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FOCUS ON EXCEPTIONAL CHILDREN

TEACHER EXPECTATIONS AND THE PERFORMANCE OF THE MENTALLY RETARDED

The influences of teacher expectations on pupil performance is currently the topic of considerable research and speculation. For the most part, references in the literature pertain to children in regular classes. However, if the phenomena do operate, the status of children in special classes for the mentally retarded must be closely studied. Teachers of special classes approach their teaching tasks equipped with considerable information on the disability of their pupils. It may be that this information generates expectations below the potential of their students. The consequence may further hamper the performance of the mentally retarded.

This possibility is examined by a researcher, Dr. Joav Gozali, and a special class teacher, Mrs. Norma Boekel. Their articles combine to bring the issue into perspective.

THE EXPECTANCY PHENOMENA: IMPLICATION FOR EDUCATING THE MENTALLY RETARDED

Joav Gozali[1]

It is generally agreed that the goal of American education is to provide each individual with maximum opportunity for his optimal development. The pursuit of this goal is most evident in the attempts, both formal and informal, to provide an adequate education for the mentally retarded. The implementation of this goal rests with the educators. They are the ones who educate or fail to educate the young.

It has become customary for educators, when gathered together, to bemoan the confusing and confused state of education, and their helpless position in it. Breast-beating and *mea-culpa* public confessions by educators concerning their failure to educate the youth of this nation are an integral part of most educational conferences and meetings. It is of little surprise, therefore, that when Rosenthal and Jacobson (1966, 1967, 1968) suggested that teachers' expectations partially determine students' achievements, their findings became both a best seller and a classic. Once more it was possible for teachers to identify the source of their failure to educate, and ascribe it to an uncontrollable entity.

Rosenthal, in a series of studies, demonstrated that the attitudes and behaviors of experimenters tend to influence and bias the outcome of their experiment in the predicted direction. In other words, given a certain predicted outcome of an experi-

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ment, experimenters' expectancies of this outcome tend to influence all aspects of the experiment and produce results in the predicted direction, i.e., experimenters generated a self-fulfilling prophecy.

The logical implications of Rosenthal's findings were that teachers' expectancies and the behavioral correlatives influence students' achievement behavior at school. The following is a description of Rosenthal and Jacobson's first experiment.

All of the children in an elementary school serving a lower socio-economic status neighborhood were administered a non-verbal test of intelligence. The test was disguised as one that would predict intellectual "blooming." There were eighteen classrooms in the school, three at each of the six grade levels. Within each grade level the three classrooms were composed of children with above average ability, average ability, and below average ability, respectively. Within each of the eighteen classrooms approximately 20 percent of the children were chosen at random to form the experimental group. Each teacher was given the name of the children from her class who were in the experimental condition. The teacher was told that these children had scored on the "test for intellectual blooming" such that they would show remarkable gains in intellectual competence during the next eight months of school. The difference between the experimental group and the control group children, then, was in the mind of the teacher.

At the end of the school year, eight months later, all the children were retested with the same IQ test. This intelligence test, while relatively nonverbal in the sense of requiring no speaking, reading or writing, was not entirely nonverbal. Actually there were two subtests, one requiring a greater comprehension of English—a kind of picture vocabulary test. The other subtest required less ability to understand any spoken language but more ability to reason abstractly. For shorthand purposes we refer to the former as a "verbal" subtest and to the latter as a "reasoning" subtest. The pretest correlation between these subtests was +.42.

For the school as a whole, the children of the experimental groups showed only a slightly greater gain in verbal IQ (2 points) than did the control group children. However, in total IQ (4 points) and especially in reasoning IQ (7 points), the experimental group children gained appreciably more than did the control group children.

At the end of the school year of this study, all teachers were asked to describe the classroom behavior of their pupils. Those children from whom intellectual growth was expected were described as having a significantly better chance of becoming successful in the future, as significantly more interesting, curious and happy. There was a tendency, too, for these children to be seen as more appealing, adjusted, and affectionate, and as lower in the need for social approval. In short, the children from whom intellectual growth was expected became more intellectually alive and autonomous or at least were so perceived by their teachers.

As already seen, the children of the experimental group gained more intellectually so perhaps it was the fact of such gaining that accounted for the more favorable ratings of these children's behavior and aptitude. But a great many of the control group children also gained in IQ during the course of the year. We might expect that those who gained more intellectually among these undesignated children would also be rated more favorably by their teachers. Such was not the case. The more the control group children gained in IQ the more they were regarded as less well-adjusted, as less interesting, and as less affectionate. From these results it would seem that when children who are expected to grow intellectually do so, they are considerably benefited in other ways as well. When children who are not especially expected to develop intellectually do so, they seem either to show accompanying undesirable behavior or at least are perceived by their teachers as showing such undesirable behavior. If a child is to show intellectual gain it seems to be better for his real or perceived intellectual vitality and for his real or perceived mental health if his teacher has been expecting him to grow intellectually. It appears worthwhile to investigate further the proposition that there may be hazards to unpredicted intellectual growth.

