

PSYCHO-EDUCATIONAL ASSESSMENT,
CURRICULUM DEVELOPMENT, AND CLINICAL RESEARCH
WITH THE "DIFFERENT" CHILD

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Introduction

The development of ^F superior procedures to assess children and design curricula for them depends upon the kind and the quality of collaboration that is fostered in these endeavors. Particularly, we are referring to the collaboration of teachers with supervisors and of both teachers and supervisors with psychologists, language specialists, social workers, and other allied professional colleagues. Although such collaboration does not guarantee that a particular teacher's style of teaching will improve, we find it impossible to conceptualize maximally effective teaching without it. For example, the existence of alternative educational placements for a child in no way guarantees that the actual placement will be thoughtful or one of choice. In the same manner, the mere gathering together of certain professional workers concerned with the education of a particular child does not preclude either ineffective or meaningless results. Although our purpose is to promulgate meaningful collaborations among professional workers toward providing placements of choice, there is no catalogue of procedures that will give assurances toward this end. However, the existence of classes of children, teachers, psychologists, and other specialists, in an open cooperative system, provides the raw materials for choice placements. With effective collaboration, the choices will not be dealt with haphazardly. F/

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An important way in which classrooms differ is the extent to which daily activities are a result of materials that have been supplied because of certain normative assumptions about the children, as compared to the extent to which they are the result of specific evaluations of children in particular classes. The fifth-grade class that receives fifth-grade readers and fifth-grade work-books is clearly using materials which have been developed with an "average" fifth grade in mind. In principle, we may make the same claim for clinical pre-school, and special classes. There are many assumptions involved in the curricular process that consists of providing ~~form~~ and content for lessons--*W.* irrespective of the children who are being taught, the teacher, and the situation. This is not to imply that the assumptions aren't often well advised. At times, it appears proper for the teacher to ignore the variability of a particular group or the individual in that group. However, we are suggesting that, to the extent to which assumptions are made about groups of children--and the resulting curricular procedures--important dimensions of variability obtain between different kinds of classes and different teachers.

At one extreme, there is a group of students, possibly a college class, who do not vary to a marked degree in age and, insofar as the teacher is concerned, are not particularly dissimilar either in abilities or motivations. The lectures are delivered to the entire class, there is a standard textbook, and the final examination is objective. Obviously, there are problems as well as virtues attendant to this kind of "normative teaching". The teacher has made certain assumptions (implicit or otherwise) about each student's life, family, prospectives, intelligence and, possibly, even his religious convictions.

At the other extreme, there is a class of children who vary greatly in age and ability. It is clear to the teacher that each child must be treated quite separately. However, if the members of this heterogeneous group of children are taught individually by the teacher, and in each case different standardized

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reading books and workbooks are used, normative assumptions are still being made. In this class, the assumptions do not apply to the group as a whole but only to the individuals in the group. Therefore, the use of normative materials does not necessarily assume that a particular class is either relatively homogeneous or heterogeneous but only that lessons have been more or less predetermined for a particular child rather than especially developed for him. In this way, even individual tutoring can be an example of normative teaching.

It is important to note that specially developed lessons for particular groups or children might very well be ineffective while, on the other hand, the teaching of packaged materials might be extremely effective. The question of how materials are developed and where they come from is not necessarily crucial to the question of quality. Further, it is likely that some teachers perform more competently when using normative materials than when using a so-called diagnostic approach to teaching. Regardless of what approach the teacher is most comfortable and successful with, his insight into the possible risks involved in choosing particular strategies is a much more important consideration. Further, we are convinced that, whether teachers use normative or diagnostic approaches to teaching, they must recognize and be sensitive to continuous "educational feedback".

Before we go further, we should admit our bias in this matter, if it is not already apparent. If the teacher is able—and his ability is not, necessarily, a matter of capability or intelligence—we believe it is desirable for him to become involved in developing, to some extent, materials for the children in his class. We do not believe that, by doing this, he will necessarily develop objectively "better" materials than those available from commercial sources; there are reasons to believe that he will not. However, by active involvement in developing materials he will have to study children more carefully and learn a

great deal more about them and how, and what, they learn. Active participation in gaining this knowledge will make the teacher ^{better} ~~more~~ able to improvise if and when the teaching-learning process is unsuccessful. With standardized materials, there are fewer ways to deal with failure because, unlike success, the failure may occur for different reasons and in a variety of ways.

