GOVERNMENT
Storage

1015

Y4.Ed 8/1:C 43/3

CHILD DEVELOPMENT SPECIALISTS

Y4
.Ed 8/1
C 43/3

HEARINGS

BEFORE THE

GENERAL SUBCOMMITTEE ON EDUCATION

OF THE

COMMITTEE ON EDUCATION AND LABOR

HOUSE OF REPRESENTATIVES

EIGHTY-NINTH CONGRESS

FIRST SESSION

ON

H.R. 11322

A BILL TO PROVIDE A PROGRAM OF FEDERAL ASSISTANCE TO ELEMENTARY SCHOOLS THROUGHOUT THE NATION TO IMPROVE EDUCATIONAL OPPORTUNITIES THROUGH PROVISION FOR THE SERVICES OF CHILD DEVELOPMENT SPECIALISTS AND TO PROVIDE A PROGRAM OF FEDERAL ASSISTANCE FOR THE TRAINING OF SUCH ELEMENTARY SCHOOL PERSONNEL IN THE INSTITUTIONS OF HIGHER EDUCATION, AND FOR OTHER EDUCATIONAL PURPOSES

KSU LIBRARIES
A11900 984040

KANSAS STATE UNIVERSITY LIBRARY
MAR 1966
MANHATTAN, KANSAS

HEARINGS HELD IN WASHINGTON, D.C.,
OCTOBER 19 AND 20, 1965

Printed for the use of the Committee on Education and Labor

ADAM C. POWELL, *Chairman*

U.S. GOVERNMENT PRINTING OFFICE
57-877 WASHINGTON: 1966

AUTHENTICATED
U.S. GOVERNMENT
INFORMATION
GPO

COMMITTEE ON EDUCATION AND LABOR

ADAM C. POWELL, New York, *Chairman*

CARL D. PERKINS, Kentucky
EDITH GREEN, Oregon
FRANK THOMPSON, JR., New Jersey
ELMER J. HOLLAND, Pennsylvania
JOHN H. DENT, Pennsylvania
ROMAN C. PUCINSKI, Illinois
DOMINICK V. DANIELS, New Jersey
JOHN BRADEMAS, Indiana
JAMES G. O'HARA, Michigan
RALPH J. SCOTT, North Carolina
HUGH L. CAREY, New York
AUGUSTUS F. HAWKINS, California
CARLTON R. SICKLES, Maryland
SAM GIBBONS, Florida
WILLIAM D. FORD, Michigan
WILLIAM D. HATHAWAY, Maine
PATSY T. MINK, Hawaii
JAMES H. SCHEUER, New York
LLOYD MEEDS, Washington
PHILLIP BURTON, California

WILLIAM H. AYRES, Ohio
ROBERT P. GRIFFIN, Michigan
ALBERT H. QUIE, Minnesota
CHARLES E. GOODELL, New York
JOHN M. ASHBROOK, Ohio
DAVE MARTIN, Nebraska
ALPHONZO BELL, California
OGDEN R. REID, New York
GLENN ANDREWS, Alabama
EDWARD J. GURNEY, Florida

LOUISE MAXIENNE DARGANS, *Chief Clerk*
RUSSELL C. DERRICKSON, *Staff Director*
C. SUMNER STONE, *Special Assistant to the Chairman*
DR. GRACE HEWELL, *Education Chief*
LEON ABRAMSON, *Chief Counsel for Labor-Management*
MICHAEL J. BERNSTEIN, *Minority Counsel for Education and Labor*
CHARLES W. RADCLIFFE, *Special Education Counsel for Minority*

GENERAL SUBCOMMITTEE ON EDUCATION

CARL D. PERKINS, Kentucky, *Chairman*

JOHN BRADEMAS, Indiana
RALPH J. SCOTT, North Carolina
HUGH L. CAREY, New York
FRANK THOMPSON, JR., New Jersey
WILLIAM D. FORD, Michigan

CHARLES E. GOODELL, New York
JOHN M. ASHBROOK, Ohio
ALPHONZO BELL, California

H. D. REED, JR., *Counsel*
ELIZABETH CORNETT, *Clerk*

KANSAS STATE UNIVERSITY LIBRARY
MAR 1966 10
MANHATTAN, KANSAS

CONTENTS

Page

Hearings held in Washington, D.C.:
October 19, 1965 1
October 20, 1965 163
Text of H.R. 11322 2
Statement of—
Bower, Dr. Eli, consultant, National Institute of Mental Health 21
Gibbons, Hon. Sam, a Representative in Congress from the State of Florida 7
Glidewell, Dr. John C., director of research and development, St. Louis County Health Department, Clayton, Mo 177
Goldsmith, Miss Cornelia, executive director, National Association for the Education of Young Children 188
Liddle, Dr. Gordon P., general director, Interprofessional Research Commission on Pupil Personnel Services 183
Lourie, Dr. Reginald, director, children's psychiatric service, Children's Hospital, Washington, D.C 163
Meyer, Miss Alberta, executive secretary, Association for Childhood Education International 190
Osborn, Dr. D. K., educator, Taylor, Mich 121
Pepper, Hon. Claude, a Representative in Congress from the State of Florida 172
Sievers, Dr. Frank L., Director, Guidance and Counseling, Programs Section in the Office of Education; Dr. Tony Milazzo, Director, Programs for Special Needs Branch; Dr. Hyrum Smith, Chief, Procedures and Techniques Unit; Mr. Leonard M. Miller, Specialist, Counseling Techniques, Mr. Kenneth Pederson, Specialist, Education of the Emotionally Disturbed 209
Thompson, Dr. Ethel, consultant in elementary education, National Education Association, New York, N.Y 158
Winsor, Dr. Charlotte, chairman, graduate programs of education, Bank Street College, New York, N.Y 125
Statements, letters, supplemental material, etc.:
Bloom, Benjamin S., professor of education, the University of Chicago, letter to Chairman Perkins, dated October 18, 1965 229
Bower, Dr. Eli, consultant, National Institute of Mental Health, publication entitled, "The Education of Emotionally Handicapped Children" 33
Caplan, Frank, president, Creative Playthings, Inc., and the Learning Center, Inc., Princeton, N.J., statement by 233
De La Parte, Louis, representative, Florida House of Representatives, Tallahassee, Fla., letter to Chairman Perkins, dated October 15, 1965 228
Fleiss, Bernice H., associate professor, Hunter College in the Bronx of the City University of New York, letter to Chairman Perkins, dated October 15, 1965 20
Frank, Lawrence K., Belmont, Mass., letter to Chairman Perkins, dated October 14, 1965 18
Gibbons, Hon. Sam, a Representative in Congress from the State of Florida, letters from the following:
Alper, Arthur E., Ph. D., associate professor of education, and coordinator, emotionally handicapped child program, University of Florida 254

Statements, letters, supplemental material, etc.—Continued
Page
Gibbons, Hon. Sam, etc.—Continued
Ashley, Marshel, regional administrator of Head Start, region V 253
Barr, John A., Ph. D., coordinator counselor education, San Jose State College 268
Barton, Walter E., M.D., medical director, American Psychiatric Association 243
Bell, T. H., State superintendent of public instruction, the State of Utah Department of Public Instruction 288
Brady, Elizabeth H., associate professor of education, San Fernando Valley State College, Northridge, Calif 273
Bruno, Louis, State superintendent of public instruction, State of Washington 251
Burnham, Mrs. V. G. Schroeder, Connecticut Manufacturing Co., Waterbury, Conn 260
Byrne, Richard Hill, professor of education, University of Maryland, letter and statement by 238
Caldwell, Robert G., professor of criminology, the University of Iowa 252
Cameron, Wm. Bruce, director, social sciences division, University of South Florida, Tampa, Fla 254
Cheatham, Mrs. Pauleta M., Tampa, Fla 260
Christian, Floyd T., superintendent, State of Florida Department of Education 280
Cole, Richard J., principal, Citrus Park School, Tampa, Fla 256
Collins, Hon. LeRoy, Under Secretary of Commerce 238
Combs, Arthur W., professor of education, University of Florida 254
Connor, Forrest E., executive secretary, American Association of School Administrators 271
Conyers, Hon. John, Jr., a Representative in Congress from the State of Michigan 237
Cowen, Emory L., professor of psychology, director of clinical training, and Melvin Zax, associate professor of psychology, the University of Rochester 284
Dent, Hon. John H., a Representative in Congress from the State of Pennsylvania 236
Donahue, George T., Ed. D., assistant supervising principal, Union Free School District No. 16, town of Hempstead, Long Island 269
Eaves, Robert W., executive secretary, department of elementary school principals, National Education Association 256
Elliott, Mabel A., adjunct professor of sociology, Brooklyn College of the City University of New York 265
Engel, Mary, Ph. D., assistant professor, Graduate School of Education, Harvard University 278
Etheridge, Jim, Tallahassee, Fla 241
Fleischaker, Jerry J., M.D., director, the Guidance Center of Hillsborough County, Tampa, Fla 260
Fox, Vernon, head, criminology and corrections, the Florida State University 240
Fraser, Hon. Donald M., a Representative in Congress from the State of Minnesota 237
Freelund, Nichael E., director, childhood mental illness service, the National Association for Mental Health, New York, N.Y. 255
Givens, Paul R., chairman, Psychology Department, University of South Florida, Tampa, Fla 251
Glaser, Daniel, professor, head of department, Department of Sociology, University of Illinois 278
Glueck, Sheldon, Roscoe Pound professor of law, emeritus, Law School of Harvard University 269
Grant, Murray, M.D., D.P.H., Director of Public Health, Government of the District of Columbia 281
Gray, Susan W., George Peabody College for Teachers, Nashville, Tenn 245
Green, Hon. Edith, a Representative in Congress from the State of Oregon 235
Grider, Hon. George W., a Representative in Congress from the State of Tennessee 236

Statements, letters, supplemental material, etc.—Continued
Gibbons, Hon. Sam, etc.—Continued
Page
Haddock, Benjamin H., secretary to the board, the American Orthopsychiatric Association, Inc. 253
Hansford, Byron W., commissioner of education, State of Colorado Department of Education 242
Harris, Dale B., head, Department of Psychology, Pennsylvania State University 249
Havenor, Mrs. Maude, Daytona, Fla. 240
Holland, Hon Elmer J., a Representative in Congress from the State of Pennsylvania 237
Holt, E. E., superintendent of public instruction, State of Ohio Department of Education 287
Iscoe, Ira, Ph. D., professor of psychology and education, the University of Texas 250
Johnson, Elmer H., Ph. D., professor of sociology, North Carolina University 248
Johnson, John L., Ed. D., assistant professor, elementary and special education, College of Education, Michigan State University 277
Keyes, Walter, director, Division of Economic Opportunity, State of Florida 264
Kindred, Mrs. Mildred, principal, Henry Grady Elementary School, Tampa, Fla. 257
Ladd, Eleanor M., Ed. D., Pinellas County Board of Public Instruction, Clearwater, Fla. 261
Lange, Lorraine, director, Elementary Education Division, State University College, Buffalo, N.Y. 264
Law, Norma R., professor, College of Education, Wayne State University, Detroit, Mich. 273
Lee, Dorothy, Ph. D., adjunct professor of psychology, Duquesne University 251
Leiter, Sarah L., supervisor of pupil services, Maryland State Department of Education 262
McKeachie, W. J., chairman, Department of Psychology, the University of Michigan 244
McKenzie, Mrs. Jessie, principal, Gorrie Elementary School, Tampa, Fla. 259
Medoff, Thelma, Miami Beach, Fla. 241
Melcher, John W., director, Bureau for Handicapped Children, State of Wisconsin Department of Public Instruction 272
Merin, Sidney J., Ph. D., consulting psychologist, Tampa, Fla. 252
Miller, Harriet, superintendent of public instruction, State of Montana 243
Molz, Harry, principal, Clair-Mel Elementary School, Tampa, Fla. 257
Ogden, John A., Jr., director, special education services, State of Colorado Department of Education 275
Papparikou, A. J., associate professor of education, the School of Education, the University of Connecticut 276
Patouillet, Raymond A., associate professor of education, Department of guidance and student personnel administration, Teachers College, Columbia University 283
Pepper, Hon. Claude, a Representative in Congress from the State of Florida 236
Persky, Blanche, professor of education, School of Education, New York University 264
Raiford, Olen W., teacher, Bartow, Fla. 261
Raines, Henry D., principal, Martha King Alexander Elementary School, Tampa, Fla. 258
Ratchick, Irving, coordinator, title I, ESEA, the University of the State of New York 282
Reckless, Walter C., professor of sociology, the Ohio State University 249
Rippy, Wilson C., Jr., M.D., diplomate, American Board of Psychiatry and Neurology in Psychiatry and Child Psychiatry, Tampa, Fla. 274
Rocco, Miss Joanne F., Orange Grove School 259

Statements, letters, supplemental material, etc.—Continued
Gibbons, Hon. Sam, etc.—Continued
Page
Rosen, Victor H., M.D., president, the American Psychoanalytic Association 247
Rowen, Robert B., Ph. D., director, school social work, New Jersey State Department of Education, statement of 282
Royster, W. B., coordinator, guidance services, State of South Carolina Department of Education 286
Scarpitti, Frank R., Ph. D., assistant professor of sociology, Rutgers, the State University 265
Slusher, Douglas L., supervisor, programs for the emotionally disturbed, division of special education, Department of Public Instruction, State of Indiana 262
Spodek, Bernard, Ed. D., associate professor, elementary education, University of Illinois, Urbana, Ill., statement by 262
Stokes, Lee, principal, Blanche Cahoon School, Tampa, Fla 257
Thompson, Alice C., Ph. D., associate professor of psychology, director, learning and behavior problems projects, California State College at Los Angeles 267
Thompson, Hon. Frank, a Representative in Congress from the State of New Jersey 238
Thompson, George G., professor of psychology, the Ohio State University 287
Udall, Hon. Morris K., a Representative in Congress from the State of Arizona 237
Wagner, Albert C., director, division of correction and parole, State of New Jersey Department of Institutions and Agencies 266
Weeks, Laura Ellen, principal, Roosevelt, Elementary School, Tampa, Fla 259
Westlin, William F., M.D., president, National Kindergarten Association, New York City, letter and statement 270
Whitton, Frank F., principal, Knights Elementary School, Plant City, Fla 274
Wiles, Kimball, dean, College of Education, University of Florida 279
Williams, H. Edgar, director, guidance services, State of Colorado Department of Education 276
Witherspoon, Ralph L., professor and director, Institute of Human Development, the Florida State University 279
Woods, Paul F., principal, Dover School, Dover, Fla 258
Wunderlich, Ray C., Jr., M.D., Suncoast Medical Clinic, Inc., St. Petersburg, Fla 261
Zeller, Robert H., Ed. D., assistant superintendent, division of pupil personnel services, State of Illinois Office of the superintendent of public instruction 275
Ziegler, Andrew H., principal, Trapnell School, Plant City, Fla 356
Gorman, Mike, executive director, National Committee Against Mental Illness, fellow, American Psychiatric Association (Hon.), fellow, American Public Health Association:
Keynote speech by 221
Letter to Chairman Perkins, dated October 18, 1965 288
Green, Hon. Edith, a Representative in Congress from the State of Oregon, letter from A. Western Niemela, director, special education and guidance, Salem Public Schools, Salem, Oreg 289
Hobbs, Nicholas, chairman, Division of Human Development, George Peabody College for Teachers, Nashville, Tenn., letter to Chairman Perkins, dated December 21, 1965 231
Hymes, James L., Jr., professor of education, director, University Nursery School-Kindergarten, University of Maryland, letter to Chairman Perkins, dated October 15, 1965 19
Kay, William H., principal, Williams Elementary School, Tampa, Fla., letter to subcommittee, dated October 19, 1965 228
Kennedy, Carroll E., Jr., assistant professor, family and child development, member, counseling center staff at Kansas State University, Manhattan, Kans., two statements by 291
Labrum, J. Harry, president, Board of Education, Philadelphia, Pa., statement of 229

Statements, letters, supplemental materal, etc.—Continued

Page
McGarry, Barbara D., executive director, the American Parents Committee, Inc., letter to Chairman Perkins, dated January 19, 1965 235
Meeds, Hon. Lloyd, a Representative in Congress from the State of Washington:
Statement of 218
Wedgwood, Ralph J., M.D., letter and statement by 219
Meyer, Miss Alberta, executive secretary, Association for Childhood Education International, publication entitled, "Basic Propositions for Early Childhood Education" 193
Miller, Lyle L., department head, guidance and counselor education, and director, 1965–66 Academic Year NDEA Counseling and Guidance Institute, the University of Wyoming, Laramie, Wyo., letter to Chairman Perkins, dated December 28, 1965 230
Nash, Harriet C., consultant, early childhood and parent education, State of Connecticut Department of Education, letter to Chairman Perkins, dated November 5, 1965 232
Price, Nelson C., director, special services, Azusa Unified School District, Azusa, Calif., letter to Chairman Perkins, enclosing comments on H.R. 11322 290
U.S. Office of Education, HEW, new obligational authority and expenditures for fiscal years 1966-71 295
Winsor, Dr. Charlotte, chairman, graduate programs of education, Bank Street College, New York, N.Y., publication entitled, "Preschool Education" 131

CHILD DEVELOPMENT SPECIALISTS

TUESDAY, OCTOBER 19, 1965

HOUSE OF REPRESENTATIVES,
GENERAL SUBCOMMITTEE ON EDUCATION
OF THE COMMITTEE ON EDUCATION AND LABOR,
Washington, D.C.

The subcommittee met at 9:30 a.m., pursuant to call, in room 2257, Rayburn House Office Building, Hon. Carl D. Perkins (chairman of the subcommittee) presiding.

Present: Representatives Perkins, Brademas, Ford, and Meeds.

Also present: Representatives Gibbons and Scheuer.

Staff members present: H. D. Reed, Jr., subcommittee counsel; and Charles W. Radcliffe, special education counsel for minority.

Mr. PERKINS. The committee will come to order. A quorum is present.

We are delighted to have with us this morning one of our colleagues on the House Committee on Education and Labor, particularly a colleague that has done so much in the field of education in the 2 years that he has been in the Congress and who has contributed as much, if not more, to the poverty legislation in sponsoring a broadened so-called war on poverty program than any other member. We are delighted, Sam, that you are now sponsoring H.R. 11322, which, as I understand, is a program to provide Federal assistance to elementary schools and to preschools, where more emphasis is now being placed, to do something to detect and arrest emotional disturbances in children. Such problems manifest themselves in children at an early age and if not taken care of produce our dropouts, our delinquents, our welfare loads, our criminals.

As I understand, your legislation provides for child development specialists to detect an emotionally disturbed child, or whatever the problems may be, in children in the preschool age and in the early primary grades. It would make available specialists through a Government-financed program, and would provide for the training of these specialists in our institutions of higher education.

(Text of H.R. 11322 follows:)

[H.R. 11322, 89th Cong., 1st sess.]

A BILL To provide a program of Federal assistance to elementary schools throughout the Nation to improve educational opportunities through provision for the services of child development specialists and to provide a program of Federal assistance for the training of such elementary school personnel in the institutions of higher education, and for other educational purposes

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That this Act may be cited as the "Elementary and Preschool Child Development Act".

DECLARATION OF POLICY

SEC. 2. Congress recognizes the relationship of education and educational underachievement to the problem of the school dropout, disruptive behavior, delinquency, crime, and serious emotional handicap. Further, it recognizes that these problems are of national significance and there is need for a program, national in scope, to contribute toward the solution of such problems.

Congress further finds and declares as policy that a program embodying early identification and prevention of these disorders should be instituted for all children at the elementary and preschool level. That in order to carry out such a program, it is necessary to provide for the training, and to make available, highly skilled child development specialists for work through all schools, with children, their families, and community personnel. That such a program will assist schools to become more effective in strengthening the human resources of the Nation.

TITLE I—GENERAL PROVISIONS

DEFINITIONS

SEC. 101. As used in this Act—

(a) The term "elementary school" means a public or nonprofit private school which provides elementary education in any or all of the grades below grade 4; including education below grade 1, as determined by State law.

(b) The term "child development specialist" and the term "specialist" means a person who by reason of a successful completion of a postgraduate course of instruction at an institution of higher education of at least two years' duration and consisting of such courses as are or have been provided by such institution with a graduate program designed to qualify such specialists to—

(1) assist elementary school personnel with the individual learning or behavior problems of elementary school children, as well as with the educational progress of such children,

(2) assist school personnel in the recognition of elementary school children who have or who are developing serious emotional, learning, or behavioral problems, and in making effective school-related changes to help such children,

(3) assist teachers, parents, and school staff to become knowledgeable about community and other resources for the use of such children and families requiring assistance in the solution of such problems of elementary school children.

(c) The term "local educational agency" means a public board of education or other public authority legally constituted within a State for either administrative control or a direction of, or to perform a service function for, public elementary or secondary schools in a city, county, township, school district, or other political subdivision of a State, or such combination of school districts or counties as are recognized in a State as an administrative agency for its public elementary or secondary schools. Such term also includes any other public institution or agency having administrative control and direction of a public elementary or secondary school.

(d) The term "nonprofit school agency" means an association or corporation operating or conducting an elementary school, no part of the net earnings of which inures, or may lawfully inure, to the benefit of any private shareholder or individual.

(e) The term "Commissioner" means the Commissioner of Education.

(f) The term "institution of higher education" means an educational institution in any State which (1) admits as regular students only persons having a

certificate of graduation from a school providing secondary education, or the recognized equivalent of such a certificate, (2) is legally authorized within such State to provide a program of education beyond secondary education, (3) provides an educational program for which it awards a bachelor's degree, (4) is a public or other nonprofit institution, and (5) is accredited by a nationally recognized accrediting agency or association approved by the Commissioner for this purpose or, if not so accredited, is an institution whose credits are accepted on transfer by not less than three institutions which are so acredited, for credit on the same basis as if transferred from an institution so accredited. For purposes of this subsection, the Commissioner shall publish a list of nationally recognized accrediting agencies or associations which he determines to be reliable authority as to the quality of training offered.

(g) The term "nonprofit", as applied to a school, means a school owned and operated by one or more nonprofit corporations or associations no part of the net earnings of which inures, or may lawfully inure, to the benefit of any private shareholder or individual.

(h) The "Secretary" means the Secretary of Health, Education, and Welfare.

(i) The term "State" includes, in addition to the several States of the Union, the Commonwealth of Puerto Rico, the District of Columbia, Guam, American Samoa, the Trust Territory of the Pacific Islands, and the Virgin Islands.

(j) The term "State educational agency" means the State board of education or other agency or officer primarily responsible for the State supervision of public elementary and secondary schools, or, if there is no such officer or agency, an officer or agency designated by the Governor or by State law.

ADVISORY COUNCIL ON ELEMENTARY SCHOOL CHILD DEVELOPMENT

SEC. 102. (a) The Commissioner shall establish in the Office of Education an Advisory Council on Elementary School Child Development for the purpose of reviewing the administration and operation of the programs carried out under this Act and for the purpose of advising the Commissioner, and making recommendations to the Commissioner, on the approval of programs authorized by title III of this Act. The Council shall consist of the Commissioner who shall be Chairman and twelve members appointed for staggered terms and without regard to the civil service laws, by the Commissioner with the approval of the Secretary of Health, Education, and Welfare. Such twelve members shall include persons knowledgeable with respect to the behavioral problems of children and the elementary education process.

(b) Members of such Advisory Council who are not regular full-time employees of the United States shall, while attending meetings or conferences of such Council, or otherwise engaged on business of such Council be entitled to receive compensation at a rate fixed by the Secretary, but not exceeding $100 per diem, including traveltime, and, while so serving away from their homes or regular places of business, they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5 of the Administrative Expenses Act of 1946 (5 U.S.C. 73b–2) for persons in the Government service employed intermittently.

(c) The Council may appoint an executive secretary and such other employees as the Council deems necessary to carry out its functions.

ADMINISTRATION OF STATE PLANS

SEC. 103. (a) The Commissioner is authorized to make grants to each State educational agency to be used in administering its State plan approved under title II, in performing supervisory functions over specialists employed under this Act, in carrying on research in areas related to the purposes of this Act, and in carrying on in-service training programs for specialists employed under its State plan.

(b) No State educational agency shall in any fiscal year be granted an amount under this section in excess of an amount equal to 5 per centum of its allotment under section 202 for that year, or $75,000, whichever is the greater, except that the Commissioner shall determine the appropriate amount to be granted Puerto Rico, Guam, American Samoa, the Virgin Islands, and the Trust Territory of the Pacific Islands under this section.

SEC. 104. There is authorized to be appropriated for the fiscal year ending June 30, 1967, $300,000, for the fiscal year ending June 30, 1968, $1,250,000, for the fiscal year ending June 30, 1969, $3,250,000, and for the fiscal year ending June 30, 1970, $7,000,000 for the purpose of carrying out this title.

TITLE II—USE OF CHILD DEVELOPMENT SPECIALISTS IN ELEMENTARY SCHOOLS

GRANTS

SEC. 201. During the fiscal year ending June 30, 1967, and each fiscal year thereafter, the Commissioner shall carry on a program for making grants to State educational agencies to be used to employ child development specialists for service in the elementary schools of local educational agencies and nonprofit school agencies.

ALLOTMENTS AMONG STATES

SEC. 202. (a) From the sums appropriated for carrying out this title for any fiscal year, the Commissioner shall reserve such amount, but not in excess of 2 per centum thereof, as he may determine and shall allot such amount among the Commonwealth of Puerto Rico, Guam, American Samoa, the Virgin Islands, and the Trust Territory of the Pacific Islands according to their respective needs for assistance under this title. From the remainder of such sums, the Commissioner shall allot to each State an amount which bears the same ratio to such remainder as the number of children enrolled in public and private elementary schools of that State bears to the total number of children enrolled in such schools in all of the States. The number of children so enrolled shall be determined by the Commissioner on the basis of the most recent satisfactory data available to him. For purposes of this subsection, the term "State" shall not include the Commonwealth of Puerto Rico, Guam, American Samoa, the Virgin Islands, and the Trust Territory of the Pacific Islands.

(b) The amount of any State's allotment under subsection (a) for any fiscal year which the Commissioner determines will not be required for such fiscal year shall be available for reallotment from time to time, on such dates during such year as the Commissioner may fix, to other States in proportion to the original allotments to such States under subsection (a) for that year but with such proportionate amount for any of such other States being reduced to the extent it exceeds the sum the Commissioner estimates such State needs and will be able to use for such year; and the total of such reductions shall be similarly reallotted among the States whose proportionate amounts were not so reduced. Any amounts reallotted to a State under this subsection during a year from funds appropriated pursuant to section 201 shall be deemed part of its allotment under subsection (a) for such year.

STATE PLANS

SEC. 203. (a) Any State which desires to receive grants under this title shall submit to the Commissioner a State plan in such detail as the Commissioner deems necessary, which—

(1) provides that the State educational agency will be the agency for administering the plan,

(2) sets forth a program under which funds paid to the State from its allotment under section 202 will be used solely to pay the salaries of child development specialists who are (A) employed by the State, and (B) assigned to perform duties in connection with the elementary schools of local educational agencies and nonprofit school agencies, pursuant to arrangements between the State educational agency and the local educational agency or nonprofit school agency which specify the respective responsibilities of such agencies for the direction and supervision of such specialists in the performance of their duties.

(3) provides that child development specialists will provide services only for children in the third grade or below, and that such specialists will perform only duties appropriate for child development specialists,

(4) provides that no child development specialist shall be assigned to serve more than three hundred and fifty children,

(5) provides that the salary paid child development specialists will be commensurate with the salary levels of comparable professional personnel in the State,

(6) provides that, in assigning child development specialists, they shall be equitably divided between local educational agencies and nonprofit school agencies, under standards prescribed by the Commissioner,

(7) sets forth such fiscal control and fund accounting procedures as may be necessary to assure proper disbursement of, and accounting for, Federal funds paid to the State (including any such funds paid by the State to any other public agency) under this title, and

(8) provides for making such reports, in such form and containing such information, as the Commissioner may reasonably require to carry out his functions under this title, and for keeping such records and for affording such access thereto as the Commissioner may find necessary to assure the correctness and verification of such reports.

(b) The Commissioner shall approve any State plan and any modification thereof which complies with the provisions of subsection (a).

PAYMENTS TO STATES

SEC. 204. From the amounts allotted to each State under section 202 the Commissioner shall pay to that State an amount equal to the amount expended by the State in carrying out its State plan. Such payments may be made in installments, and in advance or by way of reimbursement, with necessary adjustments on account of overpayments or underpayments.

ADMINISTRATION OF STATE PLANS

SEC. 205. (a) The Commission shall not finally disapprove any State plan submitted under this title, or any modification thereof, without first affording the State agency administering the plan reasonable notice and opportunity for a hearing.

(b) Whenever the Commissioner, after reasonable notice and opportunity for hearing to such State agency, finds—

(1) that the State plan has been so changed that it no longer complies with the provisions of section 203(a), or

(2) that in the administration of the plan there is a failure to comply substantially with any such provisions,

the Commissioner shall notify such State agency that the State will not be regarded as eligible to participate in the program under this title until he is satisfied that there is no longer any such failure to comply.

JUDICIAL REVIEW

SEC. 206. (a) If any State dissatisfied with the Commissioner's final action with respect to the approval of its State plan submitted under section 203(a) or with his final action under section 205(b), such State may, within sixty days after notice of such action, file with the United States court of appeals for the circuit in which such State is located a petition for review of that action. A copy of the petition shall be forthwith transmitted by the clerk of the court to the Commissioner. The Commissioner thereupon shall file in the court the record of the proceedings on which he based his action, as provided in section 2112 of title 28, United States Code.

(b) The findings of fact by the Commissioner, if supported by substantial evidence, shall be conclusive; but the court, for good cause shown, may remand the case to the Commissioner to take further evidence, and the Commissioner may thereupon make new or modified findings of fact and may modify his previous action, and shall certify to the court the record of the further proceedings. Such new or modified findings of fact shall likewise be conclusive if supported by substantial evidence.

(c) The court shall have jurisdiction to affirm the action of the Commissioner or to set it aside, in whole or in part. The judgment of the court shall be subject to review by the Supreme Court of the United States upon certiorari or certification as provided in section 1254 of title 28, United States Code.

SEC. 207. For the purpose of carrying out the provisions of this title there is authorized to be appropriated for the fiscal year ending June 30, 1967, $3,750,000; for the fiscal year ending June 30, 1968, $22,500,000; for the fiscal year ending June 30, 1969, $60,000,000; and for the fiscal year ending June 30, 1970, $97,500,000.

TITLE III—TRAINING

TRAINING OF CHILD DEVELOPMENT SPECIALISTS

SEC. 301. (a) During the fiscal year ending June 30, 1966, and each of the four succeeding fiscal years, the Commissioner is authorized to award fellowships to be used for study at institutions of higher education which are approved by the Commissioner under subsection (b). The number of such fellowships awarded under this subsection in a fiscal year shall not exceed two thousand five hundred in the fiscal year ending June 30, 1966; five thousand in the fiscal year ending June 30, 1967, and the fiscal year ending June 30, 1968; seven thousand five hundred in the fiscal year ending June 30, 1969; and ten thousand in the fiscal year ending June 30, 1970.

In the award of fellowships under this title the Commissioner shall make arrangements to assure to the maximum extent practicable that those applicants will be given priority—

(i) whose undergraduate study is most closely related to the subject field for which the fellowship is to be provided,

(ii) who have pursued a course of graduate study at an institution of higher education, and

(iii) who have established a good record of academic achievement in undergraduate or graduate study.

(b) In addition to the number of fellowships authorized to be awarded by subsection (a) of this section, the Commissioner is authorized to award fellowships equal to the number previously awarded during any fiscal year under this section but vacated prior to the end of the period for which they were awarded; except that each fellowship awarded under this subsection shall be for such period of study, not in excess of the remainder of the period for which the fellowship which it replaces was awarded, as the Commissioner may determine.

(c) Fellowships awarded pursuant to this title shall be only for such terms of graduate study as will qualify the awardee as a child development specialist but in no event shall exceed two academic years.

(d) The Commissioner shall approve a program for purposes of this section only upon application, and only upon his finding that—

(1) the program provides instruction and training in subject matter areas the mastering of which is necessary for a person to be qualified to act as a child development specialist. Such qualifications shall include, but not be limited to, competence in child growth and development, personality theories, behavior problems of children, learning disorders—their prevention and remediation, parent counseling and the utilization of community resources. The explicit goal of such programs shall be to establish a high level of competence in persons to help the school personnel to become more effective in the management and education of all children in the school, and especially to be a major support and resource to the teacher and to the parent in the education of children with beginning, moderate, or serious learning, behavior, or emotional problems,

(2) the program is provided by an institution of higher education exclusively for persons who have received a baccalaureate degree, or its equivalent,

(3) only persons who have indicated a serious intent to pursue a career as a child development specialist will be accepted for study in the program.

(e) The Commissioner shall pay to persons awarded fellowships under this title such stipends (including such allowances for subsistence and other expenses for such fellowship holders and their dependents) as he may determine to be consistent with prevailing practices under comparable federally supported programs. In addition to the amounts paid to persons pursuant to the preceding sentence, the Commissioner shall pay to the institution of higher education at which such person is pursuing his course of study an amount equivalent to $2,500 per academic year, less any amount charged such person for tuition and nonrefundable fees and deposits.

(f) A person awarded a fellowship under the provisions of this title shall continue to receive the payments provided for in subsection (c) only during such periods as the institution of higher education finds that the student is maintaining satisfactory proficiency and devoting major time and effort to his program of instruction, and is not engaging in gainful employment other than such part-time employment in teaching, research, or similar activities related to his training as has been approved by the Commissioner.

SPECIAL TRAINING FOR SCHOOL AND COMMUNITY PERSONNEL IN THE USE OF CHILD DEVELOPMENT SPECIALISTS

SEC. 302. The Commissioner shall make grants to State educational agencies for paying the cost of arrangements made by such agencies with institutions of higher education for conducting training, demonstrations, and short-term workships for the purpose of familiarizing teachers, principals, and other personnel in the elementary schools of local educational agencies and nonprofit school agencies and community agencies with the ocordinated and effective utilization of child development specialists to prevent learning and behavior disorders in elementary school children.

SEC. 303. (a) For the purpose of carrying out the provisions of section 302 of this title there is authorized to be appropriated for the fiscal year ending June 30, 1966, $500,000, for the fiscal year ending June 30, 1967, $500,000, for the fiscal year ending June 30, 1968, $500,000, for the fiscal year ending June 30, 1969, $500,000, and for the fiscal year ending June 30, 1970, $500,000.

(b) For the purpose of carrying out the provisions of section 301 of this title there is authorized to be appropriated for the fiscal year ending June 30, 1966, $18,750,000, for the fiscal year ending June 30, 1967, $56,250,000, for the fiscal year ending June 30, 1968, $75,000,000, for the fiscal year ending June 30, 1969, $93,750,000, and for the fiscal year ending June 30, 1970, $131,250,000.

Mr. PERKINS. A program of this type is long overdue, and I think you are to be complimented for sponsoring such a worthy program. We are delighted to hear from you on this occasion. Go ahead.

STATEMENT OF HON. SAM M. GIBBONS, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF FLORIDA

Mr. GIBBONS. Thank you, Mr. Perkins, and let me say thanks to the committee also. I appreciate your calling a hearing at this busy stage of Congress. I know that all of us have many things to do and I shall attempt to be brief.

You have given an accurate summary, Mr. Perkins, of the outline of this bill and of its aims and objectives. I think that before I start a detailed discussion of it, though, I ought to give credit where credit is due. This is not an original idea. I thought it was original at one time, but the more I researched it, the more I found that many other people had the idea. Perhaps the only distinction that I have is bringing it to this Congress in the form of a piece of legislation.

About a year ago, because of experiences that I had stretching back into my State legislative career, working with young people who found themselves in trouble, either in mental institutions, or in criminal institutions, or in our educational institutions, it had become apparent to me that all of these problems were semirelated and that there was a need for true prevention of the problem, that most of the attacks that we had launched on these social ills really began after a catastrophe had occurred, not a catastrophe like a flood, but a catastrophe like an imprisonment or spinning out of the school system and becoming a dropout, a delinquent, perhaps a criminal, then over into the hardened criminal phase or over into the mental institutions.

I started working very hard on this last year, and of course used all the facilities that are available to Members of Congress and first went to the Library of Congress, where I was very fortunate to have provided for my help the services of Martha Gross. Miss Gross is a research assistant in education. She is a very fine person who has worked very hard in helping develop part of the background and part of the backup for this legislation.

She called my attention to the writing of a Dr. Eli Bower. Dr. Bower, I believe, is in the room or should be in the room by now. He is back here. I had never met him before or never heard of him before. He came to us from the State of California. He now works for the National Institute of Mental Health, and Miss Gross put me in touch with Dr. Bower, and I called him in to help me.

Then, after many conferences with Dr. Bower and with people that he called in to help on this problem, I secured the services of George Skinner, our legislative assistant in the Legislative Reference Bureau, and of course your own counsel, Jack Reed, and we finally put together a piece of legislation which I introduced as H.R. 11322. Throughout the entire development phase of this program I was assisted by Hector Alcalde, my very able assistant who has had a great amount of practical experience in the field of education.

I think we should talk just a little about the need. This committee is well aware of the need for this type of legislation. You know about the dropouts. You have fought for the excellent legislation that has been passed this year, to help the deprived child. We recognize in this legislation that the deprived child does not only come from the deprived home, financially speaking, but there are deprived children in all income groups.

In truth and in fact we find that this problem of failing to learn properly, having educational handicaps, emotional handicaps, that lead on to this cycle of dropout, spinout of society, failure, criminal, and psychopathic behavior, is something that is common to almost all segments of society.

As I said in the beginning, this program is a truly preventive program. I like to draw the analogy that I think I stole from Dr. Bower, that if you were going to prevent a flood, Mr. Perkins, on the Ohio River down around Louisville, you wouldn't build dikes and dams right at Louisville first. You would use a scientific approach and go back up to the tributaries or up into the headwaters, up in the hills and up in the valleys, and you would start your flood prevention work there.

That is what this type of legislation does. This attempts to give to every child throughout America a good start, as much as we can with any piece of legislation.

As I said in the beginning, this covers all children and their families. It attempts to reach them when they are first reachable from a public viewpoint in the elementary and preschool era. This must be a national program and should be wholly national supported so that it will fulfill its national objective.

I have watched so many programs that become watered down at the State and local level that the objective of the program is not fully met, and because this is a national problem it needs a national solution, and I think that the National Government should bear the entire cost and the responsibility for it.

Of course, we are going to use local and State governments to administer the program, but the impetus, and the thrust, and the follow-through, because of the great mobility of our population, because of the great national impact that this problem has upon our Nation, should be a Federal responsibility that we shoulder and accept and that we follow through on.

This program of providing child development specialists, a good start operation, as I call it, is designed to keep the child within the school system, the public or private school system, as it may be, to correct his problems before they become acute and to keep him in school and in society rather than to keep him out, and to try to correct him and then bring him back in.

For all practical purposes it is still going to happen that some of these people are completely withdrawn from the school system before we can get them back in, but the system in the past has been, when a serious behavior problem developed, to pull the child from his peer group and to send him out somewhere else to be corrected and then bring him back in.

I referred in the beginning to my State legislative experience. I found that, while this is better than nothing, it is not the best solution for our problem. The best solution for our problem is to prevent the problem before it becomes acute, to detect it early, to keep the child in his peer group where he can be properly corrected, and to help him adjust.

This program as envisioned under H.R. 11322, would be a service to all children who are of preschool age and who are in the first three grades of elementary school. It would be a service not only to the child, but to his family, and to the school, and to the community. This child development specialist that we provide for in this act would be much more accessible than is the average school personnel to the home, and the family, and to the community.

For that reason I chose not to place this child development specialist completely within the school system, believing that one of the methods of prevention will be to work with the family and knowing that many families are not available during the normal school hours because they are, like we, tied down on the business that keeps us all so active. I provide and hope that this child development specialist will be available in the afternoons, in the evenings, to work with children, with their families, and with small groups of parents who feel that they have problems with the development of their children.

This child development specialist that is provided for in this act will not be a case worker in the sense that he will accumulate a lot of cases, or keep a lot of files, or even do a lot of research work, but this child development specialist would be the head of a team that is composed of the teacher and perhaps teacher aids and other people who can be supplied by the school system and to the school system, and while the child development specialist will not be entirely a leader, the child development specialist will do case work and will get her hands or his hands dirty, as the case may be.

I think this is what we really mean by the Great Society. If this bill is enacted and if this program is successful, it will be a solving of our problems before they become acute, a saving of personnel. It will not require the building of additional jails or mental institutions, or tighter criminal laws or better enforcement of laws, but will build for us people who can adjust to their surroundings and to their society and who can work within that society to expand opportunities for all of us.

I will cover briefly the bill.

On the first page is a declaration of policy, and in this declaration of policy Congress finds that educational underachievement and failure to achieve an education is a cause of school dropout, disruptive behavior, delinquency, crime, and serious emotional handicap, and we find it is of national significance and it will require a national program to help solve that problem.

We also find that early identification and prevention should be instituted at an early level in the school systems, that it should touch all families and all schools, and should attempt to develop America's human resources.

In title I of the act I define an elementary school as being not only the first three grades for the purpose of this act, but also preschool. Not every State has uniform laws on preschool or anywhere near uniform laws, but preschools are beginning to develop in the United States, and as they are developed, this act would become effective in the public and private preschools throughout the United States. Of course, I would define in title I a child development specialist. Also in title I, because his is a new program and will require the pulling together of many agencies that in the past have worked alongside each other, but now will work closer together, I provide for an advisory council to be appointed by the commissioner. I also provide in title I that the States shall administer and shall carry out this program under Federal leadership.

In title II, I describe the use of a specialist. I allocate the dollars. The dollars roughly are divided upon the number of people within the States who are within the age group of preschool and elementary schools. I provide the pay scale for the child development specialist. That pay scale of necessity cannot be spelled out exactly in legislation. because it would vary from State to State and from area to area, but briefly I feel that the pay scale of a child development specialist should be somewhere between the highest pay of a teacher in that elementary school and just below the principal. I think that would put the child development specialist in the proper perspective to work with the teachers, and to work with the principal, and to work with the community system.

It would also provide encouragement so that our better teachers and our more talented teachers would aspire to become this type of specialist. I provide that there shall be in the ultimate at least one specialist for every 350 children. The question arises as to whether 350 disturbed children or 350 children. This is one specialist per 350 run-of-the-mill children, just on a head count. I selected 350 because after having studied the situation, I think that that would be about the normal load that we could give intensive services to and be effective.

Obviously not all of those 350 are going to need any service at all. Roughly 7 to 8 to maybe as high as 15 percent of that 350 will need some type of service, but in some cases the service to that child could last for a period of an hour or 2 hours and you would have a cure or you would have a prevention. In some cases where the problem is more severe, it may take all the way through the third grade. And of course I hate to say it, but in some cases we are not going to be successful.

Mr. PERKINS. In other words, you are providing more child specialists or additional child specialists in your larger school systems?

Mr. GIBBONS. We provide them 1 for every 350 children that you count.

Mr. PERKINS. Do you count up the first three grades?

Mr. GIBBONS. In the preschool and first three grades we would have 1 for every 350. That means in large schools you may have two or three of them working there very intensively.

Mr. PERKINS. How are you going to count the children 3 or 4 years of age?

Mr. GIBBONS. There would have to be some kind of private schools, there would have to be some kind of preschools for administrative purposes, and that would be done by the local educational agency and the State educational agency that would have some guidance and direction over how these people are placed and allocated.

Mr. BRADEMAS. May I ask a question, Mr. Gibbons——

Mr. GIBBONS. Yes, sir.

Mr. BRADEMAS (continuing). On just that point. I do not know to what extent we have developed preschool programs in the United States, and I simply raise the question of whether the passage of this legislation might well encourage the development of preschool programs in those communities where they are nonexistent. Just as Project Head Start programs under the poverty program, to which you have given such great leadership, stimulated programs in poverty areas, would this legislation stimulate the development of preschool programs outside poverty areas?

Mr. GIBBONS. I think you are right. There seems to be a strong development now of the preschool. There is no doubt that Head Start this summer gave a shot in the arm to preschools like nothing I have ever seen. I can remember in my own State that preschools were looked down upon by the State legislature, were frowned upon, and funds were never appropriated. In fact, as recently as 10 years ago the legislature was trying to cut out preschools. I would now say that even the most regressive of the members of the legislature would probably support preschools, and I think that this program will continue to support preschools because it will draw attention to the fact that these problems can be prevented and can be corrected if they are caught early enough in one's life.

Mr. BRADEMAS. Just financially speaking, isn't it true that if the formula for assistance is based upon the number of children in preschool as well as in the first three grades of elementary school, then communities that have no preschool programs will be disadvantaged if they don't develop such programs?

Mr. GIBBONS. That is right. They will tend to develop them. They will not only be disadvantaged, but the whole country will be disadvantaged.

I am convinced that this is a program that will work. Really we have waited too long to fight delinquency. We have waited too long to fight criminal tendencies that develop. When you stop to think that we spend $26 billion a year, so the FBI says, on crime in the United States, and that is only the direct cost of crime—that is not the cost to the victim, but just cost of law enforcement that is connected with crime—you realize what a staggering burden our society is carrying. If by this program we can only reduce that by a small percentage, we can more than pay for this in the reduction of crime alone, and this

program will not only go the reduction of crime, although I must admit that is what first intrigued me by it; this program will develop better learning habits, will develop more successful students and develop more successful people, and will prevent, in my opinion, some of the severe mental aberrations that occur that fill our hospitals and our institutions.

Mr. SCHEUER. Will the witness yield?

Mr. GIBBONS. Yes, sir.

Mr. SCHEUER. Looking at it from the most crass point of view of the balance sheet and the income statement, won't this program also pay for itself? Not only from the point of view of decreasing crime, but also, to the extent that it enables individuals who otherwise would be dependent to become self-sufficient, productive members of society; from the point of view of their taxpayment to the Federal Treasury alone, won't this program pay for itself many times over?

Mr. GIBBONS. There is no doubt in my mind that it will, and I hate to oversell this program, but I think you can tell by the way I talk that I am highly enthused about it. This title II, also provides that the payment for these child development specialists and the administration of the programs at a State level shall be 100 percent federally financed.

