for my child's IEP:

_____ _____
Signature Date

I/We disagree with the goals set for my child's IEP:

_____ _____
Signature Date

I.E.P REVIEW Child's Name _____

Date of Review _____ COMMENTS

Person(s) Attending (Sign below) Title

_____

_____

_____

_____

_____

Date of Review _____

Person(s) Attending (Sign below) Title

_____

_____

_____

_____

_____

Date of Review _____

Person(s) Attending (Sign below) Title

_____

_____

_____

_____

_____

Child's Name _____

INDIVIDUAL EDUCATIONAL PROGRAM

Parental Involvement in Goalsetting

Dear Parent(s),

Your child's IEP (Individual Educational Program) is being developed or revised. The term "individual educational program" means a written statement of instruction especially designed to meet the unique needs of children. You, as a parent, are an important part of the IEP development. We need your participation in developing goals for your child.

Write a goal for your child in at least 3 areas of development. If time allows, write a goal for each of the six areas. To help you think about your child's strengths and needs, there is a brief description of the six areas of a child's development and some examples of goals one might set in each area.

1. GROSS MOTOR: Your child's ability to move his body (i.e. head movement, rolling, sitting, crawling, standing, walking.) Example of a gross motor goal-My child will sit by himself.
Your goal: _____

_____

_____

2. FINE MOTOR: Your child's ability to use his hands (i.e. holds crayons, turns pages, manipulates clay). Example of a fine motor goal - My child will pick up and use crayons.
Your goal: _____

_____

_____

3. SELF-HELP: Your child's ability to care for himself (i.e. toileting, dressing, eating, washing). Example of a self-help goal- My child will eat a cracker by himself.
Your goal: _____

_____

_____

Child's Name_____

4. LANGUAGE/ SPEECH

Your child's ability to understand and respond to people around him. This does not necessarily refer only to talking as there are other ways children do communicate (i.e. activity stops when hearing "no-no", jabbers with expression, responds to own name, etc.) Example of a language/speech goal - My child will respond to me when I call his/her name.
Your goal_____

_____

_____

5. SOCIAL/ BEHAVIORAL:

Your child's ability to interact and get along with other people (i.e. plays with other children, helps put things away). Example of a social/behavioral goal- My child will stop having temper tantrums.
Your goal_____

_____

_____

6. COGNITIVE:

Your child's ability to think and figure out how to do things by himself (i.e. looks at pictures in a book, points to one named body part, matches familiar objects). Example of cognitive goal- My child will learn how to use a new toy, such as turning the handle of a "Jack-in-the-box" when he wants Jack to jump out.
Your goal_____

_____

_____

Which of the above areas do you feel are most important?

_____

_____

_____

_____
Parent(s) Signature

_____
Date

Child's Name_____

SUMMARY OF CHILD PERFORMANCE

Assessment Tool	Date	Gross Motor	Fine Motor	Self Help	Social	Cognitive	Language	Overall Range of Performance
1.								
2.								
3.								
4.								
5.								

STRENGTHS/ABILITIES:

AREAS OF NEED: (The 3 priority areas are starred, and are of equal importance, unless otherwise noted.)

STATEMENT OF ANNUAL GOALS

Goals in all areas of development for the coming year: COMMENTS

1. MOTOR: (Gross) _____

2. MOTOR: (Fine) _____

3. SELF-HELP: _____

4. LANGUAGE: _____

5. SPEECH: _____

6. SOCIAL: _____

7. COGNITIVE: _____

8. BEHAVIORAL: _____

9. OTHER: _____

IMPLEMENTATION/INSTRUCTIONAL PLAN

Child's Name _____ Date _____ Sheet # _____

Area of Development _____ Implementor(s) _____

Long-Term Goal _____

Instructional Objectives	Initiated/ Achieved	Methods/Materials	Evaluation Procedures	Comments