Design of a Theory for Action

Teachers need a theory of action which is general enough to apply to children that are characterized by extreme variation in performance, such as are found in special classes. Similarly, the well-ordered relatively small suburban elementary school class would become a special case of this more general theory which applies to the demands of any educational situation. So, too, would the pre-school class for disadvantaged or retarded children. If processes can be developed whereby teachers can design curricula for extraordinary situations and extraordinary children, then it should follow that they will be able to deal effectively with more typical situations. However, one obvious thing is that a generalized approach to teaching and learning cannot support itself with a priori prescriptive methods (i.e. methods prescribed irrespective of the particular child and his condition). If it did, then this approach becomes another in a long list of normative ones. Therefore, the teacher must have the background and experience to make decisions about what, when, where, and how children can best learn what he is trying to teach them. Closely related to how children learn is how teachers learn and how interactions take place in the classrooms and outside

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the classrooms.

Although teachers have the responsibility for making decisions, they are restricted by their own logic in coming to a decision and in originating or planning activities. Once they have made a decision they need continuous feedback and evaluation regarding the kind and effectiveness of work they are doing. Too often, the general pattern of teaching is opposite to the model that is suggested here. Teachers and allied educational specialists tend to be overly dependent in the selection of materials because school systems and clinics oftentimes designate certain specific texts and curricula for particular classes or groups without consulting the teacher or considering the children. At the same time, teachers are visited, generally, on rare occasions and there is little concerted effort to provide them with regular feedback about what they are doing with children and how effective it is. No matter how the teaching-learning process is conceived, it is difficult to see how it can become increasingly effective unless there are certain built-in features which necessarily involve teachers and other appropriate professional persons for the purpose of changing the teachers and, consequently, for changing teaching and children.

Curriculum Development

The concept of readiness is central to the problem of curriculum development. Learning cannot take place without readiness. A child who learns obviously is ready to learn. But it does not follow that readiness necessarily leads to learning unless readiness and learning are the same.

thing. Therefore, a child can be ready to learn--physiologically, experientially, conceptually, emotionally--but fail to learn because of unfavorable conditions. There is some implication that "readiness" has to do with factors internal to the child and that "conditions" pertain to external factors. However, the distinction between internal and external factors is arbitrary as is the whole concept of readiness and, consequently, as is the construct "curriculum". The question of teaching and learning (what, when, how, and, the inevitable, why) cannot be dealt with by appealing directly to any psychological laws of learning or teaching. Although there is a considerable amount of normative data about when children tend to gain specific abilities, there are extraordinary variations of timing, sequence, and intra-child consistency. The "mass production" nature of public schools with their texts and workbooks, and standardized examinations, is an inevitable by-product of a mass-education system. Insofar as it is mandatory to educate all children to the age of sixteen, seventeen, or eighteen, in order to cope with the shortage of well trained teachers it is necessary to staff schools with teachers having greatly varying backgrounds and competencies. The result is what we refer to as "the slot machine" approach to education. The system is like a machine which works when certain generalized stimulations are given to it. Because the goals are fairly limited, the machine works both consistently and well. An individual goes through a four-year college program to prepare himself as a teacher. Upon graduation, he fits into one of thousands of classrooms and proceeds to distribute to students materials that are more or less similar to those used in all the other schools, without regard to such factors as

where the students live, what their social and cultural backgrounds are, and what their special strengths and liabilities are. There is no question that this is a great equalizer. There is a question as to whether this approach has anything to do with pedagogical excellence, and whether it is the method to be chosen for groups of children that show great evidence of failure. However, many of the "slot machines" work quite well, and teachers are capable of developing superior educational milieus which provide a setting for warm interpersonal relationships between children and their teachers. There is also little question that, in some of these situations, the children achieve what might be termed an ultimate goal of education: children learn to teach themselves. However, the contention of this discussion is that the conditions of the mass-education system are quite different than the conditions that can be reasonably set up for a superior teaching situation--which is a necessity for the child with special needs.

Teachers may insist that they can use normative materials, while they provide for other kinds of classroom experiences and needs. It has been within our experience that many teachers and children have functioned effectively in this way. However, we see a contradiction between the goal of generalized learning experiences, where children learn in order to learn, and specific a priori prescriptive methods with specific textual materials and specific lessons assigned to all children. The contradiction is most obvious in classrooms for the disabled or disadvantaged, where there are numerous children with problems ^{which} ~~with~~ affect either their ability to attend to what is going on in the classroom or their motivation to accumulate academic skills. To the

extent that an educational environment presents a relatively heterogeneous situation with respect to pupil ability and behavior, we can loosely refer to it as a special educational setting. For want of a better term, we would designate classes for most children discussed in this book as meeting the above criteria. The problem facing their teachers is in developing a construct which would provide guidelines for dealing with the most general type of teaching-learning situation--one in which there are children who are relatively heterogeneous and who show considerable variety of behavior over time and in different situations. In this kind of setting, the use of either age-wise normative materials or group-wise normative materials appears to be futile.