I had a purpose in mind when I provided for the 100 percent Federal financing. I have seen the guidance counselors, to use an example, badly misused in our school system because the State felt that they belonged to them and that they should use them however they pleased, and I didn't want this child development specialist to become a supernumerary teacher or a substitute teacher or spend his or her time providing for the Halloween program or for the PTA program, or something of that sort. I wanted this person to work with children, to work with families, and to work intensively with the community, and with the school, and not to be sidetracked into some of these other worthwhile operations, but ones that did not fulfill what I feel is a Federal need and a Federal responsibility.

This bill provides that the Commissioner can fail to reimburse the States if the Commissioner finds that the people are not carrying out what I feel is the need for leadership in this field.

Title III of the bill provides for training, and I think before I talk about that we should discuss briefly how this program will be phased in.

First of all, there is no such thing as a child development specialist in being today. There may be a few of them in the United States, but they don't walk around with that title on them, and it is going to take some time to train and to integrate these people into our school systems and into society as a whole. I estimate that it will take about 10 years to get this program so that it is 100 percent staffed in all the schools of the United States.

In that time we will have tooled up to train child development specialists in our colleges and we will be turning them out at a pretty rapid rate in 10 years from now, so I thought I would explain in the training cycle how this works.

I provide that we would start next year financing 2,500 fellowships and that in 1967 we would finance 7,500 fellowships; in 1968, 10,000 and in 1969, 12,500; and in 1970 we would have 17,500 fellowships.

In 1971 we would have 20,000, and in 1972 we would have 20,000; and in 1973, we would have 15,000; and by 1974 and 1975, we would have the vacancies, the slots, all filled, and we could begin to cut back on the number of fellowships so that by keeping about 5,000 fellowships, new fellowships, a year going out, we could keep up with the need. We would have our whole preschool and elementary schools staffed up with 1 for every 350 students, and by that time the attrition could probably be taken care of by training about 5,000 a year. The 5,000 a year in the 10th year is only an estimate. No one can tell what the need will be by that time. We can count the prospective number of children. We know we will need about 55,000 specialists by that time, but the attrition rate within those 55,000 is hard to estimate. I estimate 5,000 a year would maintain the program for the foreseeable future after 1975.

By that time, of course, the salaries for these specialists would have climbed, too. Before I go into that, let me say that I envision that the Commissioner upon application would designate schools within States to train or present courses so that in 2 years of postgraduate education, you could become a child development specialist.

The bill is pretty specific. I think it follows ideas that we have used in the Committee on Higher Education about the presentation of fellowships and it is a pretty standard bill as far as that is concerned.

Let me get over into the salaries for these specialists. We figure that in the first year there will be a need for—perhaps we can confine ourselves to those in society who can qualify—about 500 specialists, and then the rate of specialists grows at a progressive rate as the graduates come out of their 2-year work in colleges until by the year 1975 we have 55,000 specialists already trained. Now, there will have been some attrition in that, but by that time that should match the number of children that the Census Bureau tells me we will have in the first three grades and perhaps in the preschools.

Mr. BRADEMAS. What was that figure?

Mr. GIBBONS. 55,500 specialists by 1975. The growth of preschools could distort that figure some, but that would be the Census Bureau's estimate as to the number of children in that age group by 1975.

Mr. BRADEMAS. At this point, would you tell us whether or not there is any overlapping with guidance and counseling people in this particular area?

Mr. GIBBONS. I don't believe there is any overlapping. We have only recently extended guidance and counseling into the elementary schools. I have talked with guidance and counseling people. They support very strongly this program. This program cuts off at the end of the third year and at that time the guidance and counseling people would take over. By that time I hope that most of the acute problems will have been prevented or will have been corrected and the guidance counselor in the last 3 years of elementary school will have a more controllable workload.

It has been my observation of the guidance and counseling personnel that we now have in senior and secondary schools, in the secondary school system, that they are so burdened with such a heavy workload that they really can't do effectively the job that they have to do, but their mission is not exactly the same as this mission. The guidance and counseling personnel are an integral part of the school system.

These people supply services to the pupil, and to the family, and to the community that I don't believe is within the legislative intent of the guidance and counseling personnel that we now have in the senior high schools.

Anyway, by the year 1975 this program would grow from the fiscal year 1966, or its first year from $19,250,000 to $516 million. Some people will gasp and say that is a heck of a cost, but when you compare the $516 million to the cost that I mentioned before, we spend on crime alone, the savings in this program are extremely large. We are going to gain from early prevention and from early detection a good start for all of the children in the United States. We are going to help insure, I think, as far as the Federal Government can now provide leadership, an opportunity for full participation in what we hope will be the Great Society.

That is the outline and the background of the bill, and if there are any further questions, I will be glad to try to answer them. There are a number of very talented people here today to speak on this bill. I have mentioned Dr. Bower over here before, and I think he is one of your next witnesses, but I will be glad to answer any questions you may have.

Mr. PERKINS. Thank you very much, Sam.

Mr. MEEDS. Mr. Chairman, I have a question.

Mr. GIBBONS Yes, sir.

Mr. MEEDS. Sam, with respect to section 101 and (a) under that, a strict interpretation of this would seem to me that under this, and then when you define what grants will be allowed under section 201 on page 8, that any State which did not have a compulsory kindergarten or a preschool program would be precluded from grants.

Mr. GIBBONS. That is not my intention. It may be the way that the language works out, but my intention is that no one would be excluded from these grants if you didn't have a compulsory kindergarten.

Mr. MEEDS. You say, "which provides elementary education in any or all of the grades below grade 4, including education below grade 1, as determined by State law," in defining elementary school. And then on page 8, section 201——

Mr. GIBBONS. I feel that those two sections when read together mean that States can apply for grants to pay child development specialists in public and private nonprofit schools from any grade earlier than the end of the third grade.

Mr. MEEDS. So it is your intent then that, if any of the grades below this level are public or if it does provide any of them, they will be allowed allotments under section 201?

Mr. GIBBONS. Yes, sir, that is right.

Mr. SCHEUER. There would, however, be a financial penalty built in, would there not, Sam, that for a school system that did not have the kindergarten or preschool, they would have substantially fewer children in their formula and therefore would get a smaller percentage of the funds——

Mr. GIBBONS. That is right.

Mr. SCHEUER (continuing). That these children if they were in the school would bear to all of the children?

Mr. GIBBONS. That backs up what Mr. Brademas says. This would encourage the development of preschools. Although that is not the purpose of the bill, it will be one of its ancillary effects.

Mr. SCHEUER. May I ask, along the lines of Lloyd Meeds' question, what was the educational reason for which you cut off the activities of the child development specialist after the third grade?

Mr. GIBBONS. I felt that by that time if we had thoroughly done the job, we would have prevented and have corrected many of the most serious problems, and I also felt that it was necessary here, particularly in the first 10 years of this program while we are trying to get these specialists trained and we are trying to get them dispersed to the schools, to make sure that they weren't thrown in where they wouldn't do the most good.

Now, 7 or 8 years from now a reappraisal of this program may say that we have to go further or perhaps not as far, but I felt, based upon my conversations and my conferences with many people, that this was the area and the age group in which we should work intensively. This is where the national leadership and the national push should be put initially.

Mr. SCHEUER. Supposing a teacher were working with a particular child who had a learning problem or an emotional problem that interfered with his learning process and she felt deeply that she would like to carry on with this child in the fourth grade, perhaps even the fifth grade, that the particular circumstances surrounding a particular child's problem militated for continued help and that the problem really could be overcome with a little added help. Would there be any discretion in that child development specialist to carry on with a particular individual whom she felt great things could be accomplished with a little further help in the fourth or perhaps the fifth grade?

Mr. GIBBONS. You have asked me a difficult question there. I would say that the milk of human kindness would want me to do that and would want me to allow the specialist to do that, but in order to bring the focus back on this prevention and correction, I think it is going to have to be done intensively there.

Mr. SCHEUER. I don't want to push the point, and I would agree that the intensive application of this service should be in the early years, and I think the total validity of the Head Start program in the short period that we have been working with it proves that.

Mr. BRADEMAS. Will the gentleman yield?

Mr. SCHEUER. Yes.

Mr. BRADEMAS. I must go to another committee meeting, and I want only to take this opportunity to commend Mr. Gibbons for having introduced this legislation. I am glad to be a cosponsor of it with him, and I think it is just one more testimony to the outstanding leadership he is giving in Congress as a member of the Education and Labor Committee. Thank you.

Mr. PERKINS. Any further questions.

Mr. SCHEUER. No. I would like to commend our colleague for having introduced this monumentally significant bill, and I would take exception to his disclaimer of nonoriginality I suppose when it comes to the field of literature that the works of Boccaccio, and Shakespeare, and the Bible were written for all time, and everything after that was

just a matter of refinement, and so, too, in the field of education, but our colleague, Mr. Gibbons of Florida, did take the initiative to research the writing that has been done in this field and to have legislation drafted and to begin it on its trip through the legislative pipeline, and this is typical of the outstanding leadership that he has shown on the poverty program and other measures. I think I can speak for Lloyd Meeds and myself and other freshman members of this committee that we are greatly heartened that a member who is only in his second term has shown such outstanding vision and leadership and it gives us great hope of productive years that lie ahead for us.

Mr. GIBBONS. I thank the gentlemen for his kind words.

Mr. PERKINS. Mr. Meeds.

Mr. MEEDS. Mr. Chairman, I have one other question, if I may.

Mr. GIBBONS. Yes, sir.

Mr. MEEDS. I, too, would like to commend the gentleman from Florida for his introduction of this legislation and ask him another question. Sam, I notice that you provide in this bill that under the State plan arrangements must be made through the local educational agencies for both public and private schools. Do you envision any church-state problem with this arrangement?

Mr. GIBBONS. No, I don't. This follows a formula or an attack that I think this subcommittee has launched successfully against that particular problem. This is exclusively a service to the child and his family, and I think it escapes wholly the problem of supporting parochial education.

Mr. SCHEUER. Will my colleague yield on this point?

Mr. MEEDS. Very well.

Mr. SCHEUER. There was a colloquy on the floor of the House during the debate on the primary and secondary educational bill on the shared-time program between Congressman Frank Thompson and the floor leader in which exactly this question was asked, and the church-state problem at that time was in the forefront of everybody's mind and the colloquy made the legislative history that where there was a child that was in distress and had a problem of physical disability, or mental disability, or learning, or deafness, or blindness, or a learning problem, a child that has a unusual need for a special service, this was a compassionate case where the service could be provided for the private school child in the locus of the private school, and I think the service that you are providing through the child development specialist to a child with a partciular compassionate need would be completely on all fours with the legislative history and the intent of Congress in the primary and secondary education bill.

Mr. GIBBONS. Yes. I regret there will probably be some people that won't even go to school, and I wish they could get the service of this. I was amazed one time to visit a first offenders' institution in my State where I found young people who were learning to read and write. Even though we had compulsory education in Florida ever since I could remember, and, oh, I guess for 50 or 75 years, there are still children that don't go to any school. They are really freaks in society, but the school is a vehicle here not so much for formal education, but for a place in which to discover the problem and to render the service very similar to the type of service that we render through the Public Health Service. This would be analogous to that.

Mr. MEEDS. As a matter of fact, under your bill wouldn't the specialist be subject to working with the Public Health Service, and the welfare groups, and all the other agencies of government in the area?

Mr. GIBBONS. Yes; there are times in which a child will have a disorder that may be connected with some physical problem, deafness, blindness. I was sorry to learn that there were so many disadvantaged children in my own community when I got the reports in from Operation Head Start this summer. A rough screening of those people, of about a thousand students, showed that about 15 percent of them had serious emotional problems, that there were three or four active cases of it.

(*b*) That there was a pretty good percentage of deafness that would seriously affect the child's ability to learn and to be a successful member of society, and, also, cases of failing eyesight that had not been detected by the parents.

These were children whose parents had been interested enough in them to at least get them up and get them into the Head Start program so they weren't completely abandoned children, so all kinds of problems, brain damage problems and other problems, will be discovered and will be worked with by this development specialist.

Mr. SCHEUER. Mr. Gibbons, where a child guidance specialist comes across a child where she suspects a deafness problem, or she suspects a sight problem, or where she suspects a teeth problem, where severe teeth problems can also interfere with the child's general health and learning, where would the funds be forthcoming for that child to be sent to a hearing expert, or for an eye examination, or for extensive dental work in some of the States where we don't have an adequate school health program, and I hope that one of these days out of this committee will be coming an extensive school health program that I feel is desperately needed, but in the meantime where would the financial help come to solve a health, sight, or hearing problem that one of these specialists may uncover?

Mr. GIBBONS. I think you have pointed up a very real problem. We have a crippled children's law now that is federally supported. It is a State-Federal support program, and in some States it includes all of the disabilities that you have talked about.

In other places, orthopedic surgeons have found so much work to do with the bone and joint type of crippled child that that has used up all the funds. I think that there is a greater need for funding and perhaps for reworking of the crippled children's law, but it is my hope that many of these can be met from community resources. This person is a community resource, this child development specialist, and will help mobilize these forces within the community.

Perhaps Dr. Bower, when he testifies, will mention the pilot project that is working in Sumter, S.C., where they have begun to mobilize and to point up the need for developing these community services to this type of child.

I would ask consent, Mr. Chairman, to include at this point a formal statement that I shall submit concerning this program and to include some of the extremely encouraging letters that I have gotten about this program. It has been amazing to me that, while this program has only been talked about publicly for a couple of weeks, letters have come

from widely diverse parts of the United States supporting the program.

Mr. PERKINS. Without objection, it is so ordered.

(The statement and letters referred to appear on p. —.)

Mr. PERKINS. Any further questions?

Again, Mr. Gibbons, let me commend you.

Mr. GIBBONS. I thank the committee.

Mr. PERKINS. I wish to make this one observation, and I was reminded of it when Congressman Scheuer pointed up the fact of where we are going to get the funds to take care of some of these defects.

I know down home this year the county health department quoted some figures, and the figures I have in my office on Pike County alone, on the deafness that existed among the youngsters that were in school for the first time and the number of youngsters that needed glasses, those figures were just staggering to me. I am laboring under the impression that the Ways and Means Committee had a provision in the medicare bill that was enacted this past year making an allocation to the various States, but it was a mighty small allocation, where funds of that type could be utilized for expenditures on glasses and so forth to correct these serious eye defects, but I am hoping sooner or later, primarily through your leadership, Mr. Gibbons, that we can get around in the poverty program and put ample funds in that bill to make these corrections, and I cannot think of any greater need in the whole country.

Again let me thank you for your wonderful leadership in introducing legislation of this type.

Mr. GIBBONS. Thank you, Mr. Chairman.

Mr. PERKINS. We will do our best to see it through.

Thank you. I would like to insert in the record at this point letters received from Lawrence K. Frank, James L. Hymes, Jr., and Bernice H. Fleiss.

(Statements referred to follow:)

BELMONT, MASS., *October 14, 1965.*

Mr. CARL D. PERKINS,
U.S. House of Representatives,
General Subcommittee on Education,
Washington, D.C.

DEAR MR. PERKINS: Since I am unable to attend the hearings October 19 and 20 on the proposed Elementary and Pre-School Child Development Act, I should like to submit the following statement.

Since 1923 I have been continuously concerned with the advancement of the study of child growth and development and the various programs and agencies designed to further the health, education, welfare, and mental health of children and youth. Beginning in 1923 the Laura Spelman Rockefeller Memorial established a number of child research centers around the United States, provided fellowships for the training of personnel and also subsidized the establishment of preschool laboratories, known as nursery schools for observation and the training of teachers and of parent educators. For these purposes, and for the development of programs of parent education, the memorial appropriated some $7 or $8 million in the period 1923 to 1931.

When the memorial was consolidated with the Rockefeller Foundation, the General Education Board continued these subsidies to include infancy and adolescence, and likewise appropriated many millions in support of these programs.

The board recognized the importance of mental health and contributed generously to a number of commissions and exploratory programs designed to foster mental health in schools and to give teachers and administrators a greater awareness of and concern for the well-being and nonacademic needs of children and youth.

Over the past 40 years, therefore, there has been a cumulative enlargement of the institutions and the professional personnel in what is known as the field of child development. With this has come a growing recognition of the responsibilities of schools for the well-being of children as broadly conceived and interpreted by the different professions concerned with the health and welfare of the child beginning at birth and continuing through the second decade of life.

Recently it has become clear that the ever-growing expenditures for diagnosis and treatment of children and adolescents makes necessary the organization of what is now being called primary prevention, that is, systematic and intensive intervention in the preschool and early school years to protect the individual child from the recognized hazards and threats to his integrity and adequate functioning as an organism-personality.

The proposed act may therefore be regarded as the outcome of some 40 years of research, experimentation and of professional training and development. It merits full acceptance and approval as an extension of what has been thoroughly tested and widely but inadequately applied.

With the current efforts to establish agencies and programs for the preschool child, largely through the public school system, the need for child development specialists will become acute if these new programs are to be effective in furthering the well-being of these young children and especially in providing for the early recognition of their need for individualized care, treatment and reeducation together with the education of their parents.

It is especially important that these programs for the preschool child—and also the established school programs for the first three grades in elementary school—be alert to what has been called "the whole child" but who, in accordance with established academic traditions, is usually treated as if he were a disembodied mind requiring only academic instruction.

Especially commendable in the act is the provision of scholarships to train child development specialists with a broad orientation to the variety of handicaps and obstacles children face during these early years. The experience of 40 years ago, when child development was beginning to emerge, shows that an effective program requires trained personnel so that these scholarships give promise of a truly effective program in the years ahead.

May I therefore strongly endorse the proposed act as a genuine contribution to the conservation of our children and therefore an essential step in maintaining and advancing the integrity of the Nation. May I also express my own personal satisfaction in this proposal as a realization of some of the hopes and goals with which I undertook the pmomotion of child development through the Rockefeller Memorial in the 1920's.

Respectfully submitted.

LAWRENCE K. FRANK.

UNIVERSITY OF MARYLAND,
COLLEGE OF EDUCATION,
College Park, Md., October 15, 1965.

The Hon. CARL D. PERKINS,
Chairman, General Subcommittee on Education, Committee on Education and Labor, U.S. House of Representatives, Washington, D.C.

DEAR MR. PERKINS: I appreciate your letter of October 8 inviting me to express my views on H.R. 11322, the Elementary and Preschool Child Development Act at the hearings on October 19 and 20.

Unfortunately previous commitments make it impossible for me to be present at the hearings. I would be grateful, however, if it proves possible to include this letter as a part of the proceedings.

My professional experience over the past 30 years, largely with the preschool child and his family, has firmly convinced me of the wisdom of the general policy expressed in the proposed legislation. Sensitive understanding, early identification of difficulties, and help with beginning troubles during the child's early years of schooling can, I feel sure, lead to a significant lessening of dropouts, disruptive behavior, delinquency, crime, and emotional difficulties. I consider this to be one of the firmly established facts in the professions of education, psychology and social work.

Early schooling exists as a kind of DEW line—our educational "distant early warning" system. Problems are smaller at this time, they are more manageable at this time, they lend themselves better to remediation at this time. The

beginning years of school are for every child the first opportunity he has to be seen by eyes that are more objective than any of us as parents can bring to our own children. These years constitute, because of the age of the children and this objective opportunity, a prize time for building strengths and spotting and correcting beginning troubles.

I believe most teachers in the early grades of school are today aware of their potential opportunity. But teachers alone—burdened by large class size and by the multitude of their other responsibilities—cannot take full advantage of the chance that is theirs. The availability of well-trained child development specialists would make it possible for us as a society to capitalize on this potential chance that is there.

My one wish is that the bill could in some way give aid and impetus to schools to begin work with children even earlier than most now do. We still have very inadequate coverage of our 5-year-olds in public and private kindergartens. Research and experience make it quite clear that most 4-year-olds can benefit by good group living with trained teachers. Only very lucky and privileged children now have this opportunity. The fact, I think, is inescapable: The earlier the start, the more good can be done. I am delighted, therefore, that the bill includes preschool children and many references to "education below grade 1." I am not wise enough to offer a specific suggestion for improvement, but I call to the committee's attention the fact that, unfortunately, many States and local communities at this point have not yet found ways of offering programs for preschool children or for education below grade 1. The absence or paucity of local and State efforts may, therefore, weaken the achievement of what is stated in section 2 as national policy.

So far as I can tell, the other basic parts of the proposed bill seem very wise: the general plan for administration, the soundly broad outlines suggested for the training of child development specialists, and the proposed financing.

I am sorry that I cannot be present in person to express this support. The bill seems to me to represent a very significant step forward in strengthening school efforts, and in assuring more children a better start on their educational and community life.

Sincerely,

JAMES L. HYMES, Jr.,
Professor of Education, Director, University Nursery School-Kindergarten.

HUNTER COLLEGE IN THE BRONX,
OF THE CITY UNIVERSITY OF NEW YORK,
New York, N.Y., October 16, 1965.

HOUSE OF REPRESENTATIVES SUBCOMMITTEE ON EDUCATION,
House of Representatives,
Washington, D.C.

HONORABLE SIRS: Since I cannot appear this week to express my views on H.R. 11322, the Elementary and Preschool Child Development Act, I would like to put my reactions in writing.

Such a bill should certainly be supported, since a program of Federal assistance to elementary schools throughout the Nation to improve educational opportunities through provision for the services of child development specialists and the training of such elementary school personnel in the institutions of higher learning is desperately needed. Even where elementary schools already have such personnel, there are too few and their services are not being utilized most effectively.

In order for such child development specialists to have a greater impact on the elementary schools, however, they must be people who have had some experience in preschool and primary education. Many child development specialists have clinical and research experience with individual children and are unable to translate their findings to the larger group situations current in elementary schools. For this reason I would recommend that a specific provision be made for internships in the schools, with classes, to be part of the graduate study provided by the institutions of higher education.

I would also suggest that more cognizance be given to the prevention, not just the identification and treatment, of behavior disorders, emotional difficulties and learning problems. Since I believe that many of the problems arise because the curriculum demands in the early years are inappropriate for young children,

I think it is essential that early childhood education specialists as well as child development personnel be provided for the elementary schools. Children who are not experiencing a developmental curriculum often become the psychological dropouts as early as the first grade because they experience failure at the very beginning of their school careers.

Specifically, on page 10 of H.R. 11322, there should be included instruction and training in the methods of instruction in early childhood education, as well as the other qualifications listed. Thorough knowledge of the curriculum for preschool, kindergarten, and early primary grades is as essential as competence in child growth and development, personality theories, behavior problems and learning disorders. If such knowledge and experience were included, these child development experts would be better equipped to help the school personnel and to interpret the curriculum demands to the parents.

About half of the States do not have kindergartens; many are establishing them now, since the summer head start program this year. These are the very places with too few teachers trained in early childhood education and with no supervisors or administrators with a background in education for the early years. Last summer there were many head start programs where eighth grade teachers served as administrators. In such places young children were not given the materials, facilities, or curriculum appropriate for their age and level of development. We must prevent this happening in States that are introducing preschool and kindergarten programs. Child development specialists with a background in early childhood education can be of great help in establishing the appropriate curriculum for young children. They can assist the educational agencies of the States in promulgating standards for early childhood education as well.

I do hope that you will keep me informed on the progress of H.R. 11322 and will call upon me for any further expression of views.

Respectfully yours,

BERNICE H. FLEISS,
Associate Professor.

Mr. PERKINS. Our next witness is Dr. Eli Bower, consultant to the National Institute of Mental Health. Come around, Dr. Bower. We certainly appreciate your presence, and I know that you have a contribution to make to these hearings. Proceed any way that you wish. Do you have a prepared statement?

STATEMENT OF DR. ELI BOWER, CONSULTANT, NATIONAL INSTITUTE OF MENTAL HEALTH

Dr. BOWER. Well, some were up here.

Mr. PERKINS. All right. Go ahead. I want to listen to you.

Dr. BOWER. All right. Mr. Chairman and gentlemen, before Mr. Gibbons found me in the dusty files of the Library of Congress I had been chewing around this problem for a long time. I started out, unfortunately, in a residential school for emotionally disturbed delinquent children during the depression when it was difficult to find any other job, and I served 2 years there as a teacher and as a psychologist, and it became very difficult for me to go to bed at night and think about anything else but what I was going to do the next day with this group of 25 highly disturbed children, all of whom had been thrown out of school individually, and now I had them together as a group.

I spent the 2 years prior to the war with this one group. Some of them ran away and some of them got sent to other places, but I think it took me about that long for us to have a discussion in the class. It was impossible for these boys and girls to really learn or do anything other than what their impulses and what their problems directed them to do, and at that time I started to think about how easy it would have

been if somebody somewhere along the line had intercepted this kind of development and how difficult it was.

We made a followup study of some of the children that went through this institution, and we found—these were boys who had been in the Armed Forces—that more than 90 percent had been thrown out, that it was almost impossible to help them at the time that we got them.

After the war, I went to California and worked for a time with the California State Department of Education for 10 years, and then with the California Department of Mental Hygiene. This problem intrigued me. How could a society which was interested and concerned with the development of the human beings who are going to be in it prevent the development of a distorted nonfunctioning individual?

We knew that we couldn't do this by waiting until this maldevelopment had gone on for a long period of time, so that something had to be done at a more strategic and a more economical period.

I worked on this problem and was later successful in convincing the California State Legislature to support research on this particular problem, and I would like to tell you just a little about what we found. It is still pertinent, and I think it is now going on in several NIMH projects, some of the implementation of this material, and others which I would mention, and which I think Mr. Gibbons was able to tease out.

We were happy to bring some people who were working on research projects in this area, and Mr. Gibbons spent some time questioning them and getting the data out with which to put this bill together. This is a good example of the use of some of the funds and time that we put into some of our research studies at the National Institutes of Health, but I think it was very rewarding to the people who were able to come and to contribute what they were spending time finding out about, child growth and development, so that it could be put to some positive use by our society.

One of the things we tried to do in the research studies—and this was sponsored by the California State Legislature and there is a full report on it in this booklet which I understand is out of print, and I only have a few copies left. This was done in 1947, 1958, and 1959, but I just want to summarize for you the findings of the research studies because I think that the facts are very difficult to deal with in any other way than through a bill of this type. What we were trying to find out was is it possible for teachers to identify children who are going to be failures in school before the child has actually failed. Is it possible that teachers have information available to them which by putting the information together would give them a much clearer picture of what was going on, and this, of course, is very difficult to do because we have very little criteria on what the problem is. We know that some children irritate teachers and some teachers irritate children. We started out by identifying a group of children who were being seen by child guidance clinics in the various cities and communities of the State of California, and we enlisted the help of approximately 50 school districts.

The children were all children who were problems as defined by the clinical people who were seeing them. They had all been referred because they could not conduct themselves in school. They could not learn in school, and they were major problems in the community.

We knew who these children were and the following year we asked the teachers in whose classes these children were to collect some very definitive information about each child in the class. We didn't say anything about the identification, about the child who we knew was a problem, but we asked the teachers to collect some information about all children in their class, which they already had. These were scores and achievement tests. These were other kinds of data, the rate of absence, a rating by the teacher, and what we tried to do was to find out which data, which information, would identify or would help select out the child that we already knew to be a problem, and we tried to use data that the teacher had, that the teacher had available, anyway, that she wasn't collecting because of our particular project.

We found, indeed, that the teacher could—that the data that the teacher had was highly indicative if put together in a way which made sense, and we reported that out to the State legislature in a little booklet called "A Process for Early Identification of Emotionally Disturbed Children," which has the report of that research and all the findings.

This in general is what we found: That first of all teachers are highly accurate in judging children's growth and development or lack of such growth and development; that is, they don't come up and it isn't necessary for them to make any kind of diagnosis in the sense that we think of diagnosis, but they have a wonderful backdrop of normal behavior of children from which they know that this child seemingly is not behaving the way he should or that child is not acting his age or this child overreacts to a very little frustration and something is wrong here, so that their identification is simply a screening one. It is not a diagnostic one. They are good screeners of children with problems.

And we also found that they know that the children who are quiet, who are withdrawn, are also problems, but sometimes they have so many aggressive ones that they like to get help for those before they pick on the ones who aren't bothering them as much.

Second of all, we know that teachers are motivated to seek help usually when a child has reached a very serious point in his behavior problem, when the teacher's anxiety rises and she feels that she can't take it anymore.

With the limited help that is available, we often find that the teachers seek help much too late, that they also feel that they can cope with some of these problems, and that is quite correct, they can, but there are many problems which begin to emerge which they can't see because sometimes the real serious problems overwhelm them.

I remember in my own experience in this case that it is always the real big problem that concerns me and sometimes I don't see some of the beginning roots of problems as a result.

There is also a lack of sufficient help so a teacher feels a little guilty when she asks, say, a psychologist, or social worker, or the principal for help. She feels it has to be an emergency in order for her to do this, and that is why Mr. Gibbons felt that if the ratio were maintained, the teachers would ask for help and there would not be the feeling they were taking away a person from a teacher who really had a serious problem to deal with. The teachers will ask for help if there is somebody around all the time, but if they have to go scurrying about

to get somebody to do this, very often they wait and wait and wait and then, of course, it is a little too late.

We also found something that you might suspect. We watched these children that we had identified go through the grade levels and we found that as they go through the grade levels the differences between the achievement levels of the children that we had identified as school problems and the others in the class, the differences in the achievement got greater and greater as you go up through the grades.

If you were to plot the differences, they go up like that, and of course the child becomes a dropout at a legal age, but the beginnings of this start way down here, and there are tables in this book which illustrate this for arithmetic achievement and reading achievement. Of course, in reading achievement, a child unable to cope with the school reading is like a fish out of water in school because this is the basic skill of our society today, and many of these children, of course, when they have school problems, are also reading problems.

We also found that about 10 percent of the school population could be, and this was checked out by a more intensive survey in Los Angeles County, considered to have moderate to severe emotional problems in the school setting. This is a sizable chunk.

This means that in a class of 30 there are at least 3 children who need some help, and if this is the same group that later emerges as the population of people with emotional problems in our society, I think we are in good shape, but if it is another group it may be more of a problem.

There are a lot of other findings that we made and one of them is this: We followed up the children that we had identified later on in their lives and compared them to children in the regular classes. We took the delinquency rates and the vehicle code violations in the Los Angeles County probation department and we found this. This is table 7 on page 10 of this report to the California State Legislature.

(Table 7 appears on p. 54.)

Dr. BOWER. On the delinquency rate—these we took as the date of first entry in the central juvenile index—the childen who had school problems, 46 percent; the others, 10 percent; and the differences as we calculated the differences could only be had in one out of a hundred chances that there would be a difference of this magnitude.

The table simply indicates that if you let the children go, there is no question in our minds that they become the major group with delinquency, vehicle code violations, and referrals to child guidance clinics.

For example, the percentage of referrals to child guidance clinics was 61 percent for the school problems and 1 percent for the others. These were children who were seen in the fourth grade and this is 5 years later.

Mr. MEEDS. Is there any objection to inserting this entire survey in the record at this point?

Mr. SCHEUER. How long is it?

Dr. BOWER. Oh, it is about 64 pages.

Mr. SCHEUER. I ask unanimous consent that the entire survey be made a part of the record after the witness's testimony is finished.

Mr. NEEDS (presiding). It is so ordered.

(The survey referred to appears on p. 33.)

Mr. SCHEUER. May I ask a question on this 10 percent figure of yours?

Dr. BOWER. Yes, sir.

Mr. SCHEUER. Did you find that that was a consistent figure throughout all income ranges, that it stood pretty much for the deprived children in the slum areas, also for the middle class areas, and also for Bel Air and Santa Monica?

Dr. BOWER. No, it varies, the 10 percent. We found, for example, a greater number of problems in the special education classes. This went up to 40 percent in some of the special education classes in Los Angeles County. We checked this out with a survey that was done in Los Angeles County a little later on by the department of mental hygiene, mental health service of Los Angeles County, 1960, and you find this is very common, that the problems in the early grades are not as great, as you get a smaller percentage of problems in kindergarten, and this, for example, was only 6.1 in the kindergarten.

Then it gets larger and larger. It reaches a peak in the 4th and 5th and 6th grades, and then it stays there sometimes, and of course it is reduced markedly in the high school as the kids drop out, so that you have in the 12th grade here only 2.8 percent of the children as problems, whereas in the 5th grade it is 11 percent.

Mr. SCHEUER. That is very interesting. Did you find that there was also a variation in any one grade across the State in those schools that were in affluent suburban school districts and in those schools that were in deteriorating slum districts that were serving mostly deprived families?

Dr. BOWER. One of the problems is that many schools don't want to recognize some of these difficulties that the children have and in the well-to-do areas it is not considered in good style to recognize that there are children who have difficulties. They have many more private resources for children in such areas and when a child has a problem, you don't hear about it. We have the same difficulty out in Montgomery County where my children go to school, that sometimes with parents who are affluent enough to know and to be able to use private resources, the school doesn't feel that it needs to deal with this problem, whereas some of the lower class schools in the lower socioeconomic areas have no choice, they have to.

I think it is interesting that we make education mandatory for all children, but we recognize the fact that not all children are prepared to profit by the fact that an education is a vital need in today's world and with this large number of children with problems that teachers face, it becomes almost impossible for them to carry out their job.

There was a survey by the NEA a number of years ago which showed that the greatest reason for teachers leaving their job was the fact that they had to cope with so many children who were having difficulty they didn't know what to do with it, and this is, I think, true in some areas in Los Angeles County as well as in the rest of the Nation.

I just want to mention one other thing and that is we did another study at the same time. We were interested in this problem of mental illness in relation to the school, whether such a thing could be prevented, and we identified a group of young at the time. The veterans

hospital in Palo Alto had a large group of young men who were in because of mental illness, and we found that these were boys—these were only boys—who had left high school within 5 years, so we decided to find out whether the high school at the time knew that these boys were headed for this kind of future and we made up a little sheet—at that time I was working with the California Department of Education—and we told the high schools we were going to do a followup of children who had graduated from high school to see what kind of vocational choices they had made in relation to the things they were doing in the high school, and we got a list of the high schools that these boys had attended and went to the school.

We would go through looking at the yearbook to find out if the boy had indeed been at this high school. We went in pairs so that one person who did the interviewing didn't know anything about who the individual was. He did the interviewing so that he wasn't biased in gathering data, and then we picked a control child, the next one in the book, so that we talked to the teachers, we talked to the counselors, and we talked to the principal. We talked to anybody who knew these boys when they were in the school.

These were 88 children altogether and they were reported in this study, "High school students who later became schizophrenic," and what we found was that the high school had indeed known there was something wrong with these boys when they were in school. The greatest ratings that we got between the control group and the group that ended up at the veterans' hospital was the fact that the teachers and counselors said they didn't know what it was, but something was definitely wrong with this child when he was in school.

None of them made any suggestion that the child was mentally ill, but they all said that, "Gee, if we had some help with these children, something could have been done." Many of them also added that they had come through the elementary school in this way, that their way of thinking was sometimes very bizarre. They were nonparticipating individuals by and large, and the stereotype of a person who was really alienated from life is very true of this group of students, but again the school didn't make any diagnosis of this condition. They just were sensitive to the fact that these were boys who were not growing up as they should.

Whether they could have done anything about it, I don't know, but I think many of these conditions go by and we sort of wave at them and say, "Well, it's nice to know this," and our problem is very much like a Welsh legend about how they used to identify psychiatric problems in the days before there were psychiatrists. They used to put the person who was under scrutiny in a locked room and they would stand him up in front of a sink. They would put a bucket under the faucet and they would turn on the faucet and let the water run into the bucket, and then they would give him a ladle and they would indicate to him or tell him to bail the water out of the bucket, and they would go out and close the door. They would watch him. If he continued to bail the bucket without making any attempt to turn the water off, they would consider him insane, and in many ways this is the kind of activity I think that we have gotten into, that we attempt valiantly and sometimes with all the resources we have to bail a bucket when the water pouring into that is almost as great,

even greater now, than we are able to cope with, and if we don't devise some way of at least reducing the flow, we are going to have many more problems on our hands.

We collect a lot of statistics at NIH, and one of the things that really throws us is the increase in the number of problems in children. We have had almost a 116 percent increase in children who have been hospitalized between the ages of 10 and 14 and the prediction is that this will go up. Whether this is a true increase or is simply an increase as a result of people being more concerned with the problem we don't know, but I think it is indicative of why we need to begin to put a lot more emphasis on the preventive aspects of the problem that we face one way or another later on in life.

I think I ought to give some of the people who are here, who have a great deal more to say, a chance to say it.

Mr. MEEDS. Thank you, Dr. Bower.

Do we have questions? Congressman Ford?

Mr. FORD. What about the available supply of people who could be referred to as child development specialists?

Dr. BOWER. You could say that some of the mental health people who are available today could be called child development specialists. On the other hand there is insufficient manpower, for example, to take care of the community mental health centers and all other types of facilities that are needed for people who need treatment, and there will always be a need for that.

The school, of course, attempts to hire school psychologists, school social workers, but these are in very short supply. We will never be able to deal with this problem on the basis of the present manpower. We are having greater and greater problems getting mental health personnel to man just treatment agencies, so I feel that unless there is some way of getting people in this field this type of a program would have no teeth to it.

Mr. FORD. Where are we most likely to draw these people from since there is a shortage, and we, obviously, to accomplish this program, will have to take them from something else?

Dr. BOWER. I think many of these will come from liberal arts schools, people interested in the field of child growth and development who are interested in working after 2 years. Many of them will come from the mental health fields. Many of them instead of going into psychology can go into this. This is actually a kind of activity, kind of training, which psychologists, social workers, and others would have, but at greater length. I think we will draw a great number of people interested in behavioral sciences, interested in community work, and so forth. I think it is an attractive program and if I could go back to school, it would be one I would be interested in taking.

Mr. FORD. Thank you.

Mr. MEEDS. Congressman Scheuer.

Mr. SCHEUER. Have you ever tried to put a dollar sign on the cost of treating one of these children at the early outcropping of the problem via the child development specialist as against the cost of treating the child when you have failed to close off the spigot and at that point you are trying to empty the bucket by the ladle and the child ends up a decade or so later in a veterans' institution?

Dr. BOWER. I know.

Mr. SCHEUER. We have many Members of Congress who, when analyzing a problem, also analyze the dollars and cents of it, and if we could show that this is really an economy measure to society, I think it would shore up the political understanding of the program. Do you have any idea of the cost of treating that child a decade too late when he ends up in a veterans' institution as opposed to the early part?

Dr. BOWER. It is extremely difficult to do. I think Rashi Fein, an economist at the University of North Carolina, who made a study for the Joint Commission on Mental Illness and Health and published a volume called "The Economics of Mental Illness," did work out some figures.

Of course, one of the problems is if you work with the child at the very beginning of a problem and you stop it, curtail, or reduce it, you don't really know what would have happened if you hadn't intervened at this point. You are only making a guess that this would not have happened if you hadn't really intervened at that point. We know the cost of any kind of human catastrophe is the fact, as you mentioned earlier, that these people have to be supported by society, that they do not contribute to society, and it requires a great number of caretakers, requires a great number of buildings, requires everything that a child requires to take care of him, if a human being grows up unable to function on his own, and I think just in economics and human conservation alone the bill is astronomical. We could get some of Dr. Fein's material and put it in the record if you felt that was necessary.

Mr. SCHEUER. I think that would be most interesting.

Dr. BOWER. And I would give this to Congressman Gibbons.

Mr. SCHEUER. You mentioned that the incidence of the problem seems to rise in the fourth, fifth, and sixth grades.

Dr. BOWER. Yes.

Mr. SCHEUER. Seemed to reach a crescendo there.

Dr. BOWER. Yes.

Mr. SCHEUER. Under this bill the service would stop at the end of the third grade. Is it your feeling that that graph would change with the interposition of the service in the first three grades and that if we had an adequate service, you would eliminate that curve in the fourth, fifth, and sixth grades?

In other words, do you feel that is the right place to put the service, in the first three grades, to eliminate the problem in the fourth, fifth, and sixth grades where, absent such a service, it seems to have its greatest impact, or do you have a feeling at some point in time we ought to think of extending the service to the fourth, fifth, and sixth grades where it seems necessary on a per pupil basis?

Dr. BOWER. I would say, yes, I would certainly look forward to the time when it could be extended to the fourth, fifth, and sixth grades, but I suspect Congressman Gibbons feels—and I think with some justification—that the reason the problems get larger in the fourth, fifth, and sixth grades is that is when the school as a system says, "OK, kids, you have been playing around long enough now. We are going to separate the men from the boys," there is a great deal more pressure put on children at that point and those children who can't make it begin to show the signs of the increased pressure by the school.

The primary school teacher is much more flexible in this area and they tend to see the children much more as a growing organism, but at sometime in that system there is a decision made that this is the point at which we are going to really begin to say, "You have to cut the mustard or else," and it usually takes place at the fourth grade, although I think it is moving down to the third grade as we put more and more pressure on the school. But it is the children who are having problems in the first few grades that swell the ranks up in the fourth, fifth, and sixth grades, and the notion is if we could help them at that time, we wouldn't get this peak in the middle grades. There are other peaks, too.

Junior high school has a peak which is very difficult to deal with.

Mr. SCHEUER. One last question. Have you found that physical problems—hearing, eyesight, perhaps teeth, other aspects of general health—undetected sometimes produce these learning problems that are very, very much more serious than they would have been had they been physical problems in the first place?

Dr. BOWER. Absolutely. There is no question. Of course, the child with a hearing problem has probably the greatest handicap that any child has physically. A child with a sight problem sometimes is more easily recognized than a child with a hearing problem. I suspect we are doing a lot better now than we did 10 years ago in developing special programs for children who are hard of hearing or deaf, or partially seeing or blind, or children with speech problems, but we are a long way from really coping with the problem on a national basis.

California has always had a very good program for such children, and I worked in the department for 10 years and found that we attempted to do everything we possibly could to help the district and the California State Legislature was very generous in their helping.

Mr. MEEDS. Congressman Gibbons, the author of the bill.

Mr. GIBBONS. I want to thank you, Dr. Bower, for all the contribution you have made helping me understand this problem and helping me draft this legislation. I want to bring together some thoughts and ideas right now, and perhaps you don't have them at the tip of your tongue and you could supply them for the committee.

First of all, there apparently is a heavy correlation between failure to learn and delinquency, and you point that out in your California figures. Is that right?

Dr. BOWER. Right.

Mr. GIBBONS. Have there been any other people in the scientific world who have pointed out this same type of correlation? Could you name some of them or perhaps give us a list of some of them?

Dr. BOWER. There are a whole number of studies relating reading disability to delinquency. There was a man named Fabian who reported a study in the American Journal of Psychiatry called "Reading Disability, an Index to Pathology," and he compiled a number of studies which have been pointed to the fact that the delinquent's major disability is the inability to read, and it is an interesting finding because the skill of reading is not a mechanical thing. It is the ability to get yourself through words above and out of your own environment, and some of these children live in such poor environments that the inability to read simply makes it impossible for them to imagine or to consider other alternatives and they are sort of tied down.

There was a book by James T. Farrell many years ago called "Studs Lonigan." You remember, the only boy who escaped, Danny O'Neill, was the boy who was able to read and who was interested in reading because he could use his imagination. He could get beyond his present problems into the future. You really can't conceptualize a future unless you can look at words and see what they mean in terms of time. So we have a whole list of studies which point the finger at the relationship between reading disability and all sorts of human pathology.

In this monograph there is a whole section on reading disability and its relation to other studies. I think some of the other witnesses can point to it, but there is a survey of all studies on reading made by one of the organizations which lists some of the new studies in the field.

The American Educational Research Association gets out every 5 years a compilation of such studies.

Mr. GIBBONS. Have other people in the scientific field done prediction work similar to the type of work you talk about in your California studies and could you tell me something about some of those?

Dr. BOWER. We have a very interesting study in Sumter, S.C., for example, which took some of this data and tried to put it into practice. In this study—I think Sumter is about 25,000—they attempted to identify all the 3-year-old children. They contacted the parents and asked them to come to a preschool checkup where their health problems were looked at, their physical problems, and parents were talked with, children were seen in the play area, and the group who did the screening came up with some evaluations of the children, what they needed and what the strong points were. They were trying to accentuate the positive in this, to tell parents how well they were doing, what kinds of things they could do better, but they did find, for example, there were a group of children who had speech problems that were going to be getting in their way, and they worked with the health department to set up a program.

The children were all seen and the parents were all seen at the children's age 3 and they found that there were certain ingredients that needed to be strengthened in order for these children to come to school ready to learn in school.

One of them was the area of speech, and they worked with the parents on this so that the parents could then work with their children. This was done on a voluntary basis, parents coming in and getting the instructions and then going home and using the material at home.

The other was they found a group of children who were having problems socializing, that they had no opportunity to play with others. Unfortunately we have lost the notion of how important play is for children and without play experience children find it very difficult to function in a social setting where they learn in groups.

If you let children alone they will play, but unfortunately sometimes we don't let them alone long enough for them to be able to do this. They found a group of children who were having some socialization difficulties and they worked with the recreation department to set up certain kinds of play groups in areas where this was needed. This is all preventive. They are not dealing with any particular problems. They are anticipating what some of the difficulties will be when these children come to school.

If these things had not been done, let's say, we could conjecture that these problems would continue to grow. This study in Sumpter, S.C., is following up these groups of children and their notion is that they can prevent failure in children by anticipating and dealing with the problem as soon as they can help the parents see what the difficulty might be.

Mr. GIBBONS. Is this one of the problems that is supported by the National Institute of Mental Health?

Dr. BOWER. This is one of our mental health research grants to the Sumpter school training and the South Carolina Mental Health Commission. We have a number of others like that. We have one in Rochester, N.Y., which is done on somewhat the same basis but dealing with children on the older age level.

We have one in St. Louis. The county health department has been working in the school system in this whole process of early identification. The remarkable thing to me is I don't think it is so difficult to do and I often wonder why don't we do these things. Why do we wait and stand as we do at the end of the line waiting for some of these children to just fall when they can be seen to stagger all the way up at the beginning of their career?

(The survey above referred to follows:)

the EDUCATION of EMOTIONALLY HANDICAPPED CHILDREN

A Report to the California Legislature
Prepared Pursuant to Section 1 of
Chapter 2385, Statutes of 1957

by the

CALIFORNIA STATE DEPARTMENT OF EDUCATION

ROY E. SIMPSON
Superintendent of Public Instruction

ELI M. BOWER
Project Co-ordinator

PROJECT STAFF

ELI M. BOWER, Co-ordinator

NADINE M. LAMBERT, Research Consultant

PHYLLIS VAN VLEET, Research Consultant

GILBERT WHITNEY, Research Consultant

KONRAD FISHER, Research Consultant

STATE OF CALIFORNIA
DEPARTMENT OF EDUCATION

March 15, 1961

To the California Legislature:

Pursuant to Section 1, Chapter 2385, Statutes of 1957 (Senate Bill 62), we are submitting this report on the problems of identifying and educating emotionally disturbed children in the public schools of California.