A closer analysis of the data, broken down by whether the children were in the high, medium, or low ability

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tracks or groups, showed that these effects of unpredicted intellectual growth were shown primarily by the children of the low ability group. When these slow track children were in the control group so that no intellectual gains were expected of them, they were rated more unfavorably by their teachers if they did show gains in IQ. The greater their IQ gains, the more unfavorably were they rated, both as to mental health and as to intellectual vitality. Even when the slow track children were in the expermental group, so that IQ gains were expected of them, they were not rated as favorably relative to their control group peers as were the children of the high or medium track, despite the fact that they gained as much in IQ relative to the control group children as did the experimental group children of the high group. It may be difficult for a slow track child, even one whose IQ is rising, to be seen by his teacher as a well-adjusted child, or as a potentially successful child, intellectually.

The effects of teacher expectations had been most dramatic when measured in terms of pupils' gains in reasoning IQ. However, they were not uniform for boys and girls. Although all the children of this lower socioeconomic status school gained dramatically in IQ, it was only among the girls that greater gains were shown by those who were expected to bloom compared to the children of the control group. Among the boys, those who were expected to bloom gained less than did the children of the control group.

The findings potency has made it necessary for many to begin re-examination of available information and constructs. At the same time the study came under serious criticism. Thorndike (1968) stated ". . . the indications are that the basic data upon which the structure has been raised is so untrustworthy that any conclusions based upon them must be suspected." (p. 711)

However, the study has been replicated several times by now and all reported results lend support to Rosenthal and Jacobson's original study. Apparently, the expectancy construct is here to stay.

The construct of expectancy is not new in sociological and psychological theories and research (Allport, 1958; Bruner, 1951; Festinger, 1957; Goffman, 1961; Goldstein, 1962; Kelly, 1955; Linton, 1936; Mead, 1954; Pearsons and Bales, 1955; Rotter, 1954; Tollman, 1952). In spite of the ambiguity of the construct, it appeared time and again in a variety of contexts and under various labels. Gibson (1941) in his critical review identified some of the terms which are used to connote expectancy in psychological literature: hypothesis, anticipation, foresight, intention, attention, tendency, set and preoccupation. He concluded that expectancy is an absolutely necessary construct to explain most psychological phenomena. Bruner (1951) stated that "Expectancy or hypothesis is a basic determinant of all cognitive activity-perception, memory. . . ." Rotter (1954) defines expectancy "as a subjective probability held by the individual that a particular reinforcement will occur as a function of, or in relation to, a specific behavior in a given situation." He postulated that behavioral potentional is a function of expectancy and reinforcement value, i.e., BP = f(E & RV). More recently, Berkowitz (1968) in discussing aggression stated, "Many psychologists now insist that deprivations alone are inadequate to account for most motivated behavior. According to this newer theorizing, much greater weight must be given to anticipations of the goal than merely the duration or magnitude of deprivation *per se*. The stimulation arising from these anticipations—from anticipatory goal response—is now held to be a major determinant of the vigor and persistance of goal seeking activity." Another phychologist (Atkinson, 1958, 1964) suggested motivation should be construed as: motivation = f (motive × expectancy × incentive), i.e., that motivation is a joint function of the strength of the motive, subject's anticipation that he can achieve his goal, and the subjective value of the goal object.

Expectancy in the traditional sense was introduced into the field of mental retardation by R. L. Cromwell (1963). Operating within Rotter's social learning theory, Cromwell and his colleagues demonstrated the utility of expectancy in explaining and predicting an individual's behaviors. They investigated the effects of success and failure on retardates' expectations and the influence of these expectations on performance. Further, the individual's perception of the locus of control, i.e., his responsibilities toward the outcome of events, and its influence on subsequent behaviors, was investigated.

Rosenthal (1966) pointed out that there are significant differences between the ways in which he and others construe the construct of expectancy.

> Expectancy as a determinant of behavior has most often been investigated with an eye to learning the extent to which an individual's expectancy might determine his own subsequent behavior. The construct of expectancy as employed in this book has been more specifically interpersonal. The question, for us, has concerned the extent to which one person's expectancy of another's behavior might serve as determinant of that other's behavior (p. 407)

The interpersonal expectancy, as employed by Rosenthal, was introduced to the field of mental retardation by Dexter (1956, 1958, 1960). A sociologist by training, Dexter investigated mental retardation from the social

role viewpoint, rather than from deficiency construct. Dexter maintained that much of the retardate's behavior is determined by the expectations of others. For example, the retarded are expected not to be able to hold a job, or if they hold one, it must be of a montonous and repetitive nature. Yet, Goldstein and Heber (1959) questioned this expectancy. They stated ". . . a third very prevalent notion is that retarded do as well as and even better than normals on what are described as repetitive, monotonous tasks. It is probable that this notion has, in many instances, led school and rehabilitation personnel to seek and place students in jobs requiring repetitive operation at the expense of an exploration of other possible vocational opportunities. . . . This widely held assumption is backed by little or no experimental evidence." The social role viewpoint does not suggest that the differences between retarded and non-retarded are all the product of social role perception. Dexter tends to argue that actual differences tend to be solidified and assume stimuli properties which transcend the actual differences.