Psycho-Educational Assessment

We begin this section with a declaration that the processes of psycho-educational assessment and curriculum development must coalesce. We view whatever is usually subsumed under these terms as an integrated unfolding of an understanding of children and how they may best be served in an educational setting. Put another way, by the very nature of being involved in the assessment of a child, one cannot help but be involved in curriculum development, and vice versa.

An adequate school program for "different" children must have both internal and external resources. Internal resources include the coordination and utilization of the personnel and facilities that exist within the school system.

These resources should provide for careful, extensive, interdisciplinary diagnoses of children who have been referred for admission or who have been screened by some system-wide testing or recruitment procedures. After a child is placed in a special class or group, these resources should guarantee a continuing need for supervision of program development and for curricular innovations that are especially appropriate for that child.

The diagnostic process which leads to placement and subsequent programming for an individual, or for groups, should lead to further diagnoses-- both for purposes of re-evaluating children throughout the school program as well as for evaluating programs for children in different educational settings. Frequently, there is little connection between the diagnostic process and the curricular process. The diagnostic process leads to a child being placed in a special situation. It usually stops there. When the curricular process takes over there is, unfortunately, an implicit assumption that the placement of the child was a correct decision at the time and that it will continue to be correct in the future. As a result, re-evaluation is often neglected.

There will always be a point where internal resources become inappropriate or insufficient; it must become a function of school or special unit personnel to obtain the assistance of external resources in order to best serve children with special problems. It is impossible to carefully delimit what the internal resources should be and where they should give way to external resources. Certainly, most school programs would not be expected to develop their own mental health clinics, speech and hearing clinics, or pediatric-neurologic clinics. However, it would be expected that the school staff would be assisted in establishing working affiliations with the aforementioned types of clinics

or service agencies. The proper utilization of external resources and relationships takes the time and energy of school personnel, both individually and in concert. All too often, referrals consist of a telephone call and a superficial follow-up. Unfortunately, this does more to remove the burden of the child from the school than it does to best service the child's special needs.

Depending upon the size and financial resources of the school program, and location and accessibility to university and clinical facilities, its internal resources would include such personnel as supervisors, administrators, teachers, and a staff of diagnosticians, therapists, and consultants. In this latter group would be psychologists, social workers, speech and hearing therapists, art and music consultants and--in some instances--research specialists. The staff should work very closely with program supervisors and teachers in order to develop a fluid educational setting where children with special problems can be attended to in an optimal manner. The system should include provisions for moving children from one situation to another, when clinical considerations show this to be advisable. Adhering to the same principle, teachers or specialists should be ready to accept reassignments when warranted.

It must be emphasized, strongly, that an effective school program cannot exist without continual surveillance on the part of qualified supervisory personnel. It takes more than the competence and the dedication of individual professional workers to make such a program succeed. As was mentioned previously, the complex problems that so-called "different" children present to their teachers cannot be solved in any easy and a priori prescriptive manner. As we see it, worthwhile solutions to these problems will obtain through an active

integrated program, with sufficient time and personnel to perform basic functions of diagnosis and educational treatment.

To summarize, in centers having a sufficient number of classes and adequate financial resources, supervision for the educational program should be provided by a person who has experience and preparation both in education and in psycho-educational clinical procedures. The supervisor-coordinator directs the teachers and staff in the diagnostic process as well as in the curricular process. He should plan for the efficient utilization of the internal resources of the center as well as for the utilization of external resources when they are needed. He should integrate the clinical process with the curricular process, both in terms of the functions of personnel as well as the use of staffings for individual children and the supervision of classes, therapists, and teachers. The total process of education should be interdisciplinary in form as well as in content.

A Model

The model that follows deals directly with the development of a multi-dimensional framework which could be the basis for assessment, curriculum development, and clinical research. We believe the first two needs have been well documented, and that clinical research will become an increasingly important aspect of programming for the "different" child, in the light of ever-increasing public funds being appropriated for support of these programs and the subsequent reporting responsibilities which those who administer them must assume.

This model considers both the molar aspects--over-all performance and adjustment of the child in the school setting and at home--and molecular aspects--the processes of learning, socialization, conceptualization, and language development of different children. The model provides for the analysis of both school and home behavior, in terms of a theoretical framework which would allow for the intentional manipulation of the behavior of children and teachers, and for the evaluation of their behavior.

With reference to the observed behavior of children and teachers and to theories of child development, a framework is set up in order to provide a basis for action and evaluation. This tentative framework is used by teams of professional workers to evaluate children, teachers, and the curriculum. Lastly, provisions for theoretical and curricular revisions are built into this framework. The following is a description of the objectives, rationale, and design of this model.