California's public schools enroll 97 per cent of the state's school-age children and youth. They must therefore have the means required for educating pupils with vast differences in intellectual abilities, interests, and motivations, including those with marked handicaps.

In hearings of the Senate Interim Committee on the Education and Rehabilitation of Handicapped Children and Adults held in 1952, 1954, 1956, 1957, and 1958, school administrators, teachers, and parents presented the problems of educating children who have from moderate to severe emotional handicaps. In these presentations it was made clear that children who have little control over their feelings or who must manage a disproportionate amount of hostile feelings toward themselves, others, or the school cannot be successful learners; also that they rapidly become doubly handicapped—by emotional and learning difficulties which are reflected in school retardation. In most cases, such handicaps result in the children leaving school whenever opportunity to do so can be found. Obviously the children are poorly prepared to meet the problems of life, academically or vocationally, and they have strong feelings of personal inadequacy, and of hostility toward school and the community. As a result, many of these individuals are soon involved in problems that cause them to come within the jurisdiction of our public agencies. No state that expends vast funds for mental hospitals, prisons, clinics, and youth camps can overlook ways in which the burden thus produced might be lessened or eliminated; nor can it ignore the tragic waste in lives which is involved.

This study was therefore planned to find methods of identifying emotionally handicapped children before their handicaps become

twofold, and to design, develop, and test special programs and procedures that might help the children to achieve educationally to the extent their abilities permit. This study is the first known major attempt by a state to help its schools plan ways in which early identification of emotionally handicapped children can be assured and how essential steps can be taken to minimize the effects of the handicaps or to prevent the handicaps from further development.

Ray E Simpson

Superintendent of Public Instruction

PREFACE

In hearings before the Senate Interim Committee on the Education and Rehabilitation of Handicapped Children and Adults in 1952, 1954, and 1956, teachers, school administrators, psychologists, parents, and others presented testimony in regard to problems involved in educating children unable to learn because of moderate or severe emotional handicaps. Many of the school administrators and teachers testified that such children become disturbing or disruptive influences in the classroom or, in some cases, become withdrawn, isolated, and little interested in what is happening. They constantly fall farther and farther behind in their school work. In most cases, they leave school as soon as it is legally possible. They are thus being cast out into the community before they have adequate preparation for life.

Most of those testifying suggested that a school system that attempts to educate all of its children and youth cannot afford to deny or minimize the problems presented by emotionally handicapped children, and that unless California schools find methods of providing programs appropriate to the needs of the emotionally handicapped, each community will continue to be burdened with the problems generated by groups of young people who are poorly prepared academically and vocationally and who have strong feelings of personal inadequacy and of hostility toward the school and the community. It was pointed out and documented that these children will, if left alone, one day form the bulk of adults in prisons, mental hospitals, alcoholic wards, and clinics as a result of their inability to function educationally, socially, economically, and emotionally. The major question raised at the hearing was: Could children with emotional handicaps be identified early in their school careers and the required steps taken to help them secure the education they need to become good citizens?

The research programs and results presented in this report represent the first known major attempt by a state to help schools plan positive preventive approaches designed to alleviate the problems presented by emotionally handicapped pupils. No state that expends vast sums of money for treatment hospitals, clinics, and camps can afford to overlook ways in which this burden can, to some extent, be reduced or prevented. Public schools, in adhering to compulsory school attendance laws, must develop the "know-how" and resources

necessary to provide appropriate learning experiences for all pupils, including those with emotional and social problems. In so doing, the schools may wish to utilize the professional services of psychiatrists, psychologists, social workers, and others. The services will be confined to the school setting and will be utilized only to help the school to educate individual children effectively and profitably. In instances in which the emotional problem of a child is severe, his parents will be advised of such fact and encouraged to obtain professional help for the child.

This report is a summary of the research framework, methodology, and findings of the study authorized by the Legislature. Details on the research design, procedures, and instruments used in identifying emotionally handicapped pupils, and the types of experimental programs conducted in various school districts are presented in "The Emotionally Handicapped Child and the School"—a preliminary report of a research program in the prevention of personality and behavior disorders of children—issued in mimeographed form December 24, 1959, by the California State Department of Education.

FRANCIS W. DOYLE
Deputy Superintendent of Public Instruction; and Chief, Division of Special Schools and Services

ACKNOWLEDGMENTS

The research study and results described herein could not have been accomplished without the active assistance of many educators, mental health personnel, and parents.

Each of the school districts in the study volunteered to participate in the research study. These districts were as follows:

Elementary School Districts

Alhambra	Davis *	Menlo Park	Redwood City	Sunnyvale
Azusa	Enterprise	Midland	Rialto	Tulare City
Belmont	Jefferson	Millbrae	Rivera	West Sacramento
Burlingame	Las Lomitas	Mountain View	San Carlos	Whisman
Colton *	Los Gatos	Mount Pleasant	San Mateo City	

High School District

Riverside City

Unified School Districts

Alvord	Sacramento City
Berkeley City	San Jose City
Claremont	Santa Monica
Long Beach	Visalia
Montebello	West Covina
Palo Alto	

Union School Districts

Alum Rock Union Elementary	Half Moon Bay Union High
Campbell Union Elementary	Jefferson Union High
Mineral King Union Elementary	Monterey Union High
Orosi Union Elementary	Sequoia Union High
Palo Verde Union Elementary	Tulare Union High

The staff of the research project requested and received the assistance of educators throughout the state, including district and county superintendents, supervisors, counselors, and teachers. The psychiatrists, psychologists, psychiatric social workers, and statisticians assisted in making clinical assessments of children, provided consultation for teachers, counseled pupils, worked with parents, consulted with the research staff, and assisted in analyzing data collected. A list of the names of the specialists, other than educators, follows:

Joe Kennedy Adams, Psychologist, Veterans Administration, Palo Alto
Rita Loyd Atkinson, Psychologist, Private

* Joint Elementary District.

Kenneth M. Austin, Psychologist, Verdemont Boys Ranch, San Bernardino County
Diana Baumrind, Psychologist, Private
Alice L. Beach, Psychologist, Private
Gershon Berman, Psychologist, Stanford University
Raymond E. Bernberg, Psychologist, Los Angeles State College
William E. Blum, Psychologist, San Mateo County Juvenile Hall
Betty Aron Borenstein, Psychologist, Private
Murray Bower, M.D., Director, San Jose Adult and Child Guidance Clinic
Robert B. Cairns, Psychologist, Stanford University Hospital, San Francisco
Gerald Caplan, M.D., Associate Professor of Mental Health, Harvard University, Cambridge, Massachusetts
Maury T. Carlin, Psychologist, Veterans Administration Hospital, Palo Alto
Frederick C. Chapman, Psychologist, Private
Guy Chapman, Psychologist, Tulare County
Loretta M. Class, Psychiatric Social Worker, Family Service Agency of Monrovia
Stanley R. Clemes, Psychologist, Veterans Administration Hospital, Palo Alto
John F. Colclazer, Psychologist, Private
David L. Cole, Psychologist, Occidental College, Los Angeles
William W. Cootes, Psychologist, Private
John M. Daily, Psychologist, Veterans Administration Hospital, Palo Alto
Margaret Siler Faust, Psychologist, Claremont Graduate School, Claremont
Calvin J. Frederick, Psychologist, Patton State Hospital
James I. Gabby, Psychiatrist, Private
Sheldon F. Gardner, Psychologist, Aptitude Research Center, University of Southern California
Florence Goldsmith, Psychologist, Psychiatric Clinic, Hollywood Presbyterian Hospital
Robert A. Good, Associate Professor of Psychology, Sacramento State College
Jerome S. Goodman, Psychiatric Social Worker, Child Guidance Consultation Service, San Mateo County
Robert L. Gotcher, M.D., Psychiatrist, San Mateo Department of Health and Welfare
Norman Graff, M.D., Psychiatrist, Private
Richard J. Hall, Psychologist, Private
Richard C. Hamister, Psychologist, Veterans Administration Hospital, Menlo Park
Maurice B. Hamovitch, Professor of Research and Social Welfare, University of Southern California, School of Social Work, Los Angeles
Clarice H. Haylett, M.D., Psychiatrist, San Mateo County Health and Welfare
Dale Laverne Hecht, Psychometrist, Amador Valley Junction High School, San Jose
John Sain Helmick, Director, Educational Testing Service, Los Angeles
Jack Morgan Hicks, Psychometrist, U. S. Army Leadership, Human Research Unit, Monterey
Joann K. Heimann, Psychologist, Santa Clara County
Earnest Herman Jackson, Jr., Psychologist, Tulare County, Visalia
Barbara K. Keogh, Psychologist, El Segundo School District

Joann L. Kirkpatrick, Chief Social Worker, Adult and Child Guidance Clinic, San Jose
Bruno Klopfer, Psychologist, University of California, Los Angeles
Eva R. Laskin, Psychologist, Private
Seymour Leshin, M.D., Psychiatrist, Private
David Levy, Psychologist, Tulare County, Visalia
Robert Turner Lewis, Psychologist, Los Angeles State College
Antoinette B. Lotsof, Psychologist, University of California, Los Angeles
Bertha Shedd Mason, Psychiatrist, Private
Donald J. McNassor, Psychologist, Claremont Graduate School, Claremont
Patricia Joan Medley, Psychiatric Social Worker, Santa Clara County Hospital, San Jose
William B. Michael, Statistician, University of Southern California
Harvey Mindess, Psychologist, Private
Barbara J. Ozeroff, Psychologist, Highland Hospital, Oakland
Horace M. Peak, Psychologist, Patton State Hospital
Carl Edmund Peters, M.D., Psychiatrist, Private
Thomas M. Poffenberger, Professor of Child Development and Family Relations, University of California, Davis
Lucy C. Rau, Assistant Professor, Clinical Psychology, Stanford University
William D. Reichner, Psychometrist, Private
Allan Schlaff, Clinical Psychologist, Patton State Hospital
Starling D. Schultz, Clinical Psychologist, Veterans Administration Hospital, Palo Alto
Margaret Thaler Singer, Psychologist, Private
Alec Skolnic, M.D., Psychiatrist, San Mateo Public Schools
Phillip M. Spielman, M.D., Psychiatrist, Private
Sherry Stein, Clinical Social Worker, San Mateo Health and Welfare Department
Herbert Tauger, Clinical Psychologist, Private
Helene R. Veltfort, Clinical Psychologist, Mental Health Service, San Mateo
Charles O. Walton, M.D., Psychiatrist, San Mateo County Health and Welfare Department
Samuel L. Washington, Clinical Social Worker, Community Mental Health Service, San Mateo
John Wax, Clinical Social Worker, Veterans Administration Hospital, Palo Alto
William L. Weinberg, Psychologist, San Mateo County Health and Welfare
Roger Wickland, Psychologist, Private
Jerry S. Wiggins, Psychologist, Stanford University
Clarence L. Winder, Psychologist, Stanford University
Beverly B. Wingate, Psychometrist, Riverside County
Louise Winter, Psychologist, Adult and Child Guidance Clinic, San Jose
Seymour L. Zelen, Psychologist, Patton State Hospital
Irla Lee Zimmerman, Psychologist, Private

The Advisory Committee helped to set and maintain high standards of research. The membership of this committee follows.

57-877 O—66——4

John Daily, Clinical Psychologist, U. S. Veterans Administration Hospital, Palo Alto
J. Richard Harsh, Administrative Assistant, Division of Research and Guidance, Office of the County Superintendent of Schools, Los Angeles
Agnes Robinson, School Psychologist and Supervisor of Special Education, Sacramento City Unified School District
Edward Stainbrook, M.D., Professor and Chairman, Department of Psychiatry, University of Southern California (Resigned June, 1959)
Henry Work, M.D., Chief Division of Pediatrics and Psychiatry, School of Medicine, University of California, Los Angeles

The technical advisory consultants assisted in planning essential research procedures and in maintaining high standards throughout the project. The names of the advisory consultants follow:

John E. Bell, Acting Chief, Mental Health Services, U. S. Public Health Service, San Francisco
Burton Castner, Consulting Clinical Psychologist, California Youth Authority, Sacramento (Deceased, December 19, 1959)
Leon Epstein, M.D., Chief of Research, Department of Mental Hygiene, Sacramento
Belle Dale Poole, M.D., Child Health Consultant, Bureau of Maternal and Child Health, State Department of Public Health, Los Angeles
Robert Ross, Chief Research Psychologist, Department of Mental Hygiene, Sacramento
Harry Wilson, Supervisor of Education, California Youth Authority, Sacramento

The names of the members of the Department of Education who served in an advisory capacity to the staff of the projects follow:

Irving Fusfeld, Supervisor of Counseling and Child Guidance, California School for the Deaf, Berkeley
Patricia Hill, Consultant in Health Education
Donald E. Kitch, Chief, Supplemental Educational Services
Lawrence Koehler, Consultant in Adult Education
Afton Nance, Consultant in Elementary Education
Earl Sams, Consultant in Secondary Education
Thomas Shellhammer, Consultant in Education Research
Peter Tashnovian, Consultant in Education Research
Ernest Willenberg, formerly Chief, Bureau of Special Education, now Director of Special Education, Los Angeles City School Districts

Technical assistance in managing and analyzing the data was furnished by the Bureau of Education Research, State Department of Education.

CONTENTS

		Page
	PROJECT STAFF	ii
	LETTER OF TRANSMITTAL	iii
	PREFACE	v
	ACKNOWLEDGMENTS	vii
Chapter		
1	THE PROBLEM	1
	Summary	9
2	EMOTIONALLY HANDICAPPED CHILDREN	13
3	HOW EMOTIONALLY HANDICAPPED CHILDREN CAN BE IDENTIFIED AND DIAGNOSED	16
	The Screening Process—Combined Ratings	20
4	THE RESEARCH PLAN	27
5	SPECIAL EDUCATIONAL PROVISIONS STUDIED	30
	Descriptions of Plans	32
6	FINDINGS	44
	Criteria for Identification of Emotionally Handicapped Children	48
	Screening and Individual Studies	49
	Evaluation of the Effectiveness of the Special Provisions	49
	Special Class—Elementary	50
	Special Class—Secondary	52
	Special Placement	53
	Learning Disability Grouping	55
	Adolescent Group Counseling	56
	Special Activity Groups	58
	Home Economics	59
	Mental Health Consultation to Teachers	62
	Parent Group Counseling	64
	Human Relations Period	67
	Home and Hospital Instruction	67
	Screening Procedures	68
	Relationship Between Early Identification and Rehabilitation	69
	Administrative Assets and Liabilities of Programs	69
7	CONCLUSIONS AND RECOMMENDATIONS	71
	SELECTED REFERENCES	75

TABLES

Table		Page
1	Per Cent of School Age Population of Each State Enrolled in the Public Elementary and Secondary Schools of the State, 1959-60 School Year	2
2	Teacher Ratings of All Fourth, Fifth, and Sixth Grade Pupils in 186 Classes, According to Extent of Aggression, Withdrawal, Unfavorable Reaction to Control, and Refusal or Inability to Learn	3

TABLES—Continued

Table		Page
3	Enrollment in Selected School Districts in Los Angeles County and Per Cent of Pupils with Emotional Disturbances, by Grades, 1958	4
4	Differences in Academic Achievement Between Emotionally Handicapped Children and Other Children in Grades Four, Five, and Six	6
5	Per Cent of Eighth Grade Pupils in Each State or Territory in 1953-54 Who Continued in School Until Graduation from High School in 1957-58	7
6	Records of 1,583 Pupils in Los Angeles County Who Had Difficulty Making the Necessary School Adjustment as Reported by 52 School Districts and Who Because of Delinquent Behavior Were Under the Jurisdiction of the California Youth Authority	8
7	Comparison in 1960 of Pupils Identified in the 1955-56 School Year as Emotionally Handicapped with Pupils Identified at That Time as Not Emotionally Handicapped	10
8	Effectiveness of Screening Procedure in Identifying Pupils with Various Types of Emotional Handicaps	22
9	Extent to Which the Study Screening Process Identified Emotionally Handicapped Pupils Previously Referred to School Psychologist or Principal	23
10	Distribution of Pupils on the Basis of Screening Results Obtained Through Combinations of Teacher, Peer, and Self Ratings, According to Behavior Patterns Described by Clinical Psychologists	24
11	Distribution of Clinical Psychologists' Ratings of 30 Pupils (10 from Primary Grades, 20 from Elementary Grades) Randomly Chosen from Emotionally Handicapped Identified by Study Screening Procedure and 30 Randomly Chosen from Pupils Who Were Not Identified as Emotionally Handicapped	25
12	Distribution of Emotionally Handicapped Children According to Sibling Relations	44
13	Distribution of Emotionally Handicapped Children According to Status of Parents or Guardians	45
14	Distribution of Fathers of Emotionally Handicapped Children in California and of the Total Adult Male Population in California According to Occupation	45
15	Distribution of Emotionally Handicapped Children According to Intelligence Ratings	46
16	Distribution of Emotionally Handicapped Children According to School Achievement	47
17	Comparison of the Results of Special Provisions for Experimental Groups with Those of Regular Provisions for Control Groups, and with the Ratings of Administrative Feasibility of Each Type of Provision	47

Chapter 1

THE PROBLEM

"No society can afford to ignore the fact that one out of every seven men was judged to be mentally and emotionally incapable of serving effectively in its armed forces in time of war," admonished the President's Commission on the Conservation of Human Resources. In its analysis and study of factors that were most predictive of ineffective performance, the Commission found positive correlations between rejections and separations of men with moderate or acute emotional distress and poor educational background.[1]

The Commission's research staff, under the direction of Ginzberg, concluded that cultural factors such as poverty, racial discrimination, and lack of industrialization could help explain high rates of emotional instability in some sections of the country and that each of these cultural factors was also conducive to a significantly low level of educational attainment in the regions. Although a high level of educational attainment was found to be no safeguard against emotional disorders, the lower the educational level of a region the higher the incidence of failure due to emotional disorders. As to cause, it was noted that inadequate education and emotional instability may have been reinforcing each other for a long time. It was pointed out that a disturbed childhood is likely to be reflected in learning difficulties and that children who do poorly in school are likely to develop emotional problems.[2]

One more piece of evidence from an entirely different and unexpected source can be cited to illustrate the reciprocal relationship of successful educational experience and healthy emotional development. In a 30-year follow-up study of children who were referred to a child guidance clinic, the investigators, Patricia O'Neal and Lee Robbins, chose a control group of students from the files of the public schools who matched children referred to the clinic in age, sex, IQ, race, and residence.[3] They had intended to use the control group

---

[1] Eli Ginzberg and Associates. *The Ineffective Soldier: Lessons for Management and the Nation.* New York: Columbia University Press, 1959, p. 314.

[2] *Ibid.*, Vol. III, "Patterns for Performance," pp. 96-116.

[3] Patricia O'Neal and Lee Robbins, "The Relation of Childhood Behavior Problems to Adult Psychiatric Status: A 30-Year Follow-up Study of 150 Subjects." *American Journal of Psychiatry,* CXIV (May, 1958), 961-69.

for comparison purposes only, but were struck by the fact that the simple criteria used to choose the control subjects—no excessive absences, no full grades repeated, no disciplinary action recorded, and an IQ of 80 or better—had yielded a strikingly healthy group.[4] The success of the control group as citizens was particularly striking in view of the fact that the group was drawn largely from disadvantaged classes and that a history of broken homes was found in one-third of the cases.

TABLE 1

Per Cent of School Age Population of Each State Enrolled in the Public Elementary and Secondary Schools of the State, 1959-60 School Year [1]

Rank	State	Per cent	Rank	State	Per cent
1	California	97.4	26	New Mexico	84.3
2	Florida	96.8	27	Missouri	83.9
3	Nevada	96.6	28	Virginia	83.9
4	Oklahoma	96.1	29	Vermont	82.7
5	Arizona	95.6	30	South Dakota	82.6
6	Washington	92.9	31	Ohio	81.4
7	Mississippi	92.0	32	Montana	81.2
8	Idaho	91.2	33	Texas	80.3
9	Kansas	90.8	34	Massachusetts	80.2
10	Wyoming	90.8	35	New York	80.0
11	Utah	90.7	36	Louisiana	79.5
12	Arkansas	90.4	37	Michigan	79.2
13	Alabama	88.7	38	Minnesota	78.5
14	Tennessee	88.5	39	Kentucky	78.3
15	Georgia	88.2	40	Illinois	78.1
16	West Virginia	87.3	41	Nebraska	78.1
17	North Carolina	87.0	42	Maryland	76.7
18	Iowa	85.9	43	New Jersey	76.0
19	South Carolina	85.4	44	North Dakota	75.2
20	Oregon	85.2	45	Pennsylvania	75.0
21	Connecticut	85.0	46	New Hampshire	74.8
22	Indiana	84.9	47	Alaska	72.7
23	Hawaii	84.6	48	Wisconsin	70.9
24	Colorado	84.5	49	Delaware	70.1
25	Maine	84.5	50	Rhode Island	69.2

50 states and District of Columbia ..... 83.6 per cent
Puerto Rico ..... 76.1 per cent

[1] *Estimates of School Statistics*, 1959-60. Research Report 1959-R23. Washington, D. C.: National Education Association, Research Division, December, 1959, p. 20.

The importance of an education in our society is emphasized by the fact that all the states have compulsory school attendance laws. These laws, however, only serve to enforce attendance; they do not

[4] *Ibid.*, p. 968.

provide any guarantee that school attendance will in and of itself produce educated individuals. The success of a child's education is to a great extent dependent on his attitude and relationship to the school. When children are hostile toward everything and everyone and too confused to know what they want in the way of education, they pose problems which the school finds exceedingly difficult to resolve.

Table 1 shows the per cent of the school-age population of each state that was enrolled in the public elementary and secondary schools of the state during the 1959-60 school year. California had the greatest per cent. The results of several other studies reveal that between 5 and 10 per cent of the total enrollment in the schools is made up of children who are handicapped by behavior or learning problems that are caused by emotional disturbances.

Table 2 shows that the behavior of 5.4 per cent of the pupils in grades four, five, and six is of a nature that makes it difficult for

TABLE 2

Teacher Ratings of All Fourth, Fifth, and Sixth Grade Pupils in 186 Classes, According to Extent of Aggression, Withdrawal, Unfavorable Reaction to Control, and Refusal or Inability to Learn [1]

Question	Response							
	Seldom or never		Not very often		Quite often		Most of the time	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
A. Is this child overly aggressive or defiant?_____ (5,592 responses)	3,524	63.0	1,113	19.9	708	12.7	247	4.4
B. Is this child overly withdrawn or timid?_____ (5,596 responses)	3,067	54.8	1,431	25.6	757	13.6	341	6.0
C. Is this child a control problem?____ (5,597 responses)	3,117	55.7	1,365	24.4	814	14.5	301	5.4
D. Is this child an instructional problem?_____	2,709	48.5	1,458	26.1	859	15.4	563	10.0

[1]Source of data: E. M. Bower, P. J. Tashnovian, and C. A. Larson, *A Process of Early Identification of Emotionally Disturbed Children*. Sacramento: California State Department of Education, 1958, pp. 57-59.

teachers to secure from these pupils the kind of classroom behavior that is required. It also shows that 10 per cent of the pupils in these grades have problems in learning and that, as a result, teachers must provide special instruction for these pupils and at the same time maintain a well-planned program of instruction for the other pupils.

TABLE 3

Enrollment in Selected School Districts in Los Angeles County and Per Cent of Pupils with Emotional Disturbances, by Grades, 1958 *

Grade level	Total enrollment	Per cent of pupils disturbed		
		Type I**	Type II***	Total
ELEMENTARY THROUGH GRADE SIX (27 districts)				
Kindergarten	57,374	1.1	5.0	6.1
First	61,411	2.0	7.3	9.3
Second	56,834	2.2	7.9	10.1
Third	54,660	2.8	8.1	10.9
Fourth	52,587	2.7	8.3	11.0
Fifth	51,184	3.0	8.0	11.0
Sixth	45,797	2.6	7.6	10.2
Total	379,847	2.3	7.4	9.7
GRADES SEVEN THROUGH TEN				
Seventh (21 districts)	39,754	2.4	7.0	9.4
Eighth (21 districts)	39,777	2.5	7.8	10.3
Ninth (6 districts)	35,079	2.4	6.6	9.0
Tenth (6 districts)	34,023	2.1	6.9	9.0
Total	148,633	2.4	7.1	9.5
GRADES ELEVEN AND TWELVE (2 districts)				
Eleventh	1,643	2.8	4.4	7.2
Twelfth	1,304	0.8	2.0	2.8
Total[1]	2,947	1.9	3.3	5.2
SPECIAL EDUCATION				
Elementary grades (4 districts)	147	23.8	23.1	46.9
Secondary grades (3 districts)	993	29.9	26.4	56.3
Total[2]	1,140	29.1	26.0	55.1
TOTAL[3]	532,567	2.4	7.3	9.7

* Source of data. *Mental Health Survey of Los Angeles County*, 1960. Sacramento: State Department of Mental Hygiene, Ch. VII, p. 309.

** Type I. Children judged by their teachers to be emotionally disturbed and who have been or probably should be referred for psychiatric help.

*** Type II. Children who are not seriously emotionally disturbed but whose behavior is such that the children require more than their share of the teacher's time and attention.

[1] The marked drop in the per cent of emotionally disturbed in grade twelve over grade eleven may be accounted for by the fact that students may leave school legally at the age of sixteen, and maladjusted students tend to do so.

[2] Special class enrollments include only boys and girls who are handicapped physically or mentally. The enrollments therefore include a high per cent of emotionally disturbed.

[3] The 532,374 enrollment does not include 4,209 individuals who were reported as disturbed but not as Type I or Type II, nor according to their grade placement. If this number were included the total enrollment would be 557,875, and the number of emotionally disturbed would be 56,065 or approximately 10 per cent of the total enrollment.

Table 3 shows that the smallest per cent of emotionally handicapped children are in the primary grades and in the upper grades of high school. These conditions seem to confirm the belief that a reciprocal relationship exists between educational success and healthy emotional growth. In the earliest years of school life, children are not subjected to the same amount of stress on achievement as they are during the following years of their school life. The children who are unable to keep up, including the emotionally handicapped, frequently drop out of school at the first legal opportunity. This accounts for the decrease in the proportion of emotionally handicapped found in the upper grades of high school.

In examining Table 3 it should be noted, however, that although the adverse effects of learning difficulties experienced by children in their attempts to meet the demand for achievement did not become very noticeable in the first grade, in the second grade the "men" had begun to be distinguished from the "boys." From 9 to 11 per cent of the pupils in the elementary and junior high school groups are rated as having emotional handicaps. By the time these children are of high school age, many of them have left school, as inferred from the reduction of emotionally handicapped children from 9 per cent in the tenth grade to 2.8 per cent in the twelfth grade. The individuals who dropped out of school lessened the problem of the school and increased the problem of the community as a whole. Table 3 also shows a comparatively high per cent of children with emotional handicaps enrolled in special education programs.

On the following page Table 4 shows that the differences between the achievement of emotionally handicapped pupils and other pupils become increasingly great as the pupils progress. This fact emphasizes the hazards of the situation in which the emotionally handicapped child must endeavor to adjust, that is, continually struggle to keep up with his peers. In this process the pupil is blocked from gaining the self-respect for which he is struggling, and as a result of his failure he becomes increasingly frustrated. The only escape from this situation that the pupil is able to find for himself is to leave school. Generally he does so at the first opportunity. In California this opportunity is made available to him by the provision of the compulsory attendance law, which grants him the right to leave school under certain conditions on his sixteenth birthday.

TABLE 4

Differences in Academic Achievement Between Emotionally Handicapped Children and Other Children in Grades Four, Five, and Six [1]

Grade and subject	Emotionally disturbed		Other children		Difference between achievement
	Number	Grade level achievement	Number	Grade level achievement	
GRADE FOUR					
Reading	36	3.50	961	4.13	.63
Arithmetic	36	3.73	958	4.37	.64
GRADE FIVE					
Reading	64	4.24	1,644	5.21	.97
Arithmetic	62	4.40	1,636	5.15	.75
GRADE SIX					
Reading	68	4.66	1,780	5.79	1.13
Arithmetic	68	4.96	1,773	5.80	.84

[1] Source of data: E. M. Bower, P. J. Tashnovian, and C. A. Larson, *A Process for Early Identification of Emotionally Disturbed Children*. Sacramento: California State Department of Education, 1958, pp. 26 and 27.

Table 5 shows the per cent of the number of eighth grade pupils in the 1953-54 school year who graduated from high school four years later in the 1957-58 school year. As shown in Table 1, approximately 98 per cent of all California school-age population attend the public schools. Table 5 shows, however, that only 80 per cent of the pupils in the eighth grade of California public schools in 1953-54 graduated from high school four years later, and that in the four-year span approximately 20 per cent of the pupils became drop-outs. It is reasonable to assume that a sizable number of drop-outs left school before they had graduated because they were troubled by learning difficulties that were the direct results of emotional disturbances.

School systems that wish to do something about the problems caused by emotionally handicapped pupils progressing in school at less than the normal rate encounter excessive difficulty, especially in the upper grades and in high school. In most instances they find that the pupils with whom they have to work at these levels were identified early in their school lives as being confronted with unusual learning difficulties. In studying the pupils' records they also find long histories of school failure, school inadequacy, and lack of confidence. In brief, the problems have been allowed to develop over

TABLE 5

Per Cent of Eighth Grade Pupils in Each State or Territory in 1953-54 Who Continued in School Until Graduation from High School in 1957-58 *

Rank	State	Per cent	Rank	State	Per cent
1	Wisconsin	94.5	26	Colorado	65.7
2	Minnesota	86.2	27	Rhode Island	65.7
3	California	79.7	28	New Hampshire	65.1
4	Vermont	77.4	29	Oklahoma	64.7
5	Massachusetts	77.4	30	Nevada	62.5
6	Nebraska	76.7	31	Missouri	62.5
7	Iowa	74.7	32	Florida	62.4
8	Connecticut	74.6	33	Maryland	59.7
9	Illinois	73.8	34	Virginia	59.1
10	New Jersey	73.3	35	Texas	58.3
11	Washington	73.2	36	New Mexico	55.9
12	Kansas	72.3	37	Louisiana	55.9
13	Michigan	72.2	38	Arizona	55.6
14	South Dakota	71.8	39	Maine	54.7
15	Utah	71.3	40	Arkansas	54.6
16	Oregon	71.1	41	North Carolina	53.7
17	Montana	69.6	42	West Virginia	53.4
18	New York	68.7	43	Alabama	52.4
19	Indiana	68.7	44	Tennessee	51.0
20	Ohio	68.3	45	Alaska	48.5
21	Pennsylvania	68.2	46	Mississippi	48.5
22	Idaho	67.0	47	Kentucky	47.9
23	Wyoming	66.6	48	Georgia	47.5
24	Delaware	66.5	49	South Carolina	47.0
25	North Dakota	66.3			

48 states, Alaska, and District of Columbia ..... 65.6 per cent
Puerto Rico ..... 37.9 per cent

* *Preliminary Statistics of State School Systems, 1957-58.* Circular No. 605. Washington, D. C.: U. S. Department of Health, Education and Welfare, Office of Education, October, 1959, p. 5.
"Statistics of State School Systems: Organization, Staff, Pupils, and Finances, 1953-54." *Biennial Survey of Education in the United States—1952-54.* Washington, D. C.: U. S. Department of Health, Education, and Welfare, Office of Education, 1956. Chapter 2, pp. 52-53. (Available from Superintendent of Documents, Government Printing Office, Washington, D. C.)

a considerably long period of time even though they have been known to exist. For example, Table 6 (on the following page) shows that more than half of 1,538 pupils who are under the jurisdiction of the California Youth Authority because of some form of antisocial behavior were identified early in their school careers as having problems that were causing them to have difficulty in school. Possibly these individuals would not have become delinquents had they been helped to solve their problems when they first became evident.

A follow-up study was made in school districts in Los Angeles County during the spring of 1960 to determine the adjustment status

TABLE 6

Records of 1,583 Pupils in Los Angeles County Who Had Difficulty Making the Necessary School Adjustment as Reported by 52 School Districts and Who Because of Delinquent Behavior Were Under the Jurisdiction of the California Youth Authority [1]

Item of record	Number of pupils' records containing report	Per cent of pupils' records containing report	Number of school districts reporting	Per cent of 52 school districts
1. Evaluated or diagnosed by school	815	51.5	45	86.5
2. Referred to private or public treatment agency	321	20.3	34	64.2
3. Treatment needed but no treatment agency to which school could refer case	525	33.2	36	69.2
4. Need for help apparent but impossible for school to make identification of specific need	269	17.0	21	40.4

[1] Source: *Mental Health Survey of Los Angeles County, 1960.* Sacramento: State Department of Mental Hygiene, Chapter VII, p. 238.

of 52 students who, five years earlier and while they were in grades four, five, and six, had been identified as being emotionally handicapped. This was accomplished by choosing at random two students from each of the groups who had been in the fourth, fifth, and sixth grades with the emotionally disturbed individuals but who had been selected by teachers as having average or better-than-average adjustment, and comparing the school records of these students who had not been identified as being emotionally handicapped with the records of the 52 identified as emotionally handicapped.

The results of this study, shown in Table 7 (pages 10 and 11), make apparent the increase in the problems that are caused by individuals who are emotionally handicapped and that must be handled by the schools and other agencies. This increase in the problems is accompanied by a sizable increase in the cost and effort involved in dealing with the problems. The results of not dealing with the problems at an earlier time are in many instances reflected in (1) individuals poorly if not inadequately equipped to meet the usual problems of daily living; (2) on-the-job inefficiency; (3) excessive needs

for social service; (4) mental hospitals with exceptional loads; and (5) overcrowded reformatories, jails, and penitentiaries.

Certainly the problems could be dealt with at a greatly reduced cost to all by taking the necessary steps to identify children with emotional handicaps as early as possible and to take immediately the steps required to help the children overcome their difficulties. In this way every child might be helped to make full use of his potentialities in becoming a person who is self-sufficient and one who is a contributor to the general welfare.

SUMMARY

The problems involved in the education of emotionally handicapped children are created by the following conditions:

1. California requires all children of school age to attend school until they have reached their sixteenth birthday. This law is strongly backed by parents and other citizens. Approximately 98 per cent of the children of school age attend the public schools.
2. Between 5 and 10 per cent of the children enrolled in the public schools have emotional handicaps of sufficient severity that they are unable to learn in school as are children not thus handicapped, nor are they able to employ the type of behavior required in the classroom.
3. Pupils who are emotionally handicapped are continually falling farther and farther behind in their school work and at the same time losing their incentive to learn.
4. Emotionally handicapped pupils who are not identified early and then given the help they need to eliminate their handicap leave school just as soon as they find any opportunity to do so.
5. Many emotionally handicapped pupils become vehicle and penal code violators.

In their endeavor to educate all the children of all the people, the public schools are constantly confronted with emotionally handicapped pupils who present major learning problems. These problems involve both exercising the control needed to maintain the best pos-

TABLE 7

Comparison in 1960 of Pupils Identified in the 1955-56 School Year as Emotionally Handicapped with Pupils Identified at That Time as Not Emotionally Handicapped

Basis of evaluation	Per cent of group: Emotionally handicapped	Per cent of group: Not emotionally handicapped	Sig. level	Interpretation
A. School adjustment in the 1959-60 school year	*N=28*	*N=43*		
1. Final grades (C average or better)	30	70	.01	1. The emotionally handicapped group is seriously below average in school achievement.
2. Referrals to vice principal (1 to 14 referrals)	50	17	.01	2. More emotionally handicapped pupils are sent to the vice principal for disciplinary action.
3. Referrals to school counselor (1 to 20 referrals)	64	63	NS	3. The school counselor sees both emotionally handicapped and not emotionally handicapped pupils to a similar extent.
4. Number of program changes (1 to 8)	54	22	.01	4. The referrals to the school counselor more often involve changes in school programs.
5. Of those pupils remaining, per cent that will graduate on the basis of counselor judgment	57	86	.01	5. Only about half of the emotionally handicapped pupils remaining in school will graduate from high school—many have already dropped or been dropped.
6. Number of full-day excused absences (1 to more than 18)	82	67	.01	6. Emotionally handicapped pupils have more full-day excused absences than pupils who are not emotionally handicapped.
7. Number of full-day unexcused absences (1 to more than 9)	43	28	.05	7. Emotionally handicapped pupils have more full-day unexcused absences than pupils who are not emotionally handicapped.
8. Number of part-day excused absences (1 to 16 absences)	47	44	NS	8. Emotionally handicapped and not emotionally handicapped pupils have similar rates of part-day excused absences.
9. Number of part-day unexcused absences (1 to 12 absences)	39	26	.05	9. Emotionally handicapped pupils have more unexcused absences than pupils who are not emotionally handicapped.

B. In-school referrals for special services	*N=52*	*N=78*		
1. Referral to health office during 1959-60 school year (nurse and doctor) 1 to 11 referrals	71	44	.01	1. Emotionally handicapped pupils are more frequently referred to health office for illness, rest, or discomfort.
2. Referral to school guidance office (anytime during the individual's school life)	67	4	.01	2. Emotionally handicapped pupils need and receive a significant amount of attention from school guidance personnel.
3. Referral to child welfare and attendance office	19	8	.05	3. More home calls are made by child welfare and attendance workers to check on emotionally handicapped pupils than on other pupils.
C. Delinquency rate				
1. Number of entries in central Juvenile Index[1] (1 to 12 entries)	24	12	.05	1. Emotionally handicapped pupils have a greater incidence of contacts with police than other pupils.
2. Date of first entry in central Juvenile Index (before 1957; before or during junior high school)	46	10	.01	2. Emotionally handicapped pupils more frequently have contacts with police before high school.
3. Number of pupils who are or have been on probation	15	4	.01	3. Emotionally handicapped pupils are more likely to be on probation.
4. Proportion of all penal code violations committed by each group[2]	81	19	.01	4. Emotionally handicapped pupils commit more penal code violations.
5. Proportion of all vehicle code violations committed by each group[2]	67	33	.01	5. Emotionally handicapped pupils commit more vehicle code violations.
D. Referrals to local child guidance clinics	61	1	.01	Emotionally handicapped pupils need the assistance and are referred more frequently to local guidance clinics.

[1] Los Angeles County Record of juveniles who have violated the law and have been required to account for the act.
[2] Prorated according to size of group to secure comparison.

sible learning conditions for all pupils and providing the type of instruction that is conducive to each pupil's educational development to the full extent of his potentialities. In order to handle the problems posed by emotionally handicapped pupils, the schools must, however, have the required resources. These resources will cost far less than the care society must provide for those individuals who never overcome their emotional and educational handicaps and therefore never become self-supporting and contributing members of the society in which they live.

Chapter 2

EMOTIONALLY HANDICAPPED CHILDREN

Although the term "emotionally disturbed" was employed in the legislation to describe the children in this study, it was decided that the term "emotionally handicapped" should be used instead for the following reasons:

1. "Disturbance" is a word usually associated with behavior that is upsetting to an individual or a group. Many emotionally handicapped children are extremely quiet and nondisturbing.
2. As used by most persons, the term "emotionally disturbed" seems to indicate a transient but normal state of heightened emotions. The response is a normal emotional one to a disturbing situation. An emotionally handicapped individual, however, might well be characterized as one who seldom or rarely responds to normally upsetting situations in a normal or usual way. His responses in many instances may be markedly inappropriate to the situations.
3. "Handicap" implies a disabling condition of some duration. This term indicates that the emotional problem is one that reduces the individual's ability to function normally and to make educational progress at a rate and to the extent that he could if he had no emotional handicap.
4. "Emotionally handicapped" as a term makes comparable the problem of disordered or inadquate emotional development of children with other handicaps such as those caused by hearing and visual difficulties or mental retardation.

Any definition related to emotions is bound to be semantically confusing and only partially accurate, for the meanings associated with emotion by the adherents to the various psychological theories differ in some measure. Emotion is not measurable in the same manner as physical dexterity or intellectual ability. Unlike sensory, intellectual, or physical handicaps that exhibit themselves along a single dimension, primarily as a deficit, emotional handicaps are exhibited as total behavior that may be overly aggressive, inappropriate, overly

57-877 O—66——5

withdrawn, or involved in some combination of two or more of these behaviors.

One can be handicapped to the same extent by an overabundance of emotion as by a lack of emotion. One can be said to be emotionally handicapped if he displays "normal" emotional behavior at inappropriate times. For example, one may show "normal" grief at the death of a loved one; but if the same grief is displayed for a period of as long as 20 years, it could not be considered as normal emotional behavior. One may consistently develop strong and overwhelming emotions in one relationship or situation and be relatively self-contained in another. And one can be economically or educationally successful because of an emotional handicap or in spite of the handicap, just as one can be a blatant failure without benefit of neurosis or emotional conflict.

A child with a moderate or severe emotional problem will, in general, exhibit behavior that is "driven" and often inflexible. He is often regarded as stubborn or recalcitrant since the usual techniques of influencing children such as punishment, reward, recognition, acceptance, are relatively ineffective in changing his behavior. The emotionally handicapped child often has average or above-average intellectual ability, but is inordinately unsuccessful in learning school subjects or social skills. The research staff found that the emotionally handicapped child could be defined or described as one whose behavior over a long period of time shows that he has one or more of the following inabilities:

1. Inability to learn, which cannot be solely explained by intellectual deficit, sensory, or general health factors or by social or ethnic differences
2. Inability to work or play or make friends with children or adults
3. Inability to act one's age
4. Inability to "shake the blues" or to regard oneself as good, likeable, or worthy of attention or love
5. Inability to deal with stressful situations in school without becoming ill, having headaches or stomach-aches, or developing speech difficulties

It is necessary to emphasize that any child may at one time or another display certain of the inabilities described and still not be emotionally handicapped. An emotionally handicapping condition exists only when behavior exhibiting one or more of the inabilities described continues to a marked extent over a prolonged period of time. Even then one still needs to ascertain whether the behavior is largely the result of the child's choice or the result of emotional imperatives that do not permit choice.

If a child chooses to work by himself and does not need associates or friends for self-satisfaction, this may not in itself be cause for concern. Where, however, such behavior is caused by fear or strong feelings of inadequacy that leave the child relatively little choice but the avoidance of others, this behavior may be said to be the result of an emotional handicap. A child with healthy emotional development is relatively free to choose his behavior and to change his behavior as a result of his social experiences. An emotionally handicapped child has his behavior chosen for him by his emotional needs, and his behavior is relatively unaffected by normal social or educational experiences.

Chapter 3

HOW EMOTIONALLY HANDICAPPED CHILDREN CAN BE IDENTIFIED AND DIAGNOSED

Early identification is essential if the school is to provide for the emotionally handicapped child maximum help in making school progress commensurate with his ability. The later the identification, the greater the handicap, and the less likely the school will be able to provide the required help through its regular educational, psychological, and administrative services.

California schools employ established procedures for making early identification of children with hearing and vision handicaps. As a first step, screening tests are used to identify the children who may be handicapped by either of the causes. The difficulties thus identified are reported to the children's parents and their assistance is sought in securing a diagnosis of the child's condition. For example, the Snellen chart and the Plus Spheres test are used in determining which children are likely to have less than normal vision and are therefore handicapped in their school work in some degree, perhaps to the point of failure. The condition of the children found to be visually handicapped is reported to their parents and the parents' assistance is sought in securing diagnoses by specialists and the correction possible. Where full correction of the difficulty is impossible, the school takes such steps as it can to help the children. In some instances special consideration may be given to the child in the regular classroom. In others, the necessary provisions are made in special classes. The important point is that the child with a visual handicap is identified early in his school life or soon after the onset of the handicap and given the help he needs before his difficulty has involved him in a multiplicity of problems.

Some plan similar in nature to those used for the identification of visually and aurally handicapped children should be developed for the early identification of emotionally handicapped children. The schools should then be in a position to take the required steps to provide each child the special help he needs at a time when it would do the greatest good.

The procedures for early identification of children who are emotionally handicapped to the extent that they are having difficulty in doing school work entail two separate but interrelated steps. The first of these steps involves the use of a screening procedure to identify the children who are having difficulty in school probably because of emotional handicaps. The second of the steps involves identifying the children in this group whose emotional handicaps are sufficiently great to cause extreme difficulty in school or even failure. When these steps are followed, the amount of effort expended and the costs of making the necessary identification is held to a minimum. In screening, coarse but better than rule-of-thumb measures that can be rapidly administered to large numbers of individuals are used. In such a process the attempt is to identify all children who are having learning difficulties or will have learning difficulties because of emotional handicaps, including those children whose problems or severity of difficulties may not be readily apparent to teachers or parents. Administration of valid and reliable screening instruments and cross-checking the results with other data, such as the school records of the children's difficulties in learning and in working with others, are the essential mechanics of effective screening.

Once a child is identified by screening as emotionally handicapped, his parents are advised of the nature of the finding, and a plan is developed for individual study of the child and his difficulty. This study can be made by the appropriate school staff or by community mental health or private agencies. The specific purpose of the study is to determine the nature and extent of the child's problem, steps most likely to remedy or reduce the problem, and the best procedures by which the school and the child's teacher can provide for him the educational opportunities that will give him the help he needs to progress at the rate and to the point that his potential permits.

Research studies made by Rogers,[1] Ullmann,[2] Smith,[3] Bower,[4] and others have demonstrated the effectiveness of school screening procedures in the identification of emotionally handicapped children.

---

[1] Carl A. Rogers, "Mental Health Findings in Three Elementary Schools," *Educational Research Bulletin*, XXI, No. 3, March 18, 1942.

[2] Charles A. Ullmann, "Teachers, Peers, and Tests as Predictors of Adjustment," *Journal of Educational Psychology*, XL (May, 1957), 257-67.

[3] Louis M. Smith, "The Concurrent Validity of Six Personality and Adjustment Tests for Children," *Psychological Monographs: General and Applied*, Vol. 72, No. 457, 1958.

[4] Eli M. Bower, "Early Identification of Emotionally Handicapped and Delinquent Children," *Reference Papers—1960 White House Conference on Children and Youth*. Washington, D.C. (Available from Superintendent of Documents, Government Printing Office, Washington, D.C.)