A person responding to a retarded individual is likely to be responding not only in terms of the actual differences between them, but also in terms of his set of attitudes and beliefs as to what the retarded should be like. The problem, as Campbell (1967) stated it, is "While stereotypes may often have a grain of descriptive truth, social-psychologists have been, of course, right in emphasizing their overall errorfulness. The problem is how to state the errors, without claiming that all groups are identical." (p. 824)

If the expectancy phenomena does indeed operate as a major influence on the performance of the learner, then the mentally retarded may be at a definite disadvantage. The criteria for placing a child in a special class for the mentally retarded is based on the child's limitations. Consequently, information made available on the child to the teacher deals with the child's poor performance. Educational programs for the mentally retarded suffer from lack of differentiation. Individuals placed in special classes seemingly because of their low intelligence are treated as if they are educationally a homogeneous group. For example, Mercer (1968) found that children with physical, neurological and speech problems are likely to be placed in classes for the retarded. Negro children, and children with Spanish surnames who were eventually placed in special classes for EMR tended to have significantly more interpersonal problems than English-speaking and Caucasian children who were placed.

In many respects, the special class is a dumping ground for students who do not fit into current educational molds. Our educational institutions tend to treat this heterogenous group by reducing the number of pupils per class and training them with a watered-down version of the curricula used for those who fit the school environment. Little wonder it is that the teacher in the special classroom develops a stereotyped approach to her pupils The diversity of students makes it very difficult for her to teach. The inadequacy of curricula tends to foster failure. Indeed, the survival of the teacher in the complexities of the special class seems to be predicated on some form of subjective misperception.

To free oneself from stereotypical perception of the retarded is becoming increasingly difficult. Indeed, one is reminded of Kirk's (1965) warning "It has been stated that we are suffering from a "hardening of the categories," that our programs are solidified into traditional categories now fixed by laws and regulations." (p. 96)

Considering the complex matrix of factors which mitigate against the possibility of successful experiences for the exceptional child in our schools, the question is, "What can be done to change it?" It seems pretentious to assume that one has an answer to this most difficult question. However, some constructive propositions, even if tainted as speculative at this point, seem in order.

Two points suggest themselves: (1) modification of teachers' training programs and (2) reassessment of our perceptions of the retarded child.

The suggested modification in teachers' training programs is in the direction of sensitizing teachers to human beings in general, and toward the deviant in particular. Techniques are available today which are designed to substitute traditional coercive-compromise interpersonal relations, with collaborative-concensus principle. The following diagram (Schein & Bennis, 1965) provides a summary of sensitivity training objectives:

Self

1. Increased *awareness* of own feelings and reactions, and own impact on others.
2. Increased *awareness* of feelings and reactions of others, and their impact on self.
3. Increased *awareness* of dynamics of group action.
4. *Changed attitudes* toward self, others, and groups; i.e., more respect for, tolerance for, and faith in self, others, and groups.
5. Increased *interpersonal competence,* i.e., skill in handling interpersonal and group relationships toward more productive and satisfying relationships.

Role

6. Increased *awareness* of own organization role, organizational dynamics, dynamics of the change process in self, small groups, and organizations.

7. *Changed attitudes* toward own role, role of others, and organizational relationships; i.e., more respect for and willingness to deal with others with whom one is interdependent, greater willingness to achieve collaborative relationships with others based on mutual trust.

8. *Increased interpersonal* competence in handling organizational role relationships with superiors, peers, and subordinates.

Organization

9. Increased *awareness* of, *changed attitudes* toward, and increased *interpersonal competence* and specific organizational problems existing in groups or units which are interdependent.

10. *Organizational improvement* through the training of relationships or groups rather than isolated individuals.

Moreover, T-group techniques make prolific use of non-verbal communication. The communicative value of non-verbal interaction is particularly crucial in work with individuals whose verbal skills are limited. Retardates, by definition, have difficulties in formulating and understanding ideas through words. It seems that systematic use of non-verbal techniques is likely to enhance and revitalize learning.

Our traditional methods of assessing and determining retardation have many shortcomings. One of the most serious is the general tendency to use quick methods of assessment which tend to obscure information. Over the past two decades Jastak (1949, 1958, 1967) has argued that our currently available psychometric instruments provide us with information about many abilities. Each individual profile suggests areas of relative strength and weaknesses. Understanding of the relative contributions of each of these abilities to the observed unified behavior is imperative. Teachers, given this information, will be in the enviable position of working with the student where he is and with what he has. The two suggestions are likely to bring teachers' expectancies into focus. Teachers who are sensitive and knowledgeable with regard to individual differences are likely to have accurate perception of their students, and thereby will have reasonable expectations.