Objectives. The objectives of the model are to stimulate the development of curricula to offer maximum opportunities for the assessment of children, and to guide clinical research studies in program evaluation and child behavior. We assume that not one of these objectives can be accomplished effectively and validly without the accomplishment of the other two.

In the past, some behavioral scientists have studied children, under experimental conditions, by which they attempted to control environmental factors. For example, an educator might study differences among several independent methods of teaching reading. He would design his study so that, by randomization procedures, a group of children learning to read under one

method would probably be like another group learning under another method. He would also plan to assign teachers to each group randomly so that one teacher would be more or less as well adjusted to his group and method as any other teacher would be to any other group and method. Consequently, the researcher would be able to claim that these two variables were held constant for all of the groups studied.

Research strategies similar to the above are based on the assumption that the method of teaching is the most significant independent variable. Controls are set up to equalize the other variables. In such studies, the kinds of children and the personalities of the teachers are considered to be intervening variables that have importance, but are peripheral to the experimental comparison being made.

Our model presents a basic design that is a reversal of the above example. We consider the independent variables to be the teachers and the children and the intervening variables method and content of the curriculum. Although this approach is one that would be suitable for the study of any kind of classroom situation, it is especially suitable for disabled or disadvantaged children. In special classes, the usual curricula goals are, in general, subordinate to those pertaining to adult-child and peer relationships. Emphasis is not primarily on achievement, and methods of teaching are not generally considered to be of greatest importance. This is another way of saying that the independent variables which should be given most attention in such settings are not readily subjected to careful measurement and control--e.g. teachers and children and their interactions.

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There are many good reasons for experimenting with only one or two fairly discrete variables at a time; on the other hand, there are as many good reasons for analyzing the complex interactions of children in realistic behavioral situations as is our approach. Classroom situations will be intentionally manipulated in this model in order to answer questions raised by the theoretical orientations of a particular clinical research study and by the interactions between observers and teachers. The information obtained will then be used to vary programs and curricula for children in order to maximize the possibility of favorable behavioral changes in children. A careful study of the behavioral deficits and strengths of both the children and the program is an explicit part of the design. It will be through such study that the following questions are confronted: What anomalous behaviors are displayed by the children? How does the school program deal with these undesirable behaviors? What are the specific effects of various procedures upon individual and group behavior?

In essence, the total process of curriculum construction and evaluation for disabled and disadvantaged children should be continually re-examined for the purpose of setting a self-generating working model. It should include fragmental studies of all elements of the classroom "field" as well as an intensive study of the total "field". The problems of what to teach and how to teach should be intensively explored.

There is a good deal of evidence that leads to the proposition that the teacher-child relationship is critical to the teaching process. This suggests that it is not only the "how" of teaching, but the relationship that develops between the teacher, on the one hand, and both individual children

and the total group, on the other. An example of this phenomenon is the "halo effect" that persistently appears in psychological and educational experiments. This effect seems to be more consistently related to improved performance than any particular method. An assumption of this model is that something like this "halo effect" is necessary to the development of a superior curriculum. Another way of stating one of our major objectives is, therefore, to build a "halo effect" into a curriculum.

Although we believe that something like a "halo effect" is necessary, we know that, in itself, such an effect is not sufficient. There are other questions to be answered. How do children spend their time in the class? Do they attend to what is going on? How is their attention monitored? How are they dealt with when they succeed and when they fail? Questions such as these must be studied and answered, in depth, if behavior is to be modified in a meaningful way.

Rationale. Variables in the usual educational situation are such as to discourage the rigorous experimentalist from dealing with them. The classroom situation is antithetical to a controlled experiment that demands the rigid application of certain a priori conditions. Personalities of teachers and children, social interactions, and creative processes are examples of difficult-to-measure factors that have to be dealt with if we are ever to be able to do any more than produce sterile descriptions of curricula. Since these factors cannot be measured easily, they are not usually included in the design of an experimental study.

The procedures of this model deal directly with both the process and

the substance of interpersonal reactions as they take place in the classroom. (For purposes of this model, process has to do with the ways in which relationships are initiated and proceed between individuals and the extent to which relationships exist; substance is concerned with the content of these relationships.) In studies of children, substance has received considerably more attention than process. Thus, in terms of what is here called substance, the literature is extensive in providing constructs that hypothetically and empirically describe how children differ from one another and how individual children change over a period of time.

However, the literature is not at all clear on how to produce changes most efficiently, especially when the children under consideration have cognitive or other disorders. Process has received less attention because it is less amenable to study. The measurement of the abilities of children (substance) is less difficult than the measurement of their social interactions or their motivations. It is understandable that psychologists and educators have concentrated on variables that are relatively easy to measure, even though such variables may be of trivial importance to learning.