Some of these procedures were subjected to analysis by Bower, Tashnovian, and Larson in 1954 and reported in a bulletin published by the California State Department of Education.[5] As part of this project, it was noted that although many instruments and ratings were available for screening purposes, few were used by teachers because of the time requirements and the difficulty of administering them, and because most of the instruments were better suited for diagnostic purposes than for screening. It was also found that practices in which both the separate and combined teacher, peer, and self perceptions were utilized were best for screening purposes. The problem for this study, however, was to develop instruments which the teacher could use successfully in the regular classroom situation. The following 10 conditions were, therefore, set up for the development of screening instruments and procedures:

1. The information to be collected by the teacher would be usable with large samples of school children, and the instruments used for collecting the data would be designed for group administration.

2. If so desired, the teacher could administer and score the screening instruments with little or no help from administrative or psychological personnel.

3. The administration and scoring of rating scales and tests would require a minimum amount of time and work on the part of the teacher.

4. The data should be obtainable as part of regular classroom routine and not involve the teacher in extra classroom duties, extra home visits, or individual test administration.

5. The data collected should help the teacher to obtain a comprehensive perceptual picture of the child from as many sources as is economically possible.

6. The data collected would not involve the use of questions pertaining to information of a highly personal nature to parents or children.

[5] Eli M. Bower, Peter J. Tashnovian, and Carl A. Larson. *A Process for Early Identification of Emotionally Disturbed Children*, Bulletin of the California State Department of Education, Vol. XXVII, No. 6. August, 1958.

7. The major purpose of collecting the data should be to identify children with emotional handicaps, not for diagnosis.
8. Screening would provide for earlier referrals of children in need of help to sources prepared to give the help required.
9. The information collected should be of such a nature that, in collecting and analyzing the data, the teacher would gain a better understanding of each child and be better able to provide for him the help he needs.
10. Collecting and analyzing the data should motivate the teacher to seek help for children with moderate or severe emotional handicaps.

All instruments employed in this study were designed, developed, and utilized specifically for the purpose of identifying children with moderate to severe emotional maladjustment. The instruments used at different grade levels are perceptually similar but are geared to the intellectual and maturity level of the children. With one exception, each of the instruments met the 10 conditions set forth.

Three types of instruments are used for screening purposes. These instruments are designed to collect three different perceptions of each child in a classroom: the teacher's perception of the child's day-to-day behavior, classmates' perceptions of the child's classroom and school behavior, and the child's self-perception. On the basis of previous studies of the screening procedure on large school populations, a ranking method has been found to be most effective for combining scores for screening. Children who score above a certain rank on any two or three of the screening instruments are those who are likely to be handicapped emotionally and therefore need diagnosis. The population thus selected through the screening process will include between 10 and 15 per cent of the school population.

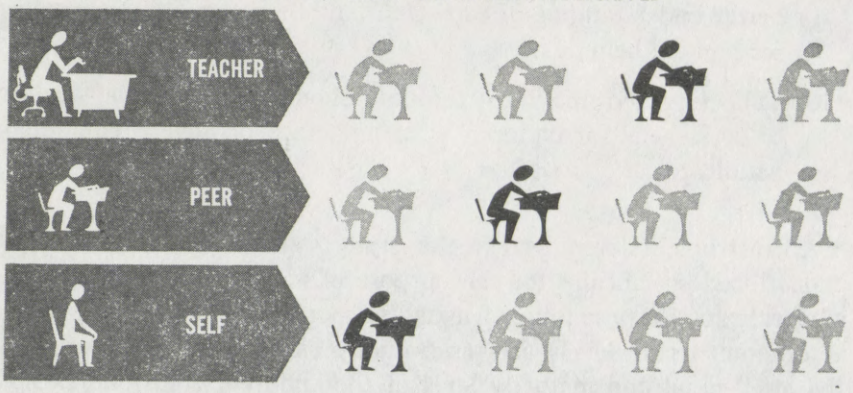
The instruments employed in this research study were developed specifically for the purposes of this study. They are as follows:

Teacher Rating: *Behavior Rating of Pupils*—all grade levels

Self Ratings: *Picture Game*—primary grades
Thinking About Yourself—elementary grades
A Self Test—secondary grades

Peer Ratings: *Class Pictures*—primary grades
Class Play—elementary grades
Student Survey—secondary grades

COMBINED RATINGS USED IN SCREENING PROCEDURE TO IDENTIFY PUPILS WHO ARE LIKELY EMOTIONALLY HANDICAPPED



A summary of the conclusions reached in this study of the use and effectiveness of the screening process follows:

1. It is possible and practical for the regular classroom teacher to use screening instruments to locate in the general school population those children who are most vulnerable to or handicapped by emotional problems. To administer all the screening instruments takes about 45 minutes of class time for the students and about three hours of work for the teacher. No special training is necessary for the teacher and he is not required to make judgments that go beyond his responsibilities as a teacher.
2. The screening tests for primary, elementary, and secondary grades which were developed and tested during this research project on the education of emotionally handicapped children are as reliable as most standardized ability and achievement tests commonly used in school.

3. The validity of the screening procedure has been subjected to many different tests. A ratio of nine out of ten children who were identified through the screening process were found to have moderate to severe emotional problems on the basis of individual studies. (See Table 8, pages 22 and 23.) By cross-checking school referrals of children with emotional problems, it was found that seven out of ten children who had moderate to serious emotional problems and who were identified by the screening instruments had not been identified or reported by the principals or school psychologists. It was evident that without some screening procedure a great proportion of children who need guidance services or school assistance because of their emotional difficulties would be missed. (See Table 9, page 23.)
4. The screening procedure enables the teacher to identify children with a variety of emotional problems. Each instrument used will help the teacher to identify children with specific kinds of emotional problems. For example, teachers and peers are sensitive to all the types of emotional handicaps described on page 14, and children themselves are aware of some kinds of emotional difficulties of a more intrapersonal nature. (See Table 10, page 24.)
5. Blind analyses of children identified through the screening procedure corroborate the effectiveness of the procedure. A total of 30 pairs of pupils were tested by two clinical psychologists without the psychologists having prior knowledge of the school histories or case histories of the children. In each pair, one pupil had been selected through the screening procedure and the other picked at random from the class. The psychologists were able to identify correctly 27 out of 30 children who were selected through the screening procedure at the primary and elementary grade levels. When the psychologists' ratings for each pupil were totaled, the scores for the group of children who were identified through the screening process and those of the children picked at random were significantly different. (See Table 11, page 25.) Research evidence of this kind indicates that through the screening procedure children are identified who have real emotional difficulties of a variety of types and of sufficient magnitude to warrant diagnostic study.

6. A screening procedure is an essential phase of the total program for emotionally handicapped pupils. Research evidence indicates that without an effective screening procedure a significant number of pupils with moderate or severe emotional handicaps are not identified. When a screening procedure to identify children in need of clinical study is employed, the amount of school staff time necessary to identify emotionally handicapped children is minimized and the results are obtained with the expenditure of considerably less time for the school and the staff than otherwise possible. The process also eliminates unnecessary work by the specialists whose responsibility is to make a diagnosis of the children found in the screening procedure who are likely emotionally handicapped.
7. The use of screening processes is helpful in getting teachers involved in the educational needs of children with emotional handicaps before the problem has become sufficiently severe or ingrained to be relatively unreachable. The involvement of the teacher is at this point positive, less motivated by frustration and anxiety, and conducive to the seeking of positive ways of educating the child.

TABLES

Tables 8, 9, 10, and 11, which follow, contain the data discussed in this chapter.

TABLE 8

Effectiveness of Screening Procedure in Identifying Pupils with Various Types of Emotional Handicaps

Behavior classification[1]	Assignment			
	Boys		Girls	
	Number	Per cent	Number	Per cent
Extremely poor interpersonal relations; bizarre, eccentric behavior	24	14	4	7
Shy, inhibited, timid, fearful	44	26	20	36
Generally aggressive in many situations	42	25	9	16

TABLE 8—Continued

Effectiveness of Screening Procedure in Identifying Pupils with Various Types of Emotional Handicaps

Behavior classification[1]	Assignment			
	Boys		Girls	
	Number	Per cent	Number	Per cent
Socialized delinquency, primarily a cultural problem where a child gets along with his gang but not with other groups	8	5	1	2
Organic—possible constitutional rather than emotional instability	7	4		
Other[2]	44	26	22	39
TOTAL	156	100	56	100

[1] Behavior classification system based on work of Richard L. Jenkins and Maurice Lorr as reported in "Patterns of Maladjustment in Children," *Journal of Clinical Psychology*, IX (January, 1953), 16-20.
[2] Pupils in this classification: 6 per cent were mentally retarded, 33 per cent had no problems or minor problems, and 61 per cent were handicapped by a variety of problems and could not be placed in any one of the other five classifications.

TABLE 9

Extent to Which the Study Screening Process Identified Emotionally Handicapped Pupils Previously Referred to School Psychologist or Principal

Screening procedure results with pupils identified by specialists as emotionally handicapped	Per cent of pupils at each grade level		
	Primary	Elementary	Secondary
Scores on all instruments indicated emotional handicap	66	64	88
Scores on one instrument indicated emotional handicap and scores on the other instruments indicated a borderline case	25	26	10
Scores on instruments indicated borderline case		6	
Not identified	9	4	2
TOTAL	100	100	100

TABLE 10

Distribution of Pupils on the Basis of Screening Results Obtained Through Combinations of Teacher, Peer, and Self Ratings, According to Behavior Patterns Described by Clinical Psychologists

Psychologists' behavior classification	Number of pupils with behavior as determined by screening procedure				Number of pupils	Per cent of all pupils
	Teacher and peer evaluations	Teacher and self evaluations	Peer and self evaluations	Teacher, peer, and self evaluations		
Poor interpersonal relations—bizarre, odd	9	0	1	4	14	13
Shy, inhibited, fearful, withdrawn	17	3	3	8	31	28
Primarily aggressive	17	3	3	14	37	33
Socialized delinquent, primarily culture problem, gets along with gang but not others	0	0	0	0	0	0
Organic, marked variability, unpredictable behavior, and instability	3	0	1	1	5	4
Others	9	2	7	6	24	22
TOTAL	55	8	15	33	111	100
Per cent of all pupils	50	7	13	30		

TABLE 11

Distribution of Clinical Psychologists' Ratings of 30 Pupils (10 from Primary Grades, 20 from Elementary Grades) Randomly Chosen from Emotionally Handicapped Identified by Study Screening Procedure and 30 Randomly Chosen from Pupils Who Were Not Identified as Emotionally Handicapped [1]

Degree of emotional adjustment	Number with rating		
	Total rating	Emotionally handicapped	Not emotionally handicapped
Good	7		
↑ Plus ratings	6		1
	5		1
	4		2
	3		8
	2	1	5
	1	4	4
Neither good nor poor	0	1	6
↓ Minus ratings	1	5	1
	2	5	
	3	3	
	4	6	2
	5	2	
	6	2	
Poor	7	1	
TOTAL		30	30

[1] The ratings were based on the results of psychological tests generally used for such purposes. Each pupil was rated on each test by the psychologists on a scale ranging from —2 to +2. The psychologists were uninformed regarding which, if any, of the pupils were screened as emotionally handicapped.

Chapter 4

THE RESEARCH PLAN

In order to ascertain the extent to which special programs for emotionally handicapped children, their teachers, or their parents were helpful to the child, a research plan was developed to answer the following question:

> Are emotionally handicapped children significantly affected by each of the special programs as shown by a comparison of school behavior after one and two years with that of a similar group of emotionally handicapped children who have not been in special programs?

The research project was planned to include several types of special programs for the emotionally handicapped and to permit several school districts to conduct programs of the same type. However, each district was permitted to conduct only one program, and enrollment in this program was limited to a selected number of emotionally handicapped pupils. These provisions were made so that (1) each program could be conducted by the regular administrative and instructional staffs of the school with the assistance and guidance of the project research staff; and (2) the investment of time required would not place unnecessary strain upon members of the school staff who had direct responsibility for the program.

Comparability of pupils in one district with those in another, and pupils in one region of the state with those in another, was accomplished by utilizing the same screening instruments and procedure in all the participating school districts to identify the pupils from which the ones were selected for the experimental and control groups. Assignment of pupils to these groups was made through random sampling. The project's research procedure provided for the six steps that follow:

Step 1. *Screening all pupils in the school population to identify those who were possibly emotionally handicapped*

This was accomplished by employing teacher ratings, peer ratings, and self-ratings.

Step 2. *Selection of the group of emotionally handicapped pupils for study*

The pupils selected qualified on at least two of the three criteria that follow:

a. One of five highest teacher ratings for the class
b. One of the five highest peer ratings for the class
c. One of the three highest self-rating scores made by boys and one of the three highest made by girls

Step 3. *Individual appraisal of pupils selected by screening procedure*

This appraisal involved use of data secured from the following sources:

a. Case history and behavior record
b. Individual intelligence test results
c. Results of selected psychological tests other than intelligence tests
d. Clinician's summary and conclusion regarding emotionally handicapped children, excluding those with gross physical disabilities, those who would qualify under present state law for mentally retarded programs, and those whose parents objected for any reason

Step 4. *Selection of pupils to participate in study*

A random selection was made from the emotionally handicapped pupils identified to determine which pupils were to be assigned to special programs and which ones were to be assigned to the control group and kept in the regular program.

Step 5. *Placement in programs*

The pupils identified as emotionally handicapped were assigned to programs and to receive services of the types that follow:

a. Special class—elementary
b. Special class—secondary
c. Special placement
d. Learning disability grouping

e. Adolescent group counseling
f. Special activity groups
g. Mental health consultation to teachers of regular classes
h. Child study meetings by teachers
i. Human relations period
j. Parent group counseling
k. Home economics
l. Identification

Step 6. *Evaluation of effectiveness of experimental programs and special services*

The effectiveness of the experimental programs and special services were determined according to the following:

a. Change in achievement
b. Change in teacher rating
c. Change in peer rating
d. Improvement in performance on intelligence tests
e. Qualitative evaluation by school personnel

As directed by provisions of Senate Bill 62, Steps 1, 2, and 3 were designed to provide data from which appropriate recommendations could be made for identifying emotionally handicapped children in primary, elementary, and secondary grades. Steps 4, 5, and 6 were designed to collect information to discover the most effective and economical educational adjustments for children with emotional handicaps.

The professional experience of the research staff and the professional staffs of each school district were utilized in formulating each program and in assessing the administrative problems connected with the program.

A follow-up of an earlier study—reported on pages 7 through 11—provided data on the relationship between early identification and treatment of children with emotional problems and the ultimate need for the state to provide treatment and rehabilitation for the individuals at a later time.

Chapter 5

SPECIAL EDUCATIONAL PROVISIONS STUDIED

Once the emotionally handicapped pupils in a school district are identified and diagnosed, the administrative and instructional staffs should be ready to take the steps that are required to provide the help the pupils need. The same help should not be provided for all because the pupils' handicaps will range from those that are minor to those that are severe. In many instances the pupils will have had the handicaps for long periods of time and as a result will be poorly equipped to profit from help. In a few instances the handicaps will be of such nature and duration that the district will wish to seek special help. However, in a large majority of the cases the school district will be able to make its greatest contribution by providing each handicapped pupil with the type of educational opportunity he needs in order to make the educational progress and social adjustment his ability permits.

The first year in which special provisions are made for emotionally handicapped pupils will probably be the one in which the most difficult problems will have to be solved. In each succeeding year the difficulty of the problems should decrease. Once a school district has a procedure for screening annually to identify each pupil who is emotionally handicapped, it will soon find that the special program required can be conducted with comparative ease. This will be true because each pupil with an emotional handicap will be identified early in his school life or soon after the onset of his handicap. The district will then be working with pupils whose handicaps are still minor. This being the case, the pupils will not be more than mildly retarded educationally or socially. Therefore the special program will not have to provide for extended use of remedial measures. The program will, however, provide for the required remedial measures to be taken when they will prove of greatest value in the shortest possible length of time.

In this research project approximately 45,000 pupils in 50 school districts were subjected to screening procedures to identify those who were emotionally handicapped and in need of help. About 1,200 who

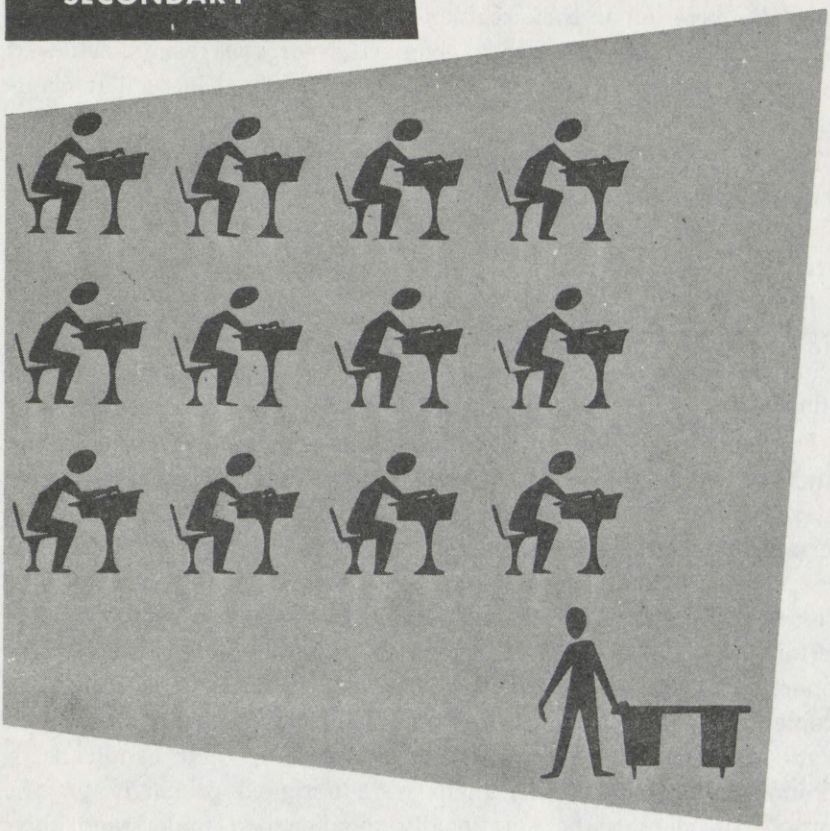
were moderately to severely handicapped were used in the study. Half of these children were randomly selected for special help; the other 600 were left in their regular classrooms and treated as control groups. This made possible a comparison of the results achieved through the special provisions with results achieved in regular classroom situations.

The special provisions for the handicapped pupils in the experimental group were made according to plans that had been or were being employed in California public school districts for the purposes specified. However, the plans were modified as required to make them usable in the specific situations. The plan used in each school district was one that the district had not used previously. This provision was made so that the comparison of program results would be reliable.

The plans employed in providing special help for the emotionally handicapped were varied in type so that study might be made to determine the potential values of the provisions made in each plan. Certain of the plans were designed to provide in special classes for the emotionally handicapped the help that was needed; others, to provide the required help through special provisions in regular classes. Certain of the plans were designed to provide teacher and parents opportunity to become increasingly well informed regarding the problems of emotionally handicapped children and how their children might be helped to best advantage to overcome their handicaps or minimize the effects. Other plans were designed primarily for the purpose of helping the emotionally handicapped understand their problems and to discover how they might help themselves to advantage.

Descriptions of the various plans and designations of the grade levels at which each of the plans was used are presented on the following pages. The illustration that accompanies each plan shows graphically the conditions in which the educational provisions were made. In these illustrations the colored figures represent pupils who were identified as emotionally handicapped; the black figures, pupils who were *not* identified as emotionally handicapped as well as the teacher or other person responsible for the work being done. The description of each plan has been condensed so that it contains only a brief statement of the salient features.

SPECIAL CLASS—SECONDARY



Instruction: By teacher qualified to teach in English, arithmetic, and social studies and skilled in remedial work.

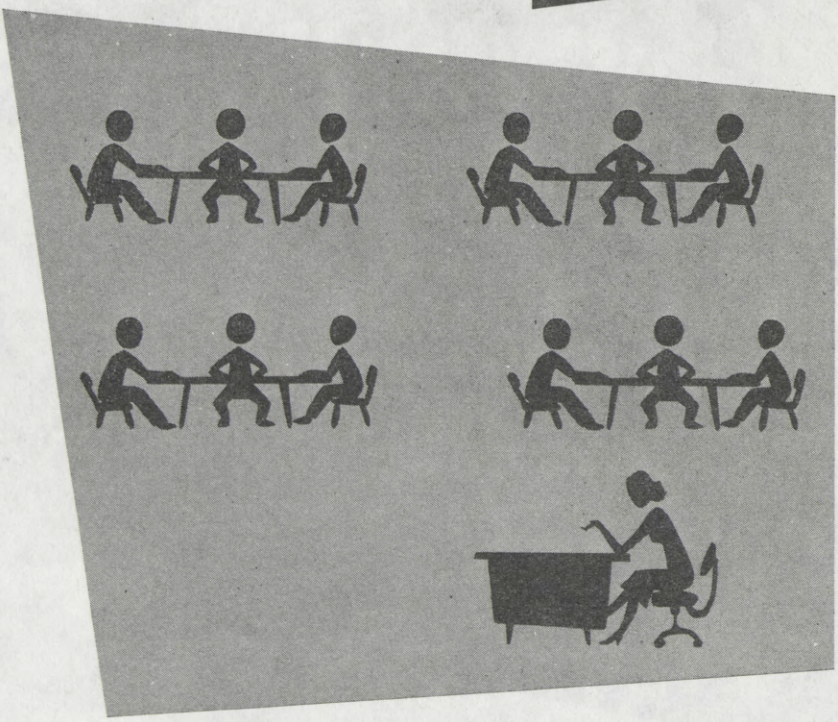
Teacher help: Through consultation with mental health specialists and assistance of district guidance and curriculum personnel.

Class composition: 10 to 15 emotionally handicapped students.

Class time: About three hours daily; students assigned to regular classes for certain work during other hours in school day.

Educational provisions: Life-experience units incorporating skills of language and mathematics. Problems of employment, recreation, and human relations stressed. Individual help provided for each student as such help is needed. Class sometimes conducted as part of the work experience educational program.

SPECIAL CLASS—ELEMENTARY



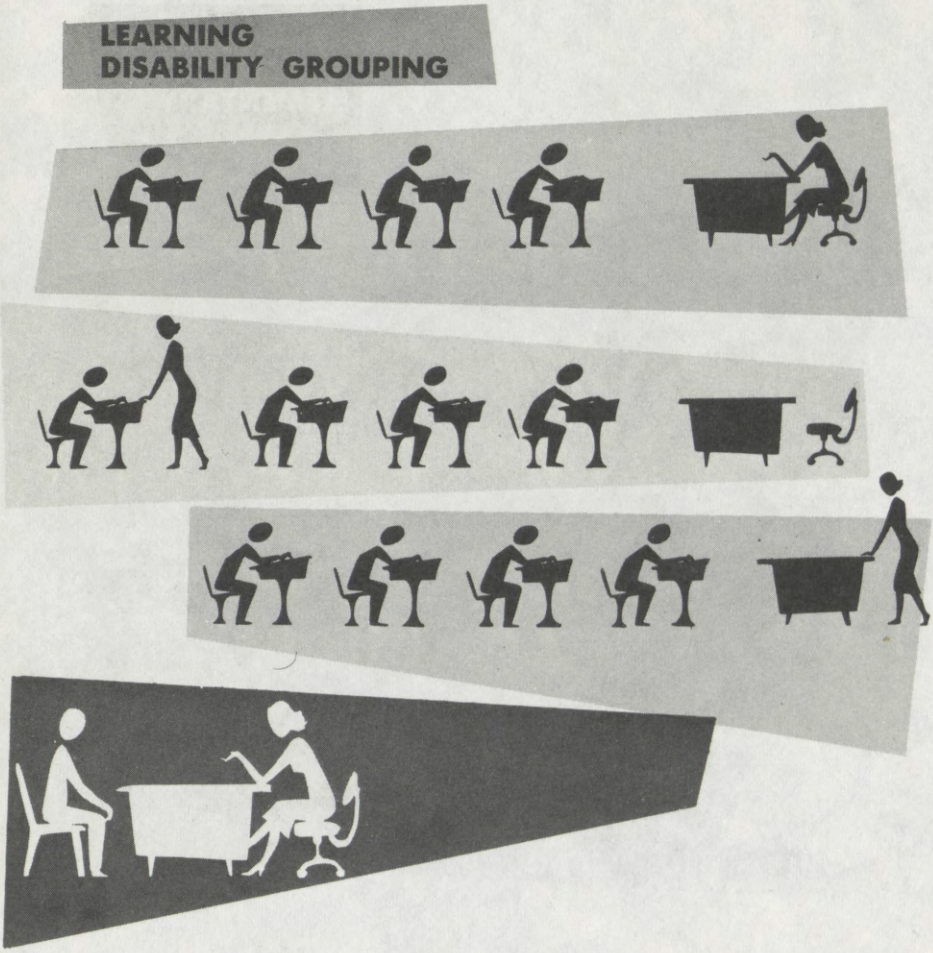
Instruction: By teacher interested in working with emotionally handicapped children.

Teacher help: Through consultation with psychiatrist, psychologist, or social worker; through assistance of guidance and curriculum personnel of district.

Class composition: 8 to 12 emotionally handicapped pupils.

Class location: In elementary school building centrally located in the area where the pupils generally attend school.

Educational provisions: Content that of basic program appropriate for the pupil. Instruction adapted to each pupil's needs and ability. Behavior problems handled by teacher, with principal's help if needed.



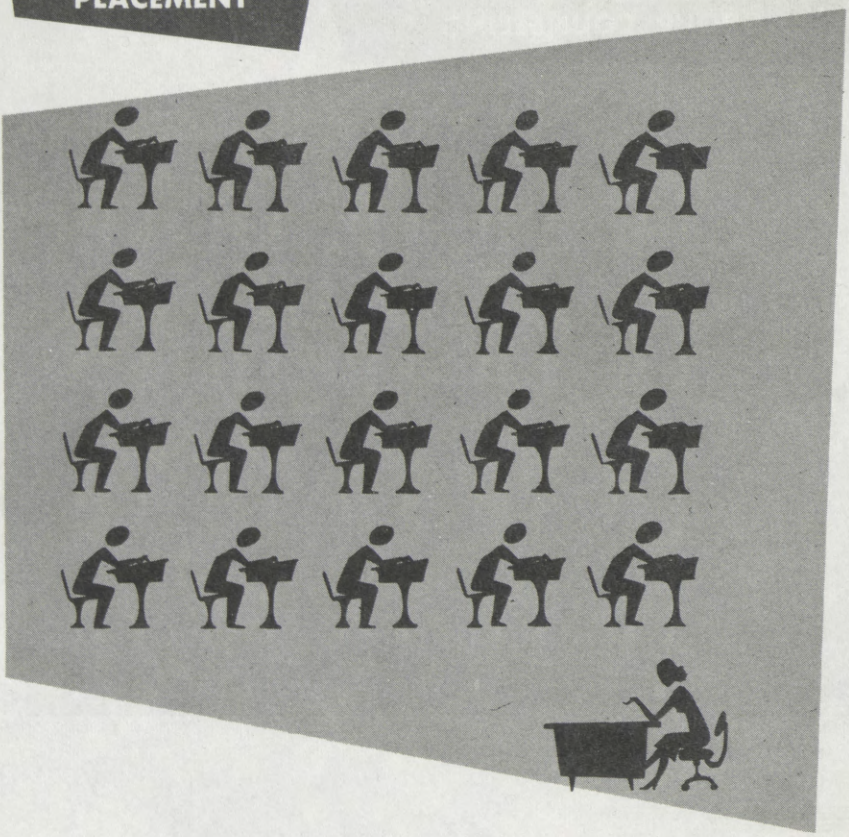
Instruction: By specialist in remedial instruction.

Teacher help: Mental health consultant; guidance and curriculum staff personnel.

Group attendance: Maximum of 8 emotionally handicapped pupils with disability in skill subject, generally reading or arithmetic; one or two hours daily, one to five days a week. Pupils taken from regular classroom usually when class is working in same subject.

Educational provisions: Child's needs are determined and the required instruction then provided. In reading, emphasis given to basic skills; all methods employed in some modified form. In arithmetic, basic skills stressed through use of concrete materials. Once a pupil has the ability required for his grade level, he is capable of doing work in the regular classroom.

SPECIAL PLACEMENT



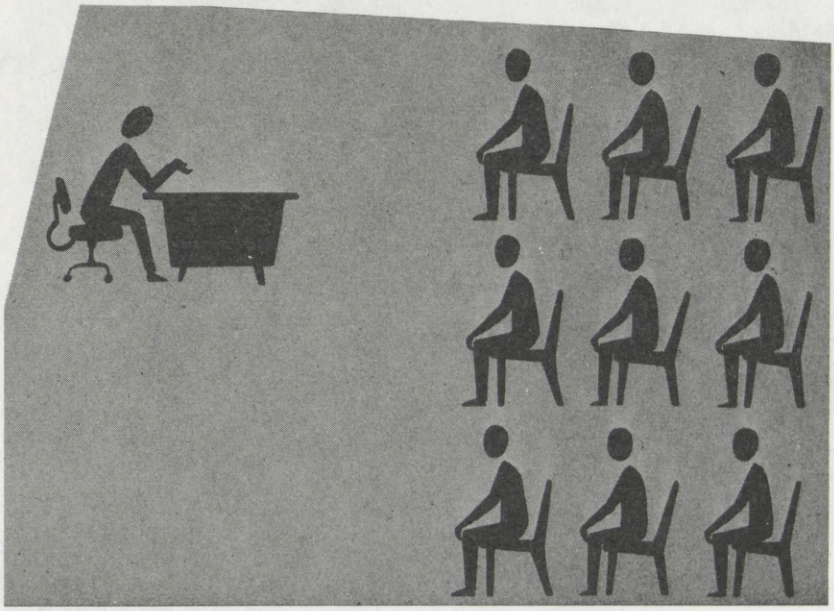
Instruction: By teacher who is (1) skilled in teaching emotionally handicapped and in giving remedial help in basic subjects; and (2) interested in working individually with students and their parents.

Teacher help: Regular meetings with mental health consultant; guidance and curriculum staffs also assist.

Class composition: Small, selected regular class of about 20 students, including 2 to 4 emotionally handicapped students who are chosen for special placement in this class.

Educational provisions: Educational program for emotionally handicapped students as well as program for remainder of class is that of regular grade. Individual assistance is given wherever need is indicated.

ADOLESCENT GROUP COUNSELING



Purpose: To help emotionally handicapped students make good personal and social adjustment in high school.

Group leadership: Clinical psychologist or psychiatric social worker (not a regular member of school staff) who has had experience in working with emotionally handicapped adolescents.

Group attendance: About 10 specially selected emotionally handicapped students; one-hour sessions, two or three times per week.

Procedure: Student-centered discussion concerning problems common to the group. Group leader guides discussions, which are intended to help clarify school problems and peer conflicts.

Educational provisions: Course work and training in skills are provided for this group in regular daily school program just as for other students. Emphasis in counseling session is on personal and social adjustment.

SPECIAL ACTIVITY GROUPS

Participants: 6 to 8 emotionally handicapped pupils; teacher specially trained for working with emotionally handicapped.

Purpose: To provide emotionally handicapped children with opportunity to engage in activities that may have educational value.

Time required: One- to two-hour periods twice a week. Time no greater than that spent in other school activities such as orchestra, chorus, speech improvement.

Procedure: Special room available. Teacher leads rather than directs. Atmosphere nonjudgmental, nonthreatening; children encouraged to use play materials to express themselves freely. Rules differ from those of regular classroom. Teacher meets regularly with mental health specialist regarding problems encountered.

Educational provisions: Provisions for children's regular education are made not in these activities but in regular classroom.



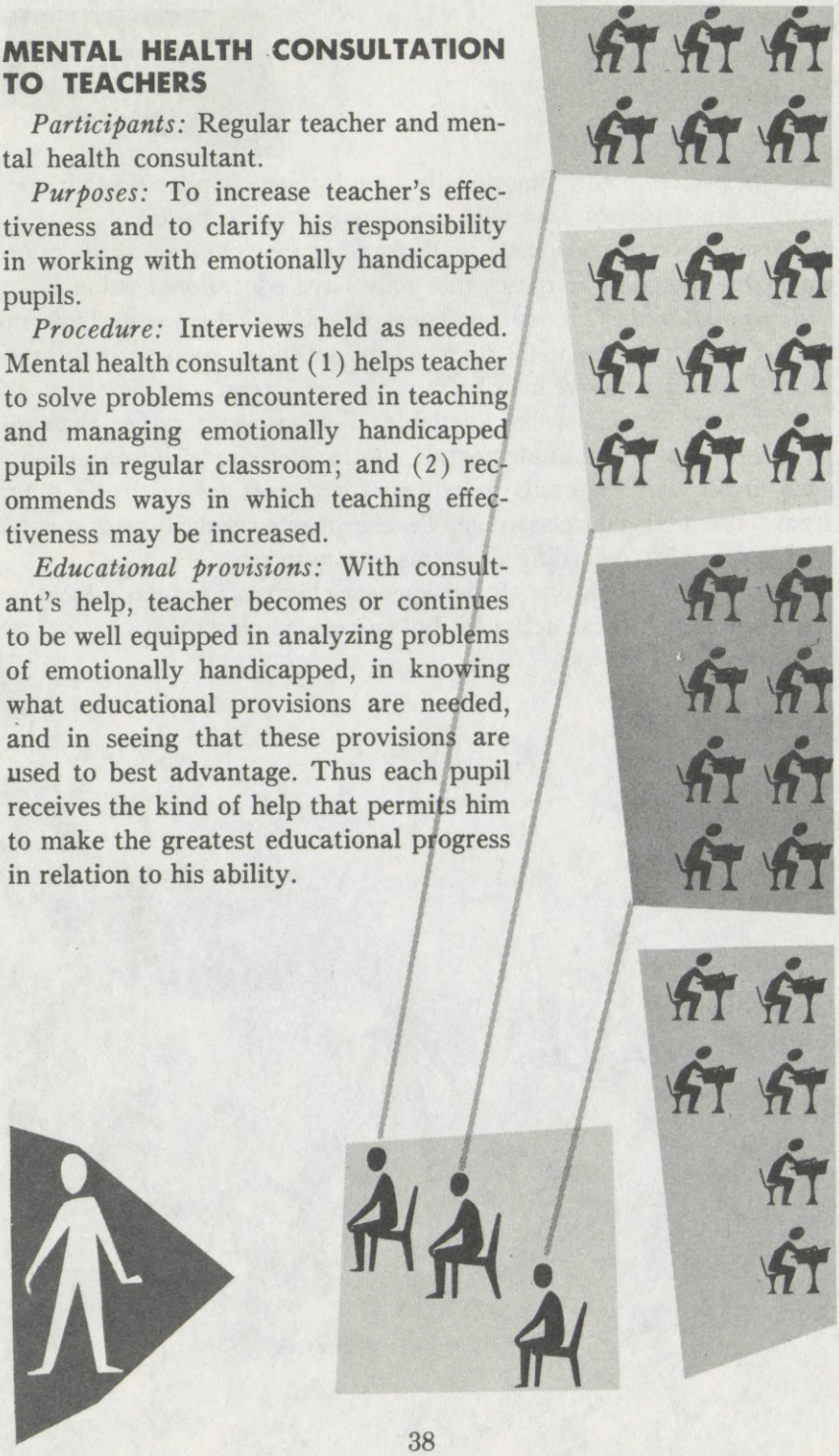
MENTAL HEALTH CONSULTATION TO TEACHERS

Participants: Regular teacher and mental health consultant.

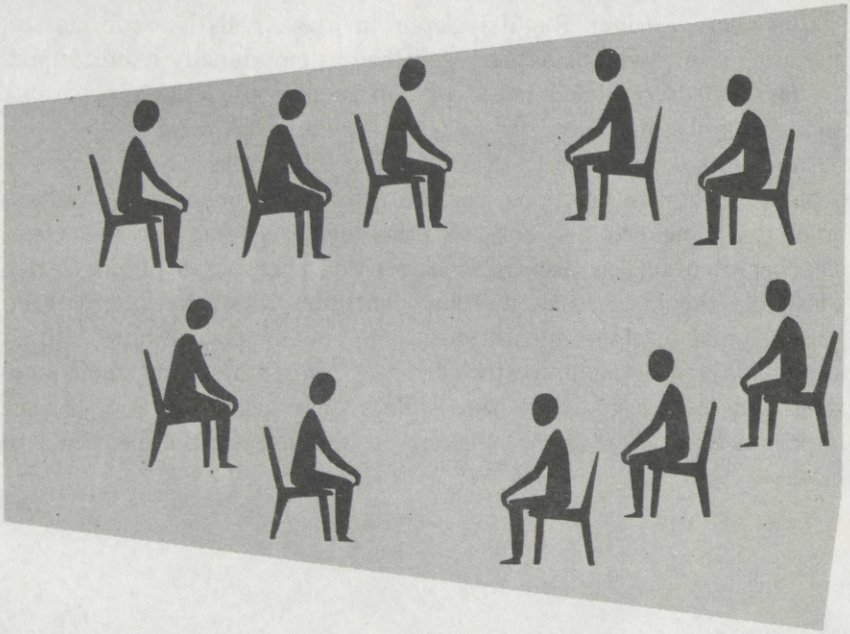
Purposes: To increase teacher's effectiveness and to clarify his responsibility in working with emotionally handicapped pupils.

Procedure: Interviews held as needed. Mental health consultant (1) helps teacher to solve problems encountered in teaching and managing emotionally handicapped pupils in regular classroom; and (2) recommends ways in which teaching effectiveness may be increased.

Educational provisions: With consultant's help, teacher becomes or continues to be well equipped in analyzing problems of emotionally handicapped, in knowing what educational provisions are needed, and in seeing that these provisions are used to best advantage. Thus each pupil receives the kind of help that permits him to make the greatest educational progress in relation to his ability.



CHILD STUDY MEETINGS



Participants: Teachers of regular classes (in groups of 8 to 15 each); occasionally a consultant.

Purpose: To help teachers learn more about certain pupils and thereby educate these and other pupils with more fruitful results.

Procedure: Group discussion every two weeks, two hours after school. Teacher brings to meeting information about a pupil of his choice, one who may or may not have been identified as emotionally handicapped. Information is gathered from school records; conferences with other teachers; visits to child's neighborhood; analyses of child's drawings, stories, and other school work; and observations of child in school setting. Discussion focuses on pupils chosen by group. Consultant may assist.

Educational provisions: By acquiring additional information and learning ways of increasing teacher competencies, members of group are able to give better assistance to pupils discussed and to other pupils as well. Pupils given individual help as needs arise.

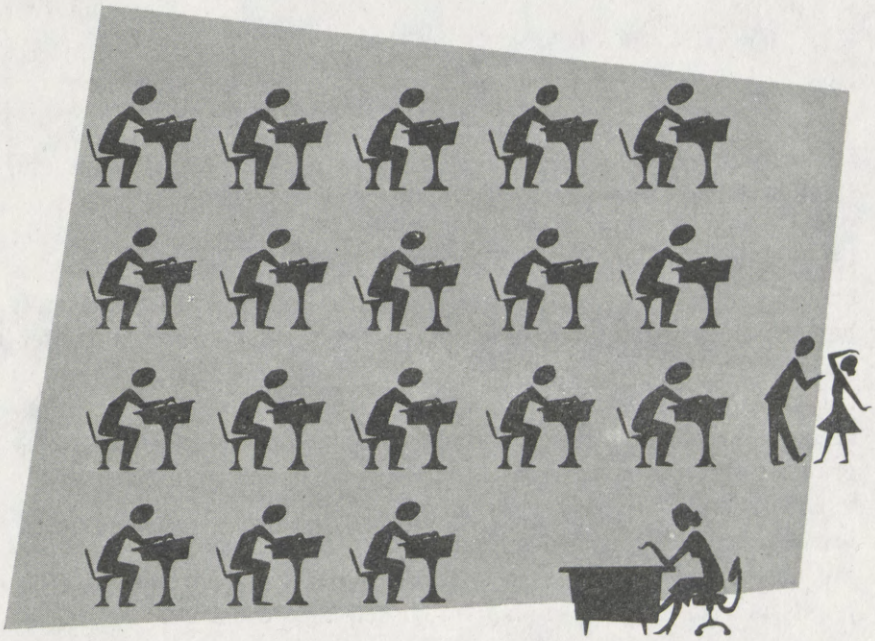
HUMAN RELATIONS PERIOD

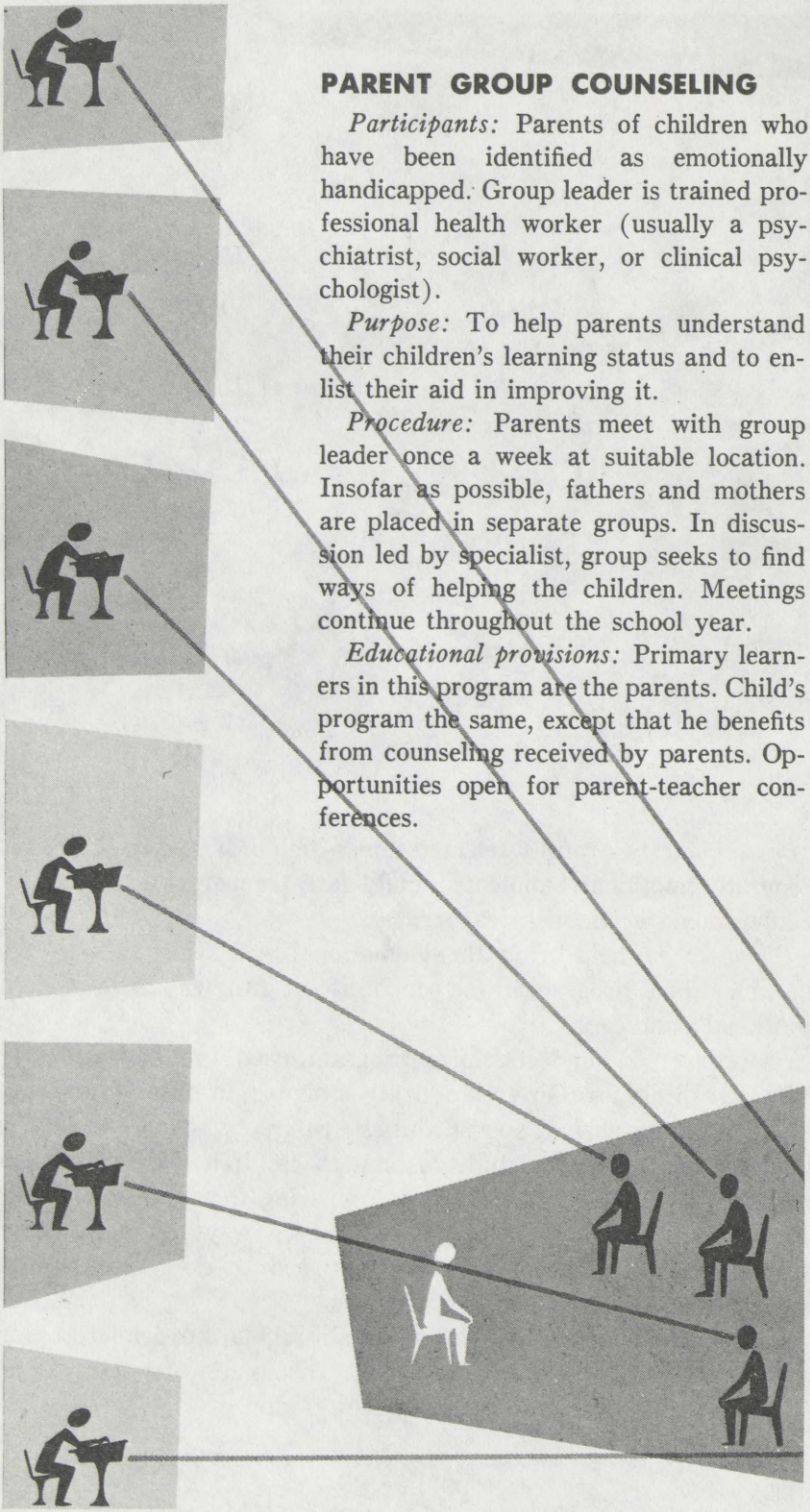
Instruction: By regular teacher.

Class composition: Regular pupils in fifth or sixth grade classes, including pupils who have been identified as emotionally handicapped.

Class schedule: Scheduled as part of regular educational program; approximately one hour per week in regular classroom.

Educational provisions: A story that illustrates or highlights a problem in human relations, such as inferiority feelings, intolerance, cruelty, suspiciousness, and unfriendliness, is read to the class. Teacher then acts as discussion leader and encourages pupils to discuss fully theme of story. Teacher concludes lesson by summing up points found in story and those brought out in discussion. Children are thus given opportunity to learn (1) something about their emotions and feelings and how these affect their behavior; and (2) the importance of their own behavior in relation to the behavior of others.





PARENT GROUP COUNSELING

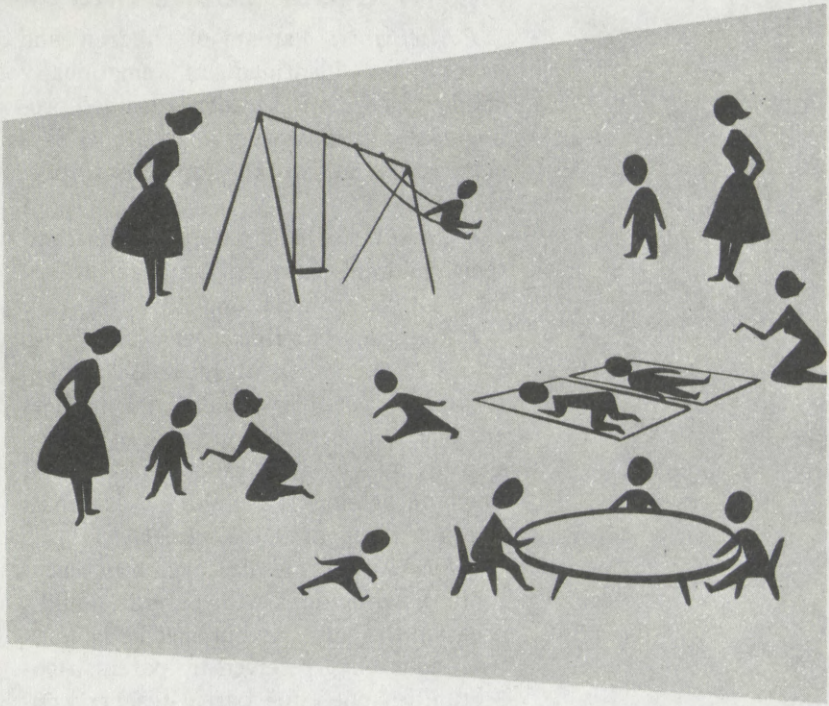
Participants: Parents of children who have been identified as emotionally handicapped. Group leader is trained professional health worker (usually a psychiatrist, social worker, or clinical psychologist).