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THE INFLUENCE OF TEACHER EXPECTATIONS ON THE PERFORMANCE OF THE EDUCABLE MENTALLY RETARDED: A Teacher's Point of View

By Norma Boekel[1]

There exists in current literature the theoretical proposition that teachers' low expectations for educable mentally retarded children influence educational attainment in a negative direction. The teacher's expectation is but one factor in the total environment that affects the development and adjustment of the child. Admittedly, the content and methods of school programs are important factors contributing to educational growth. However, it is my contention that the factor of teacher expectations has been underestimated to the degree that many criticisms levied against special education are justified.

What are some of the basic attitudes educators manifest toward the mentally retarded child? Teacher-training institutions are challenging us to provide for individual differences in children. Too often these "differences" are defined in terms of inadequacies. Prospective teachers, presented with behavioral descriptions of the educable mentally retarded, tend to develop negative attitudes and low expectations for them. For example, one student teacher was so "hung up" on what her students could not do that she was completely inhibited in her effectiveness. Even the more experienced teachers are sometimes preoccupied by "What's wrong with him . . ." rather than "What works with him . . ." Such attitudes can nourish and even magnify the child's problem.

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The important question that follows is one which asks: "How can a teacher's expectations become translated into behavior that will result in maximum pupil growth?" Although most teachers perform the same routines in the classroom—present subject matter, question, deal with students' behavior and evaluate results—the by-product of their "teaching" is a climate in which learning either languishes or flourishes, and this difference may well hinge on the teacher expectations for the children in the room.

The most successful teachers possess an optimistic outlook, with confidence in themselves, confidence in their students, and confidence in their own ability to achieve the best results. We must label teachers as incompetents if they behave toward children in a manner that fosters the elements of their behavior which contribute to their problem. Masterful teaching is probably more important for the less able child than for the able, because it is the former that is most easily thrown off track by poor teaching.

INDIVIDIUALITY

Many commonly held assumptions concerning the learning characteristics of the mentally retarded have been proven to be fallacies. Increasingly, we realize that what we may describe as true of one child may not be characteristic of others. We can assume nothing. Blanket descriptions serve only to cloud the issues. Concerning any area of curriculum, no two children are exactly alike in aptitude, disability, or background of experiences. The challenge presented by the "uniqueness" of each pupil is tremendous, but we must not lower our expectations for the majority because of the characteristics of a few.

LABELING

It is impossible to discuss teacher expectations without getting involved in the issue of "labeling." There is positive evidence supplied by research that teachers' attitudes are affected by labels placed upon the children. Since teacher *attitudes* are important in determining the emotional adjustment of the child, it seems safe to assume that teacher *expectancies* are important in influencing their educational progress in a positive and/or negative way.

Teachers need to examine their own thoughts and feelings. For example, a teacher's natural tendency to react favorably to clean, eager-to-learn little girls needs to be recognized for what it is—a personal preference. I personally favor dirty, freckle-faced, aggressive little boys, so I need to be introspective in order to make cer-

tain that, being more impressed with some, I do not allow these feelings to interfere with my expectations for others.

I am not convinced that labeling always creates problem groups. Proper placement of a child doesn't necessitate "tagging" him as inadequate. Although placing a child in an EMR classroom could be called "labeling," we could neutralize the effect by reminding ourselves that the label (EMR) does not begin to tell us all the things we need to know about him.

The child's inadequate self-concept is more apt to result from the attitudes manifested toward him than from the label itself. Similarly, failures are more often failures of the learning system rather than the learner.

Let us proceed to the exploration of teacher strategies that positively affect the child's self-concept and educational growth. As a teacher, I cannot resist the temptation to include a list of Do's and Don'ts.

THE UNINTENTIONAL COMMUNICATION OF EXPECTANCIES

Children catch feelings like they catch the measles. They catch anxiety and fear about themselves from their parents. Likewise, lethargic children may well be the result of passive, indifferent teachers. *Do* radiate optimism and courage in what you believe they can do. These are contagious, too.

COMMUNICATIVE SKILLS

It is true that many young EMR's come to the special class with grossly inadequate communicative skills. *Don't* succumb to the temptation of believing that such a condition is irreversible. The world continues to judge individuals by the way they communicate. Right or wrong, the importance of good oral expression cannot be overemphasized.

You can give the young child courage to express himself. He may be non-vocal at first (gestures, facial expressions, etc.) but reward his attempts. Let him see that he *is* communicating with you.

Physical experiences precede language. He may come to school sorely lacking in experiences. Provide them. Begin to build a broader background for him. Create some "happenings." Include a narrative about what you are doing. Give him something to talk about, and when he does, *listen*. Look at him and listen attentively as if nothing else in the world matters at that moment.

Other modes of expression (handwriting, spelling, etc.) are important too, but in a more utilitarian respect. Except for rare cases, speech must be acquired first. Success in the other operations appears to be related to and/or dependent upon oral expression.