For example, an Intelligence Quotient is a good predictor of academic success, and it is generally used as such. However, academic success is a function of both the substance and process variables. The latter, being difficult to measure, is more or less ignored. Why then is IQ such a good predictor of academic success if it measures essentially the substance and not the process? It is obvious that process variables effect IQ in the same way that they affect academic success, and the predictive efficiency of the IQ is, to a greater or lesser extent, due to indirect measurement of the process.

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For obvious reasons, it behooves clinicians to explore thoroughly not only the components of the IQ but the components of academic success as well. This exploration calls for intensive investigation of the total field of behavior of children with, perhaps, minimal attention to conventional aptitudinal criteria and maximum attention to processes. Such a focus is clearly a reversal of what generally takes place in school evaluation programs. For most typical children, the consequences of failure in academic and social activities are not catastrophic in that these pupils will eventually find jobs and will have friends, in spite of many failures. The educator is somewhat more anxious when confronted with children who will grow up to be intellectually and socially dependent--unless he can do something about the situation. Most teachers of typical children see no compelling reason to discover why some children do better than others; instead they "explain" the phenomenon by saying that it is just so--in the nature of things. They may point out that there are individual differences in aptitudes, value systems, and performance. There is no reason to discuss how we ~~might~~ change the status quo and yet, the status quo is clearly unacceptable for the disabled child.

This model focuses its attention on processes while it utilizes substantive constructs. Both serve as a basis for what is taught when it is taught. It does not merely rely on a descriptive study of what is happening. Evaluation becomes a part of the program. A feedback system serves to involve teachers in every part of the evaluation so that they cause changes and ~~are~~ ^{become} changed. (?) Parents are exposed to a program of group counseling, which is designed to

support the school program and is considered to be a part of the curriculum. The psychologist and social worker collaborate with teachers to interpret process and substantive constructs and to point out how they operate in classroom situations. The vehicle for changing the behavior of children is the teacher's increased understanding of the process and substance of the desired change rather than particular teaching methodologies or curriculum content. However, special percepts and concepts should be tested and innovations should be made in the curriculum in order to treat deficits of particular children. The treatment should always be dependent upon the situation in which the behavior takes place.

Consequently, a design of teaching methodology or curriculum content should not be imposed on the classroom situations. Instead, the substantive information should be the tools that serve as sources for generating hypotheses and as bases for evaluating protocols. Different teachers would use the tools in different ways depending upon their perception of their roles as teachers. Some teachers might take an experimental approach, carefully evaluating specific deficits of particular children and treating them directly. Others might take a more clinical approach, concentrating upon their relationship with children and upon interactions within the group of children. Each class in the program should be autonomous, to the extent that the teacher and children of the class present a unique cluster of individuals and situations. There should be similarities in approach to the extent that the cluster of individuals and situations overlap. The procedural core of this model should be a network of seminars and conferences, where substance and process would be

studied so that uniqueness and overlap could be determined.

In summary, the rationale of this model calls for the development of assessment, curriculum, and evaluative procedures that are in harmony with what actually takes place in the classroom. Teachers should not be expected to fit into a predetermined mold. This recognition of individual differences in classroom situations is analogous to the recognition of individual differences in children. For research purposes, bases for comparison would be the variability that exists among and between interactions rather than among and between either teachers or children.

Design. The design of a model which is based on the dichotomy, substance and process, is somewhat artificial since neither can exist independently. However, this theoretical division does offer a workable way of discussing the design, and, therefore, we will take advantage of it.

Included under the category substance, are the abilities of children. Meyers and Dingman (1960) reviewed the literature in this field and have hypothesized seven domains of expressive and receptive abilities of young children: psychomotor, whole-body; psychomotor^d, hand-eye; visual perception; auditory perception; receptive psycholinguistics; expressive psycholinguistics; and mental, including memory and thinking.

Although pedagogical and diagnostic methods for dealing with these domains are not, by any means, pure, numerous studies have been done which focus on one or more of them. What has resulted is a growing body of data on typical and atypical development and on the dimensions and structures of abilities of children. Although these studies have been encouraging in that they tend to offer support

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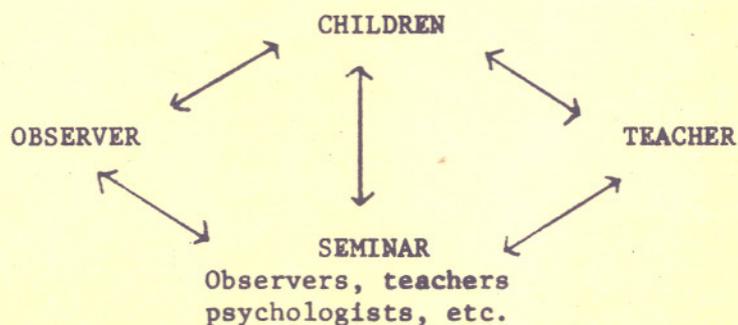
for agreement between the aforementioned hypothesized domains and empirical ones, there still remains the question of how the knowledge gained from the studies can be applied. Does the existence of more or less independent domains of abilities in children mean anything to the educator?