Purpose: To help parents understand their children's learning status and to enlist their aid in improving it.

Procedure: Parents meet with group leader once a week at suitable location. Insofar as possible, fathers and mothers are placed in separate groups. In discussion led by specialist, group seeks to find ways of helping the children. Meetings continue throughout the school year.

Educational provisions: Primary learners in this program are the parents. Child's program the same, except that he benefits from counseling received by parents. Opportunities open for parent-teacher conferences.

HOME ECONOMICS



Participants: Carefully selected junior high or high school girls with moderate emotional handicaps; child-care teacher or head teacher; regular home economics teacher.

Purpose: To help bring about emotional well-being and to enrich the educational program in the school life of girls who have moderate emotional handicaps.

Procedure: Home economics program used in association with child-care program. Girls chosen are assigned to observe and carry out, under supervision, special duties in nursery school, usually one hour per day. Duties include reading to children; helping them on playground, at snacks, at lunches; preparing them for rest. Discussions held with home economics teacher on ways of working with children. Girls assigned special projects, such as doing a case study, making a baby-sitter's kit, creating toys.

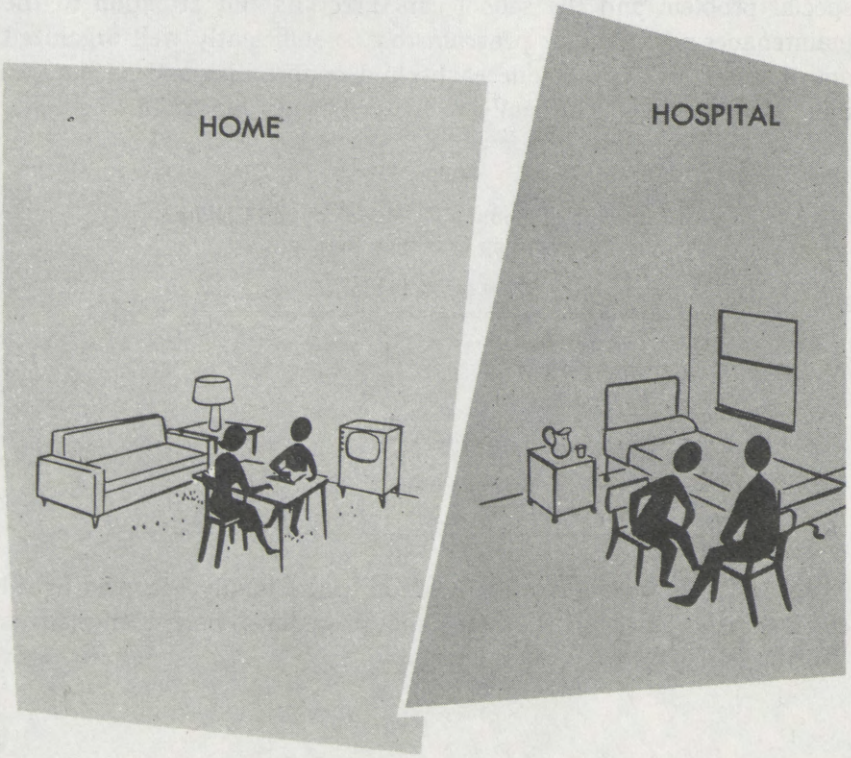
Educational provisions: Girls maintain regular academic program; nursery work done during free period. Discussion of nursery school activities held during home economics period.

HOME AND HOSPITAL INSTRUCTION

Although the research study contained no provision for determining the importance of home and hospital instruction for emotionally handicapped children and the type of instruction that would produce the desired results, a real need for instructing certain emotionally handicapped children either in their homes or in hospitals became evident to the research staff during the course of the study.

Instruction of this type could be provided in the school district's regular program of home and hospital instruction. However, it would be necessary to make whatever provisions would be required to meet each handicapped child's needs, and to do so through practices helpful to the child both in his learning experiences and in overcoming or minimizing his emotional handicap.

A somewhat complete appraisal of the importance of home and hospital instruction for emotionally handicapped children and its various uses is on pages 67 and 68.



Chapter 6

FINDINGS

Emotionally handicapped children, like other children, have varied socioeconomic backgrounds, generally live with their own parents, and have average intelligence. Also, like other children, they come from families of various sizes and occupy various positions in their families—some are the only child, some the oldest, some the youngest, some the in-betweens. They differ from other children in that they are (1) emotionally handicapped; and (2) educationally retarded, especially in reading and arithmetic. Each of these conditions continually plays havoc with the other, with the result that both continue to become increasingly worse until essential steps are taken to remedy the situation. The school's responsibiliy for the education of each child, therefore, becomes one of finding ways in which the effects of the handicap can be reduced to a minimum and the child's educational achievement can be brought to the highest level his ability permits. Once this is accomplished, the child will cease to present a special problem and the school can direct its full attention to the maintenance of a regular program that is sufficiently well organized and administered to provide each child opportunity and encouragement to advance educationally to the peak level his potential allows.

TABLE 12

Distribution of Emotionally Handicapped Children According to Sibling Relations

(N = 461)

Family status	Per cent
Only child	9
Older or oldest child	33
Second child	40
Third child	16
Fourth child	6
Other	5

Table 12 shows the relative position in the family occupied by all children who, through the screening procedure, were identified as

emotionally handicapped and then provided special help with their problems. It is apparent from the data that the family relationships enjoyed by the emotionally handicapped are as varied as might be found in any group of children chosen at random. These facts make it apparent that emotional handicaps are not necessarily related to a child's position in his family.

TABLE 13

Distribution of Emotionally Handicapped Children According to Status of Parents or Guardians

(N = 461)

Child's family	Per cent of emotionally handicapped
Mother and father	84
Mother or father	9
Grandparents	1
Foster parents	1
Relatives	Less than 1
Father and stepmother	1
Mother and stepfather	4

TABLE 14

Distribution of Fathers of Emotionally Handicapped Children in California and of the Total Adult Male Population in California According to Occupation

(N = 461)

Occupation	California fathers	
	Per cent with emotionally handicapped children	Per cent of state total
Professional and managerial	11.9	26.0
Clerical and sales	8.2	14.6
Service	18.0	7.6
Skilled	17.5	21.1
Semiskilled	36.0	16.7
Unskilled	8.4	14.0

Table 13 shows the adult relationships of those maintaining the homes of the emotionally handicapped children. The proportion of those children who live in homes with their own parents is similar

to that of all children. And the proportions that live in other conditions are also similar to those of all children. These facts make it apparent that emotional handicaps cannot be predicted on the basis of the status of the parents or guardians of the child.

Table 14 (page 45) shows the types of employment pursued by the fathers of the emotionally handicapped children studied as compared to those of all employed males in California. This shows that fewer emotionally handicapped children had fathers who worked in professional or managerial occupations than one would expect in the population, while more such children had fathers in semiskilled occupations than one would expect in the population. Further research is needed to clarify the meaning of these differences.

Table 15 shows the average intelligence quotients of the emotionally handicapped pupils studied. Girls' IQ's were slightly lower than those of boys, but the difference could not be considered as significant. The significant fact is that the pupils had average intelligence and that the same condition would prevail for any heterogeneous group and for the school population as a whole.

TABLE 15

Distribution of Emotionally Handicapped Children According to Intelligence Ratings

(N = 461)

Test	Average intelligence quotients		
	Boys	Girls	Boys and girls
Group intelligence	101	98	100
Individual intelligence	99	97	98

Table 16 shows the emotionally handicapped children's achievement quotients in reading and arithmetic. The quotients, which are derived by dividing achievement age by chronological age, are comparable to IQ's which are derived by dividing mental age by chronological age. In either instance if both ages are equal, the score is 100. Since the average IQ of the emotionally handicapped was 100 and the average achievement quotient in reading 95 and in arithmetic 94, it is apparent that it is possible to predict that an emotionally

TABLE 16

Distribution of Emotionally Handicapped Children According to School Achievement

(N = 403)

Subject	Achievement quotient[1]
Reading	95
Arithmetic	94

[1] Computed by changing the achievement grade placement into an achievement age and dividing by the pupil's chronological age. The quotients can be readily compared with ability as measured by group intelligence tests.

handicapped pupil will not make the academic achievement that other pupils will make. And in those circumstances in which pupils' academic achievement is less than their potential permits, it may be possible to assume that the pupils are handicapped in some degree by emotional disturbance.

Table 17 shows the comparative results of evaluations that were made regarding the special provisions for the emotionally handicapped children studied.

TABLE 17

Comparison of the Results of Special Provisions for Experimental Groups with Those of Regular Provisions for Control Groups, and with the Ratings of Administrative Feasibility of Each Type of Provision

Provision	IQ	Achievement	Peer rating	Teacher rating	Administrative rating	Total rating
Special class—elementary	+	+	★	+	A	+
Special class—secondary	0	+	0	0	A	+
Special placement	0	0	—	0	C	0
Mental health consultation	+	0	0	0	A	0
Child study	★	0	0	0	A	0
Adolescent group counseling	0	+	0	+	A	+
Special activity groups	—	0	+	0	B	0
Learning disability grouping	+	★	★	+	B	+
Parent group counseling	—	—	—	—	C	—
Home economics	0	0	0	0	B	0
Identification	0	0	+	0	B	0

★ Difference significant at <.10
\+ Difference significant at <.30>.10
0 Not significant
— Difference significant at <.30>.10 in favor of control groups

A Administrative assets heavily outweigh liabilities
B Administrative assets and liabilities about equal
C Administrative liabilities outweigh assets

In the provisions of Senate Bill 62 of the 1957 Legislature, five areas of inquiry about the education of emotionally handicapped children were proposed. In essence, these areas of inquiry were (1) criteria by which emotionally handicapped children could be identified; (2) screening procedures by which children who are probably emotionally handicapped might be identified for study so that the school might know how best to educate each child; (3) the effectiveness of school provisions designed to help educate emotionally handicapped children; (4) the relationship between early identification of emotionally handicapped children and their rehabilitation; and (5) the administrative problems and costs of developing and operating such programs. A summary of the findings follows.

CRITERIA FOR IDENTIFICATION OF EMOTIONALLY HANDICAPPED CHILDREN

Emotionally handicapped children are those who are markedly ineffective and unproductive learners as compared to their potential, or those who behave in a markedly hostile or alien way toward self or others. What is most characteristic of this group is that they present learning problems or negative behavior with which the school is unable to cope when regular educational or counseling techniques are used. As a result, emotionally handicapped children often show a pattern of educational retardation, lack of interest in learning, and behavior designed to irritate and incense teachers, counselors, vice-principals, and other pupils. Some, however, resolve their difficulties by crawling into shells of their own making. The selection of the kind of difficulty from which the presence of the emotional handicap is inferred is related to the specific genetic and life experiences of the child. Many emotionally handicapped children are readily identified by the school; others, however, are not discovered until their difficulties have progressed beyond a point where they cannot be helped by simple adaptations made in the regular school program.

The children selected for this study are called *emotionally handicapped.* This term is not intended to be a psychiatric classification or an educational pigeon-hole; rather, a general description of the type of handicap which the children have. The children might just as well be called "problem-prone," retarded or reluctant learners, or frustrated. In all cases, the major sources of their difficulty lie in con-

fused or inadequate feelings about themselves or in their relationship to the school.

SCREENING AND INDIVIDUAL STUDIES

It was found in the study that emotionally handicapped children can be identified early in their school careers and that the cost of making the identification is reasonable. The screening procedure can be administered in much the same manner as vision or hearing screening procedures. The use of such procedures has proved to be a highly successful means of directing attention to children who probably need individual attention of some kind.

Screening and invididual study are separate processes. Effective screening holds to a minimum the number of individual studies that are required. Individual studies have as their purpose the discovery of relevant causative factors about the child's learning or behavior difficulties and the development of a plan of educational action based on such knowledge. In each instance the individual study should be conducted only after the child's parents have granted their permission and understand fully the reasons for the study and the specific purpose for which the results will be used. The help of psychologists, social workers, physicians, psychiatrists, and school nurses should be of value in making the studies. Information from teachers, principal, parents, and others who know or have known the child should be used in the endeavor to understand why the child is not learning and what might be done about it. It should be emphasized that the purpose of the screening and, where necessary, of the individual study is not that of classifying or labeling children; the sole purpose is to bring enough facts to bear upon the child's problem so that plans can be made to provide the help he needs to make the desired educational progress. The contribution and value of individual studies in helping teachers and principals successfully educate reluctant or disinterested pupils have been amply demonstrated in this research study.

EVALUATION OF THE EFFECTIVENESS OF THE SPECIAL PROVISIONS

In all instances the special provisions worked successfully with some children. This was, in part, a result of (1) the influence that the

school's participation in the program had upon teachers; and (2) the increased individual attention paid to the children. However, a considerable amount of information was gathered on the over-all effectiveness of each type of special provision by comparing the progress made by the pupils in the experimental group with that made by the pupils in the control group. The comparisons were based on changes in school achievement, teacher ratings, peer perceptions, self-perception, and IQ's. Consideration was also given to the kinds of children who were helped and the characteristics of the special program that helped the children. Finally, the administrative assets and liabilities of each program were evaluated by the research staff.

The results of the program evaluations are presented here according to each special provision. The evaluations of pupils' progress in the programs are presented, in part, by descriptions of typical real cases. These descriptions are in their original form except that fictitious names have been substituted for the real names. An over-all summary of the statistical comparison of the effects of each program and the evaluation of the administrative assets and liabilities of each is presented in Table 17.

The following, then, are typical reports describing the results of the special provisions that were made in this study for emotionally handicapped children. Accompanying each of these reports, information is supplied regarding the special provision as to (1) the type of children best served; (2) how children who have emotional problems are helped; and (3) the administrative assets and liabilities.

Special Class—Elementary

The following report written by the teacher of a special class is typical of those received regarding the success of the special classes conducted for elementary school pupils with emotional handicaps:

> Charles was eleven years, seven months old when he entered the special class. He was a stocky, well-built boy, extremely hyperactive and unsociable. An electro-encephalographic study and a neurological examination were interpreted as normal. It had been suspected that he had some organic trouble and was given medication by his doctor, but no change in behavior was apparent. He was extremely quick-tempered, argumentative, surly, stubborn; used obscene language; and was the instigator in many infractions of rules. He jiggled constantly, both at his desk and out on the school grounds.
>
> Charles has average intelligence, and yet he was over 2½ years below his grade expectancy when he entered the special class. He was not interested in

his work and could not concentrate for more than a few minutes. The boy had been transferred from school to school where he spent most of his time sitting in the office. He had had a difficult time at home, too, and had lived with an indulgent grandmother for a year before being assigned to the special class.

Since there are fewer children in the special class than in his regular class, I was able to work closely with Charles. Firm, consistent, and kind treatment, with pressure applied at opportune moments, resulted in progress and stability for the boy. Gradually, Charles began to take pride in his progress. Success brought results. There was a recession in his aggressive behavior which in turn brought him much-needed friends. Assignments were turned in on time, and his academic work showed startling gains. In the two years he attended the special class, he achieved 4½ years in reading, 3 years and 8 months in arithmetic, and a total achievement of 3 years and 5 months in all subjects. This brought his score up to his expected grade placement.

From the special class he was placed in the regular classroom, where he has continued to maintain his academic progress. The stability in behavior patterns which the boy developed in the special class are carrying over now that he is back in the regular program.

TYPES OF CHILDREN BEST HELPED

The special class at the elementary level can best serve emotionally handicapped children who are unable to learn in a regular classroom situation but are able to go to school and profit from the special class program. The special class also provides a beginning program for those pupils who previously had been exempt from school because of emotional disorders and are now ready to return.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

The special class provides increased individualization of instruction for those children who cannot be served adequately in a regular class. In addition to the fact that the teacher of a regular class is spared the disproportionate amount of time and effort that would have to be expended for the child and is relieved of the anxieties which the child produces, the special grouping provides an opportunity to reduce class size, permits greater flexibility in educational programs, and allows for the use of specialized classroom control procedures. For some children, the special class provides a haven from school pressures, peer conflicts, and continuing unsuccessful experiences in school. For others, it provides a safe, comfortable base where they can resolve conflicts and self-doubts, make progress slowly, be better understood, receive more teacher time, and learn more effectively.

ADMINISTRATIVE ASSETS AND LIABILITIES

Operation of the special class is an effective grouping procedure for providing more individualized instruction for pupils with moderate or serious emotional handicaps. It is usually the only means whereby some pupils may get a fresh start and begin to learn. Such a program is also most helpful to regular class teachers and the principal. On the debit side, teachers who have some special training in educating emotionally handicapped children are difficult to obtain. Often teachers of such children feel isolated and alone. The process of placement of the pupils is also critical to the success of the program. The program costs are expensive, most of which are involved in teachers' salaries and psychological services.

Special Class—Secondary

The following reports submitted by a high school counselor are typical of those received regarding the success of the special class program for emotionally handicapped high school students:

Steve. This boy participated in the special class for one year. I talked with the Dean and he told me that now Steve is a completely different boy. He is making satisfactory grades and is on the varsity football team, playing in every game this year. The Dean feels Steve has gained some recognition in school and is doing a creditable job—which will mean that he will be in a position to graduate. This is a boy who had a serious record of delinquent behavior and who receives little support from his home. The Dean is very pleased with the lad's change in outlook and remarked to me, "You would not know him in his present role."

Don. Don had problems with his family, his school, and the law. For example, he wrecked the family car because he was driving while drunk. He was in the special class for two years and functioned in an erratic fashion. When he returned to school this fall, he was unable to handle high school at all. As the Dean said, he completely "fell apart." Then he began to gather himself together; his grades started to improve, and he is currently working out with the wrestlers in the hope of getting back on the team. He is a very satisfactory athlete in this area and seems to have gained control of the situation in his relationship with other students, his family, and his academic work.

Christine. I have talked with the Dean of Girls at the high school, and she reports that Christine has made an excellent adjustment this year. Her attendance is far better than it was last year; she has not been sent out of a single class because of her attitude or conduct. She has not been referred to the Dean for any reason. The Dean reports that this student is completely different and is making highly satisfactory personal adjustment to school. The Dean sees much improvement from her ninth and tenth grade record, and a rather dramatic change from the eleventh to the twelfth.

TYPES OF YOUTH BEST HELPED

Students with emotional problems who are unable to profit from programs in regular classes are those most often placed in the special class. This program can best serve students with quite severe emotional problems. Students returning to school after psychiatric treatment or those returning to school after placement in residential schools or in the California Youth Authority often find that the special class is an excellent place where they can have successful school experiences.

HOW THE PROVISION HELPS YOUTH WITH EMOTIONAL PROBLEMS

Emotionally handicapped students at the high school level are usually markedly retarded in the basic academic subjects of English, mathematics, and social studies. Many are ashamed of their educational retardation and are constantly and inadvertently reminded of this inadequacy by other students. Nearly all of these students need to relate well to one or two teachers rather than superficially to many. The special class is often one of the few havens to which the emotionally handicapped boy or girl can come without fear or shame and in which he or she can attempt to learn with some chance of success. With success in school subjects comes improved behavior, and in a reasonable length of time the student is able to handle the regular school program.

ADMINISTRATIVE ASSETS AND LIABILITIES

Teaching personnel for special classes at the high school level are hard to find. They must be persons (1) who are comfortable around youth afflicted with emotional difficulties; and (2) who have had training and experience in remedial instruction in basic school subjects. The program does help in the removal of difficult children from regular classes and helps greatly in the provision of individualized attention and instruction to those who seriously need such assistance.

Special Placement

The following report was submitted by a teacher to show the good effects of the special placement provision in a particular case. The report is typical of those received regarding this type of help for the emotionally handicapped.

> James was of average intelligence, but was very small in bodily stature. In addition to being physically immature, the lad was very immature emotionally.

He was educationally retarded and lacked self-confidence. The only time he showed any initiative was when he was threatened. His relationships with others were annoying to all concerned.

Learning to understand this little fellow was a valuable and rewarding experience in my life. This understanding took many hours of work on the part of others beside myself. I feel that the positive reaction James showed was the result of many experiences. The size and relaxed atmosphere of the class, along with the rich activity-type of curriculum geared to fit the needs of each child, had a lot to do with it.

Through the help of the mental health consultant, I was able to understand better the boy's disturbing behavior and his feelings about himself. I found that when a teacher is able to understand and accept a child, positive steps can be taken to strengthen educational provisions for him.

Today James is accepted by his peers and is working at grade level. In spite of his physical size, he has learned better how to deal with problems he encounters. His parents agree that a great change has taken place in him. His present teacher reveals that he is functioning as well as others who have the equivalent of his ability.

TYPES OF CHILDREN BEST HELPED

The emotionally handicapped pupil who has a moderate amount of peer conflicts and learning disabilities and who can work with some success in a classroom of normal pupils is most successful in the special placement program. He is a child who needs learning assistance in basic school subjects and help in developing more appropriate interpersonal relationships. He can satisfy these needs by being helped to work with normal children of his age who can affect his motivation for more positive behavioral attitudes. While this program is helpful for the type of child described, the research indicates that the effect of the program on the total group of emotionally handicapped pupils was no better than the effects of a regular school program with little or no additional help provided.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

Special grouping of this kind for emotionally handicapped children may yield effective and economical results since the classroom situation can help provide a more accepting peer group. Such help can be accentuated by giving the teacher a smaller number of students, most of whom do not need extra help or instruction. The size and composition of the class encourages the teacher to intensify his efforts with the children who are especially placed. He can plan classroom relationships in which the emotionally handicapped child can work

with peers who are not easily flustered by inappropriate, hostile, or unsuccessful behavior.

ADMINISTRATIVE ASSETS AND LIABILITIES

This is an expensive and difficult program to administer. The special placement of pupils is critical and places a heavy burden of responsibility on the teacher and on the other members of the class. It does, however, provide a method for giving some emotionally handicapped children more individualized instruction and a chance to build more positive peer relationships.

Learning Disability Grouping

The following account from a remedial teacher is typical of those submitted to show the good results that occurred from using the techniques of learning disability grouping to help emotionally handicapped children:

> In the fall of 1958, when the group was started, the classroom teacher said that Jeff cried easily, fought often, and talked consistently. According to the principal, he was frequently in the office for fighting. In this new setting he often refused to read with his group in the room, and he started many fights with other emotionally handicapped children.
>
> By June of 1960, Jeff had developed an interest in reading and often read quietly for half an hour. He got along with the others in the group and helped to control the group. The principal reported he was no longer a discipline problem in the school.
>
> His mother reported, "Everything has improved. He used to fight all the time, but now he has just a few fights. He never tried to learn before, but now he does."
>
> As of January, 1961, the only problem Jeff has is arithmetic. Everything else is better. His mother says, "He seems much happier with school." She is extremely pleased with Jeff.
>
> The principal reports still no more fighting by Jeff, and no referrals to his office.

TYPES OF CHILDREN BEST HELPED

Emotionally handicapped children who can be helped considerably by remedial assistance in learning are those with measured intelligence above or within normal limits and retarded significantly in learning on the basis of normal expectancy. One also needs to determine how much motivation to learn there will be; whether or not this approach of learning disability grouping has the best chance of success; and what adjunctive steps need to be taken—for example, working with parents and teacher.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

Learning retardation is seldom a simple, uncomplicated matter. It has been attributed to visual defects, intellectual defects, brain injury, emotional maladjustment, lack of interest, lack of books at home, and lack of good instruction. Whatever the cause or constellation of causes, the lack of learning skills is itself a problem which the child needs to manage. The child who cannot read is aware that he is incompetent while others are skillful and that he lacks the essential means for progressing in other kinds of school learning. The basic approach in learning disability grouping is a frontal attack on the disability, with the assumption that removal of the difficulty can help the child be more effective in school. Reducing a sick child's fever may not be getting at the basic cause of the fever, but the resulting comfort and strength may help the child bring more of his own healthy resources into action.

ADMINISTRATIVE ASSETS AND LIABILITIES

The program is viewed positively by students, teachers, and parents. The major administrative problem is getting children to and from the remedial center. Special remedial help is regarded by many schools as the province of the regular teacher. This is undoubtedly sound, but such teachers should not be expected to work with children whose problems are too severe or too long of term. This program may not help all children with learning disabilities but can be highly effective with some.

Adolescent Group Counseling

The following statement by a counselor typifies a number of reports received concerning the advantages of providing emotionally handicapped adolescents with group counseling:

> When Sid came to us he was a very strange-acting boy. Before the program started, Sid had spent a summer in Juvenile Hall. You could never tell whether he was going to be a gentleman or a terror. Sid's friends were of the "hood" variety and he associated only with a very small group outside of the school. You could not get the boy to look you in the eye when he spoke to you, and he wasn't sure whether he wanted to talk to you or just sit there.
>
> He had absolutely no ambition and did not seem to care whether anyone was interested in him or not. Girls were afraid of him on campus because, as they expressed it, he had the "look" in his eyes.
>
> Sid has an excellent IQ. At times he showed real aptitude in the field of mathematics.

After one year in the group, Sid actually participated in a school play in one of the leading roles, had a few friends on campus, and was beginning to think seriously about college work. By the beginning of the second year, Sid was asking for regular appointments with his counselor to discuss current events and his future.

By the end of the second year, Sid was one of the most popular senior boys with both sexes. He was participating in drama and two clubs on campus, as well as bringing up his grades in college preparatory courses to an above-average point.

Sid is now attending college.

TYPES OF STUDENTS BEST HELPED

Those best helped by this program are the boys and girls who do not respond to individual counseling or other types of help and are often one small step from suspension or expulsion from school. However, even in this program, students placed in the group must be able to profit, must have a capacity for learning, and must have an initial desire to attend. Even though they may not be able to talk about their difficulties before they enter the program, at the end of a year's work they should know more about their problems in school and at home and be better able to undertake self-control and initiative in handling them.

HOW THE PROVISION HELPS STUDENTS WITH EMOTIONAL PROBLEMS

Effective group counseling serves to clarify and reduce emotional conflicts in participants by permitting and encouraging interaction among members of the group with the group leader as interpreter and counselor. This is not just an opportunity for letting off steam, but one that helps students learn a little about the source of his trouble and ways of controlling it. With the help of a group leader, a student can put together several obvious facts about his behavior and, in so doing, may be enabled to understand why certain patterns of interpersonal difficulty always arise in his relationships with others. In other cases, the group, with the help of the group leader, can provide a safe basis for each student to try, often for the first time, a positive relationship with an adult or peer.

ADMINISTRATIVE ASSETS AND LIABILITIES

This program can be developed and administered with a minimum amount of special effort or assistance. It is most desirable that an experienced counselor, group worker, or clinical psychologist be the

group leader. If a counselor becomes a group leader for such a program, mental health consultation for him is necessary to ensure success of the program. In some districts this may mean hiring a professional worker on a part-time or hourly basis. Liaison between group counselor, individual counselors, and teachers need to be anticipated and provided.

Special Activity Groups

The following report, submitted by a school principal, was among a number of similar reports testifying to successful outcomes in the special activity group program for emotionally handicapped children:

> I feel there is considerable evidence that the special activity type of program for emotionally handicapped children had a positive effect on the total school program. In addition to the increased general awareness among our teachers of the causes of misbehavior in children, this special program seemed to have a beneficial effect on most of the children involved in it. In no case did I feel that a child's general school behavior or academic progress was worse as a result of being a member of a special activity group. In many cases, better progress and better behavior was noted.
>
> In one boy, David, a marked change of attitude was noted for the better. Here was a boy who had not been able to achieve much success in school in any respect. He was constantly in trouble and could never bring himself to admit being wrong or at fault. He also had (as did his older brother) a habit of running home for mother's protection when in trouble. Needless to say, my relationships with the child and with his parents were very poor.
>
> About the end of Dave's first year in this program, an incident happened which I feel indicates (among other things) a change in attitude on his part. A second-grade child reported that Dave had thrown an orange through a school window on the weekend but had no other witnesses. Prior to this year, Dave would probably have reacted in this manner: "It's his word against mine," and denied it. In this case I pointed out there was only one witness, a small child, and therefore I would have to take his, Dave's, word for his guilt or innocence. If he had thrown the orange, he would have to pay for the window. Surprisingly, he readily admitted breaking the window. He brought in the money two days later. Dave's reaction to all forms of school rules and authority had improved, also. He reached the point where he would respond pleasantly to my greeting, and his parents became much more co-operative. His school work, while still below grade level, also showed general improvement.

TYPES OF CHILDREN BEST HELPED

The children who need this program are emotionally handicapped pupils who manifest behavior problems. Some are extremely hyperactive; others are timid and withdrawn children. All of these children are able to attend regular classes; but in the activity groups they are provided respite from the tensions that occur in peer relationships

and that are caused by frustrations in learning. Taking part once or twice a week in an activity that allows the children some freedom from the controlled regimen of the classroom makes it possible for the emotionally handicapped pupil to become more amenable to regular classroom procedures and to concentrate more effectively in class. When this need for retreat from the demands of the regular classroom has been met by the special activity group, the children lose interest in the special program and ask to spend more time in regular school work. While some children were helped by this program, the total experimental group made no greater gains in achievement or in peer or adult relationships when compared to the control pupils in regular classes.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

In the special activity group, the emotionally handicapped child is free to act out impulses or feelings which up to that time have been too frightening and too fear-producing to be expressed. The nonthreatening play climate enables the child to try new methods of solving peer relationship problems and, as a result, to be less rigid and more successful in his school relationships. The safe, reassuring leader-pupil, and pupil-pupil relationships provide for some children the first satisfying experiences in working and playing with others. A victory over self-doubts and feelings of inadequacy makes the child better able to conquer the challenges of learning and behaving properly in his regular classroom.

ADMINISTRATIVE ASSETS AND LIABILITIES

The success of the program is highly dependent upon the activity leader. Personnel who have had the training to do an effective leadership job in this program are rare. Some teachers, however, can be trained as group leaders, as has been done in the New York City schools. Consultation with a mental health specialist is required to assist the group leader in his job. In some cases this program is viewed as inappropriate in a school setting. On the other hand, the school is often the only institution that is able to offer such help.

Home Economics

The account that follows, written by a home economics teacher, is typical of the reactions expressed by school personnel regarding

the effectiveness of the child-care program provided for emotionally handicapped students:

Cathy was enrolled for one class period per day in a special program as a student participant in the Child Development Center (nursery school). She continued in this program for two semesters, during which there were 10 discussion group sessions involving 11 other such student participants. Cathy had a history of illness and surgery during her elementary school years. Although her intelligence was average, she manifested some classroom learning problems. Her relationships with her peers was not unfriendly, but she was usually little noticed by them.

Cathy was neat and attractive, "perky," appealing, concerned with self, demanding, flitting and easily distracted, often preoccupied, easily upset, alternately enthusiastic and moody, often sulky, and generally immature in behavior. During her first semester in the nursery school it was doubtful whether she could be constructively incorporated into the special program because of her emotional immaturity and incessant need for adult attention and response. In the group teacher's opinion, Cathy's presence was equivalent to two extra four-year olds. Most of Cathy's energy was invested in seeking approval, appreciation, or sympathy from members of the nursery school staff. She functioned on the level of the young children and related to them primarily as competitors for adult response. She was neither interested in nor able to assume any degree of leadership role with the children, as did other students. Cathy liked coming to the nursery school, and she used many of the materials and equipment provided for the younger children in competition with these children for approval and recognition.

Her relationship with the children reflected little interest in them and was characterized by frequent anger, impatience, and irritability. The teacher's dilemma was one of continuously helping the children work with Cathy while seeking clues as to how to fit her into the situation. Cathy could assume no responsibility except for materials, and this only with continuous direction. Every day she reported physical ailments, hangnails, headaches, backaches, sore toes, and the like to all of the teachers, and the degree to which she was handicapped by these seemed to tie in with current problems and disappointments.

Cathy was easily upset by frustrating situations, such as getting change for a quarter for the snack machine, and, at these times, became either tearful or sulky. She wore neat, attractive clothes about which she was very concerned. One day a group of understanding four-year-olds dashed inside to find the nursery school director saying, "Come out quick; the teen-ager is crying because she got paint on her skirt."

Cathy made frequent extra visits to the nursery school and seemed to count on it as a home base. The group teacher gradually raised her expectations for Cathy, giving her small new responsibilities and limiting her opportunities to assume a child's role with the group. She also tried to provide legitimate times for adult-student conversation. In casual discussions she acknowledged with Cathy the satisfactions of being "little" and being a child who is cared for, but recognized also the advantages of growing up. She reminded her, when necessary, that she was a big girl now, that the children called her "teacher" and needed her help.

By the middle of the second semester, staff discouragement about Cathy's lack of progress began to lift as she began showing a budding and genuine interest in the children and their activities. Along with this, she began to take simple responsibilities on her own initiative, and her demands for personal response from the teachers became less intense.

By the end of the school year Cathy's progress had far exceeded the expectations of the staff. The following characterize the changes that had taken place in the quality of her behavior and relationships in the nursery school: her role with children was more consistently that of a guide or leader rather than that of competitor; she developed an interest in watching their behavior and often identified possible reasons for problems that arose; on her own initiative, she began a notebook in which she recorded dramatic play incidents, describing what the children said and did, and taking it to her other teachers to read; her relationships with staff members were more disciplined and seemed to be used for more mature purposes; teacher-Cathy contacts were more typically focused upon situations related to the children than upon Cathy, and she seemed to find satisfaction in the "colleague" type of relationship as she and the teacher planned for their activities; she was more aware of the needs of the children and acted more independently in doing something about them; she became able to cope with increasingly complex "incidents" of child behavior and more confident in her ability to handle them; she met disappointments with more equanimity and could better delay her wishes; her retreats to physical symptoms were less frequent. In general, Cathy seemed to like herself better as she bounced in each day late in the year with an "idea" or plan for her group in the nursery school.

TYPES OF STUDENTS BEST HELPED

Girls who can learn to be comfortable with young children have found the child-care relationship most satisfying and rewarding. The girl who is assigned to such a program should be one who can be trusted to carry out the instructions and minimal responsibilities for the assignment. Only specially selected girls should be assigned to the program. However, even the aggressive type of personality has been quite effective in some cases. By observing the girl at work, the homemaking teacher can soon tell whether she can be an effective worker in the nursery center and can profit by this experience.

HOW THE PROVISION HELPS STUDENTS WITH EMOTIONAL PROBLEMS

The advantages of this program are twofold. First, homemaking activities are concrete and satisfying to most girls. The work with young children can be meaningfully integrated into the homemaking program. Second, supervised relationships with small children and the problems of small children seem to result in experiences that are self-satisfying, interesting, and maturing for most girls. In providing

such experiences for girls, one can anticipate and resolve some of the role conflicts of these students as prospective mothers and as adults who will have responsibility for total care of their own children.

Those girls who were successful in this program were highly successful. Since the evaluation of the status of the students in the experimental and control groups took place in a social studies class, the immediate transfer of the gains into other classes was not always evident.

ADMINISTRATIVE ASSETS AND LIABILITIES

This is a difficult program to develop and administer since it may involve complicated programming for some girls, transportation to the child-care center, and supervision and consultation services. It has, however, a marked, positive effect on some girls who have otherwise failed to learn or progress in school.

Mental Health Consultation to Teachers

The two reports that follow were submitted by teachers, one who teaches in a regular classroom and one who is in charge of a special class. These and similar reports submitted call attention to the benefits that were derived from the mental health consultations provided for teachers who worked with emotionally handicapped children.

> They say the proof of the pudding is in the eating. I have "eaten" and, like Oliver Twist, I too ask for more. The emotionally disturbed children in my room are no longer the major concern I confront daily in the classroom. I have been released from part of this responsibility since the consultant helped me to set some limits on what should be expected of the classroom teacher. I feel that this understanding has somehow permitted me to change my attitude and behavior toward the disturbing children in my room, so that I am able to function more efficiently as an instructor. Others in our group of teachers have expressed this same thought. It is as though a magic wand had been waved over these emotionally disturbed children and they no longer destroy our efforts to give our best to the job at hand. *—a regular classroom teacher*

> Our consultant helped us in many ways: she listened to our problems and how we handled them, and gave practical suggestions as well as corroborated our management of disturbed children. This sharing with her relieved our anxieties and gave us the healthy support we needed. A few examples are as follows:
>
> 1. In teaching a pupil whose home life was very unstable and, in turn, was a constant disturbance to the class, the consultant supported my discipline of firmness with kindness, with adherence to standards in order to give him some foundation of security. She advised me that very little help could be expected from the home. His behavior has improved considerably.

2. In teaching a resistant learner whose answers to questions were inappropriate and ludicrous and who studied only when urged or under pressure, the consultant suggested that the boy's comprehension was limited to concrete thinking, and that abstractions baffled and confused him. She said to try simple instruction on familiar subjects that would help to stimulate his thinking.

These examples reflect a few of the ways the consultant helped me. Talking with someone who is an expert, who understands and is interested in worries, tensions, and problems, who eases the common frustrations experienced by a teacher in this field, is vital to the mental health of the class and the teacher as well. *—a teacher of a special class*

TYPES OF CHILDREN BEST HELPED

Mental health consultation is a valuable addition to any program for emotionally handicapped pupils wherein the pupils are best educated in a regular or special class. In educational settings where the children remain in regular classes, this program of consultation is particularly helpful in small schools, schools in rural areas, or schools where faculty members feel they can help children in the regular program. Consultation is most helpful to the teacher in working with children whose problems are not too severe.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

Mental health consultation is aimed at assisting teachers in coping with two types of school problems commonly encountered in the regular classroom. The first is one in which the child manifests behavior or learning difficulties that cause the teacher more than a moderate amount of anxiety. The second is one in which the teacher is faced with trying to decide what to do in handling specific problems in the classroom and does not know the best procedure to follow. Often pupil problems become teacher management problems. Mental health consultation services are intended to help teachers to manage these crises so that the child is better able to function with the help of the teacher. Consultation indirectly benefits the pupils because increasing the teacher's effectiveness in the management of the class makes the children more comfortable and secure and enables the teacher to deal successfully with the behavior of the emotionally handicapped child before he has exhausted the teacher's patience or his classmates' tolerance. If the innumerable problem situations of the emotionally handicapped adults in our population had been dealt with success-

fully each time they were encountered in childhood, the cumulative results might well have helped or strengthened the personality resources of the individual.

This program is seldom successful without the teacher taking additional time to help the children with their learning disabilities. The instructions to districts in the research study were not to provide any "special" help outside of that provided in a regular classroom. The statistical evaluation indicates that the emotionally handicapped pupils in this type of program made some, but not significant, gains in achievement and school behavior. However, the program was found to be helpful to teachers and especially helpful when combined with learning assistance to pupils.

ADMINISTRATIVE ASSETS AND LIABILITIES

This is probably the least expensive, most easily administered, and most effective long-term program. Teachers like the program, and the help they get lowers their tensions and anxieties. The program encourages a better use of psychological and curriculum services and requires no special placement of students. Trained consultants are hard to find, and some teachers find it difficult to use consultants effectively. The long-range effect of this program can well be that of raising instructional standards, of enabling teachers to acquire a better understanding of child behavior and thus serve as abler instructors.

Parent Group Counseling

The following statement from a parent is an example of the type of reaction expressed by a number of parents who benefited from the provision of parent group counseling:

> Bobby is twelve, and he's pretty good; but he just wasn't making out in school. I'm really surprised and I don't know how it happened, but since I've been coming here his teacher says he's been doing much better in reading and arithmetic. I don't understand how this could be since we aren't teaching him anymore at home and helping him less with his homework.

TYPES OF CHILDREN BEST HELPED

The problems of some emotionally handicapped children are precipitated or enhanced by the conflicting aspirations and relationships of their parents. Inconsistency in providing discipline, too high expectations or too low expectations are also commonly related to increased problems in learning and behavior. For some children whose

parents need assistance in understanding how the home can better prepare and help their child in school, the parent counseling groups offer an unequaled opportunity for help.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

Parents often unknowingly promote or encourage learning difficulties or antisocial behavior in children. This program of parent group counseling is based on the assumption that if parents are helped to become more aware of their relationships to their children, the children will be more free to respond to positive educational and social influences. Those parents who can be helped to gain insight about their interpersonal relationships and feelings will, in turn, reduce the emotional conflicts and learning problems of their children.

A philosophical question needs to be asked regarding the place of the public school in providing parent group counseling services. Communities need to ascertain whether the school is the best or most appropriate agency to support such an activity. Most professional mental health workers seem to find sponsorship of this program by the school the most effective and fruitful atmosphere for such groups. The fulcrum of the helping relationship—a child with a school problem—comes at an earlier time than is usually possible to begin such programs in other agencies. In addition, this service when provided by the school is regarded in a positive and helpful manner by the parents and is consistent with the school's interest in the education and welfare of all children. The research results did not show any significant gains after two years. This, however, may be too short a time to measure the results of this type of program.

ADMINISTRATIVE ASSETS AND LIABILITIES

Most teachers and administrators consider this a good program. It is relatively inexpensive and may be the only source of help available to many parents. However, not all parents are interested in coming, especially parents who are less verbal or those who tend to be resistive. Experience has shown that this program is effective only with some parents who attend and that liaison with the school administrator and teacher is difficult to develop. Usually the group leader is a community mental health worker (psychiatrist, clinical psychologist, or social worker). Many persons from this field of leadership may expect to find the parents similar to parents of seriously ill

children. Some training and selection of group workers for this program is indicated.

Child Study Meetings

The following brief statement by a teacher was among a number of expressions made by school personnel who responded to this provision with appreciation and enthusiasm:

> Kenneth will not finish an assignment or follow directions. Nothing we do seems to make an impression on him. After gathering much information about this child, I began to get some clues on how best to help him learn. I'm sure he does much better now.

TYPES OF CHILDREN BEST HELPED

The pupil with minor to moderate emotional problems is the best candidate for a "child study." He is helped to the degree that the teacher is able to incorporate the data that she collects into specific classroom planning. This program is seldom helpful in cases where the child needs extensive remedial help or individual instruction.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

The aim of the program of child study meetings is to help teachers better understand the meaning of children's behavior by having each teacher intensively study one child. This plan has proved to be more meaningful to teachers than in-service educational programs aimed at giving information about growth and development, guidance materials, and so forth. In the child study program, the teacher translates her findings into action in the classroom. From the discoveries she has made with a particular child, she is better able to understand and act appropriately in providing learning experiences and in managing the behavior of the child with emotional problems.

ADMINISTRATIVE ASSETS AND LIABILITIES

This program has few administrative headaches since the program is voluntary and conducted after school. Most teachers like the program. The program as it is now administered is not intended to help teachers in the education of emotionally handicapped; but helping teachers to understand children usually carries over to the more deviant children. The costs for this program are minimal, and the program can be carried on by schools as part of their in-service training of teachers.

Human Relations Period [1]

TYPES OF CHILDREN BEST HELPED

This program is designed to meet not only the needs of emotionally handicapped pupils but the needs of all pupils. Its purpose is to help boys and girls better understand the human relations problems that are common to all children and to all adults.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

It has been suggested by authors of human relations programs in the schools that, as a result of the lessons in the programs, young people learn that their own problems are not unique and that others have problems that are surprisingly similar. Pupils are helped to think about themselves during the discussions and can be helped to gain insights about their relationships with others. To the degree that children with emotional problems can "learn" about human relations, this program can be helpful for the emotionally handicapped child.

ADMINISTRATIVE ASSETS AND LIABILITIES

A certain amount of curriculum supervision and development is needed for this program. Some teachers are able to handle the group discussions; others are markedly uncomfortable in their role as discussion leader. Many children like the program and seem to profit by what they learn from it. The program is viewed favorably by teachers and administrators. Its costs are minimal, and no additional funds are required for its operation.

Home and Hospital Instruction [2]

Home and hospital instruction is an educational program already in operation in many school districts. Such a program can be used to advantage in assisting emotionally handicapped children. The following report cites an instance where help of this kind was given:

> Terry's mother held off enrolling her son, age six, in school because of his hyperactivity when in the presence of a group. Terry and his parents had been involved in a treatment program at a psychiatric institute, and the boy showed marked improvement. However, he was able to concentrate on school work only for short periods of time. Terry had a measured IQ of 120 and was in-

[1] No reports on individual children available.

[2] This was not one of the experimental programs tried out in the study project. However, the need for such educational services in behalf of emotionally handicapped children became evident as it was made increasingly clear to the study personnel that a small but consistent number of children could best be educated not within the school itself but in their homes or in a residential school.

terested in attending school. It was felt, however, that he should attend school only part of the day. During the first month of his attendance at school, Terry became overly disturbed and it was decided to instruct him at home. Accordingly, a home teacher was sent to Terry's home twice a week, with Terry's mother filling the breach the other three days.

TYPES OF CHILDREN BEST HELPED

Children with serious emotional difficulties or those needing residential or home care are greatly helped by a program such as this one. Children who are mentally ill or who become overly stimulated by school attendance are often more easily instructed at home or in a residential facility. Children returning to school after psychiatric treatment may also find this service necessary to fall back on during the transition they are making. Helping a child to keep up with his studies may be a significant factor in permitting him to return to his regular class in taking his place among his peers.

HOW THE PROVISION HELPS CHILDREN WITH EMOTIONAL PROBLEMS

This program permits children who are on the borderline of institutional care to maintain liaison with their school and for the school to work with the family. Often a mentally ill child can profit by individual instruction despite the fact that he is seriously ill. His relationship to the home or hospital teacher may be a profitable one for him and may help him to cope more effectively with the problems of life. For those children needing a transition between hospital and school, home teaching can be most profitable and effective.

ADMINISTRATIVE ASSETS AND LIABILITIES

Home teaching should be reserved for those children who are too ill to attend school. Home teachers need to be well-trained teachers and should be able to work with mental health personnel in integrating the home teaching with the total treatment program.