ATTENTION SPAN

It has been stated many times that mentally retarded children have short attention spans. Unfortunately, that is a quality possessed by many of us. However, we *can* do something about it. Knowing when to change activities, when to speed up or slow down, is an asset to any good teacher. If the child can't sit still, consider how to incorporate gross motor movements into his learning. Consider also the appropriateness of the activity. Children can be *completely absorbed* in a task that is geared for capacities and interests.

In contrast, some "authorities" who point to the EMR as having short attention spans add insult to injury with the statement that he is satisfied with monotonous jobs. First, it should be pointed out that the EMR may be satisfied with such a job because a lot of effort went into his preparation. It is not inconceivable that some very competent teachers instilled in him the desire to do the job efficiently, in spite of its monotony. Another possibility is that he is a well-adjusted individual who understands himself and accepts the job as being in line with his capacity. Perhaps as part of his education he learned to balance the tedium of a monotonous job with appropriate leisure-time activities. For example, I know a young man who is so busy with bowling and refurnishing furniture that he finds his job at the laundry a pleasant relief. Last, it is possible that mentally retarded adults *learn to accept* monotonous jobs because of the lack of alternatives.

OBSERVATION

It is particularly offensive to me to be confronted with generalizations such as, "The EMR child lacks curiosity," or "Retardates are not observing. . . ." More appropriately, we should state that they need to be *taught* to observe. If they are unaware of their environment, give them reasons to notice it. For example, I have had young children who were so unobserving that they would walk right past a new, colorful bulletin board without noticing it. Very quickly they discovered that as a part of their daily opening exercises I asked for information that required some scrutiny of their environment. (I tell them the previous day what they are to look for.) "I want to know about something in your house that is red," or "What things did you see on the way to school that had moving parts?" A new library is being constructed near our school. Instead of merely naming objects, the children are learning to make some comparisons when asked, "How has the

building changed since last week? They can be encouraged to observe and make judgments about the weather by asking, "Do you think I will need my umbrella today?"

Another discovery I made about my youngsters was that upon returning from the cafeteria, they could not recall what they had eaten! When they learned that I planned to hold them responsible for this little bit of information, they began paying more and more attention to the food. (Sometimes they relay information that spoils my appetite.) Frequently I ask, "What did you eat for breakfast?" or "What was on your dinner table last night?" Some concomitant results are in the form of my increased insight into their families' eating habits and more importantly, their improved short-term memory skills.

CONFIDENCE

Those of us in education accept the goals of social and economic independence for the educable mentally retarded as readily as we do for all human beings. No one would question the sincerity of such statements. However, we should be concerned over the amount of confidence displayed by some teachers about the attainment of these goals. It is not possible to determine whether or not the lack of confidence is in themselves or in their pupils. Obviously, there is no place in the classroom for the teacher who overestimates the abilities of the students—who expects too much and thereby creates failures. Neither can we continue to tolerate the teacher who persists in underestimating their potentials, expecting too little and creating even more failures.

SELF-CONCEPT

The self-concept is the single most important factor that determines how the child will learn. It is a complex element, crucial to the child's behavior, a determinant of his educational growth. Theorists among the ranks of special educators accept the premise that a positive self-concept increases the child's chances for success. Stated another way, the more he succeeds, the more healthy his self-concept becomes. Obviously, teachers need to consider how they can manipulate the classroom environment so that negative self-concepts become positive ones and healthy ones become strengthened.

In a way, the child's world is like a mirror, reflecting an image to him. He sees himself as others see him. Failure in his social and academic efforts quickly results in feelings of unworthiness. Very often, the child who comes to us has already met so much failure that maladaptive behavior results. Even though the source of conflict may be outside the school, the teacher's attitude can create a change in his perception of himself.

All children have the same needs but vary in their ability to fulfill them. They must be made to feel worthwhile to themselves and to others. Plan activities that will insure success. Make certain that objectives are in line with the development level of the child. Have confidence in his ability to grow. Minimize his errors, but *radiate* enthusiasm in his successes.

Just as teachers need to examine their atitudes toward their pupils, children too can profit from examining their attitudes toward each other. One good activity aimed toward enhancing the self-concepts of the children is to let each child "have his day." Request each member of the class to cite one example of what he likes about the special child. A booklet can result, with one page illustrated by each child, and his comments recorded at the bottom. I paste a snapshot of the special child on the front. The retarded child may acquire a clearer bodily image of himself after statements like "She always has clean hands . . ." or, "I like John's freckles . . ." The tape recorder serves as another medium for this activity. (Encourage complete sentences.) Inevitably, a turn comes to the socially unaccepted child (He may need peer approval more than anyone). His classmates may struggle to come up with honest, positive statements. I recall one instance in which a little girl, after much deliberation, stated "I like Tommy because he always remembers to flush the toilet." Another child said, "He's okay at feeding the fish." Tommy *treasured* that tape, playing it repeatedly during his free time. This type of activity can be adapted to meet the needs of pupils of all age levels.