There is a good deal of research to suggest that there is no simple and direct application of these discoveries about abilities. The knowledge that there is a normative sequence of steps in which children tend to develop a particular ability domain does not have general application for individual children. There are, at least, three important reasons for this: individual differences in acquisition are so great that mean growth rates are applicable to relatively few children; motivational variabilities are of far greater importance than specific learning sequences; and, although, it is possible to teach very specific tasks, there is no guarantee that there will be any transfer of the learning that takes place. Further, the studies of ability domains give descriptive information about what children learn and when they learn, but they do not tell how learning takes place. Nor do they indicate what is necessary for its transference. It is important to utilize these ability studies, for they provide educators with a necessary array of insights. However, it is equally important not to ignore other operations that have to take place if learning is to be socially meaningful.

For reasons enumerated above, particular batteries of tests cannot be stipulated for utilization in an assessment program. In general, the a priori listing of specific procedures in either the evaluation or teaching situation would be extremely unrealistic. Standardized instruments have not been developed for the complex problems disabled children present *at* the evaluation team and, *tr*.

as mentioned previously, results of evaluations are not usually directly applicable to the classroom setting. Therefore, we need to modify existing procedures and attitudes if evaluation protocols are to be useful for teaching these children. Perhaps, the greatest value that evaluative studies of ability domains of children have is in their entree toward detailed study of children by members of the school staff. These studies should lead to the development of a psychologically oriented curriculum based on the described variations that exist among children. In summary, the study of the substance of learning is dictated by the type of children in the program, the kinds of behavior to be modified, and the extent of the behavioral modification. The selection and development of testing and teaching techniques should stem from studies of the ability domains of children. However, specific applications should depend on both psychometric protocols in each of the ability domains and clinical assessments of behavior of children in the program.

In terms of the process of learning, we include reactions between children and reactions between children and teachers, observers, and other individuals involved in working with the children. The interactions among children must not be isolated from contingent interactions of adults who are teaching and studying the children. The following diagram indicates the existence and direction of interactions.



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For each group of children (class) there would be a teacher and at least one observer. The observer could be assigned to several classes. For each class there would be a seminar which would meet regularly to discuss behavior of the class, including ^{that of} the teacher and the children. Members of the seminar should be the teacher, the observer, a psychologist, a social worker, as well as other professional workers who are intimately involved with other children. They would deal with speech, medical, and other problems as they arise. The seminar would follow from the general description of Sarason, Davidson and Blatt (1962, pp. 75-96) with modifications made necessary by the obvious differences in situations.

Essentially, our design for process provides systematically for communication between two group entities, which are the teacher and the observer. We find this to be a much more elaborate procedure than the usual educational model which consists of a teacher and the class of children and, at times, observers with whom the teacher may interact. The usual model lacks a system for facilitating communication and makes the process of teaching and learning completely dependent upon the personalities of the individuals involved. Perhaps, children with no unusual problems can afford the relative wastefulness which results from an educational setting that leaves learning largely to chance, at least in this regard. However, it is clear that disabled children cannot afford anything but the most effective kind of learning situation. The first requirement for such a situation is that all of the professionals know what is going on and when it is going on. Furthermore, there must be a strong beneficial, and defined relationship between the teacher, who is continuously involved in a two-way relationship with the children, and an observer,

who is involved in a one-way relationship with the children. In general, this supplies the model with an internal evaluative device which is the interaction of two elements in the system with significant variation in function but with a basic similarity in design.

Some Final Comments

At appropriate times, observers may wish to summarize, in some standard way, the observation of a child or a class. Oftentimes, this summarization proves helpful for staffing and in longitudinal studies. Appendices A and B provide schedules developed for these purposes. We make no particular claim for their applicability insofar as the reader's needs are concerned. However, they may serve as useful examples of formal schedules that have been used with pre-school children.

At regularly scheduled staffings, or on particular occasions, teachers and others are asked to make formal case presentations. Although we will not prescribe a format for these presentations we have found the following questions to be particularly useful in centering discussions on the child, his problems, and his learning environment.

Why is the child being presented for study?

In what ways were his difficulties first determined?

What was done in order to alleviate his problems?

What happened?

What did you learn from your involvement with this child and his family?

If you had another opportunity to become involved again with this child,

from the beginning, what would you now do differently?

As we are about to close this chapter, it is important to draw together a statement of our clinical philosophy. First, we are recommending that, as children enter the pre-school program, evaluation procedures should be inductive in nature.