Screening Procedures

Values of teacher participation. Participation in the screening procedures proved to be of value to all teachers. The teachers gained understanding of many classroom problems, both those involving disturbing behavior and those involving learning difficulties. As a result of this gain, the teachers began seeking advice from school guidance personnel and planning ways in which essential help could

be provided for the pupils with special problems. The over-all result was reflected in improved opportunities for all pupils by reason of the fact that as the atmosphere of the classroom was freed of disturbances, it became conducive to better learning on the part of all the members of the class. Furthermore, in their study of ways to help the pupils with handicaps, the teachers found new ways in which they could help all pupils to make the maximum educational achievement which their abilities made possible.

Values of parent participation. Since the screening procedures involved parents in conferences regarding their children's difficulties, parents gained valuable understanding of their children's problems. This understanding gave them a basis (1) for providing at home certain of the help their children needed to overcome their handicaps; and (2) for co-operating with the school in securing the special educational assistance their children needed in order to work successfully in the regular school program.

RELATIONSHIP BETWEEN EARLY IDENTIFICATION AND REHABILITATION

It has not been possible during the span of two years in which this research study was conducted to determine what the ultimate outcomes of the special provisions might be. This could be done only by following the handicapped children for a period of years, both in school and after they have left school.

However, it is possible to infer from the data supplied by other researchers, as well as the follow-up work conducted on an earlier study, that emotionally handicapped children do not get better in the absence of help. There seems to be little doubt that as they get older they become delinquent, drop out of school after age sixteen, make poor grades, are frequently referred for disciplinary action by school authorities, or need the attention of a child guidance clinic.

ADMINISTRATIVE ASSETS AND LIABILITIES OF PROGRAMS

Although all the special provisions for emotionally handicapped children which were tried out in the research project had been or were being employed by schools, the effectiveness of such provisions as part of the regular educational service rendered by a school depends to a great extent on how well they can be administered and operated in the total school program. The administrative assets and

liabilities of each type of special educational provision made for the emotionally handicapped were evaluated on the basis of the criteria implied by the questions that follow:

1. Is the special program seen positively by faculty and parents?
2. Is the special program one with which the staff and the principal can be comfortable and can support over a period of time?
3. Can proper selection and placement of pupils be made to ensure success of the special program?
4. Can parents be informed and communicated with during the operation of the special program?
5. Can the special program be successfully integrated into the total school program without developing a feeling of separateness?
6. Does the principal of the school feel positively motivated and professionally comfortable and confident about the efficacy of the program?
7. Is the time and effort necessary to administer the program disproportionate to its values and outcomes?
8. Are the excess costs of the special program reasonable and necessary?

Any special provisions that are designed to foster the learning of children who have already been separated from their school groups by reason of physical, sensory, intellectual, or emotional handicaps must not require further separation. Particular attention should be given to this fact in the provision of special help for emotionally handicapped pupils because these children are greatly influenced by any social setting that separates them psychologically from other children. When any special grouping is made, therefore, it is necessary to ensure its general acceptance and understanding within the school.

Another point—one that needs continuous consideration—is that *emotional handicaps are not necessarily permanent handicaps.* The eventual success of any system or program of special educational provisions for emotionally handicapped children depends upon the extent to which the children become able and willing to work within the regular school program without special help.

Chapter 7

CONCLUSIONS AND RECOMMENDATIONS

Any society that insists upon all its children of school age attending school should also insist that the attendance be profitable to the children and to society. To insist upon compulsory attendance of children who fail to learn and who in time learn to fail, and for whom school attendance becomes a millstone about their necks, is to insist upon illness, crime, and parental and vocational ineptitude. Education in a democracy does not mean the same education for all children but the best education for each child. Children have little choice—they must go to school. The community, therefore, also has little choice—it must provide an adequate education for each child or be prepared to deal with the consequences.

The public school of the 1960's is an institution of many facets and responsibilities. It has the task of preparing scientists to meet the requirements of the space age; manpower for executive leadership, as well as for the everyday work of the community; citizens who vote intelligently; and competent, responsible fathers and mothers. The school is an institution through which all children must pass. A child whose family experience is wholesome and his school experience successful has a good start in life. A child with unwholesome family experience and unsuccessful school experience has given "hostages to fortune," which are often irretrievable both to the child and to his society.

When an airplane crashes, it is not customary to punish the wreckage and bewail the vagaries of man-made machines. Many highly trained men spend days and months attempting to discover the "why's" of the crash in an effort to prevent similar mishaps. It is no less evident in the crashes of the human personality and spirit. What goes on between adults and children and between children and children in the primary institutions of a society, to a great extent determines what goes on inside children. To find satisfaction and meaning in one's family and in one's school is a fulfillment devoutly to be wished for every child.

What do we know about the prevention of learning and behavior disorders? In terms of broad, sweeping, and brilliantly controlled

scientific studies, we know very little. In terms of some pretty reasonable hunches and the results of studies such as this, we know enough to begin to act. Every day individuals wager their life upon imperfect knowledge. To John Snow, M.D., in 1820, imperfect knowledge of the causes, method of communication, and bodily effects of cholera did not deter him from putting together what facts he did have and acting to save the population of London. Little was known of the pathogenic nature of bacteria in those days; but to Snow, making his rounds during a cholera epidemic, it was obvious that the disease was particularly severe near the intersection of Cambridge and Broad Streets. He also found men who worked in a nearby brewery remarkably free of disease and guessed, correctly, that these workers used the products of their labor for their usual beverage. As he looked at a map, pinpointing cases he had recorded and the available facts he had discovered about the prevalance and absence of the disease, his hunch was that something in the water might be the culprit. He then ascertained that most, if not all, of the afflicted used a common water supply—the well at the corner of Broad and Cambridge. By removing the pump handle of this well, again without knowing the exact cause of the disease or its source, Snow ended the cholera epidemic.

There is much evidence, some presented here and some in other research studies, to suggest where some of the "pump-handles" of effective prevention might be. It is evident that the successful and effective adult began as the successful and effective child. A child who is inadequately and poorly educated is inadequately and poorly prepared for adult living. To minimize this fact is to suggest that the best a community can do is to build bigger and better clinics, mental hospitals, youth camps, and prisons.

The personal and social waste represented by individuals with from moderate to severe emotional handicaps has become a major social burden. In terms of economics alone, Fein[1] calculated the costs of mental illness to be a minimum of 3 billion dollars annually; the costs of juvenile and adult crime have been estimated to be 15 billion per year.[2] In addition, there are highly related problems of alcoholism, suicide, drug addiction, and the increasingly heavy highway

[1] Rashi Fein, *The Economics of Mental Illness.* New York: Basic Books, 1958.
[2] *Biennial Survey of Education in the United States,* 1952-54. Washington, D.C.: U. S. Department of Health, Education, and Welfare, Office of Education, 1956.

carnage. In studying the problems caused by the use of the automobile by persons ill equipped emotionally to do so, an analysis of the case histories of 100 teen-age drivers deemed the poorest by their driver educator teacher showed that four-fifths of the students were working below their ability level in school, two-thirds were discipline problems, three-fourths had poor relationships with their teachers, and half were overly aggressive.[3] Tillman and Hobbs found that persons drive much as they live and that accident repeaters are well known to juvenile courts, venereal disease clinics, public health clinics, and social service agencies.[4] In 1958, a study made by the California Department of Motor Vehicles revealed that the greater the number of moving traffic violations and accidents a person had on his record, the greater the chance that he would have others. In some cases, the study showed the chances approached certainty.[5] It seems evident, then, that many so-called accidents can be predicted with somewhat the same accuracy as weather conditions are predicted. Yet, one is dismayed to find little major effort to use such predictive information to reduce or prevent the storms and stresses in the human personality. One could assume, with some justification, that the sum and substance of present creative thought and action about the problem of human maldevelopment is to permit and, in some cases, to encourage such maldevelopment so that professional and community energies can be expended on long-term treatment, rehabilitation, or incarceration.

One cannot bail the water out of a bucket placed under a running faucet. Some ways must be found to reduce or curtail the flow before bailing can be effective. Society cannot in the long run make much progress dealing with the consequences of mental and emotional disorders without paying attention to the need for prevention. Such attention, however, must be in terms of effective action. "It seems to me," said a noted psychiatrist, "that we are trying to turn back the Mississippi at New Orleans. Is it not possible to build dams higher up the stream and to plant more trees on the slopes, and hold the water in?" [6]

[3] Ross McFarland and Roland More, "Youth and the Automobile," *Reference Papers on Children and Youth.* Washington, D. C.: White House Conference on Children and Youth, 1960.
[4] W. A. Tillman and G. E. Hobbs, "Accident-Prone Automobile Drivers: Study of Psychiatric and Social Background," *American Journal of Psychiatry,* CVI (November, 1949), 321-71.
[5] "Driver Record Study, 1958." Sacramento: California State Department of Motor Vehicles (mimeographed).
[6] Daniel Blain, M.D., in a speech before the Western Interstate Commission on Higher Education, June, 1956.

If one accepts the proposition that prevention is at least 16 times as effective as cure, California, its communities, and its schools need to act on the following recommendations:

1. Attention must be paid to each child in school to the end that each is provided the opportunity for an education commensurate with his ability, his assets, and his learning handicaps.

2. It is essential that the state and its schools recognize the significance of emotion in effective learning and the disabling results of emotional handicaps on school success.

3. Such a recognition entails a commitment for early action on the part of each school in identifying children who are most vulnerable to or are rapidly developing learning problems or behavior problems.

4. To act at a later time, i.e., after the child has become markedly educationally retarded or emotionally handicapped, reduces the school's chances of success and the child's chances of obtaining an adequate education.

5. Children with emotional handicaps who are identified early in their school life can be helped most economically and effectively by a variety of educational procedures, including (a) special classes; (b) providing the children's regular class teachers, special teachers, and counselors with consultation services by a psychiatrist, psychologist, or social worker; (c) providing opportunities for children with learning disabilities to become successful learners; (d) providing opportunities for children who cannot attend school to receive adequate educational services at home or in the hospital; and (e) employing other procedures as suggested in Chapter 6.

6. The state should encourage the development of screening programs to secure early identification of the emotionally handicapped and the provision of educational assistance for emotionally handicapped children by providing for the school districts to be reimbursed for the excess costs of such programs as is done for mentally retarded and physically handicapped children.

SELECTED REFERENCES

BOWER, ELI M. "Early Identification of Emotionally Handicapped and Delinquent Children." *Reference Papers—1960 White House Conference on Children and Youth.* Washington, D.C.: Superintendent of Documents, Government Printing Office, 1960.

BOWER, ELI M. *Early Identification of Emotionally Handicapped Children in School.* Springfield, Illinois: Charles C. Thomas Co., 1960.

BOWER, ELI M. "Early Identification of Maladjusted School Children." *California Schools,* XXVI (May, 1955).

BOWER, ELI M. "The Emotionally Disturbed Child—A Challenge to Public Education." *California Schools,* XXIX (February, 1958).

BOWER, ELI M. "The Emotionally Handicapped Child and the School." *Exceptional Children,* XXVI (September and December, 1959; January, 1960), 6-11, 182-88, 232-42. (Published as a monograph by *Exceptional Children.*)

BOWER, ELI M. "Primary Prevention in a School Setting." In *Possibilities for Prevention of Mental Disorders in Children,* edited by Gerald Caplan. New York: Basic Books, 1961.

BOWER, ELI M. "A Process for Identifying Disturbed Children." *Children,* IV (July-August, 1957), 143-47.

BOWER, ELI M., and HOLMES, JACK A. "Emotional Factors and Academic Achievement." *Review of Educational Research,* XXIX (December, 1959), 529-43.

BOWER, ELI M., and LAMBERT, NADINE M. *Teachers Manual for In-School Screening of Children with Emotional Handicaps.* Princeton, New Jersey: Educational Testing Service, 1961.

This includes directions for administration, scoring, and interpretation, and examples of the following screening instruments: *Behavior Rating of Pupils, A Picture Game, Thinking About Yourself, A Self Test, Class Pictures, A Class Play, Student Survey.*

BOWER, ELI M.; SHELLHAMMER, THOMAS A.; and DAILY, JOHN M. "School Characteristics of Male Adolescents Who Later Became Schizophrenic." *American Journal of Orthopsychiatry,* XXX (October, 1960), 712-29.

BOWER, ELI M.; SHELLHAMMER, THOMAS A.; DAILY, JOHN M.; and BOWER, MURRAY. *High School Students Who Later Became Schizophrenic.* Bulletin of the California State Department of Education, Vol. XXIX, No. 8, August, 1960. Sacramento: California State Department of Education.

BOWER, ELI M.; TASHNOVIAN, PETER J.; and LARSON, CARL A. *A Process for Early Identification of Emotionally Disturbed Children.* Bulletin of the California State Department of Education, Vol. XXVII, No. 6, August, 1958. Sacramento: California State Department of Education.

LAMBERT, NADINE M., and BOWER, ELI M. *Technical Report on In-School Screenings of Children with Emotional Handicaps.* Princeton, New Jersey: Educational Testing Service, 1961.

Report of the Joint Interim Committee on the Education and Rehabilitation of Handicapped Children and Adults. Sacramento: California Senate and Assembly, 1959.

Mr. MEEDS. Dr. Bower, I would be interested in the reports and surveys you have there, and the one for the record has been inserted, if you will leave that, and I, and perhaps other members of the committee, would like copies if you can obtain them for us, particularly the one left in the record.

Dr. BOWER. I can leave this and I can get other copies.

Mr. MEEDS. I would like a personal copy. If there is any charge I will be happy to take care of it.

Dr. BOWER. I will have to write to my friend Dr. Rafferty and see if he can send me some more.

Mr. MEEDS. Thank you very much, Dr. Bower, for being with us and your accommodations to us.

I am going to call upon Congressman Ford to introduce the next witness, Dr. Osborn.

Mr. FORD. Thank you, Mr. Chairman.

It is a particularly personal privilege for me to be able to be here this morning and hear Dr. Osborn, since we are neighbors in my hometown of Taylor, Mich. I saw him over the past weekend in Michigan and he told me that he was going to be here today. I used to see him quite a lot last spring when he was on loan to the Office of Economic Opportunity helping them set up Project Head Start, which we all know was a great success this past summer.

Dr. Osborn, it is a pleasure to have you here as a neighbor and friend, but also because of the service you have already rendered to our Government and to the very successful program that you helped get started this last summer. I am looking forward to your testimony.

STATEMENT OF DR. D. K. OSBORN, EDUCATOR, TAYLOR, MICH.

Dr. OSBORN. Thank you, Congressman Ford.

May I begin by saying that educators like myself who have spent their entire professional lives promoting better education for all children are grateful to the 89th Congress because they too have shown equal concern for the education and the welfare of the Nation's children.

The bill before you, the Elementary and Preschool Child Development Act, is further concrete evidence of your own deep concern. This bill recognizes one of the cardinal tenets of the education world, namely, that every child is a unique individual. It recognizes that if we are to capitalize on the talents and the potential of every child we must provide each child with maximum opportunities for learning.

Fortunately, a large number of American families provide their children with the healthy emotional climate in which they can grow, develop, and learn to cope effectively with today's problems and today's pressures. Fortunately, classroom teachers are able to help large numbers of children realize their capabilities by following normal routine classroom procedures. But there remain a significant number of children, as has been indicated this morning, with problems beyond the ability of the family and beyond the scope of the classroom teacher.

Unfortunately, at the present time our school systems are not able to provide optimal learning conditions for each and every child. Not all children come to school with the same degree of readiness for learning. Social and emotional differences, familial differences, socio-

economic differences all make the task of learning highly complex. The child development specialist can aid the teacher in determining ways of working more effectively with each individual, helping each child follow a pattern of growth and learning most natural for him in order to realize his fullest potential.

The bill suggested by Congressman Gibbons also includes the need to provide teachers with professional assistance in the recognition and handling of serious emotional learning and behavior problems.

I must forewarn you that my own psychological training would lead me to state that problems are seldom what they appear to be. Therefore, I am suggesting that more often than not the problem which the teacher observes and which she attempts to handle very often is not the problem at all. Rather, it is more often an overt expression which disguises certain covert motivations. Thus a teacher facing a child with an apparent reading problem may on further investigation discover the basic problem to be emotional in origin and I think this was just demonstrated by Dr. Bower.

It is not at all uncommon to find the roots of a discipline problem completely unrelated to the actual overt behavior manifestations.

Now, we do ask and we do expect teachers to have some understanding of behavior and multiple causation. Of course we also expect teachers to know subject matter content, to have a general understanding of child development, to be agents and transmitters of a cultural heritage, not to mention handling lunch money and Christmas plays.

However, the skill required in providing intensive handling of the deep-seated learning and behavior problems is in fact beyond the ability and training of most classroom teachers.

In addition, the few classroom teachers who already possess this skill and training often do not have the time to provide the necessary treatment and the special tutorial help because of the ordinary commitments within the school today.

Another reason that this bill deserves your serious consideration is the age grouping of the children mentioned. The preschool and early elementary years are formative ones indeed. The attitudes and habits developed in the early years influence learning in later years. In many instances attitudes learned during this period of time follow us throughout our life to the grave.

Generally speaking, the behavior and learning patterns of younger children are more adaptable. In addition, younger children are generally more amenable to adult help and suggestion than they are in later stages of growth, particularly the adolescent years when in many cases it is too late.

The bill also recognizes that often parents and teachers are not familiar with existing governmental and private agencies within the community which are prepared to help children. My own past experience has shown that there are instances where an appropriate community agency did exist, but was not utilized because the school or the home was unaware of the agency's actual function.

Perhaps in this connection the committee should explore the role of the school social worker and the visiting teacher to see how these disciplines could complement the child development specialist.

I would like to add a couple of additional considerations. Tremendous advances have been made in certain problem areas. In the past few years, for example, there has been tremendous research in the problems and behavior of individuals from low-income families. Continually new information is added in terms of emotional and social areas of development and more recently perhaps the largest body of new information is the research being done on the cognitive process, that is to say the intellectual development of young children.

By and large, teachers have not kept up with the current research. Actually so much research is coming out that it is almost impossible to keep abreast of recent findings. The child development specialist who focuses in this area can keep the teacher alerted to significant research findings such as those we heard this morning which are appropriate to the classroom teacher and there effect better teaching.

There exists a significant number of children who come to school with serious emotional problems or with minor emotional disturbances which will ultimately lead to major problems in later years if the situation remains unchecked.

I would also like to point out that today the heavy workload of teachers often prevents their giving the individual help which they might be able to give otherwise. I would like to reemphasize the bottom of the problem, which I mentioned earlier, the fact that in most instances the real problem in behavior is disguised and often eludes the untrained person or the untrained teacher. I think this suggests an additional consideration not covered by the bill.

We do need to provide some additional training to the regular classroom teacher, particularly in social, emotional, and intellectual areas.

Additional consideration, and perhaps this cannot be placed within the parameters of this bill, is the real need to ultimately reduce classes so that the teacher can work more effectively herself using her own skills with the children she teaches.

In summary, I feel this bill offers many advantages. Specialists trained in the areas outlined in this bill can help the teacher perform her own job more effectively. The bill offers both children and families help in areas which are often beyond the training and the time commitment of the classroom teacher. It offers the individual child the opportunity to realize his fullest potential. The American system of education has always been committed to the spirit embodied in this bill, that is, that every child in this country is entitled to the best education possible.

Thank you, gentlemen.

Mr. MEEDS. Doctor, do you distinguish your concept of the child development specialist from what we now conceive to be the school social worker?

Dr. OSBORN. Yes, I think there are some differences here. I think, as Congressman Gibbons pointed out earlier, ordinarily the school social worker is not working in this area. He is certainly not working in the preschool area at all. I do think as I indicated here that, in the advisory committee that ultimately would be set up, this is one consideration they would have to give, not only this, but the visiting teacher, and to help define these roles more clearly; and I feel that would be good in itself; and also to see where this person can help.

I think one of the things this bill adds is the cognitive part or the learning part and very often in many of these learning problems we do need specialists to help on some of these.

Mr. MEEDS. Do you envision the child development specialist as something more than merely a troubleshooter? In other words, a person detecting problems?

Dr. OSBORN. I view him as both. Let's say in certain problems a troubleshooter can meet with the teacher and say, you know, "Given this insight, here are some things you can do." In our own Merle Palmer Institute we employ sociologists and they work with the teacher and they say, "Based on the work I have done with this child, I would suggest this approach be more firm or in some cases give a little leeway." There are other situations where this person could be employed to give more direct help to the child. I see it both ways, help to the teacher to make her more effective in the teaching situation.

Mr. MEEDS. This thing is a limited field in which the development specialist works with this grade level or this age of child on a multiple or a multiplicity of sociological, emotional problems?

Dr. OSBORN. Yes. This is in fact the way I read the bill, too.

Mr. MEEDS. Thank you.

Congressman Ford?

Mr. FORD. Is it too early for us to draw conclusions from the experience we had this summer with the preschool children in Head Start? Have we learned something?

Dr. OSBORN. I think we did learn something. I have to say without at the present time the benefit of Ki-squares and significant differences which will incidentally be forthcoming, that I think one of the most significant things we learned was the class size, that the child development teacher in this Head Start program working with 15 children was able to accomplish things that these teachers did not believe was possible.

I am basing this not on statistics, but on my discussions with teachers throughout the country, many of whom are elementary teachers who said, "I didn't believe this was possible to accomplish this much in 8 weeks," and over and over again the big thing that they felt was the class size, small groups of children where the teacher had time to give both individual attention or attention to two and three children at one time.

Mr. FORD. What about the aspect of making parents more aware than they might otherwise have been of the special problem of the child entering our modern rather sophisticated school system? How did that work out?

Dr. OSBORN. Actually that worked out very well. Here again from observation the OEO did have an advisory committee of low income families. One of the things that kept coming over and over again was parents saying, "George, I never realized the teacher cared." They had in Chicago an interesting study on this several years ago where they found middle-class parents were saying to their children prior to kindergarten entrance, "Now you are going into a kindergarten. There will be a teacher there who cares and she is very much like Mommy and she very much wants to help and you are going to help." And so forth. When down in a lower income family the parent was always

saying something like this: "You got to go to school Bud, that is the way it goes, and if you don't behave she will give you a good rap in the mouth and you better behave or I will give you one," and which raises a very interesting question on what is the perception of the child coming to school to begin with.

It was very interesting traveling around the country and talking with parents from low income families who were saying now what some of the middle-class parents are saying, "Here is somebody who cares. I didn't know she was interested. Gosh, she is as concerned with my children as I am."

On the other hand, I think it is fair to say many of our teachers learned that the poor was not some sort of animal over here or a different kind of cat but they were also human. I think you have mostly in the major areas, the small class size, some change in perception on the part of the family, the parents, some change in perception on the part of the teacher.

Mr. FORD. Thank you, Doctor.

Mr. MEEDS. Congressman Gibbons?

Mr. GIBBONS. Nothing, except to say I appreciate your coming here and am very happy to have met you and I think that you have some very fine suggestions, Dr. Osborn.

Dr. OSBORN. Thank you.

Mr. MEEDS. Mr. Scheuer.

Mr. SCHEUER. I can only say that there must be something awfully good about this legislation if you can stimulate the enormously interesting and excellent testimony that has been presented by you and your predecessor in that witness chair.

Dr. OSBORN. Thank you so much.

Mr. MEEDS. The next witness will be Charlotte Winsor. On behalf of the committee I welcome you to our hearing and we will start right off with your testimony.

STATEMENT OF DR. CHARLOTTE WINSOR, CHAIRMAN, GRADUATE PROGRAMS OF EDUCATION, BANK STREET COLLEGE, NEW YORK, N.Y.

Dr. WINSOR. For myself and the colleagues that I represent, may I thank you for the opportunity to testify and may I say I took my assignment quite literally when I was told I would have 5 minutes and I shall try to limit my statement to 5 minutes and be glad to talk with you further if you so wish.

Within these brief comments, I should first like to say that there is unqualified approval of H.R. 11322 both by my colleagues at Bank Street College and the people in the field with whom I have had the time to communicate.

In recent years we began to take very seriously the development of human resources and we have in this undertaking laid the many social, economic, as well as educational problems quite frankly at the schoolhouse door.

I think the 89th Congress has given us every expectation that we are going to have to perform. If these somewhat grandiose expectations of the educational enterprise are to be fulfilled we must now face squarely the need for the further development of the faculties of the

educational enterprise and also think imaginatively of some new professions within this field.

In effect, this bill, it seems to me, is attempting just this. In fact, I view this child development specialist as a new variety, as really the beginnings of a contemplation of a new profession within our field, someone who is neither a psychologist nor a teacher nor a social worker, and more than a combination of all three.

It may be that we really need to begin to think toward how can we train a person who will not have either the tradition of any of these disciplines to bog down into, and yet have enough skill and precision in training and development to perform the task that we so blithely, I might say, offer her.

The bill in title III, section 301, has taken a truly comprehensive stand, I believe, in that it includes provision for the support of good training, decent, important training of the child development specialist.

It then goes on to protect the quality of their training by the selection of institutions where such training may take place and perhaps most important to me—and I have to interpolate here that I have worked with city schools and city systems for many, many years—perhaps most important in title III, section 302, the support of activity within schools and school systems which would familiarize and indeed sell the schools on the proposition of the fullest and the wisest use of the competencies of child development specialists, and I suppose I say this because of my many years of experience with very fine programs with school social workers, community coordinators, et cetera, et cetera, where the school system has said, "Yes, that is very nice, but we really don't have very much time and we don't know why we need all these extra services." The fact that this bill has built into itself the provision for alerting and educating the schools and the systems to the availability and the possibility of such service, I think, is a wise and sophisticated aspect of this measure. Because the development of a real core of child development specialists calls for an educational breakthrough, it would seem to us, that the training of such specialists calls for interdisciplinary effort in the fields of education and the allied professions.

The behavioral and social science disciplines have much to offer and should be explored and indeed exploited in the development of these specialists.

Having heard from Dr. Bower this morning, I don't think I need to emphasize that statement any further because I think we all know and have known for a long time that the educators alone are really pretty hard pressed. Let me say committed, but not capable of bringing to bear in this day and age the knowledge and the understanding of child development, particularly in these early years.

I agree so fully with Dr. Osborn on his findings of the Head Start program this summer and, in fact, not in any research sense, but just because I get around in city schools, I have heard from teachers that they think they can tell without being told which of the children in the kindergarten and first grade have been through the Head Start

program and the most interesting comment was made to me by a teacher on the Lower East Side the other day. She said:

> And if I don't know it from the children, I know it from the mothers. They come to school expecting something, as though, "We have some rights here, we belong here." They do not come with that same quality of intimidation that we so often find in lower-class school situations.

She went on to say:

> Don't think that makes it easy. That makes it harder.

And it is from dozens of such comments, not only in terms of Head Start but in terms of so many problems that confront the schools, that one sees that there is a need if we are to bring into use, into viable productive use, what we already know about little children, that we need people who can make that interpretation both ways, back into the community and the parent and toward the educational, toward the people in the direct profession.

But I should like to say that, although I look toward my colleagues in the related professions, it would be a great pity to neglect the basic contributions made by the teaching professions. In title III, section 301, I note that there are qualifications which are listed and valid and important, but it would seem to me not sufficiently comprehensive.

As an educator and a teacher, I should like to emphasize that such a child development specialist should in addition to these stated qualifications have a rich theoretical and practical experience in program development in the classroom.

All too often the core process of the school experience—namely, to master the skills, the knowledge, and the attitudes that make entrance into the mainstream of our society possible—are neglected. There is no belittling of the prime importance of personality development, productive home-school interaction, et cetera, but it is our hope that programs developed for the training of child development specialists will include serious attention to learning as well as child growth—and I emphasize learning in my tone of voice perhaps because I have been a teacher and educator most of my life—but I think more specifically because my colleagues at Bank Street College where I have been working and those of us who are in the field of education—and I should parenthesize the fact that we are in interdisciplinary institutions working with a great many psychologists, sociologists, and anthropologists and so on—have always and more particularly in more recent years, put tremendous emphasis on the role of cognitive development and cognitive may be a transitive term, but a simple idea of any thinking and learning in the development of healthy personality.

From the discussion with Dr. Bower about reading and delinquency and the correlation between it, it seems to me it takes very little imagination to feel what it must be like to be sitting in a classroom where everything that goes on around you is meaningless because you can't participate in the basic way of receiving knowledge by the time you are a fourth grader, which is through the process of the books which are presented as well as the teacher and the other experiences, so that, it would seem to me that basically a bill of this nature and the opportunity that the enactment of such a bill would offer to young children are so apparent that they hardly need further discussion with just this exception: that we do need to take a very careful look

at the kind of training and experience that we will offer such specialists and the deployment of their services within the systems because they will be members of systems in one fashion or another.

Perhaps here I stepped in where angels fear to tread, because I really don't know how these acts, when they become acts and laws, are finally implemented, but I would like to ask one or two questions because those of us in the world there have been at the other end of this, where we have written the proposals for the National Science Foundation, and NDEA and National Institute of Mental Health, and I might say that our institution has done a great deal of research and practical work with the aid of such agencies, but a question that comes to mind, as I read, and reread this bill, is the proportional allotments of funds to States. I am not so innocent as to not know that we are a Federal Government and States are very important considerations, but if we are going to make allotments in terms of numbers, I think we may be missing out somewhat in the terms of needs and facilities.

It would be very sad, it seems to me, to have such a child development specialist wandering around in a situation where there was not sufficient use because there was not sufficient development of the community to make sufficient use of such a specialist and by that same fact cutting back the most productive uses such as specialists in communities ready to receive such services.

A brainstorm that came to me was simply maybe we ought to have a national child development foundation, somewhat like the National Science Foundation, which quite directly has supported student training in the institutions in which this training has taken place, a brainstorm notion, but I offer it just the same as a more direct way of making available to the communities around the country the support that this bill has in mind, and which we certainly support enthusiastically.

Mr. GIBBONS May I comment?

Mr. MEEDS. Yes.

Mr. GIBBONS. To get some of Mrs. Winsor's suggestion.

I think you hit a difficult point in the bill. It is very hard to allocate these people where they are needed because it is very hard to put your finger on just where they can be accepted and where they are needed the most.

It was my idea in allocating them on the basis of child population that Congress could come back as it learns more about the use of this act and perhaps better define how they should be allocated, but the allocation envisioned in the bill when it is fully operative is one development specialist for each 350 schoolchildren in the elementary and preschool systems of the State, the public and private.

Obviously some communities can accept and can use these people more readily, but where they go into areas that are not ready to use the services of the specialist, immediately the specialist would, I hope, from the specialist education be able to become a leader in that area and help the community understand this problem a little better and I think within a very short time because of the intense interest all of us have as parents in our children these areas that are behind can catch up more rapidly, particularly some of the more rural areas where communication is more difficult and where there is no feeling of closeness. These are all just ideas.

Let me get over to a suggestion you made, apparently referring to page 16 of the bill. You are talking on page 16 about around line 10 of the bill.

As I understand, you suggest, in addition to the competence that is suggested there in the bill, that there be some emphasis upon the curriculum development and upon the child's normal learning process. I think the matter of normal learning process was probably overlooked in the enumeration of these nonexclusive characteristics that I put in here, but would you just go into that a little more deeply about curriculum and learning process?

Dr. WINSOR. Let me start with Dr. Bower's word "play," which rings a very important bell in the minds of anyone who has dealt with young children and in the ways in which some of us have for many years.

I would like to go one step beyond what Dr. Bower said about children's play, and that is that there is not only essential learning in the process of children's play, but by golly, somebody has to teach children what is the meaning of play. It sounds almost fatuous when one talks about a teacher teaching children how to play, but this is part of early childhood curriculum as we envisage it and by play here we mean the opportunity for children to play out some of their personal life processes, what it means to be a boy or a girl, or a son or a daughter, or a not fathered son or a not fathered daughter, but beyond that how the teacher can further the child's entry into a life in his environment through the process of his play.

Do I have to give you an example? I am sure you see it.

Mr. GIBBONS. May I give you an example?

Dr. WINSOR. Yes, do.

Mr. GIBBONS. You will read about it tomorrow in Time magazine. It talks about your public school system, one of your public schools—No. 77, I think it is—in New York, where a particularly talented principal was using music as a system to get children to learn. It was his theory, and apparently he has been able to sell it, that by using music he was able to get the children to act and to get the children to learn, and there were some very good illustrations in the article that you will read in the current issue of Time when it comes out about the progress that has been made in reading skills just because of this type of activity in the classroom.

Dr. WINSOR. I am saying about a child development specialist understanding the ways in which he or she could further the quality of classroom life for children because such a person understands that the play of children at the age of 4 and 5 and 6 has curriculum meaning, and I use the word "curriculum" advisedly, because that usually sounds like reading, writing and arithmetic, and to us it means a great deal more.

In the case of the principal of No. 77, he meant music. He probably loves music and he found his entry to children through music. In our concept here of young children we find our entry to children or we find ourselves bringing the distance between what we wish for them and what are ready to do through their play. We interpret a great many of their behaviors through their play. This is for the psychologist and the psychological processes.

I am talking now about the cognitive process. Let me say this, that if a child builds a bridge with blocks and he learns if he doesn't put a ramp on the bridge to get the cars off the bridge he is stuck in the middle of nowhere, he is learning in his play a basic engineering proposition as well as an environmental proposition. These are some of the things that sound almost fatuous as one says, but that is a basic process of early childhood learning that we find so often.

Mr. MEEDS. Pardon me. May I ask you to summarize rather quickly? We have at least one more witness before noon and then we will have time for a question period.

Do you have something else?

Mr. GIBBONS. No, I have finished.

Dr. WINSOR. You want me to summarize what I have just been saying?

Mr. MEEDS. Any further testimony that you have.

Dr. WINSOR. In summary, I would like to say that the need for such a person in a community augmenting with what is the process of child growth and learning is of the utmost importance in this day and age, that we have come a long way in a long time, I would say 50 years or more in my own institution, studying the problems of children's learning and growth and personality, and for my colleagues I have to say that we approve the bill without qualification, but would wish in its implementation that more emphasis or concern is put into the proposition of the education of children. That is 1 minute, I am afraid.

Mr. MEEDS. May I just take a moment to compliment you and to observe that you have presented some of the most obviously dedicated testimony I have heard before any committee in a long time. I certainly congratulate you.

Dr. WINSOR. Thank you.

Mr. MEEDS. Congressman Ford, do you have any questions?

Mr. FORD. No questions.

Mr. SCHEUER. I would like to say since I have had the privilege of my four children enjoying a superb experience in the Bank Street school, that I am not surprised at the interesting and dedicated testimony and I wasn't disappointed.

Dr. WINSOR. Thank you. Perhaps I should include for this record this word article by a member of our faculty, Dr. Biber, which is called preschool education.

Mr. SCHEUER. How long is this?

Dr. WINSOR. This is 24 pages.

Mr. MEEDS. Without objection it will be made a part of the record.

(The document referred to follows:)

BARBARA BIBER

Preschool Education

BANK STREET COLLEGE OF EDUCATION
Publications
131

BARBARA BIBER

Preschool Education

EDUCATION, at all age levels, has short- and long-range goals and purposes. The teacher who welcomes back the four-year-old, exuberantly returning from his first venture on an errand that required finding his way down a flight of stairs and through a winding hallway, responds directly to the child's pleasure in his new-found powers. Her own pleasure is more complex. One of her goals in teaching four-year-olds, whose impulse to explore beyond established boundaries is strong, is to help them become oriented in their own extending spatial world. This she has already done by leading them to wonder—which children are in the room above, which below; by accenting for them the decisions that she, as an adult, would make automatically—which turns to take on the way to the play yard; or by engaging them in a collective recounting of the turns and crossings each one must perform to cover his route from home to school.

In these ways she works toward a short-range goal: to help the children map their immediate spatial universe and, in gaining orientation, to be more knowing of the world around. Something has been accomplished that the teacher feels is important

for these four-year-old children to know in order for them to function more effectively. Four-year-old effective functioning, however, is not the outer limit of her purposes. In this small incident she sees another meaning, related to how this child will function at fourteen or at forty, in life experiences infinitely more intricate than the path between hall and stairway. Her hope, her long-range goal, is that through this, and myriad other experiences, the child will be learning that it is not necessarily dangerous to venture from the known to the unknown, that the "scary" feeling does not have to turn one back, and that the pleasure of conquest is warmly shared by the very one who at other times seems so unreasonably to have clipped one's wings.

Similarly, the teacher of science at the college level enjoys his students' mastery of the exercise in the laboratory manual; but he has a goal far more grand in view: to guide his students toward understanding under what conditions and to what extent the canons of the scientific method provide a tool for probing the unknown, and, still more ambitiously, he wishes to enlist their drives and energies in the search for truth as scientists, far beyond the immediate goal of developing their competence in the laboratory.

It can easily be argued, and agreed upon, that these attitudes are unusual, that on the whole, teachers are content with their own and their students' competent performance in the daily round of tasks, lessons, and examinations, functioning as practitioners, with little awareness of the fundamental social processes of which they are part. Long-range goals, however, are necessarily part of the fabric of education as a force through which the future of the culture is forged. Moreover, the long-range goals of education, whether consciously pursued or passively accepted, represent the dominant value system of a culture.

The contemporary hue and cry criticizing education for not doing a good enough job in developing students who can conceptualize and engage in systematic thinking illustrates this point. In a culture where independence of thought and judgment is an ideal, education is expected to find ways and means to fulfill this long-range goal. Directly and indirectly, by percept and identification, in books and through relationships, children learn to live by values such as these while they are in school and to incorporate them into a way of life for the future. This encompasses codes of behavior with people, ego ideals to strive for, decisions involving adaptation or compromise, idea systems for taking attitudes and focusing opinions. The drift of these values in response to social, economic, and political changes in a democratic society is of broad social significance, although we are likely, more often than not, to be preoccupied with the more personal perplexities implicit in the increased gap between generations created in eras of rapid change.

The intrinsic worth of the individual, a value recognized as the foundation of democracy, may be considered in two ways, both of which are relevant to the place of preschool education in a democratic society. For the individual, on the one hand, the primacy of this value in his society is a protection and a privilege. There is a constant upward movement, despite the social faults that act as obstacles, in providing equal, universal opportunity. How opportunity is perceived, on the other hand, varies from era to era and generation to generation. Multiple meanings accrue to the concept. Historically, these meanings have included opportunity to move across social classes, to be educated at public cost, to make independent vocational choices. Part of the guardianship of democratic functioning also rests in the freedom of the individual to call out against its shortcomings in formal or informal protest, through such diverse social instruments as

the law and literature. Admittedly, these are ideals against which the reality falls far short; a serious contemporary problem, for example, is the younger generation's feeling that they have no means of influencing the course of social change.

In recent decades a new ideal of opportunity for the individual has come to the fore as a result of the revolutionary progress made in understanding the psychology of human behavior and development. Man has been held back from within himself; if the processes of emotional maturing, the integration of unconscious forces with conscious powers, can be "well educated," it is felt that each individual can function more intelligently, effectively, and creatively.[1]

In addition, then, to the opportunities and rights embedded in legal and social institutions and bound up with them, opportunity has also come to mean freedom from neurotically generated miseries, and maximum fulfillment of potential capacities. This opportunity is not one to be reached for in the manner of the "rugged individualist" of the early twentieth century, when those lacking in a defined series of explicitly virtuous ways of dealing with the environment were left behind to lesser individual fulfillment, with little accompanying social concern. The opportunity for resolution of debilitating conflict and self-realization of the individual has become a public trust.

Evidence of this change in the social climate is beginning to make itself felt institutionally in various ways: in the pressure to provide all groups of the population with financial support for higher education, the increasing spread of guidance services in the public schools, the concern for psychological problems in social casework, the emphasis on promoting positive health as an essential addition to cure of disease in the mental-health field,

1. Lawrence S. Kubie, *Neurotic Distortion of the Creative Process* (Lawrence: University of Kansas Press, 1958).

the changing emphasis toward psychologically oriented child-rearing practices as mirrored in government publications.[2] Disturbing as it may be to some people, the fact is that we are moving toward becoming not simply a welfare state but a psychological welfare state.

That a democratic society should undertake to provide this extended opportunity for the sound fulfillment of individuality makes the only possible good social sense, since the culture survives, moves, and takes its directions through the imaginative adventuring and practical decision making of collective individuality.[3] This expansion of opportunity, circumstantial and psychological, for fulfillment of individuality cannot remain a privilege or a right granted from society to the individual if it is to be a basic source of strength for the social fabric of a democracy. Ways must be found for a reciprocal process between individual fulfillment and social commitment and responsibility.

These considerations return us to the question of how these values relate to education. Fulfillment of the individual alone, even by the ambitious criteria of psychological health and realization of potential, does not constitute a system of values. The Nazi ideal, which exemplified the grotesquerie of effective functioning and was pathologically fulfilling to so many individuals, stands out as the epitome of violation of all that we regard as the basic code of human functioning. *The worth of the individual becomes the cornerstone of a value system only when fulfillment of the individual, abstracted from personal right and privilege, culminates in a universal concern for everyone else's individuality.*

Some people have incorporated this goal into a concept of

2. M. Wolfenstein, "Trends in Infant Care," *American Journal of Orthopsychiatrics*, Vol. 23, No. 1 (1953), pp. 120-30.

3. Norman Cousins, "The Human Commonwealth," in Eli Ginzberg, ed., *The Nation's Children* (New York: Columbia University Press, 1960), Vol. III.

emotional maturity[4]; others have integrated it into a philosophical scheme of things.[5] For education it is the central concept around which to build long-range goals.

The evolution of the socializing process of the individual can be seen as a sequence of breaking the boundaries of the self; it means extending the sphere of kinship from parents and family, to school, to teachers, to sex, to neighborhood; to those who share one's skills, one's interests, one's religion, one's viewpoint; to profession, community, region; to ethnic group, to a nation, and now to mankind. This development, optimally, consists of a cumulative extension of self, not a bartering of one identification for another. In the process of growing up, therefore, the primordial self of the infant gradually becomes a multiplicity of selves acting in complementary ways in the integrated individual.

Some of the child's struggles in the preschool years are closely related to this complex aspect of human functioning. When the father is being the husband, for example, can he still be felt to be the father? In the spontaneous play about family life among three-year-olds, it often takes two children to deal with this, one being the father, the other the husband. This innocent separation of functions makes it possible for the young child to discipline cognitive complexity. One also may read into this characteristic play form the expression of the child's unconscious wish that the father should have no identity with the husband. A year or two later the child may have mastered, abstractly, the concept of multiple selves; nevertheless, he is considerably surprised when, in the second grade, he is confronted by the thought of his teacher putting her baby to sleep. His surprise is

4. Erik H. Erikson, *Childhood and Society* (New York: W. W. Norton & Co., Inc., 1950).

5. Robert Ulich, *The Human Career. A Philosophy of Self-Transcendence* (New York: Harper & Brothers, 1955).

57-877 O—66——10

not unlike that of the college freshman who learns that the lady professor of Greek can turn out the best cable-stitch sweater on the campus. It seems as hard to accept a basic constancy of self that is sustained through a variety of roles and functions as it is to achieve a continuity of self through the successive periods of a total life span.[6] Pulling away from attaining such constancy and continuity of self is a tendency toward a negative polarization, as though what one is, at any stage or in any context, is definable, realizable, experienced, in terms of what one is not. This is often clearly projected in the club formations of children. The club derives its meaning more from the definition of who cannot be in it than from common interests and activities. In one very young club idea, at about the first-grade level, the criterion was an intellectual one: "Anyone who thinks that steel floats, can't be in."

Where this tendency toward negative polarization of self identities is dominant, one often finds a parent who cannot empathize with the child because his feeling that he is a parent rests on feeling himself *not*-a-child, like the man of wealth who represses the memory of his childhood poverty and like the white man whose feeling of whiteness rests on being the opposite of, and therefore maintaining the greatest distance from, the black man.

There is another kind of internal war having to do with the extension of the self that is easily recognized as a product of a particular form of the socializing process. It springs from the morality of sacrifice and assumes a dichotomy between fulfillment of the self and extension beyond the self, as though to care, to live, to love beyond the bounds of the personal is glory, a kind of godliness that calls for sacrifice and the loss of a smaller

6. G. W. Allport, *Pattern of Growth in Personality* (New York: Holt, Rinehart & Winston, Inc., 1961).

self, intrinsically of lesser worth. Yet neither the centuries of exhortation from parents and pulpit not to be selfish, nor the knowledge that there have been people who have achieved great heights of selflessness, has produced an ethically superior kind of man, endowed with a capacity to consider all men as part of his own existence and feel his identity as part of all mankind.

It appears that a concept of individuality in which self-realization comes to fruition, not through a survival by competition of multiple selves, nor through moral repudiation of baser selves, but through an integrated progression from a personal to an extended self, is essential in order to give reality to any expectation that concern for mankind can become a potent social force. This concern, expressed verbally, albeit with sincerity and even passion, is not an ideological creation of our generation or century. Many of us, if we recall anything at all of what we learned in our study of the classics, are likely to echo the phrase: *nihil humani a me alienum puto*. The problem of our times, the challenge to education, consists in transmuting this value from an exalted position in an ideological system—where, admittedly, it has the power of any great idea or ideal[7]—into a more earthy existence, where it can govern the functions and feelings, the dreams and decisions, of the hours and days that are filled with ordinary living.

The hope of our era, if there is time, lies in our new-found knowledge of the deep-lying motives of human behavior, in our ability to bring this knowledge to bear on this ideal for mankind through the social institutions of the family and the school. Progress in this direction will condition how far the nature of man can be cultivated so that his ways of feeling, thinking, and being support the ideals he professes. The goals of education are thus

7. L. K. Frank, *Society as the Patient* (New Brunswick, N.J.: Rutgers University Press, 1948).

clearly bound up with available knowledge of inner processes, with the transmission of values through experience rather than verbal precept, with consciousness that the educative process has a vital impact on a manner of man as well as of mind.

During the last few decades a philosophy of education, consonant with humanistic ideals, has emerged in which the concept of extended individuality is a primary value. In this philosophy, the principles and methods through which teaching and learning are enacted utilize psychodynamic theory concerning the nature of experiences and relationships presumed to be conducive to developing ego strength. The maturity of an extended self, by this theory, depends on the development of psychic strength at every stage of growth, incorporating basic affirmative attitudes, the capacity to resolve conflicts noncorrosively, and conduct adaptive and creative interactions with people, work, and ideas. This philosophy and method in education is young and difficult to enact. It has been an imaginative forefront in American education and has suffered from distortion and misinterpretation; it takes hold slowly because it demands fundamental departures from traditional concepts of education, as well as the development of a new kind of teacher. Its foothold is firmest in preschool education because there is less tradition to be put aside and because the interaction between the child's inner processes and his mode of relating to his life environment is more open to observation and understanding.