SENSE OF HUMOR

Presented with a list of behavioral descriptions of EMRs, we see mentioned frequently the characteristic that they lack a sense of humor. This is not true of the majority. There may be some who possess such negative self-concepts that they cannot appreciate humor. Others suffer from the *lack of exposure* to it. However, most retardates, at any given age level, are hungry for amusing situations. Appreciate the power of laughter! A sense of humor *can* be developed and it can be a powerful tool.

Sarcasm can be powerful too, like a deadly weapon. There is no place in the classroom for cutting remarks or sardonic laughter.

Do keep your sense of humor. It can help you through some tough situations. Consider the day a failure if you have not laughed with your students.

PERSONAL INVOLVEMENT

The importance of personal contact in teaching has been receiving less attention in recent years. The emphasis instead has been on materials, testing and classification of students. Unfortunately, some teachers have been trained to remain objective and detached. In contrast, no teacher should be afraid of personal involvement. A child's ability to succeed in life depends upon a series of personal involvements with responsible people, and teachers are among the most important. Let him know that *you* care. It is more motivating to say "*I* want you to . . ." rather than "You should . . ." when giving directions. It is more effective to say "*I* like the way you . . ." than "This is a good way to . . ." when giving approval.

TOWARDS INDEPENDENCE

Sometimes, pupils become overly dependent on constant success. Some of them begin to require a perpetual reinforcement from the teacher. It should be recognized that as they gain self-confidence, these needs should decrease in intensity.

No teacher would knowingly foster the elements in a child's behavior that make him dependent. However, there is a good possibility that the teacher will underestimate his capacity for developing independence. Assuming that the child's self-concept is wholesome, the teacher should begin to push him ahead in his development. We should present him with activities that tempt him into the next stage of development.

Some educators labor under the misconception that mentally retarded children cannot stand failure. They provide excessive amounts of success, thus fostering the children's dependence on it. They may even delay introducing skills to a child and generally limit the scope of his educational program.

We must not shield the child from failure forever. Other aspects of his environment may not be so generous. *Everyone* meets frustration and failure in daily living. Learning to overcome it and come away unshattered is essential.

Assuming that the child has developed a wholesome opinion of himself, begin introducing small doses of stress into his curriculum. As he gains self-confidence, occasional experiences of failure, plus an understanding of why the failure occurred, will enable the child to evaluate new situations.

SINCERITY

Be honest in your evaluation of his work. Continue your emphasis on success, rewarding correct responses and behavior. However, don't say "That was a very good try," when the child has just made a gross error. Neither should you be noncommital. Either reinforce or reject discreetly. There are ways to lessen the impact of failure, but don't be a phony!

Children have a keen sense of fairness, and nothing will disrupt a room as easily as insincerity on the part of the teacher. To feign interest in him is the worst sort of insincerity. Don't act interested in him just to make him feel good. He *is* interesting. Let him know he really *counts* for something in your book.

POSTURE

There exists another "characteristic" too often generalized of the educable mentally retarded, but seldom explored for its implications—that the EMR possesses poor posture and/or a shuffling gait. Let us not accept this as an unalterable fact. When it occurs we should ask why, and under what circumstances, and how it may be overcome. Perhaps he has a physical involvement that reveals itself in his lack of coordination. There is a better possibility that he is reflecting his feelings of inadequacy and unworthiness.

We should not underestimate the importance of physical appearance. As previously stated, the world judges us by the way we talk. Similarly, we are judged (or misjudged) by the way we walk. We have preconceived notions about persons we meet shufflling along the sidewalk, i.e., they are either drunk or retarded.

Do not dismiss poor posture as "typical" mentally retarded behavior. Do something about it! Gross motor activities can be aimed toward more acceptable posture and gait. Be steadfast in efforts to enhance a child's self-concepts. Care about what they *are*. Treat each child as if his father were the superintendent of schools!

GOALS

An effective teacher needs to be aware of the role he plays in preparing the child for future independence. Setting goals for children is important, but *don't* keep them a secret. Sometimes the goals and objectives for teaching a unit become completely shrouded in our efforts to introduce and motivate it. No wonder when weeks later, the children exclaim, "Is *that* what we're learning about?" It is criminal to waste time and energy if the pupils could have grasped the situation earlier. Do establish goals, but make sure they are worth working toward.

COMMITMENT

Another factor often overlooked is that of commitment. A pupil will gain increased pride in his accomplishments

if previously *he* committed himself to them. Know what you can expect from pupils. Let *them* know what your expectations are. Their task may be simple, like learning to dot "I's," or perhaps relatively complex, such as improving their conduct in the lunchroom. Be realistic in your expectations. Get them to commit themselves, and hold them to it.