The professional staff should not be in the habit of labelling a child from the outset as "normal", "mentally retarded", "emotionally disturbed", "language disordered", or as having one or another handicapping or non-handicapping condition. Although, eventually we will have to label, we must carefully select useful labels which we can then put to clinical tests during the course of our continued observations and work with children. This would require us to be extraordinarily careful in the observations which we make and the uses which are made of them.

Lastly, we must express our neutrality in regard to decisions that professional staffs make concerning assessment procedures and tools, teaching methodologies, and curriculum content. We have our own prejudices and convictions, many of which have been stated in this chapter. However, we respect deeply the right of well-trained and well-supervised professional colleagues to develop their own tactics and strategies for evaluating and teaching children. The most serious danger that lies before us is that which would occur if the development and application of divergent methods and content in any school curriculum were discouraged--solely because these were divergent.

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APPENDIX A

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A YOUNG

SUMMARY EVALUATION OF OBSERVED BEHAVIOR OF ~~THE~~ CHILD

Name _____ Age: Years _____ Months _____ Birthdate _____
 Evaluator _____
 Dates of Evaluation _____ Length of Evaluation (in days) _____

1. Does he spontaneously go to the teacher? _____
2. Does he spontaneously go to another child? _____
3. Does he spontaneously talk to the teacher? _____
4. Does he spontaneously talk to another child? _____

If the answers to any of the above are "yes", describe the circumstances under which the behaviors took place.

5. Is speech in numbers 3 and 4, clear, indistinct or a mixture? _____
6. Does he stay with any one activity; hardly at all, briefly, moderately? _____
7. What type of activity does he seem to prefer? _____

8. Does he appear: tense _____, relaxed _____. (Check one)
9. Would you classify him on the basis of your observations as a very active child, moderately active child or a passive child? _____
10. Does he seem to prefer people (i.e., teacher, peers) or objects? _____

11. What distinguishes this child from the other children?

12. Is there anything noteworthy about his gross motor movements? Yes _____ No _____
 If yes, explain. _____

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13. Is there anything noteworthy about his fine motor movements? Yes _____ No _____
If yes, explain. _____

14. Do you find yourself liking this child, repelled by this child, no feeling either way? _____

15. Do you feel that this child's intellectual potential is higher, no higher than his overt behavior might suggest? _____ If higher, please explain. _____

16. Additional comments. _____

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SCHEDULE FOR OBSERVING LESSON IN SPECIAL CLASS
DISABLED
FOR ~~MENTALLY RETARDED~~ CHILDREN

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Date: _____
Time: _____
Teacher: _____
Certification: _____
School/City: _____
Class: _____
Observer: _____
Hrs. Class Meets Daily: _____

A. Details of Observed Lesson and General Learning Environment

CHECK

- 1. Materials for Observed Lesson (double check (✓) if materials were adequate for lesson)
 - a. None _____
 - b. Textbooks, workbooks, and other commercial resources _____
 - c. Commercial, teacher prepared materials, and/or teacher-pupil materials _____

- 2. Teacher Preparation for Observed Lesson (double check (✓) if preparation was adequate)
 - a. None or little apparent _____
 - b. Minimal _____
 - c. Extensive _____

- 3. Evidence of Teacher-Pupil Planning
 - a. There is no or little evidence _____
 - b. The room contains evidence of such planning: teacher prepared charts, children's relevant work, etc. _____
 - c. From examination of physical environment, one could clearly determine prior and present activities of class; i.e., charts, pupil's work, exhibits, books, and other materials reflect the curriculum and its objectives. _____

- 4. Teacher Presentation of Observed Lesson (s)
 - a. Presentation inadequate _____
 - b. Presentation minimally adequate _____
 - c. Motivation device effective, presentation clear, material pertinent _____

- 5. After Presentation, Teacher
 - a. Returns to desk or engages in unrelated activity _____
 - b. Goes from child to child or group to group to help when asked _____
 - c. Works with small groups or individuals on related exercise, discussion, or other activity _____

- 6. After Presentation, Children
 - a. Engage in activities, both unrelated to presentation and unsupervised by teacher
 - b. Engage in unrelated seatwork or other activity
 - c. Engage in related seatwork, discussion, or other activity

- 7. Developmental Skills Presented in Sequence According to
 - a. Unknown or unobserved procedures
 - b. Textbook, workbook or other outside guide lines
 - c. Teacher's evaluation of children and materials, and evident planning

- 8. Teacher Provides for Differentiation of Abilities Through
 - a. Unknown or unobserved procedures
 - b. Some attention to grouping of children and/or individual supervision
 - c. Grouping of children for both developmental and functional activities