It is possible to find illustrations of the links between (a) a theory of the developmental processes in children from three to six, (b) a method for guiding the educative process, (c) the goals for positive growth as a child during this period, and (d) a rationale for the presumed relation between this positive growth and commitment to humanistic values in maturity.

To understand and educate the preschool child it is neces-

sary to take cognizance of certain elemental processes that inevitably involve conflict. The way in which these conflicts are resolved furnishes basic attitudinal material for the personality in formation.

The younger the child, the more dependent is his perception of reality on the particular configuration of each separate experience. Recognizing the lines of connection and constancy between experiences separated in time or differing in constellation is part of gradual maturing from infancy on. The faith that the mother, when gone, is not lost forever is part of learning; the absence of this faith easily becomes a generalized separation anxiety. For the preschool child the ultimately reassuring rhythm of separation and reunity has usually taken place within the familiarity and constancy of the home. When he enters school, he relives this experience in a new, unknown setting. Awareness and acceptance of the child's possible anxieties by school people becomes educationally fruitful when they supply for him the bridge between what is being left behind and what is being entered, by acts relevant to the child's emotionality: no stricture against crying or regressive behavior, bringing home-toys to school, having parents stay in school during early phases, offering food and supporting physical contact.

Yet, support for anxieties associated with the child's loss of familiarity of setting and separation from the closest figures in his life is only part of the educator's task; it is primarily her task also to offer the child a meaningful new phase of life in which to partake, rich in opportunity for finding gratification for the maturing powers of body and mind.[8] Optimally, then, the goal is twofold: first, to reduce the possible trauma of experiencing separation as irretrievable loss, and, second, to make the expe-

8. Heinz Hartmann, *Ego Psychology and the Problem of Adaptation*, trans. by David Rapaport (New York: International Universities Press, Inc., 1958).

rience of entering new orbits of life experience stimulating and satisfying to the forward drives of the individual.

The problem of possession represents another basic process in the emotional life of the preschool child, one that is rooted in the experiences of infancy, and is relived and reshaped during these years. The infant's basic feeling of safety in belonging to the protective mother is inevitably threatened as the child encounters the reality of the mother's other ties—to husband, to siblings, to her own parents and friends. After infancy, the preschool child's deepening ties to the parent of the opposite sex involve him in the resolution of a mighty conflict, in which denial of possession must once more be resolved.

In his school life, looked at superficially, he has a few simple rules of civilized social conduct to learn: to wait his turn, to share the things he plays with and becomes attached to, to accept his place as one of many in the teacher's feelings and thoughts. Certain moral precepts derive from this view: he should not demand too much attention, he should yield things and priorities quickly and smoothly, and above all, he should not be "selfish."

By contrast, the teacher who recognizes that a child who desperately clings to a favorite "thing," or pushes to sit right next to her in the story circle, is involved in living out and working through deep, universal human conflicts of possession and rivalry is faced with more complex goals than the teacher who wheedles or forces children's behavior into pleasing social molds. Arbitrary demands on young children to give up, to give away, without a feeling of loss may exact a terrible price. It may be teaching them to avoid loss by giving up the disposition to care, or to want, deeply, in any way. For the child to whom beloved things may be almost part of his psychic self, the demand may be felt as a deep violation. This does not mean

that children do not need to learn to give, to yield, to wait. It does mean that the teacher's feelings, insight, and technique should make it possible for her to guide the child gradually to give up what may be dear to him without feeling decimated as a person, to feel a deep tie to her while knowing she is similarly tied to others, to control his primitive ways of expressing his rivalry with other children without feeling overwhelming guilt for having had such feelings in the first place. In such an educational atmosphere the primitive self does not have to be castigated, thrown off, and replaced by the civilized self. Its vital energies and passions are needed for the ultimate capacity to live deeply and fully: they should be educated, not censored or denied.

Another basic transformation of the preschool years takes place in the sources of pleasure. The self, even after infancy, is in important ways still a body-self, and it is understandable that in a puritanical society such as ours, there is pressure, conscious and unconscious, to wean the child as fast as possible from the natural pleasures he can find in body sensations and in the active exercise of his physical powers. Thus shame, if not threat, and, in either case, the arousal of deep guilt, are the means used to train the child in his habits of elimination and to stop his impulses toward thumb sucking or masturbatory activity. Once more, by these methods, a part of the elemental self is chipped away and lost as a wellspring for full growth toward emotional maturity.

Education during the preschool years has a delicate task to perform in this area of development. It must create an atmosphere in which body functions and impulses are not associated with disgust or shame while at the same time gradually initiating the children into handling these drives in socialized ways. A second task is to provide the opportunity and equipment for

finding pleasure in discovering endless possibilities of engaging physically with the world of things and space, of experiencing mastery in the skills of the body. The goal is to help the child gradually outgrow the autistic sources of pleasure, and instead find gratification of the body-self through an outward course into an extended environment. The image of a four-year-old who has not only reached the top of the jungle gym, but who has managed to suspend himself head down and explains excitedly for anyone to hear what an "upside-down world" looks like, can suggest in what way the fulfillment of the powers of the body-self is part of the educational task in the preschool years. This is particularly true when one of its long-range goals is to develop individuals with the capacity for deep involvement in the orbit of the self and, ultimately, extended commitment beyond the self.

A few general principles emerge to serve as guidelines for the education of the young child: elemental impulses are to be accepted and rechanneled, not denied and stamped out; impulsivity in general is an irreplaceable source of vitality and depth, not to be sacrificed by premature socialization or taboo setting; to strengthen the self, education needs to provide appropriate encounter between the child and his world, at every stage.

One of the significant confrontations for the young child is his experience of the strength and authority of the people in his world vis-à-vis his own weakness and social impotence. In the nature of this experience lie alternate possibilities. His natural drives to explore beyond possible bounds, to release aggressive impulses in dangerous ways, or to seek his own strength by resisting adult authority cannot be given free reign if he is to be physically or emotionally safe. If these drives are harshly, arbitrarily, or punitively curbed, the child's resulting good be-

havior will be accompanied by a sense of inner badness and the kind of repression of primary and retaliatory anger that is most likely to become a dangerous reservoir of latent hostility. There are alternative ways of exercising control over the young child that avoid the stamp of sin, which invite him to enter into the rationality of authoritative acts, and which leave room for expression of negative feeling within limits. This is one of the most studied aspects of preschool education at the present time; it is worth noting that it is also one of the areas in which neophytes in the profession find themselves most troubled by the rearousal of feelings connected with their own childhood relations to and conflicts with authority figures.

It is not the intention of educators to spare the child the inevitable conflicts of growing up; this, if it were true, would be the most egregious error of all, since it is through the meeting and resolution of conflict that the self gains and feels its deepest strength. The goal is to guide the child in his preschool years through the inevitable conflicts associated with the family drama and his induction into socialized living, in such a way that he emerges capable of accepting control but uncowed, capable of love without demanding exclusive right of possession, without a feeling of sin attached to his psychic or physical self, ready to move on to taste the pleasure of knowledge and mastery in an ever-widening world.

One elemental process during these years that can be the very handmaiden to the educative process is the child's ambivalence and the ready accessibility of his opposite feelings. He has not much face to lose if the child he tried to pummel on Monday is his best friend on Tuesday; while he may join enthusiastically in a contagious outburst of stamping feet, he is happy and relieved when the teacher restores the collective calm he also wants; the lingering pleasure to stay young, to depend

on adults for support, reassurance, and control live alongside the deep wish to grow up, to strike out for independence and forego the comforts of enveloping protection. The skillful teacher, dedicated to the growing rather than the training processes, can tune her response to the shifting behavior that bespeaks the child's ambivalent feelings. She can believe in his positive drives and wishes even when he is engaged in maneuvers that are destructive to himself and others, and help him bring his positive self into dominance and show him to himself in a warm good light. Perhaps this can be considered the essence of healthy self-knowledge—to know and accept one's self as a source of good and evil, and to trust that the positive self will provide the major dynamisms for living.

At this point, it is time to consider other growth processes that characterize the preschool years and the known possibilities for channeling these processes toward deepened and extended identification of the individual with his environment. If a single term could be at all adequate, the term "extensor" processes might be employed to refer to the burgeoning impulses of the healthy young to make contact with his world, from the earliest days when all he can do is taste and smell it, to the time, four or five years later, when it is an idea world as well as a thing world that he feels challenged to master through understanding. The stubbed toes and dirty knees of the two-year-old determined to explore every unknown corner, to achieve the top of the stairs at the cost of no matter how many bumps, is the forerunner of the wrinkled brow of the five-year-old trying to sort out his scrambled ideas about "olden days," when people had only candles for light, when his father was a little boy, and no airplane, not to speak of a jet, had flown across the sky.

The urge to get at and into the world beyond the self goes through miraculous transformations in the short span of the

preschool years: they are characterized by accelerated maturing of the human apparatus in its physical and mental capacities, and the momentum generated by the powerful drives for motility[9] and curiosity.[10] What these transformations shall be are the resultant of native equipment and social impact. Every child enters the sphere of symbolic discourse, which leads eventually to a system of explanatory and interpretive thought, synchronous with the logos of his society; every child creates a pattern of coherence for his perceptual and ideational experience that has attitudinal as well as cognitive elements.

In relation to the issue of education and mankind, there are two intrinsic questions to be raised. What can early education do to lead the young, groping mind toward the kind of intellectual potency that is represented by the capacity to deal analytically and synthetically with the ever-widening world of objective knowledge and personal experience? How can the young child experience the deep, creative involvement in his early encounters with the world of things, problems, and ideas that will insure against superficiality and indifference and lay the groundwork for an attitude of commitment to hopes and ideals for man's progress?

Children themselves, under almost any circumstances, construct an era of discovery out of the span of the preschool years. Education for this period holds the possibility for helping the child build an image of himself as a discoverer of a way of life within which one expects to move from the unknown to the known, from the mystifying to the comprehensible. For such a possibility to be approximated, it is essential that teachers are

9. Bela Mittelmann, "Mobility in Infants, Children and Adults: Patterning and Psychodynamics," *The Psychoanalytic Study of the Child* (New York: International Universities Press, Inc., 1954), Vol. IX.

10. Gardner Murphy, *Human Potentialities* (New York: Basic Books, Inc., 1958).

themselves attuned to the ordinates of early childhood: sensory-perceptual-motor modes of relating to experience, establishment of meaning through self-reference and personal experience, rapidly shifting bases of idea structures from contextual simultaneity to cause-effect paradigms, and, most important of all, the pre-eminence of the subjective life, expressed in the child's satisfaction with phantasy as a mode of bringing coherence into the welter of fact and feeling that constitutes his experience.

It takes an open mind to be aware of the child's ways of "seeing" the world around him; but it takes a disciplined mind to plot the course by which the child can be guided toward increasingly objective mastery of reality without sacrificing the idiom of his own perceptions and transformations.

On the simplest level there is the concrete, physical world, to be known through exploration and discovery. Every home has a chair to creep under and climb over, a dark corner to hide in, things hard to reach for, and in-between spaces to squeeze into, all of them opportunities for knowing the physical world. In school during these years another kind of setting is carefully created for this aspect of experience in "knowing": greatly increased opportunity, through the provision of equipment and space, to engage with the physical world in a varied round of maneuvers, including climbing, swinging, sliding, balancing, heaving, and stacking, and freedom to invent new variations of accomplished patterns of manipulation and co-ordination. In this setting, freer of the restrictions that must be made at home to keep life safe and enjoyable for all those who compose a family, the limits on courage and opportunity to try new feats can be set in terms of the child only: at what point will his drive to explore lead him toward physical injury or psychological damage in the form of excessive frustration? What kind of sup-

port can one child have for his bold, courageous adventuring? How can another be weaned from a tendency to hang back from the uncertainties of such new frontiers?

To the outside eye, they are busy, active children enjoying themselves. To the conscious educator, they are learning new skills; they are accruing new knowledge of themselves. Not only a child but a new self-feeling swishes down the slide with outstretched arms after he has climbed to the top of the jungle gym for the first time and, standing alone, has scanned the endless vista of the neighboring roofs. They are gaining direct knowledge of the nature of the physical world, knowledge that, in a few years, will be transformed into abstract concepts of weight and pressure, of wheel and axle, of hoisting and leverage. The adults in this world echo the child's pleasure in the expanding sense of himself as he moves about in his physical world, and see in his playful elaboration of physical feats the evidence of his individuality, making over in his own shape the "world" he has been given.

In an address a few years ago, Dr. Karl W. Deutsch applied his thinking about computer models and communication systems to questions of education and said:

> Openness—the ability to increase the sensitivity in the range of our channels of intake, the ability to interact and to receive, to learn more about the universe around us and from the human beings around us—is perhaps one of the most critical and most precious qualities of any system of communication. . . .[11]

Almost the same words have been used by this writer in formulating a first principle in the education of young children as "increasing the range and depth of children's sensitivity to the

11. Karl W. Deutsch, "What Do Our Computers Tell Us About the Way Our Children Grow?," *Child Study*, Summer 1959.

world around them."[12] In application, this principle guides preschool organization at all levels, from decisions on purchasing to criteria for selection of teachers. The "things" of the preschool world offer a wealth of sensory experience: the rough sand in the box, the smooth velvet covers for the doll bed, the red paint jar beside the black one, the hard blocks that cannot be squeezed into a small space, the too-soft clay that cannot be made to hold a shape, the tap on a triangle, and the rush of water in a sink. The "things" alone are not adequate teachers, though, unfortunately, there are many schools even at more advanced levels where there is a false dependence on materials, equipment, and buildings as the carriers of learning. In this young world it is the sensitive teacher who supplies the accents for the child's experience, perhaps by standing quietly with a few children, so quietly that one can try to hear the sounds the fish make when they pass each other in the tank, or still for so long that there is time to see the last bit of the boat pass over the horizon; perhaps by clutching a pan of snow under her arms, after the excited tramp in the snow piles, for the children to watch as it melts inside the warm room and to touch its smooth, icy surface when it is brought in from the window sill the following morning. The teacher's sensitivity can sometimes be measured indirectly; it is almost as if it correlates negatively with the amount of verbalization that accompanies this aspect of her teaching capacity.

The young child's naturally high impressionability, his freedom from the need to act through a structure of systematic purposes and means to ends, the available energy of the extensor processes provide his teachers with limitless possibilities for

12. Barbara Biber, "Integration of Mental Health Principles in the School Setting," in G. Caplan, ed., *Prevention of Mental Disorders in Children* (New York: Basic Books, Inc., 1961).

deepening his powers of perception and response to an accented, differentiated life environment. Through these experiences he becomes an observer; through observation, he is being introduced to one of the basic processes of learning; by deepening his own capacity for observation he is strengthening one form of vital communication between the self and the environment.

When he learns to walk, long before he gets to preschool, the child graduates from the plantlike existence of the infant. When he learns to deal with experience by means of symbolic reference systems, he leaves the animal world behind.

It is during the preschool years that the human mind performs its greatest magic: the child is freed from dependence on sensory-perceptual-motor experience as the sole channel of communication with his environment.[13] The evolution of the capacity to deal with experience symbolically represents the key extensor process of the maturing organism. It manifests itself in every medium of expression known to man, and runs the full course from the simplest gestural representations to advanced levels of abstraction. The string held to the ear is "telephoning" to the child who is nowhere near a three-syllable word in his vocabulary; the spinning five-year-old who drops to the floor in delicious exhaustion is the astronaut in orbit; from the crayon lines of the three-year-old a "face" appears; the clay in the hands of the four-year-old walks like a dog; the left-over strips of lath in the wood box are regenerated, to live again as a helicopter. Symbolizing through gesture, through two-dimensional and three-dimensional representation, are natural child modes of reiterating the more meaningful aspects of experience, thereby strengthening the joining lines between the inner self and the outer world. Equally exciting to the child, and ulti-

13. C. M. Solley and G. Murphy, *Development of the Perceptual World* (New York: Basic Books, Inc., 1960).

mately the keystone of his ability to deal effectively with the complexity of human living, is his gradual mastery of the word and the idea as tools for symbolically organizing experience. The telescoping of this growth process within the preschool years is forever astounding even to the most experienced adults. The very young child, intoxicated with the insight that everything has a name, stumps the adult with his unanswerable question: What is the name of yesterday? A very few years later, the six-year-old's unanswerable questions are of another magnitude: If settling arguments with words instead of fists is a sign of growing up, then why do we send soldiers to fight in wars?

The intermediate steps in this progression toward more complex, conditional, and comprehensive concepts are not random; patterns of increasing differentiation and integration follow a discernible sequence. Elements in experience are seen by the child as belonging together through acts of repetition, through similarities of projected affect as well as object attributes, through classification based on use and function. Differences in degree are added to absolute contrasts; time perceived at first through sequence of familiar events matures into the syntax of seasons, days of the week, hours of the clock. The child's first universe of given things in an eternal state of the "present" gives way to a world of change over time; his fascination with the "how" processes of making, doing, and fixing is close to the generic meaning of "manufacturing"; the span between beginning and end, then and now, expands to a primordial sense of history.

The responsibilities of education for this period of growth become clearer when it is recognized that it is possible for the child, not only to acquire knowledge of what constitutes his world and how it functions, but also to learn an attitude toward himself as one who can gain mastery over ignorance, perplexity,

and confusion; not only enlarge his vocabulary and engage in traffic with ideas, but also learn how the process of thinking can be an exciting, gratifying form of exploration and discovery; not only look to adults as the source of information and know-how, but learn how to transform what, in the last analysis, can only be borrowed from others into a self-absorbed and internalized understanding of one's own. To fulfill such possibilities requires highly specific attitudes and techniques on the part of teachers; these can only be briefly referred to in the context of this paper.

There is a concrete method for firsthand study of the environment, creatively conceived and skillfully developed by Lucy Sprague Mitchell,[14] which is adapted to the constant revision and revolutionary changes in the child's world of reality. The emergence of television and the space age, for example, requires basic rethinking of what a child's world of ideas is. Techniques of group discussion in school make thinking a socialized experience, in which a wide score of accepted relevance and a minimum of right-wrong orientation invite the child mind to roam fully with the raw materials of thought and allow the teacher the role to guide in accenting connectives, by opening up new and richer fields for wonder and research, by leading thought processes to more advanced organization, as, for example, when children first engage in cause-effect reasoning.

There is a danger, of course, that the teacher may overdo her function as a guide toward mastery of reality in terms of increasingly clear and logical thinking and, in so doing, sacrifice the opportunity to nurture creativity at its source.[15] In the intellectual realm, this problem is analogous to the damage to

14. Lucy Sprague Mitchell, *Our Children and Our Schools* (New York: Simon and Schuster, Inc., 1950).

15. Barbara Biber, "Premature Structuring as a Deterrent to Creativity," *American Journal of Orthopsychiatry*, Vol. XXIV, No. 2 (April 1959).

57-877 O—66——11

creativity in the sphere of the emotions inherent in too early or too strict denial of impulse expression, as discussed earlier. There are manifold ways in which the young child's creativity in assimilating and organizing experience can be kept vital and gratifying. One of these is to provide the materials, the setting, the atmosphere, for full and free activity in the nonverbal modes of symbolizing and reorganizing experience, to give psychological space to physiognomic as well as representative symbolizing activity.

Another way is to understand and accept the young child's need to use the self as the nucleus around which meanings and concepts are developed. To develop the mind, the teacher needs to be in close touch with the self. Concepts of time are threaded around the emotions of birthdays. When a five-year-old, watching a group of three-year-olds with his teacher, turns to her and asks, "Do you remember what we looked like then?," he is comprehending growth. The boundless curiosity about all origins, about where things come from, is rooted in the great mystery of one's own birth. The skillful teacher constructs a continuous bridge from the central self to the extended realities of the nonself, thus presumably preventing a system of dichotomous affect between the personal and nonpersonal, between the individual and the outer world. Unless such processes as these are rooted in the early years of personality development, is there much reason to hope that self-transcendance can be psychologically healthy in mature life?

The most significant opportunity for supporting creative processes in young children lies in the way in which their life of pretending is understood, responded to, and provided for. A first principle is to recognize the dynamic aspects of the play life of children and to perceive it as a complex counterpoint of active selection and transformation of experience, in which

material from the deepest levels of affect can be merged with recently acquired factual knowledge. There are transformations of self-roles: the child turns himself into a baby, a tiger, an engineer, a cyclone. The interpersonal and mechanical relationships of everyday life are relived and reinstituted; meals are cooked, babies lovingly tended; windows and elevators appear in block buildings; planes crash and cows escape from the pasture. The complex of relations among the children within which the play sequence develops is characterized by its fluidity, but is never random with respect to individual personality. Some children project relatively fixed roles: the baby, the victim, the captain, the pessimist, the idea man. Some move in and out of a variety of roles as varied qualities of interaction take shape: dominating, supporting, joining, aggressing, manipulating, distracting, and so on. There are no mandates for what the things in the real world shall be; a rusty muffin tin is a beautiful cake; a small wooden cube is a traffic light; a sawhorse is a bridge or a tunnel or a mountain; an enclosure is a house or an airport or a jail or a field of wild flowers.

When the educational setting and atmosphere offer guidance without imposing direction on the play life, the children are the masters of selection, sequence, timing; for future development, it is important that the child counteract his feelings of powerlessness by being given the chance to experience autonomy in such creative, constructive activities, not through his natural resistance to an adult-ordered world alone. By reliving the most meaningful aspects of their experience through self-initiated play, children actually master the realities of life experience. Thereby, they intensify their insights and, at the same time, create situations that lead them on to new and deeper levels of wondering and questioning; how great the gain depends on the quality of teaching available to them.

The play of young children, however, serves a far more intricate function than to advance and extend their mastery of reality: it is the child's natural vehicle to bring about a dynamic fusion of mastery of reality with subjective expression. Emotional responses—positive and negative—are projected and relived as actively as cognitive responses. The freedom to symbolize experience through play, away from objective, logical modes, gives the child emotional safety. This, in turn, makes it possible for his play to become a catharsis for living through defeats, frustrations, and pain, and thus has value, in general, for working out inner conflicts in an external field.

For play to serve these multiple functions, it is necessary that teachers be able to read the language of play and be aware of the extent to which coherence can be achieved on a symbolic level, while play roles and relationships may deny the simplest facts of reality. Only then will teachers be able to provide the balance between the child's dual impulse toward phantasy and reality while at the same time respecting the integration of the two, which the child is accomplishing at a deep level, in his own idiom.

In this paper an attempt has been made to illustrate how preschool education is related to the nurturing of individuality, conceived in terms of self-knowledge, self-realization, and self-transcendence. Two major propositions have been developed. First, the socialization of the young child need not, should not, mechanize the impulses associated with the elemental processes of development, lest, in doing so, it sacrifice creativity, spontaneity, and a positive self-image at the source. Second, the intellectual development of the child, identified as the extensor process, can be guided so as to enhance his powers of establishing a pattern of deep, personal involvement with the world around him, by protecting his modes of integrating experience through

phantasy as well as reality, by fostering an image of self-strength and an expectation that it is the individual who, through his own potentialities for being impressed and making impact, continually makes and remakes his world, as a child and in maturity.

From EDUCATION AND THE IDEA OF MANKIND edited by Robert Ulich, © 1964 by the Council for the Study of Mankind. Reprinted by permission of Harcourt Brace & World, Inc.

BANK STREET COLLEGE OF EDUCATION
69 Bank Street New York 14, N.Y.

Dr. WINSOR. I would have to use the word "philosophical." It is a philosophical development of the process of preschool education which I thought you might want to have.

Mr. MEEDS. Thank you.

Dr. WINSOR. I thank you.

Mr. MEEDS. Dr. Thompson?

Dr. Thompson, on behalf of the committee I would like to welcome you here and thank you for coming in support of Congressman Gibbons' bill.

STATEMENT OF DR. ETHEL THOMPSON, CONSULTANT IN ELEMENTARY EDUCATION, NATIONAL EDUCATION ASSOCIATION, NEW YORK, N.Y.

Dr. THOMPSON. Thank you. I shall be brief.

I am Ethel Thompson, the staff liaison of the Elementary-Kindergarten-Nursery Education Department of the National Education Association. Our department includes 4,000 teachers, and administrators working directly with elementary school programs in public schools and colleges, and is one of the 33 specialized departments of the National Education Association.

We wish to commend Congressman Gibbons on this introduction of H.R. 11322 and his clear exposition of the need for this legislation which he made to the Congress on September 30, and again to the committee today. We also deeply appreciate the committee's holding these hearings at this time, since we realize that these final days of the session are especially demanding ones for all Members of Congress.

I would like to associate myself with the remarks of the three preceding speakers concerning the need and justification for this legislation.

H.R. 11322, the Elementary and Preschool Child Development Act, is a long overdue major step toward strengthening education at all levels. The importance of the earliest school experience to academic success in later years has long been recognized by educators and psychologists. Unfortunately, this important principle has not been recognized until the introduction of H.R. 11322, by the Federal Government, except tangentially through such programs as reading institutes in the National Defense Education Act, and more recently through the Head Start program of the Economic Opportunity Act.

Meritorious as these programs are, by and large, they do not reach the heart of the situation. H.R. 11322 does. In the long run this bill can be the most important education measure enacted and is basic to the success of all other education programs as far as large numbers of children are concerned.

Before making specific suggestions on the language of H.R. 11322, we wish to commend Congressman Gibbons, the bill's author, on the spirit implied in certain key sections of the bill as drafted. We note with approval that the bill, in every pertinent instance, implies assistance and support to the teacher and parents, rather than a takeover of basic parental and professional responsibilities. Notably:

Title I, section 101(b), pages 2 and 3. The keyword "assist" is used exclusively to describe the specialist's role.

Title III, section 301(d), page 16 lines 19–22. The key words are "to be a major support and resource to the teacher and parent."

Title III, section 302, page 18. The provision of orientation workshops for teachers, principals, and other school personnel is an excellent device to establish the proper context for the role of the child development specialist.

We also commend the fact that the bill does not require matching from the States in order to implement the program. A matching requirement would in effect negate the effectiveness of the bill in those States and communities who are most in need of this type of program.

We believe that there is a need for clarification of the language in the following parts of the bill so that the public may not be confused:

Title II, section 203(a)(4), page 11, lines 1–2, should be reworded to make it clear that the factor 350 refers to all pupils, not just those needing the specialist's services. We believe the intent here is to provide that for every 350 children under the age of 9 years enrolled in the elementary schools, there shall not be less than 1 full-time child development specialist assigned to serve those who may need the specialist's service.

Title III, section 301(a), line 19, page 14: there seems to be a typographical error and "(b)" should "(d)".

The final section of our testimony concerns suggested amendments which we hope the committee will consider as constructive suggestion to improve the bill as now drafted.

1. Title I, section 101(a), page 2, line 21: We suggest that the words "—in any or all grades below grade 4, including below grade 1, etc." be deleted and that the words "—for children below the age of 9 years, as determined by State law." be substituted. Page 2, lines 19–22, would then read, and let me quote as we recommend:

"(a) The term 'elementary school' means a public or nonprofit school which provides elementary education for children below the age of 9 years, as determined by State law."

Our reason is that several school systems now are experimenting with ungraded programs for children in this age level. Wording that includes the age group as a factor would cover the traditional grade organization and still not preclude nursery school, kindergarten, and ungraded primary programs in those school systems using other patterns.

2. Title III, section 301(a), page 15, lines 10 through 13: We believe that item (ii), line 10, is superfluous and could be too restrictive. The language in (iii), lines 12 and 13, is adequate to cover those who may be already in graduate school. Graduate schools can be trusted not to admit people who do not have the academic ability to achieve. Further, in this time reference, we suggest two additional priority qualifications:

(*a*) Those who have at least 3 years of successful teaching or related experience with children under 9 years of age.

(*b*) Those who are determined by the institution providing the program, to have a high potential for success in dealing with children, parents, and teachers.

Perhaps this latter factor can best be provided for through language in the report, rather than by specific wording in the bill. How-

ever, we feel it is important that it be mentioned, since the individual's inherent commonsense and ability to establish good human relations is a key to the success of any child development specialist. Academic ability is not, alone, enough, especially in this field.

Also in title III, section 301(d), page 16, line 4, we suggest the words "* * * of an institution of higher education * * *" be inserted between the words "program" and "for". This will make it unequivocally clear that the institution's program, not the individual trainee's, is that which the Commissioner approves.

On line 7, page 16, under (1) of this same subsection we suggest the words "* * * internship experiences and courses of * * *" be inserted after the word "provides" and that the words "and training" be deleted as superfluous.

Page 16, lines 4–10 would then read: "(d) The Commissioner shall approve a program of an institution of higher education for purposes of this section only upon application, and only upon his finding that—(1) the program provides internship experiences and courses of instruction and training in subject matter areas the mastering of which is necessary for a person to be qualified to act as a child development specialist."

We believe the value of actual experience under competent professional supervision is essential for trainees in this field, and we trust the committee agrees.

On line 23, page 16(2) the words "by an institution of higher education" are redundant if the above amendment to line 4 is accepted.

On page 17, line 3 should be reworded to read "* * * are accepted by the institution for study in the program." Page 17, lines 1–3 would then read: "(3) only persons who have indicated a serious intent to pursue a career as a child development specialist will be accepted by the institution, not by the Commissioner." There is some misunderstanding on the part of some on this point and we believe these suggestions for rewording of these statements in title III will allay some fears.

Finally, we reiterate our support, and that of the National Education Association, for this bill. We hope that in future years the opportunities provided herein will be open to those who intend to remain as classroom teachers, but are not suggesting that it be so broadened at this time. The need for specialists to support the present corps of teachers is so great that the limitation of the program to specialists is fully justified for the present. And, of course, as institutions improve and broaden their graduate offerings in the early childhood education field, under the impetus of this program, the opportunities for meaningful graduate work for classroom teachers are also expanded.

We urge the enactment of this legislation and pledge our efforts to assist in its implementation.

Thank you for the opportunity to express the support of the department of elementary-kindergarten-nursery education and of the National Education Association for this bill.

Mr. MEEDS. Thank you very much, Doctor.

I will call on Congressman Gibbons to see if he has any questions or comments.

Mr. GIBBONS. First, I know the time is brief and I certainly appreciate the great detail you and your association went into in

analyzing this legislation. I think your suggestions have a great deal of merit.

Dr. THOMPSON. Thank you.

Mr. GIBBONS. I didn't catch them all thoroughly, but I am going to read your testimony in detail. I appreciate your fine work.

Dr. THOMPSON. We were so delighted with your effort, Congressman Gibbons, we wanted to help.

Mr. GIBBONS. I have no further questions, Mr. Chairman.

Mr. MEEDS. Congressman Ford?

Mr. FORD. I had already started reading Dr. Thompson's testimony and I was interested in her observation about the committee in the last days of the Congress. The Perkins subcommittee was the 1st committee of the 89th Congress to start holding hearings back in January and we were talking about new ideas in education then, and I think it is very fitting that Chairman Perkins' subcommittee is going to go out with the 1st session of the 89th Congress still talking about new ideas.

Dr. THOMPSON We are so indebted to you.

Mr. GIBBONS. Congressman Scheuer.

Mr. SCHEUER. We are indebted to you for your most interesting testimony.

Dr. THOMPSON. Thank you.

Mr. GIBBONS. We appreciate the efforts of the NEA in behalf of not only this bill, but all of the bills.

Dr. THOMPSON. Thank you very much. We hope we can help.

Mr. GIBBONS. Thank you.

The committee will be in recess until tomorrow morning at 9:45, when we will hear from other public witnesses.

(Whereupon, at 12 o'clock noon, the committee was recessed, to be reconvened at 9:45 a.m. Wednesday, October 20, 1965.)

CHILD DEVELOPMENT SPECIALISTS

WEDNESDAY, OCTOBER 20, 1965

HOUSE OF REPRESENTATIVES,
GENERAL SUBCOMMITTEE ON EDUCATION OF THE
COMMITTEE ON EDUCATION AND LABOR.
Washington, D.C.

The subcommittee met at 9:40 a.m., pursuant to recess, in room 2257, Rayburn House Office Building, Hon. Carl D. Perkins (chairman of the subcommittee) presiding.

Present: Representatives Perkins, Gibbons, Scheuer, Meeds, and Reid.

Also present: Hartwell D. Reed, Jr., subcommittee counsel.

Mr. PERKINS. The committee will come to order. A quorum is present.

Our first witness this morning is Dr. Lourie, director of the children's psychiatric services, Children's Hospital, Washington, D.C. I can hardly speak myself, but Dr. Lourie, we thank you for your appearance here this morning to testify on behalf of such an outstanding piece of legislation and we are delighted to hear your views on H.R. 11322, which we hope will be enacted into law at the earliest possible date.

We appreciate your coming.

Give us your background and experience in the field, a little of your background, education, training, and experience to qualify as an expert on legislation to train child specialists, and so forth, to do something about these emotionally disturbed children. Give us a little about your background at an early age.

STATEMENT OF DR. REGINALD LOURIE, DIRECTOR, CHILDREN'S PSYCHIATRIC SERVICES, CHILDREN'S HOSPITAL, WASHINGTON, D.C.

Dr. LOURIE. I am something of a hybrid in that I am trained both in pediatrics and child psychiatry. I am a member of the American Academy of Pediatrics and an officer on some of their committees. I have been president of the American Academy of Child Psychiatry, I head the department of psychiatry at Children's Hospital in Washington and am medical director of the Hillcrest Children's Center and I am professor of pediatrics and psychiatry at George Washington University Medical School.

Previously I had been on the faculty of the University of Rochester, Columbia University, and New York University, before coming to Washington in 1948 where I have been since.

Mr. PERKINS. Go ahead and give us your views on the legislation. We appreciate your appearance.

Dr. LOURIE. I am struck by the timeliness of this legislation from two vantage points. One, I have been involved with the Joint Commission on Mental Health of Children, which was authorized by the amendment to the Social Security Act recently, and in thinking of the overall needs of children in this country, and, also, I have been involved with the planning Operation Head Start in this country, and the prime problem as we have been able to see it in this country where it relates to children's development is with the group of children who are born and brought up in the culturally disadvantaged parts of our population.

The inapproprate kinds of experiences that they are exposed to in development as they grow have their repercussions in most obviously the school situation, because these are the least well prepared children as they get to school. These are the children who according to our methods of measurement will function at a retarded level. In our work on the President's Panel on Mental Retardation it was this group that provided 75 percent of the retardation in this country, and it was obvious from a number of studies that have gone on that are available to the committee if they are interested, if needed, that showed that many of these children start out with normal potentials and that it is the experience in growing up, or in some areas the lack of experience and in other areas too much experience, that makes it possible for them to function intellectually in terms of how they would fit into our educational system.

They have functioned at a retarded level. Where it comes to survival intelligence they have much higher intellectual levels than our middle-class children. However, the problem when these youngsters get to school has a number of facets which can be dealt with which Head Start has proven can be reversed if there is an awareness of the areas in which these children need special help. For this we found that specialized thinking is necessary to be able to spot some of the sometimes not very obvious kinds of distortions which make these youngsters' educational experience a hazardous one for them.

We know that they in some areas are deficient in the kind of verbal experience they have. They have difficulties in some areas in dealing with abstract ideas. By the time they reach school many of them will be thinking in very concrete ways. They have lost a degree of flexibility. We have turned the searchlight sufficiently on this group to have some idea of where all this comes from, and eventually preventative approaches will have to tackle these problems at their sources, but from a practical point of view very often the first access we have to these children is through the school system, the point at which the community says, "You have to produce these children in the open and start getting them prepared to function in the community." Sometimes this is the first that the community has had an awareness of these children. For instance, here in the District of Columbia we know how many babies are born at the District of Columbia General Hospital and we know how many babies get to well-baby clinics and to doctors' offices and fully a third are not seen unless there is some kind of a crisis, so that not infrequently these youngsters will be coming up for school without even having the basic medical attention that

is necessary, so that the point at which these youngsters become available for remedial approaches is when they are produced into the school system.

At that point we need the people who can spot what is wrong. We cannot make this the duty of a teacher because otherwise we are making her a social worker. We are making her a child development expert. We are diluting her teaching functions and at the same time she is at a handicap if she does not have information available or remedial approaches available that will deal with those functions that are interfering with school, school achievement, school participation. This bill is one of the few possibilities we can see concretely as providing a basis on which the educational system can have some access to specialized thinking, have access to the remedial services that are building up in the community, and a child development counselor such as is pictured in this bill would seem to be the ideal person to be the bridge between the school, the classroom in which the areas of difficulty are showing up and handicapping the child, and the family remedial services that are hopefully available to that child outside and to the family.

Mr. PERKINS. From your training and professional experience assuming that we already had today a sufficient number of child development specialists well trained that would come in contact with these children in preschool and in the first 3 years of the elementary school, do you feel that if we had these specialists available we would have a far lesser number of emotionally disturbed children, problem children, than we have at the present time?

In other words, do you feel that this legislation will remedy to a considerable degree the problem child that does not receive the attention that the child deserves before the child enters preschool and the first 3 years? What is your feeling along that line, Dr. Lourie?

Dr. LOURIE. I would put it that, as long as we have a situation in which youngsters are coming to school with these handicaps, both emotional and in terms of intellectual functioning, we will need this kind of remedial service in order to keep these from being perpetuated. If these can be interpreted and intercepted at the point where they become available there is no question but that remedial approaches would relieve the problems, and it is not primarily prevention in the sense that we think of it medically and in public health terms, but the devil is secondary prevention, and we do have the evidence that secondary prevention can be effective.

Mr. PERKINS. Based on your knowledge and experience in what socioeconomic group do you find the greatest incident of serious emotional disturbances in children?

Dr. LOURIE. The greatest incident is in the lower socioeconomic group. This is not by any means to say that all children in that level of society are emotionally disturbed or that all the families are of the nature that produce children of this kind. There are segments in the lower socioeconomic part of our population which are upwardly mobile, which are bringing their children up to function at a healthier, more optimal level, but there is probably 20 percent of that group in the population which perpetuates emotion problems, and these we see even by 2 and 3 years of age quite clearly, the problems that are already built in.

Mr. PERKINS. There is another question that we want your advice on. We feel that you are expert and can give us an answer. What do you visualize as being appropriate graduate work to qualify a person to perform duties in the school as a child development specialist? What specific courses, in other words?

What degree of training?

Dr. LOURIE. We now have a training program for child development counselors at Children's Hospital to train a highly selected group of ladies to work with the parents of the very young children in the well baby clinics to try to deal with some of these problems at their sources. We have found from our experience that they need 2 years of training. At least that is our present indication. We find that to know as basic information about the makeup of both mothers and children. They need to know as basic information how the mind functions, how it develops, what can go wrong with it, as well as what can you do about it, what kind of distortion in mothering causes some of these problems, and how do you understand and deal with the mothers. They need to know about the community, its resources, and how the pieces fit together in the community, so that the community resources can be mobilized to deal with the problems that turn up.

They have to have basic information about interviewing techniques. They have to know about how a psychologist functions. They have to know how a social worker functions, how physicians function. In other words, these are the people who will be their resources and in order to know how to use them they have to know what goes on in their fields, and if you expect this child development person to function in an educational setting you would need, in addition, to have at least some of the principles of education and what problems are involved from both the administrative and the firing line points of view.

As we try to picture what should go into the training of such a person, I would say it is going to be a fight to squeeze it into 2 years.

Mr. PERKINS. Do you know some institutions of higher education to your personal knowledge that provide graduate programs of the nature adaptable to the training of such specialists?

Can you give us some institutions that provide training of this type, higher educational institutions?

Dr. LOURIE. At the University of Maryland there is a child development institute, for example. At Cornell University there is a child development program. At Peabody College in Nashville, Tenn., there is an outstanding program for training of individuals.

Mr. PERKINS. Do you feel that a program of this type, if enacted into law, would serve as an incentive or accelerate the institutions of higher education throughout the country to realize the urgent need for training programs in the area of child development specialists?

Dr. LOURIE. I have no question about that. I would think that the availability of fellowships, stipends, and so on, as pictured in this bill would be one of the greatest inventives for young people to think in terms of this training, the fact that there are programs aiming in this direction and backing for them is very often the kind of evidence that young people need in making their career choices. They like

visibility of what they do and wherever this type of support has come into the picture there has been an enhancement of the field.

This is how the Congress made it possible for psychiatry to develop after the Second World War, by making stipends available, premiums for training, and it has worked.

It has worked so well that the other specialty areas in medicine have adopted the same type of support. It is some of the best pump priming I think that Congress has provided in the educational field, in higher education that is, in the professional areas particularly.

Mr. PERKINS. Mr. Meeds?

Mr. MEEDS. Yes, Mr. Chairman. Dr. Lourie, I would like to compliment you on your testimony. I have a question regarding the early part of your testimony in which you indicated that the greatest emotional educational disturbance occurred among the culturally disadvantaged young people, as you put it. And then later you indicated that these problems also seem to be predominant in the area of the lower socioeconomic strata.

The bill before us provides for a pro rata disbursement of funds on the basis of the number of total schoolchildren in the educational system from preschool up to and including grade 3 that that number of children enrolled in school bears to the number of children enrolled in the schools across the United States.

In other words, there would be an equal division based on children in school. Do we not find that there are more culturally disadvantaged children in some areas, in some States? For instance, one State may have fewer culturally disadvantaged children than another State.

Dr. LOURIE. I think that has had recognition from the Congress in its Appalachia bill, for example. This is something that possibly we cannot annotate with definitive figures until some such figures are available, hopefully, through the work of this joint commission which seems to be getting underway.

Mr. MEEDS. In the Elementary-Secondary Educational Act, we used a formula which is rather complicated, but which basically provided in title II for a distribution on the basis of people in families of an income less than $2,000. Would you think this would be a better method than a straight across-the-board equal distribution?

Dr. LOURIE. I would hate to think of a program of this kind which wasn't also available to the middle-class child. They then become the deprived part of the population in this sense. I am not sure that we have the answer to that, and I would feel it isn't worth while to wait for the findings in 2 or 3 years of a joint commission study to launch a program of this kind. But once a program of this kind is underway, I would suspect that it would be influenced by the findings as they emerge from the joint commission type of study.

Mr. MEEDS. Would it be your feeling, Dr. Lourie, that a child specialist working with 350 young people in that area would have his hands full in most any school district in the United States?

Dr. LOURIE. Oh, yes, I am sure that if there isn't some legislative limit set that these youngsters would make up so much of the load carried by these people. You see the examples in the high schools. What this legislation is doing really is saying, "here is a process that works at the upper levels in education. If you bring it down lower

it would make such good sense instead of waiting until the youngsters get to high school or junior high school or whatever."

Mr. PERKINS. Just so we understand each other, out of the 350 figure there in all probability would be a limited number of problem cases. It could in certain problem areas perhaps run much higher. The figure will fluctuate, but with the 350 figure even if you got 35 cases it would keep I think a specialist really busy. Do you agree?

Mr. MEEDS. That is what I wanted to bring out.

Mr. PERKINS. How many cases do you feel the child development specialist could handle and do the right type of job? That is, where you have emotional problems and other problems involved at an early age and they are detected?

Dr. LOURIE. I think that would depend on the level of job that it is anticipated this child development specialist will carry on. But to do a minimum kind of job, I would think carrying 100 cases actively would keep such an individual busy. Some of the precedence might be found from the caseload patterns in probation offices in juvenile court. It depends on how active you want those individuals to be, because if you give them too many cases they are only going to be able to give a lick and a promise to each one of them or concentrate on just a few.

Mr. GIBBONS. May I ask a question?

Mr. PERKINS. Go ahead, Mr. Gibbons.

Mr. GIBBONS. Interposing here, Doctor, it was my idea that this ratio of 1 specialist to 350 would include all children, ones who need educational service and ones who did not need service, and, of course, some would have more cases than others. I hope you didn't have the impression or I hope we weren't giving you the impression that we would take 350 kids that needed service and then turn them over to 1 person, because we realize that would be impossible.

Apparently from the data that has been made available to me and from some of the discoveries in Head Start, there is some approximation from, say, 7 to 15 or 18 percent of the children in any run-of-the-mill type school who need some sort of help, and that was how we arrived at the decision to provide 1 specialist for each 350. I wanted to bring that up because I was afraid that perhaps we were giving the impression here in the record that we were going to give these specialists 350 disturbed children to work with. I realize that would be impossible.

I know you didn't, Mr. Perkins, but Mr. Meeds' questions led me to believe that he was approaching it from that angle.

Mr. PERKINS. I am glad you made the clarification so the record is very clear now on that point. Go ahead, Sam.

Mr. GIBBONS. That is all.

Mr. PERKINS. Mr. Scheuer?

Mr. SCHEUER. Following up Mr. Gibbons' suggestion of somewhere between 7 and 18 percent, would you then think that taking 7 to 18 percent of 350, which would be about 20 to 50, or 60 children per child development specialist would be a reasonable caseload that a child development specialist could handle and do a fairly deep reaching job with each of those 20 to 50 pupils?

Dr. LOURIE. I think that is not unreasonable. This could be done. You could keep a string on that number of children. The thing we need to be watchful for is not just awareness in picking up a case, getting services for it—that is available now—but as we take a look at the pattern of services we find that children have bits and pieces of unconnected services, families, too, bits and pieces of services, which very often have nothing to do with each other, and one of the functions I would hope a child development specialist of this type would serve in a school system where there is continuity is to help maintain the continuity, to stay connected with a problem, and not to operate on a hit-and-run basis as we see so many of our services operating now.

Mr. GIBBONS. I think that is an excellent observation.

Mr. SCHEUER. May I ask a further question? How much up during the child's school life do you think this continuity should be provided in point of time? Do you note that this bill carries up the service through the third grade? And Congressman Gibbons explained that this is a start. We know it is just a start and it had to have finite, manageable boundries to begin with. But in terms of the longrun future, would you say that such a service could well extend beyond the third grade, or do you think that if we are successful in the kindergarten, first, second, and third grade, we would pretty well for each child have the child in manageable proportions by the end of the third grade terms?

Dr. LOURIE. No. In the first places you cannot count on all problems getting to a manageable level at any definitive time, and you cannot function with the assumption that children are not going to run into problems, that families are not going to run into problems at any level.

Mr. SCHEUER. New problems?

Dr. LOURIE. New problems.