One successful teacher plays a simple version of "Password" with his pupils as he greets them each morning. In order to "pass" into the classroom, the pupil states his special "problem." It may be an arithmetic fact, a crucial spelling word, or a behavior problem. Perhaps he has trouble distinguishing a nickel from a dime. Or maybe he needs to assume the responsibility for getting to work on time. Being able to identify the problem is one giant step toward solving it. Two things the teacher should remember are: 1) to help the pupil identify problems that are in balance with his capacity, and 2) to encourage statements that are positive, such as "I need to . . ." rather than "I can't . . ." Although they may be isolated bits, it is possible that they are the missing links that prevented that pupil from moving forward in a special area of curriculum. Young children, as well as older students, can profit from this kind of "commitment." It is individualized instruction in its simplest form.

RESPONSIBILITY

While responsible citizenship is an end purpose of special education, oftentimes the placement of a child in a special class labels him as "unable to assume responsibilities." How the teacher interprets his performance and potential will determine his progress toward any goal. The skillful teacher can communicate confidence in his ability to assume responsibility for his own actions.

Give a child choices. (He may not be responsible for his past, but give him the opportunity to assume increasing amounts of responsibility for his present and future.) Help him to distinguish between appropriate and inappropriate behavior. Then gradually shift the burden of responsibility to *his* shoulders. You may have to share his failure—they are your failures too—but do give *him* the credit for his successes.

HUMAN RELATIONSHIPS

Whether in New York or California, on college campuses or in special class settings, today's education is where the action is. As young people search for relevancy between academic courses and the world outside, so should educators pause to examine just what's happening. Mentally retarded youths and adults are not immune to the forces that urge a reorganization of our cultural society. They, like the rest of us, are often confused by the computerized society in which we live. We must be convincing and firm with the knowledge that as a retarded boy approaches manhood, he *can* be prepared for his "place in the sun." A computerized society doesn't have to be a dehumanized one.

In many instances, special education has surpassed general education with its emphasis on social skills and human relationships. We congratulate ourselves, but we can't afford to be complacent.

We must begin and end with an examination of ourselves. Show ourselves as human beings. Get to know our students as human beings. The process of learning how to relate to one another begins there!

ISSUES & TRENDS

The effects of teacher expectancy and the labeling of children based on disability is becoming a professional concern of considerable importance. There is evidence to suggest that decisions regarding the organizational construct of special education programs, as well as the placement procedures employed, are often geared to the needs of the administration rather than to those of the child.

Although general education has been the target of criticism from outside and within the profession, education for the handicapped has escaped the major thrust of the review. This may be due to the "sacredness" of educating the handicapped. The consequences of not having to defend our practices has allowed us to employ practices founded on assumed results, rather than proven ones.

The Council for Children with Behavior Disorders, a division of C.E.C., distributed a position paper at the national C.E.C. meeting in Denver, Colorado, last spring. They essentially are calling for an appraisal of what we as professionals are doing in perpetuating present practices of educating exceptional children. This movement within the profession will evoke considerable response. The result might well be a major change in operational programs for the exceptional children. Should this happen, it needs to be couched within a similar restructuring of teacher preparation programs.

The position paper of CCBD should serve a useful purpose in motivating professionals to reexamine their

thinking. If used in a campaign manner, each professional might well be asked to take a stand on the issue. This might be a healthy activity. Following is the position paper, printed in its entirety as distributed by the Council for Children with Behavioral Disorders at the Council for Exceptional Children's meeting in Denver, Colorado, April 8-12, 1969.

Council for Children with Behavioral Disorders

We believe the following to be true, that the values and practices of professionals concerned with children produce schools which:

1. Deprive all children of the experience of self-fulfillment; causing them to fail in school; to be excluded from school; to become impotent in education and society;
2. Create and maintain racist, and otherwise dehumanizing values in society; and
3. Use labels which place responsibility for failure on the child, his parents or on other factors unrelated to his school experiences.

We further believe that Special Educators have allowed themselves to be used to perpetuate these means of harming children through practices which shield American education from its failures.

Moreover, we believe that C.E.C. and its divisions have permitted themselves to be used as one of the special arrangements for relieving individual and institutional guilt and responsibility. Now, therefore, CCBD calls upon the C.E.C. to:

1.) Seek a definition of exceptionality that is educational in its origin and conception, and in its diagnostic and remedial implications.

2.) Strongly affirm the inadequacy of the traditional special education model of remediation, and actively affirm the need for the development of a new model that involves the total system and all children.

WASHINGTON REPORT

Twenty-four projects serving handicapped children in pre-school or early stages of education have recently been funded under the Handicapped Children's Early Education Assistance Act, passed last fall. It is expected that the projects will continue for three years, and most of the grants are for a year of initial planning.

The Act stemmed from the recognition that the preschool years are critical to a child's future development and that it is therefore important that handicaps which may cumulatively retard a child's learning and hamper his emotional and social adjustment be identified and prescribed for as soon as possible. While special educators have recognized the need for preschool education, there has been a lack of information about models which could be imitated in planning local programs. The Act therefore called for model programs representing a wide variety of approaches, which would encourage parent participation and create community awareness of the problems and potentialities of the children.