- 9. Teacher's Attitude Toward Students' Participation in Planning
 - a. Students are not encouraged to offer suggestions, are given little or no responsibilities, and are generally ignored in this regard
 - b. Students are sometimes encouraged to offer suggestions and are given practical responsibilities as a function of administrative procedures (e.g.: clean chalkboard)
 - c. Students are encouraged to offer suggestions and are given a variety of responsibilities as part of the teacher's intent to provide another learning opportunity

- 10. Teacher's Attitude Toward Students' Social Development and Interaction
 - a. Students are discouraged from helping each other and sharing during activity
 - b. Students are neither encouraged or discouraged from helping and sharing
 - c. Students are encouraged to help each other and share during activity

- 11. Evaluation of Students in Observed Lesson
 - a. Teacher does not make evaluative statements
 - b. Teacher makes general statements to whole group and/or individuals
 - c. Teacher makes statement above (b) plus specific statements to individual children; some children make evaluative statements regarding own work

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CHECK

12. At End of Lesson, Teacher

- a. Did not summarize lesson in any manner
- b. Summarized lesson and described ways in which activity or skill may be used in other situations
- c. Did above (b) and elicited additional uses from students

13. Teacher Handled Distracted or Deviant Behavior During Lesson Through

- a. Use of bodily or other punishment, threats, or isolation
- b. Verbal admonitions and other, non-threatening, devices
- c. Verbal encouragement, help in assignment, use of alternate tasks, and other positive means of involving child in more acceptable or purposeful behavior

B. SUMMARY RATING OF TEACHER IN LEARNING ENVIRONMENT¹

14.		Poor	Fair	Average	Very Good	Superior
a.	Teacher's ability (methods and curriculum)	1	2	3	4	5
b.	Teacher-pupil relations (sympathy and understanding)	1	2	3	4	5
c.	Classroom management (routines and discipline)	1	2	3	4	5
d.	Learning environment (physical, psychological, social)	1	2	3	4	5

Sum of above ratings divided by 4

G. SUMMARY RATING OF CHILDREN IN LEARNING ENVIRONMENT

- 15.
- a. Children spontaneously go to teacher for help.
 - b. Children spontaneously go to other children for help.
 - c. Children appear relaxed.
 - d. Children appear to enjoy school.
 - e. Children appear to like teacher.
 - f. Children appear to understand the purpose of class.
 - g. Children appear to accept their placement in class.
 - h. Children are often involved in activities with other pupils in school.
 - i. The school administrators appear to understand and appreciate the purpose and accomplishment of children in class.

Yes or No

¹ Adapted from: Wrightstone, J. Wayne, and others, A Comparison of Educational Outcomes Under Single-Track and Two-Track Plans for Educable Mentally Retarded Children. Cooperative Research Project, United States Office of Education, 1959, P. 299.

Yes or No

- j. The other teachers in school appear to respect the worth of each child, regardless of class placement or ability and appear to understand the contributions that special classes can make in educating retarded children.

Sum of "yes" answers divided by 8

D. SUMMARY RATING OF DIAGNOSTIC AND PLACEMENT PROCEDURES AND EXTENT OF CONSULTIVE AND SUPERVISORY ASSISTANCE

Yes or No

16. Evaluative Material: Diagnostic and Placement

- a. Psychological report available for each child.
- b. I. Q. score available for each child.
- c. Diagnostic medical report available for each child.
- d. Cumulative academic folder available for each child.
- e. Family study available for each child.
- f. Observational reports kept for each child.

17. Placement Procedures

- a. Placement made on basis of team evaluation.
- b. Parents consulted prior to placement and counseled concerning nature of child's school problems.
- c. Child's prior teacher consulted and visited by receiving teacher.
- d. Placement into advanced class (from present class) made after visitation to receiving school.

18. Teacher Use of Evaluative Data

- a. Established parent counseling program operant.
- b. Established referral procedure operant (consistent method, forms, use of summarizing class personnel sheet, and other indices)

19. Consultive and Supervisory Assistance

- a. Teacher able to request consultant aid (e.g., psychiatrist, psychologist, other specialist).
- b. Teacher receives consistent and planned supervision from specialized personnel (e.g., director of Special Education).
- c. Teacher receives supervision from school principal.

Sum of "yes" answers divided by 3

E. SUMMARY RATING OF QUALITY OF OBSERVED LESSON (S) AND CURRICULUM EMPHASIS

Yes or No

20. Lessons

- a. Reflect an emphasis on developing a degree of independent problem solving behavior consistent with ability level of class.
- b. Use rote learning assignments and drill as supplements to above conception rather than as central purpose of lesson.
- c. Encourage a degree of individuality in developing methods to complete assignment, insofar as possible, considering ability level of class.