The projects selected for support represent many different approaches, and vary in terms of type of handicap served, administrative situation, urban vs. rural settings, and geographic distribution. Several of the projects will demonstrate techniques of early intervention, diagnostic evaluation, and individualized treatment and education. One program will include home demonstration training for parents and a part-time, highly structured nursery school stressing cognitive development. A preschool center for the deaf will provide language and acoustic stimulation in a variety of settings. There are early intervention programs for the seriously emotionally disturbed, and some combination home and classroom training programs (e.g., for the multiple handicapped retarded). In addition, a grant has been given to establish an R&D Center for Educational Evaluation of Programs for Preschool Handicapped Children.

Only $1,000,000 was appropriated for the first year's funding under the Act. The 213 proposals received from 49 states for the small number of possible grants reflect the amount of interest in, and need for, early education programs for handicapped children.

RESOURCE MATERIALS

By Linda Smith[1] and Reuben Altman[2]

THE HOGG FOUNDATION FOR MENTAL HEALTH

As part of its continuing effort to support pilot programs, community services, and educational projects

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in the area of mental health, the Hogg Foundation disseminates relevant publications, films, audio- and video-tapes as well as radio and television programs. The Foundation was established in 1940 by a grant from the Will C. Hogg family to encourage innovative programs and to further awareness of mental health needs. Among those who have served on the Hogg Foundation's National Advisory Council are such distinguished individuals as Mrs. Winthrop Rockefeller, Dr. Ernest R. Hilgard of Stanford University, and Dr. Nicholas Hobbs, innovator of Project RE-ED for the education of emotionally disturbed children.

Any interested individual or organization may be added to the Foundations' mailing list upon request. Periodic mailings include currently published informative pamphlets by professionals in the mental health disciplines, a complete catalogue of available titles, and a quarterly newsletter. Up to five mixed titles or five single copies of any one publication will be sent without charge. Additional materials ranging upwards from 5 cents are sold at cost.

Among the recent publications of particular interest to teachers of the emotionally disturbed are *Creating Climates for Growth, Mental Health Principles and School Practices, Adults Look at Children's Values, Self-Acceptance, The Nature of Mental Health, Becoming a Person, Look Toward Tomorrow* and *There Was a Child Who.*

To be placed on the mailing list or to receive additional information, write to: Publications Division, The Hogg Foundation for Mental Health, Will C. Hogg Building, Austin, Texas 78712.

FEARON PUBLISHERS

Fearon is an educational publisher producing a quantity of instructional material geared specifically to the needs of the Special Education teacher. With particular emphasis on the exigencies of the educable mentally retarded child, available materials include textbooks, worktexts, workbooks, teaching aids, and educational games. In addition, the majority of these products are amenable to modification for the slow learner, reluctant reader, and the culturally disadvantaged. Both their supplementary and remedial reading materials are usually designed to provide high interest appeal while maintaining a low vocabulary level. Of special interest are Fearon's adaptations of classic novels such as *Robinson Crusoe, Treasure Island,* and *Ivanhoe* which employ this high interest-controlled vocabulary format. Other content areas in which materials are available include science, mathematics, social studies and consumer economics. Teachers may also purchase both professional literature and instructional aids which can be utilized in the remediation of learning disabilities.

Inquiries should be directed to Fearon Publishers, 2165 Park Boulevard, Palo Alto, California 94306.

NATIONAL DAIRY COUNCIL

An excellent source of materials and services in the subject area of health education and nutrition is the National Dairy Council. The purpose of this nonprofit organization is to promote sound health habits through a better understanding of nutrition. Its research and educational programs employing current scientific knowledge are supported nationally by the dairy industry.

Teachers may avail themselves of a wealth of materials ranging from informative posters, charts, and booklets to elaborate displays and authentic models. Many of these materials are accompanied by a teacher's guide. Graphically designed recipes and menus suitable for the educable mentally retarded in their vocational training and home economics classes may be purchased. In addition, many supplementary films, filmstrips, film guides, recordings and transparencies which are appropriate for social studies units are available. Of particular value to teachers is the categorization of materials into primary, intermediate, junior high and senior high school grade designations. The National Dairy Council also publishes the bimonthly *Dairy Council Digest* and the quarterly *Nutrition News* providing pertinent research, book reviews, abstracts, and articles relevant to nutrition and health education.

A colorful and attractively illustrated *Health Education Materials Catalog* presenting annotations and prices for the complete selection of materials can be acquired free of charge. Materials prices range from 5 cents for a single information sheet to $65.00 for an assembled Model Dairy Farm. Film prices may be slightly higher. Address catalog requests to your local affiliated Dairy Council unit or write to: National Dairy Council, 111 North Canal Street, Chicago, Illinois 60606.

Fourth International Seminar on Special Education, Cork, Ireland, September 9-12, 1969. Sponsored by International Society for rehabilitation of the Disabled, 219 East 44th Street, New York, N. Y. 10017.

World Congress on Rehabilitation, Dublin, Ireland, September 14-19, 1969. Write for information to Colm J. Sweeney, 18 Merrion Road, Ballsbridge, Dublin 4, Ireland.