This is one of the difficulties we have in psychiatric work with children. If one problem gets cleared up, the finger is pointed back at the psychiatric service when it breaks down again and they say, "you didn't do any good." We have to allow for people to have the luxury to develop new difficulties or to run into new crises, and so on. We face the same problems with any medical difficulty like tuberculosis. We have to be ready for it to run up at any point or to recur after it has cleared up, and if when it recurs you bring it to the attention of the people who knew about the earlier difficulties, they don't have to go through all the working back as they have formerly, which will enhance the treatment of the current difficulty because they know about it in light of the past.

They know what has worked, what hasn't worked, and so on, where the hazards are, if new difficulties come up, and this is one of the gratifying things about this legislation. It provides for a continuity that doesn't exist even in our medical services where in the well baby clinics, for example, there are 5 years of records and then a youngster starts again in the school health program and the two don't necessarily have anything to do with each other.

Here is continuity from the preschool period into the school, the first grades of school. The reason I was so cheered by this legislation is that here is a chance to work from the bottom up and on a continuum.

Stopping at the third grade is debatable; but I think you have to start someplace and if there is enough of a demonstration that these services are effective, I am sure——

Mr. PERKINS. You will agree that we started in the best area? That is your professional opinion, isn't it?

Dr. LOURIE. Well, my own conviction is that you have to start earlier, that you have to start even in the first year of life, because even by the preschool years you are already picking up the pieces. You are already redoing things. But secondary prevention is better than no prevention at all, and you have to reach these youngsters at the point where they become available, and most often until you have services set up for them in the form of preschools and so on you don't have a youngster available to apply your remedial techniques to him or preventive approaches.

Mr. SCHEUER. How early in a child's life can we tell whether he needs special help?

Dr. LOURIE. I think you can tell in the first year of life. It is very hard for even some of our physicians to think in terms of babies under a year or under 2 years as having emotional problems, but it is quite possible to demonstrate them. We get the signals early.

Mr. SCHEUER. Do you find that in the child school program in comparing children from an impoverished families' list, middle-class families, affluent families, there is a differing incidence of emotional problems and learning problems? Or does a certain percentage run like a thread throughout the various vocational and income levels?

Dr. LOURIE. I don't think we have an accurate picture of that at this point. This is one of the reasons for the creation of this joint commission to study mental health needs of children.

Dr. SCHEUER. So you wouldn't say that there is more need for a mental health service for schools in areas that are serving a slum population, so to speak, than there would be for a school in an affluent suburban population?

Dr. LOURIE. My clinical impression would be that there is. We have a clinical service right in the middle of such an area at Children's Hospital and our impression is that if we were to have access to all the children in the school system in the area around us, we would be so overwhelmed that we couldn't handle all of the children.

As a matter of fact, that has already happened with Head Start. We had a call the other day. Before we look at the evaluation studies that we did on these children in Head Start, they asked us locally—we know of 90 children who need help right now before we even look at the evaluation sheets, the ones that don't stick out. What can you do about these 90 children?

In other words, we are getting some idea, now that we have lifted up the rug and swept out the pathology that is underneath it in 4- and 5-year-olds, not in the whole child population that we don't have nearly the facilities to deal with all that pathology, and that is why I would see a bill such as this as providing at least some way of being in communication with these children and these families, to do something about making these problems not only advisable, but mobilizing the facilities that can do something about it.

Mr. GIBBONS. Based upon your experience you would say that it would be a mistake to limit the scope of this bill to the lower socio-

economic groups, that the incidence of disruptive behavior is high enough in the upper groups to where they would also reasonably need this service? Is that correct?

Dr. LOURIE. We can share with you an impression. I don't have the facts on this, but our impression is, from the middle-class families that asked us to study cases from the cases referred by pediatricians and so on, that one of the most prominent problems in the last few years being brought to the attention of the mental health services for children is not achieving up to potential. That is a direct complaint in our middle-class families, but there it has the visibility and there help is being asked for, and I would think that if in the early school years, preschool and the first few grades, there is somebody to monitor on location in our middle-class school areas, to monitor what is going on, to be available to look into questions that turn up about youngsters in the early grades, we would save many, many headaches and heartaches and also failures of youngsters who will perpetuate learning disabilities.

Mr. GIBBONS. Dr Lourie, you have mentioned the matter of continuity. That is something of which I am aware. That is something we considered in drafting this legislation. I guess the most recent classic example of a failure of continuity is the late Harvey Oswald case. Apparently the reports from the Warren Commission show that this man was recognized as being a person who was subject to violent, disruptive behavior. Some work was started on him, but no one ever followed it through, even though he bounced from one agency to another.

Mr. SCHEUER. I think we are also finding that many of the participants in the Watts incident also have predictable histories of violence and serious problems ahead.

Mr. GIBBONS. Those are all the questions I have.

Mr. SCHEUER. May I ask one more question?

Mr. PERKINS. Go ahead.

Mr. SCHEUER. I think we are all agreed that Congressman Gibbons has started us down the road of a precedent shattering and highly significant program of mental health for our primary school system. Do you feel that there is a relationship between the physical health of a child and emotional and learning problems, and if there is, do you feel that we are doing enough in the school system now to enhance the physical ailment of the child, his sight, his hearing, and his general physical well-being?

Dr. LOURIE. Well, I think as we look over the school health services they certainly have the philosophy that would be aimed in the direction of having optimal health and picking up the distortions and development. As you say, you can't separate the emotional and physical. Both have influence on each other and both have influence on learning. I think there is an awareness that these objectives aren't being met adequately, optimally, in many school systems, and the AMA has been quite aware of this.

It has had a recent conference on school health problems. It is preparing literature that would create greater awareness of the needs in this area. But I think here, too, it is a matter of the school system continuity, the whole atmosphere in which these school health services operate; where it is so easy for the doctor to become a technician in-

stead of really the director of school health services, he becomes later on the stethoscopist, and the health teacher or the nurse gets to be the one who runs the school health services, because doctors are busy.

However, you are talking about another area of training. I think it could stand a great deal more visibility such as we hope child development will get from a bill such as this. Pediatricians are very concerned about this. There is discussion going on in the pediatric field now about prolonging the training of pediatricians, and one of the prime components that will go into the additional training year, for example, would be training in school health.

There is an awareness of the deficiency and wanting to do something about it.

Mr. SCHEUER. Thank you so much for your most interesting testimony.

Mr. PERKINS. Thank you, Dr. Lourie. We certainly appreciate your appearance, and your expert testimony has been most helpful.

Dr. LOURIE. Thank you, sir.

Mr. PERKINS. Come around, Mr. Pepper. Our next witness is Representative Claude Pepper, who everybody knows is one of the distinguished Members from the great State of Florida, and I am delighted to welcome you here, Congressman Pepper, to give your views on the legislation introduced by your colleague, Congressman Sam Gibbons, H.R. 11322. In my judgment your colleague has performed an outstanding public service in introducing legislation of this type, which provides a child development specialist in an area where we can do something about many of the problems that later have tremendous repercussions in our society.

If we can do something to stop and make corrections at an early age, we will have performed a great service in preventing juvenile delinquency and other areas of crime and social concerns. It is a great pleasure for me to welcome you here. Proceed in any manner that you prefer.

STATEMENT OF HON. CLAUDE PEPPER, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF FLORIDA

Mr. PEPPER. Mr. Chairman and members of the committee, I thank you very much for your kind words of invitation and introduction, Mr. Chairman. It is a great privilege for me to be here today to testify in behalf of H.R. 11322 introduced by my distinguished colleague, Mr. Gibbons, and a companion bill H.R. 11614, which I have introduced to show my support of and my desire to help in any way I can in the progress of that very desirable and in my opinion very important legislation.

There are no more serious problems America faces today than those twin evils of delinquency and crime.

Not far behind taking their social toll are the tragic conditions of mental illness and other forms of emotionally debilitating and social disruptive behavior.

There is not one American in this country who would not agree that these grave problems are threatening the survival of the very fabric of our democracy. Yet, what are we doing about these problems today?

The sad answer is, I believe, that we are now spending our resources simply to contain these problems once they have become rampant and done their damage. Crime costs us billions of dollars a year and our prisons are overflowing. And our mental institutions are also full—in this case of tragically afflicted human beings.

This is why I urgently support the bill which has been so ably introduced and sponsored by my distinguished colleague, Mr. Gibbons, for the proposals in this act, instead of dealing with these problems at the end of the line, aim to strike at the hearts of these problems at a stage before they have a chance to become full blown; that is, when children are still very young.

This would be done by sponsoring a program that would place child development specialists in our elementary schools to help them to discover and work with young pupils who have these potentially disruptive forms of behavior. By working with such children in the early school grades, these disruptive forms of behavior could be prevented before they had an opportunity to develop into serious problems.

Before discussing the excellent provisions of H.R. 11322 and companion bills, I would like to say I have been vitally interested in this early preventive approach to dealing with the problems we are talking about for a very long time. And the Congress has for some time considered this approach. In 1945 when I was privileged to be chairman of the Senate Subcommittee on Wartime Health and Education, we investigated, among other things, the educational and physical fitness needs of our country, at that time and, in the report which resulted from this inquiry, we clearly indicated our feeling that early preventive programs of mental hygiene were needed to solve some of our deep-rooted social problems.

Our report stated, and I quote directly:

> From a longer range point of view, the establishment of child guidance clinics in all communities is urgently needed to prevent early social maladjustments. Such a step would pay tremendous dividends in decreased crime, delinquency, and costs of institutionalizing the mentally ill.

In line with this same thinking, even earlier, in 1939, I introduced in the other body a bill to offer Federal assistance for the promotion of kindergarten education. The report of the Committee on Education and Labor which accompanied this bill also made clear our belief that the answer to many of our social problems lay in acting in the early grades of school. It said, and again I quote directly:

> From information available to the committee, college presidents and other educators of note, penologists, and psychiatrists * * * furnish valid reasons for the contention that an increase in the number of kindergartens will mean a decrease in crime. The committee believes that by being given training in kindergarten and nursery schools, normal children will be better prepared to lead normal lives and that such training will prevent the development in children of dispositions toward unsocial acts.

The idea behind our present bill, 11322, and companion bills, is very similar to those motivating these earlier ones. But in the form of H.R. 11614, we have a much improved proposal for achieving the aims of early prevention of socially disruptive behavior in young pupils.

How then would H.R. 11322 and similar bills do this?

Basically, as I have said, it would attempt to accomplish this preventive action by initiating an original program that would help our elementary schools to identify and treat these problems as they become apparent in young pupils in our earliest grades.

The heart of this practical program would help to provide our elementary schools with the services of child development specialists who would help elementary schools to carry out plans of preventive action. In addition to paying the salaries of such elementary school personnel, the program would also give assistance for training these needed child specialists in our institutions of higher learning.

These child development specialists would be persons who had successfully completed a postgraduate course of at least 2 years in an institution of higher learning, such course which would qualify them to help schools carry out a program of prevention.

These specialists would act in a number of valuable ways. First, they would help elementary school personnel with the individual learning or behavior problems of elementary school children, as well as with the educational progress of such children. Second, they would assist school personnel to recognize elementary school children who have or who are developing serious emotional, learning, or behavior problems, and in making effective school-related changes to help such children. And third, they would help teachers, parents, and school staff to become knowledgeable about community and other resources that might be used by such children and their families who required assistance in solving some of the problems of these schoolchildren.

By the terms of the proposal, the child development specialist would work only with children up until and through the third grade of elementary school. He would be assigned to serve no more than 350 children. And, he would perform duties appropriate only for child development specialists.

These specific limitations are extremely important—and extremely sensible. For, we feel that they will insure that the beneficial effects of the child development specialist's services will not be allowed to be dispersed ineffectively over too many grades and too many students, but will instead, be able to be focused on the primary aim of the program—to identify and treat incipiently disruptive behavior in some of its very earliest identifiable stages in very young schoolchildren.

These points cannot be stressed enough. For, we feel that if this program is to do any good, it must be strongly pinpointed on this one problem of early identification and treatment of young children before the fourth grade. Moreover, the persons who are to be the major leaders in this task—the child development specialists—must not be allowed to be diverted to other educational duties, no matter how important these may be. These limitations I have just described will help to assure that these fundamental purposes of the program will be accurately carried out. And, they will help to assure that the specialized knowledge of the child development specialists will really be appropriately used by the school for these purposes.

Those who have worked in this field believe that staffing our Nation's elementary schools with these highly trained child development specialists would be one of the most practical and effective ways of realistically helping elementary schools to identify and help troubled little children

before their problems grow out of hand. Yet, the truth of the matter is, even if we wanted to put this program, I have discussed, into operation tomorrow, we would not be able to provide our elementary schools with these essential child development specialists for the simple reason that, at this time, we do not have sufficient personnel properly trained in this field.

This is why another very important part of H.R. 11322 provides assistance for training child development specialists in our institutions of higher education. Through a program of fellowships, to be awarded for not more than 2 years, we would help qualified persons pursue a program of graduate study that would appropriately prepare them to be child development specialists.

Although the act does not spell out all the details of the training a child development specialist would have, it does wisely set down some firm guidelines for such training. For instance, to qualify an individual as a child development specialist, the act specifies that, among other things, his training program shall make him competent in child growth and development, personality theories, behavior problems of children, learning disorders and their prevention and remediation, parent counseling, and the utilization of community resources.

The clear aim of the child development specialist's program is specified, however—it is to be to establish a high level of competence in these persons so that they can help school personnel to become more effective in the management and education of all children in the school, and especially so that they can be a major support and resource to the teacher and to the parent in the education of children with beginning, moderate, or serious learning, behavior, or emotional problems.

Another well-planned part of the training provisions of H.R. 11322 and companion bills provides assistance for training and would make grants to State educational agencies so that they could sponsor in an institution of higher education programs that would provide special training for school and community personnel in the use of child development specialists. Since the idea of this program would be very new to many persons involved in running educational programs in the country, it would seem apparent that these courses would be extremely useful—if not, indeed, essential.

Finally, H.R. 11322 and companion bills would establish an advisory council on elementary schoolchild development to review the administration and operation of the programs carried under this act and to advise and make recommendations to the Commissioner on the approval of programs authorized under the training provisions of the act.

It is, I think, clear that H.R. 11322 provides a carefully designed and comprehensive practical plan for helping our Nation's troubled children at the stage when they can be helped—in the early grades of elementary school. Its plan of providing child specialists for elementary school and the training to create them, and its provisions for training school personnel and the community as to the aims of the program, would all constructively contribute to providing this desperately needed help.

I urge every American concerned with finding a really effective solution to our national problems of crime, delinquency, mental illness, and other such social problems, to support H.R. 11322.

Mr. Chairman, I would like to add on to this. I have been urging at the administrative level for some time that there be set up in each of the major cities of the country a public security administration, or a public security director, or administrator, as I have called him, for lack of a better term. The purpose of that function would be to have someone of outstanding competence and responsibility who I hope would be paid something like $15,000 to $25,000 a year, and I prefer the latter figure, with the cost of that administration being divided between the Federal Government and under the recent anticrime bill that we passed and the local municipality.

I say the function of that overall administrator with a small staff but a comprehensive jurisdiction would be to recognize and to adequately deal with every facet of this multifaceted matter of what we call crime, the kind of maladjustment or antisocial behavior which we describe as crime, and for a good long while I have been emphasizing and supporting this proposal: that one of the areas where such a person could serve advantageously is in working with the school authorities at these tender ages of children when criminals are being developed, when criminals are aborning, and when tragedy is also aborning in the life of the children who have that predisposition or predilection toward the kind of antisocial behavior that eventuates this crime.

As it is now the school principal is one of the claimants for the public money that is available, and, of course, there are a lot of other claimants and he has to fight the battles from the point of view of the schoolman, but if the man I envisage was of the stature that he should be he would have a hearing before civic clubs, before the press, the radio, and TV media, and before parent-teachers' associations, before community groups of influence and responsibility and concern to tell them, "Listen, I am not fighting battles of education. I am trying to keep some of us from being killed. I am trying to keep someone, some woman or girl in your family from being attacked by some criminal youth or somebody who will manifest tendencies to commit crime."

If we don't work with these school authorities at these tender ages, when now it is the psychiatrists tell us that these antisocial predelictions and predispositions are observable and maybe correctable, or at least perhaps to be ameliorated, why, eventually we are going to have to deal with a criminal and the tragedy again may be unspeakable or indescribable. Look at what has happened here in Washington. A teenage boy—I think he was 17 years old—attacked a woman and killed her, murdered her. I am as sympathetic as anybody—I think I am—toward the problems of delinquency and toward judicial attitudes that take cognizance of those maladjustments in the mental and nervous derangements of those people but at any time when a local judge in Washington sentenced that boy only to incarceration until he got to be 21 years old and then made it possible for him to be turned loose on society without any psychiatric examination or any determination as to whether he has an inevitable compulsion to do the same thing then, I think it is a gross and a valid miscarriage of justice.

It might well have been that if that boy who performed that heinous act had had the kind of treatment that Mr. Gibbons' bill would wisely contemplate and envisage, that boy might have been saved from crimi-

nality and for a useful life and that lady might have been spared her life from his later criminal attack.

Take just one further instance. Take slums. Well, it just happens that I know of some areas right here in Washington. There are some areas to my knowledge, and the police tell me, where a shocking amount of criminality comes out of those slum areas. There must be somebody in the District whose problem it is to try to eradicate slums, but every time he goes before the board which dispenses the money they have a problem and he has a problem: Is there enough money to go around?

But some man speaking for the community should even be enabled to go out to the community and tell the story. I am not talking about more housing projects. I don't personally care whether you get them or not, but I don't want to be killed by some criminal that comes out of these areas. I am trying to help you and me save our lives or protect our property or our families. I think this is one of the most meaningful approaches that could possibly be made, start at the tender age when what will later become the hardened tree is only a tender twig which can be prevented perhaps or at least saved from deformity when it comes to full maturity; so, therefore, I commend my distinguished colleague for some more excellent work and farsighted contribution to our country.

Thank you, Mr. Chairman. Thank you very much.

Mr. PERKINS. Any questions? Mr. Scheuer.

Mr. SCHEUER. No; I don't have any questions, except to say how pleased I am that our colleague, Mr. Pepper, came before us. To me this is the greatest evidence and if I had had any lingering iota of doubt that this bill is right as rain, then Mr. Pepper's appearance would have obliterated it.

Mr. PEPPER. Thank you very much.

Mr. PERKINS. Thank you very much.

Mr. PEPPER. Thank you very much and members of the committee.

Mr. GIBBONS. Thank you very much. It is an excellent presentation.

Mr. PERKINS. Our next witness is Dr. John C. Glidewell, director of research and development, St. Louis County Health Department, Clayton, Mo.

Dr. Glidewell, we appreciate very much your appearance here today and your taking time to testify. Please proceed in any manner you see fit.

STATEMENT OF DR. JOHN C. GLIDEWELL, DIRECTOR OF RESEARCH AND DEVELOPMENT, ST. LOUIS COUNTY HEALTH DEPARTMENT, CLAYTON, MO.

Dr. GLIDEWELL. Thank you, Mr. Chairman. I am Dr. Glidewell, and I am a social psychologist. I hold the joint appointment between the St. Louis County Health Department and Washington University in St. Louis where I am associate professor with joint appointments on several departments of the faculty because of my interdisciplinary wanderings in psychology, sociology, education, and psychiatry.

Is there any other information the committee would like to have about my background or qualifications?

Mr. PERKINS. I think you are well qualified to add yourself as an expert in this area and go ahead.

Dr. GLIDEWELL. Thank you, sir. Both I and my colleagues are very much in favor of your bill. We think there is no question that the allocation of resources to this particular spot in the developmental history of the child is a crucial occasion and that up until now we have not been able to mount or to allocate resources appropriate to the need. We also think the need is widely recognized in the community, and even in the most conservative of the professional community this need is in fact widely recognized.

I think it is important to say to you that the data we have from research, and the attitudes, and use of such resources as a child development specialist would suggest that we are not yet in this country in a position of being convinced that any one particular discipline can meet the need about which we have such consensus. By this I mean, for example, if a citizen finds himself in such position that he wants to refer a child to a psychiatrist, the citizen will find in his own ideas and his neighbor's that there is no question that he needs this kind of help.

But it is still true in this country that a remarkably large number of people are afraid that they actually are not going to get the help, that the clinical psychiatrist really isn't going to meet their needs. This attitude is changing. I am sure it will continue to change and I think you will make some contribution to making it a more realistic attitude. I think it is unnecessary for me to go through item by item and tell you that we think your bill will work, because we think it will. But perhaps I should indicate that anything which produces a large profit also has a large risk, and perhaps it is my responsibility to call your attention to what in my views are some of the risks that you will take and leave it to your judgment as to whether the anticipated profit is worth the risk.

Let me say again that I and my colleagues think that it is worth the risk. On the other hand, we also think that the specialist needs to make as intelligent guesses as he can about the risk that he is taking. First of all, at the risk of sounding academic or even insulting your intelligence, I would like to say that an elementary school system is not a random collection of individuals. It is a tightly knit social system. It is always in the process of reallocating its roles, its resources, and its rewards in order to meet the demands that come down the members of the system and from the community outside of it.

The creation of a new role in this system, which is what you propose to do, is going to introduce tension in the system, a reallocation of resources, and a reallocation of rewards. Elementary schools also have the reputation of being able to manage tension very well, and I think they will manage this tension; but I think it is important that one understands that the tension is going to arise and perhaps as a part of its management I can say that the role will be accepted to the extent that it is clear that the child development specialist has skills which the teacher doesn't have and doesn't need to have or is not expected to have.

As I understand the bill in its present form, there will be confusion about where the responsibility of the teacher ends and where the

responsibility of the child development specialist begins. As you well know, in the educational field more and more attention is being given to training teachers in just the thing you are suggesting that your child development specialist shall do, that is, to deal with disturbed children, make an early recognition of disturbed children, and marshal the community resources necessary to help him.

From our point of view, no teacher is really going to be able to develop the skills to the extent that the specialist will be able to develop them; but I suggest that it will take awhile, quite awhile, for a trained educational specialist in all respects competent to get in a comfortable situation with the teacher so the teacher knows what she can expect of the specialist and when she can go to him for help without reflecting upon her own competence as a teacher.

Another aspect of the establishment of a new role in the system other than this kind of complementing of roles is the distribution of the rewards involved and the allocation of authority. I was surprised in the bill to read that you propose that the specialist should be employed by and paid by the State governments with the grants the bill would provide from Federal funds. I thought about that for a long time, knowing that you must have had good reason to do this. The best reason I can think of, at the risk of reading your mind, is that there probably are a significant number of elementary schools in the country which have yet to develop the competence necessary to find the kind of person they need as an educational specialist, so that if, for example, you gave the school the grant, the money to pay the salary of the specialist, and allowed it to select the specialist, it is quite possible that its selection won't be as careful or as adequate as that by the State and it certainly would be subject to other considerations from those that it would be subject to at the State level. I feel also that I should suggest to you that one possible way of coping with this problem would be to give the money to pay the salary to the local agency but to require the local agency to hire a person whom the State will certify, and certification in the field of education is not at all new.

I don't think you would have any great trouble developing such a certification, and you would dodge I am sure what will be an unusual occasion of authority in this closely knit social system of an elementary school.

There is evidence, and it is quite compelling, that when people from the mental health professions enter elementary schools, and we have had 15 years painful experience in trying to introduce such people into elementary schools, unless this kind of complementary role can be established the school is likely to object to this foreign body or else to encapsulate it in such fashion that it has very little influence over what goes on in the school.

I wouldn't like to be a prophet of doom. I think this is very unlikely, but I do think it is a consideration which you should take account of, or perhaps ask the Office of Education to take account of as they implement your bill. I would like to move on from that particular concern about the establishment of a new role in this closely knit social system of an elementary school to another concern with the position of this role with respect to the entire community.

We have had in St. Louis County and elsewhere now a number of years of experience of detaching people from the community's medical

services or medical institutions, if you will. By institutions, I don't mean a building or organization, but a set of beliefs about how people deal with illness or distress and what kind of a person a medical person should be to cope with this illness and distress. This is in fact an institutionalized procedure. It is highly institutionalized. And yet, on the other hand, although it is changing, it has confidence and trust in the community.

One goes to a physician and is willing in many cases to lie unconscious on the table while he does whatever he thinks is best for his patient and generally speaking it comes out very well. The medical profession has a very long and honorable tradition, but their prime responsibility is the help of the particular patient at hand at this time, and I wouldn't want to change that in any respect. However, I should point out that your education specialist cannot really orient himself with this point of view. He is going to have to have the point of view of the entire school and community and he is going to have to think of the welfare not only of the child, and I wouldn't call him the patient because as I understand your bill, you don't expect these people to act as physicians, and the children are not the patients of the education specialist—incidentally they are not a case or a caseload either if I understand your bill.

In any case, there is going to be some overlap between the field of medicine and the duties of the specialist which you are proposing. On the one hand this can be very fortunate because you will get some of the advantages of the legitimation of medicine shifting over to the role of the specialist. You also take some risk if you get involved in this. Let me say that I would like to recommend that such a specialist does need a connection with the community health institution, the medical profession, and that it is not clear to me in the bill right now whether or not this is being taken account of.

If he can get this connection there are several things he can do which will be very valuable to him in his role. The first thing is that, having this connection and having it included in his training, the first time he sees a really disturbed and upset child in the school he won't be frightened because he will have seen him many times before. If, however, the education is confined to the educational field he is unlikely to find himself face to face with a schizophrenic child. I well understand that you expect him to treat schizophrenia. But if it is true as our experience indicates, that in an elementary school a person put there in a role which is nonclinical, in an advisory capacity, panics in an emergency situation, he loses the confidence of the people in the school.

Mr. GIBBONS. May I interrupt your train of thought at this time?

Dr. GLIDEWELL. You certainly may.

Mr. GIBBONS. I think you have made some very incisive analyses of some of the problems that we have here and I want to ask you about this role of working more with the physician. Let me say to begin with that in the training of these development specialists at the college level we anticipate that there will be as part of the college course, although we don't require it—apart from the legislation—perhaps we will in the regulations that implement the legislation—a practical experience or type of going out, an internship with someone who has had some experience.

You notice in the legislation we have a provision there for institutes so that we can train the teacher, and the school personnel, and other community personnel to work with this specialist. In fact, I think that is one of the major things we are going to have to do. We really put more emphasis upon these institutes in the early stages than we do in the later stages of the legislation.

Do you think it would be a good idea to specifically include as a part of this institute program to bring in the pediatricians and other people in the area, to make them eligible to attend and to in some way encourage them so that there will be a greater——

Dr. GLIDEWELL. Yes, sir. I would have two rather specific recommendations—that one that you just mentioned, that you use your workshops and your continuation training activities to keep the person connected with the medical institution in the community. The other specific recommendation is that this connection is not easy to establish and that the part of the health institution of the community through which it would be the easiest to establish such a connection is, at the risk of being biased, the public health field of medicine.

Medicine is an emergency situation oriented, caseload oriented, clinically oriented profession, quite properly so—I hope they don't change—interested in the welfare of the individual patient. The public health part of medicine, however, isn't really interested in sick people. They are interested in keeping people from getting sick, and to make this linkage between medicine and education, it seems to me if the linkage goes through the Public Health department that is the point where it will be the easiest.

I don't, however, in any way want to dilute the other recommendation that no matter what part of medicine they are, there is an important educational activity which needs to be accomplished, and I think very well could be accomplished by the continuation training which is provided for in your bill. I think you are wise in leaving it largely to the university to decide how people are to be trained and still at the same time establishing, I hope, a certification system.

One other specific recommendation and then I would be willing to say more about any of these points that you would like me to. Perhaps just because of a reflection the first question was shouldn't there also be a State advisory council and a local advisory council comparable to the one at the national level but concerned with the lower levels of government? So, gentlemen, in summary, we think the bill is excellent. We are particularly interested in the allocation of new resources to this particular part of the development of a child. We do think, however, there will be tension in the system when you introduce them, that this tension can be managed, and that the pinpoint of its management lies in the differentiation of where the teachers' responsibility ends and the principal's responsibilities end, and where your child development specialist begins.

Finally, because there is going to be an inevitable overlap with medicine for some of the things which you will try to detect at early stages which really are injurious to the central nervous system, and at the point that they are detected they become immediately the province of clinical medicine, in that case I think you need a linkage between the educational institution, and I recommend that public health departments are an excellent linkage between the two.

Mr. SCHEUER (presiding). May I ask a question? We have had some testimony before that there is a definite linkage and interrelation between physical health and mental well-being and that both of them have a direct relation to the learning process. Would this be your view?

Dr. GLIDEWELL. Yes; it would.

Mr. SCHEUER. Congressman Gibbons has really started us on a new epoch in the field of mental health in the schools. Do you feel that there is a place for a companion measure, assuring a comprehensive and well conceived program of physical health in the schools? Would you say that we are doing enough in that direction?

Dr. GLIDEWELL. Let me first say that the child development specialist, while he won't be exclusively concerned with physical health, inevitably is going to be somewhat concerned with it.

Mr. SCHEUER. Would you elaborate on that? In other words do you think if he sees a child that may have a hearing problem he would be a little bit more sophisticated in deciding that it might be a hearing problem than the teacher would be, an eyesight problem, or a general physical well-being problem of some kind?

Dr. GLIDEWELL. Yes. There are available to the schools now, and used or not used, depending upon community laws, traditions, attitudes, public health nurses or school nurses, even school physicians. In some cases we have seen schools which retain physicians full time, school psychologists, school social workers. All these people are now involved in some way or the other in school health, not just mental health, but in school health, and in our experience in St. Louis County when the mental health services get established in the school which already has a reasonably good school health system, both of them profit from one another.

It is also true in our experience that it took us awhile to establish the interest of the community and of the professions in the community to set the standards for and make recommendations for a broad school health activity, not just a mental health activity. But once the job was done, it was very facilitating both to—well in your case, it would be the child development specialist. And to the legitimate clinical medicine concerns, and with the linkage the child development specialists can turn over the child to a legitimate clinical and medical concern without a showing up as a stranger in the emergency room in a hospital, which puts him in a position where his skills are almost completely closed off. But through the public health services he can have direct connection with every medical resource in the community if you ally him in some fashion with this group.

Mr. SCHEUER. Would you feel that the existing facilities for school physical health programs in our communities are adequate? Or do you think that we need to look to something here like Mr. Gibbons is providing for in mental health?

Dr. GLIDEWELL. This is one area in which I don't claim to have competence or expertness. But my opinion is that by no means, and my friends who are in school health and working on this are very concerned. In Missouri, as in some other States, the responsibility for health is assigned to the local school board, not to the health institution, and the linkage problem becomes even more difficult under those circumstances. But we do need a greater allocation of resources there. I agree.

Mr. SCHEUER. Congressman Meeds?

Mr. MEEDS. No questions.

Mr. SCHEUER. Thank you very much, Dr. Glidewell. We have enjoyed very much your testimony.

Dr. GLIDEWELL. Thank you. It is a measure before you, and I am certain that your work will bear profit as well as tension.

Mr. GIBBONS. A very, very incisive analysis of the problem ahead of us.

Mr. SCHEUER. We have four witnesses left and we are going to meet until 12 noon. We have the conference reports on the higher education bill on the floor of the House. Immediately after the conference reports on the higher education bill, we will commence to vote. If anybody would like to go over and sit in the gallery while that is going on, I am sure we could arrange for that, or if you want to you may relax here.

It should be around midafternoon or later in the afternoon. I might say to all four witnesses, if you have prepared statements, you can give them to the reporter and they will be printed in their entirety in the text of the record at the point at which you start your testimony, and then you can chat informally, if you so wish. If you prefer to read your statement, of course, you may do that.

Dr. Gordon P. Liddle.

STATEMENT OF DR. GORDON P. LIDDLE, GENERAL DIRECTOR, INTERPROFESSIONAL RESEARCH COMMISSION ON PUPIL PERSONNEL SERVICES

Dr. LIDDLE. Yes, sir.

Mr. SCHEUER. Dr. Liddle is general director of the Interprofessional Research Commission on Pupil Personnel Services.

Dr. LIDDLE. Yes. Would you like me to tell in a sentence or two something about my background?

Mr. SCHEUER. By all means.

Mr. GIBBONS. Yes.

Dr. LIDDLE. I have worked in industry as a psychologist. I was an assistant dean of men at Oberlin College. I worked for 11 years at the University of Chicago, following a group of children from grade school on into adulthood, trying to develop talent and prevent maladjustment in this group of children as a member of a team of social scientists from the University of Chicago. I have also had a 5-year study of culturally disadvantaged children beginning in kindergarten and running through grade 3, which I am just now completing. I now work for the Interprofessional Research Commission on Pupil Personnel Services, which is composed of representatives of all the various pupil personnel professions and school administrators.

By "pupil personnel professions" I am referring to those specialists in social and medical sciences who work in schools to help children become and remain educable. It is their task to enable children to utilize, to prevent, or remediate learning problems, especially those caused by poor health care or by emotional disturbance. At its October meeting the organization which I represent discussed this legislation. There was surely a consensus that the legislation is in line with what

is thought to be desirable direction to be taken by pupil personnel services.

That is, within the education professions, pupil personnel workers and other school people have seen that there are not and never will be enough professional workers to remediate all the learning problems of children if we don't reduce the number of such problems that we are making for ourselves by our lack of flexibility and sometimes through the naivete of our teaching personnel.

Mr. SCHEUER. Will the witness yield?

Dr. LIDDLE. Right.

Mr. SCHEUER. Going off the record.

(Off the record.)

Mr. SCHEUER. Back on the record.

Dr. LIDDLE. Teachers are by law and by force of public opinion increasingly becoming subject-matter specialists. Departmentalization in schools, even in elementary schools, is rapidly on the increase. Training in learning theory and child development has given way to additional courses in the teacher's subject-matter specialty. Since children are highly individual animals with a great variety in their present skills and great variety in their learning styles, teachers in my view must be trained largely on the job to individualize instruction.

At present there are almost no broadly trained learning specialists in elementary schools and school people are agreed that neither psychotherapists nor counselors based on the traditional secondary school guidance counselor model are the answer. School nurses are about the only pupil personnel persons that are functioning at the present in elementary schools in large numbers, and they aren't trained to play the role that we are talking about by and large in this bill.

School people are broadly trained in the social sciences and can themselves handle most of the problems that are now being handled by school psychologists, social workers, and counselors, and we have them in a very few elementary schools. There will still be a need for a limited number of highly trained professionals who can be stationed at the board of education office and who can be called in when their expertise is needed. There will also be a need for community mental health clinics; but it is commonly recognized that many potential learning problems could be prevented or alleviated if competent consultation on emotional and learning problems were readily available to teachers and parents, and that is what we are talking about here.

When this type of person can give half time or full time to a given school, one school, he can become acquainted with the school personnel strengths, and with their needs, and with the community's resources. Increasingly, school administrators are going for consultants to parents rather than persons who see their jobs as binding up the wounds, without exampling the classroom, the home, and the community situations which cause or aggravate the child's learning problem.

Several universities, among those that I know of Texas and Maryland, for example, have begun to train what they call child behavior consultants or child development consultants. These are persons who work primarily with teachers in elementary schools. They found that the teachers have found it valuable to talk with these people. Together the teacher and the child-development consultant examine what is known about the learning situation, decide what they need to

know to arrive at an intelligent plan for action, decide how they can get that additional information, and go out and get it, come up with a plan, examine their results after a time, modify the plan of action, and so on.

If they need to go to the parent or elsewhere for additional information they do so. People at these universities I believe have demonstrated that teachers value the child-development consultant and administrators would surely hire more of them if they were available, which they are not. In this area, several States, for example, Maryland and California, have recently changed their certification laws to make them more flexible.

Previously, a person had to have teaching experience to become a counselor, but many educators think that an adequate internship or field training experience such as the bill discusses would be a more economical substitute and would materially, thereby, reduce our shortage of trained counselors. Concentration on the learning problems of young children is advisable. The parents of young children usually have high hopes for these children and are willing to work with the school to see to it that the children can be successful.

If their children, year after year, meet with defeating experiences and if every time the parents come to the school they hear a tale of woe about their children's lack of achievement, about his behavior, they are going to withdraw from the school. I think we have found that when the schools have to go it alone they have not been very effective. Often parents, particularly parents who are not very successful themselves in school, do not know how to be of help to their children, how to help them learn more successfully.

In a study which I recently conducted in a midwestern city, I found that a substantial percentage of the parents of the poor were willing to participate in education of their children if someone from the school, someone in the school, someone like a child development consultant, would teach them specifically what they could do to be of help to their child. The ratio of workers to children and families in addition to this bill would make this participation by the parents possible, and I believe would prevent many of the learning problems which we are now facing in the secondary schools.

Mr. MEEDS (presiding). Thank you, Dr. Liddle.

Dr. LIDDLE. That is the end of my statement.

Mr. MEEDS. Thank you, Dr. Liddle. Do you have any questions?

Mr. GIBBONS. I don't. I certainly appreciate your coming here, though, to testify about this bill. I was impressed that what you say makes such real good sense as far as the school problem is concerned.

Dr. LIDDLE. I think the professional organizations in this field recognize that this is the direction we should be taking. We are for the first time going into elementary schools in large numbers and this is an opportunity not to repeat the mistakes of the past, but to get the parents and the teachers on the same team with the pupil personnel workers, not to take the problems away from the teacher, but to help the teacher plan with the parents to do a more intelligent job with young children.

Mr. MEEDS. Would you envision, Dr. Liddle, a function of the specialist or consultant as primarily with the student, or as primarily with the teacher?

Dr. LIDDLE. I think I differ somewhat in emphasis with our first witness of the morning in that I feel that the primary person to work with is the teacher because the teacher can create learning problems much more rapidly than pupil personnel workers can alleviate them, and if a child is defeated in school year after year, no amount of psychotherapy will make school a satisfying experience or make the child, in my view, educable. This does not mean that this person would not work with children, but that this would not be as exclusive his concern. I think in the past pupil personnel workers have been expected to take children out of the classroom, work some kind of a miracle with them, make them educable, and put them back in the situation that in part was responsible for the learning problem.

Now, I think we should do more in terms of consultation. I think this is the direction we are going.

Mr. MEEDS. We heard testimony yesterday to the effect, and I certainly think there is a lot of validity to this, that teachers are pretty good at recognizing that a problem exists.

Dr. LIDDLE. Right.

Mr. MEEDS. In defining or delineating a problem, while we think they are pretty good, they are not as good as the specialist would be. So then you would envision the function of this specialist to be called in by the teacher when the teacher recognizes and asks the specialist to delineate this problem and to advise the teacher what might be done about it?

Dr. LIDDLE. This is the way, for example the University of Texas is working in a school system such as Northeast School system in San Antonio. St. Louis County, Minn., is doing pretty much the same thing with the Range Mental Health Center. Most teachers have been using this service and have been finding it of value, have been asking for more consultation service as opposed to more individual service to individual children.

Mr. MEEDS. I notice that you have used the word "consultant" in all instances when you discussed this. We talk about a child development specialist in the bill. Again, it would seem to indicate, at least from the language of the bill, more working with the children primarily.

Dr. LIDDLE. Yes.

Mr. MEEDS. Would it be your idea or your concern that the word be changed to "consultant" then?

Dr. LIDDLE. No; it would not. I think I have emphasized the word "consultant" because I think this is the new element, and a needed element, in pupil services, not that we would abandon working with children individually, but I think in the past we have spent too much of our time working individually with children and therefore some balance needs to be struck with and between consultation to teachers and parents and individual help to children on the learning problems of children.

I would like to bring consultation in as one of the major skills of the child development specialists.

Mr. MEEDS. I would like to get your ideas on this now. Would you distinguish between a school psychiatrist as we envision him today in the elementary grades and a child development specialist or consultant? What would be the primary distinction you would make here, if any?

Dr. LIDDLE. The school psychiatrist is a valuable member of the team. We haven't enough school psychiatrists in the United States to take care of the problems of a community of 50,000 if they all work primarily with individual children. There are not that many of them. I think that people can be trained in a couple of years to handle most of the learning and emotional problems presented by young children and that we should reserve the psychiatrist for a consultative role to these kinds of individuals for the most part.

Mr. MEEDS. Would you envision the role of the specialist as more of an intermediary, again, recognizing his limitations or her limitations, as the case might be, in the instance of an acute situation calling for a highly specialized person such as a psychiatrist?

Dr. LIDDLE. Right.

Mr. MEEDS. Would this be the distinction?

Dr. LIDDLE. That is the way I would see it, but not an intermediary in the sense that this person is merely a telephone that calls in community resources because I think that most of the learning and emotional problems of young children can be handled by such a person in the school, a person that knows the school, knows the community resources, can learn to know the parents, and learn how to work with parents effectively.

Mr. MEEDS. It is particularly important in the school setting?

Dr. LIDDLE. Right.

Mr. GIBBONS. One of the motivations behind a part of this legislation is, in my opinion—and I wonder if you would comment on this when I get through—that the parents are often isolated from the school and the school system. This happens because most parents are working at the same time the school system is working, and the teachers and the guidance people who are presently available in some schools are unavailable at the time when parents can normally get off from work, particularly the type of parent who must work at a nonprofessional job and is, say, an hourly employee or a weekly employee and really finds it almost impossible to commute from a job back home to the school and work with the school people on a problem.

I hope that these development specialists will be able to bridge a part of that gap, particularly with children that are having problems. They can work wtih the child and family and the school after the normal school hours, actually, perhaps, even taking time out to visit the home for counseling with the parents and with the child in the home setting, although I realize that we don't want to get this person tied down with a lot of casework.

Would you say that that philosophy is a valid one? Do you think we are hitting at the problem that needs to be solved?

Dr. LIDDLE. I do. In the project which I have directed for culturally disadvantaged kids in the early grades, we have found it necessary to call on the homes at least initially because many of these parents were defeated in school and do not naturally come to the school. They have to be shown that the school is interested in the education of their children, and this means going after school. It means working some of the time in the evenings and even on Saturdays. There is nothing sacred about the school hours, and if such a person works in the evening there is no reason that he should show up at 8:30 just because children show up at 8:30 at the school.

Mr. GIBBONS. That is one of the reasons I didn't want to get these persons too closely connected as being just other school personnel, because I am afraid they might slip into the hourly schedule of 5 days a week from 8:30 in the morning or 8 o'clock in the morning to 3, or 3:30 or 4. I wanted someone around who can work in the hours when the parents are available and when they can really do some intensive work.

Dr. LIDDLE. Yes; I agree that that is important and I think it can be done. Thank you very much.

Mr. SCHEUER (presiding). Mrs. Leon Ginsberg. Is Mrs. Leon Ginsberg here?

Miss Cornelia Goldsmith. Miss Goldsmith is executive director of the National Association for the Education of Young Children. We are very happy to have you here this morning.

STATEMENT OF MISS CORNELIA GOLDSMITH, EXECUTIVE DIRECTOR, NATIONAL ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

Miss GOLDSMITH. Thank you very much.

Mr. GIBBONS. She has been a very attentive member of the audience back there for 2 days. I appreciate it.

Miss GOLDSMITH. I think what I represent is really the firing line of the teacher. Personally, I have lived and worked as a teacher and as a director, as a consultant, as a teacher of teachers, as a camp director, and for 20 years as the chief of a division of Day Care, Day Camp Shelters Institution for Young Children in the New York City Department of Health; as head of a multidisciplined staff of pediatricians, social workers, educators, of parent educators, and from time to time one of these rare and scarce psychiatrists.

I might, in view of what has just been said, give a touch of experience from there to indicate that in our work with those, we did standard raising, we did licensing, we did interpreting to the public of the good living of the young child, and because public health was involved, and because we had educational staff, in this experience it became possible for the health department auspices to employ doctors who were made available to give a health program within a nonprofit group at the expense of the health department and at the wish of the board that operated such a group.

One of the major problems that came up was this need for the mother to be involved with her child whenever a health examination was conducted. Everyone took for granted that mothers would not be able, since they were working mothers, to attend. But through careful working with the social investigators who determined the eligibility of families and children, the mothers talked with their employers and the result was that 90 percent of these workingwomen without any difficulty as to their earning capacity, nothing being deducted for absence, arranged to have available time so that the appointment could be made and they could be present, and the nurse was there and the followup was done through the nurse.

I think this was just a very interesting experience. I think once we tackle this kind of problem we can find some solutions and once we rub elbows with people in other professions we find that the gates can be opened.

As far as the NAEYC is concerned, which is the organization I represent here today, we are going through a similar metamorphosis to that which legislators and others are going through, and interestingly enough, we parallel to some degree the kinds of movements that I see exemplified by the bill.

We have recently changed the name of the organization, which was the National Association for Nursery Education, and has now become the National Association for the Education of Young Children, in order to include the very span of years that you are now talking about, to include the nursery, the kindergarten, and the primary years.

We have a very deep conviction that there should be continuity in these years. We also have a deep conviction that the teaching personnel itself needs help, but that the people who are learning to move into this field are perhaps the people who are freest of something that binds them as a system might, that these are people who are moving forward, that Project Head Start has actually highlighted some of the most important needs and some of the most important directions in which we can move—the fact that from the point of view of Project Head Start a stand was made that one could not really work with young children, particularly disadvantaged young children, unless the group were small enough and there were sufficient flexibility, and unless the entire community aspect and the family aspect entered into this with considerable validity.

I think these early years, if you are interested, as I presume we all are, in bringing the family, and the school, and the community into a partnership, are the years in which it can be done. These are the years in part because the children are young, and when they are young and dependable and are recognized as more vulnerable than later, and also more educable, they are also closer to the family and the high hopes of parents of young children if doors are opened will move directly into the kind of setting you visualize. It is my own hope that ultimately, when this program vindicates itself, and with our fullest support, the child development specialist will be so valid and become so useful and the community will become so genuinely a part of all of this, and the professions will have rubbed elbows long enough to begin to work together more effectively, the class size for children of 3, and 4, and 5 will become the 15 children regardless of whether they are crucially disadvantaged in any way, and that the child development specialist aspect will move right into the entire stream of education and become the basis for the future work in the school.

I believe that if this happens in these early years this whole movement will inevitably move into the school system, slowly, depending on the system, gradually from where we are to where we hope to go. But it would seem to me that the timeliness of this bill, the obvious wish here to bring professions together, to bring family, school, and community together, with the focus on the needs of the child, is a tremendous thing.

I believe further, as an educator now, that the child development specialist has two basic roles to play. One of these has been described at these hearings, and very effectively and very convincingly. The other, which perhaps hasn't been sufficiently highlighted, is that the wisdom of your selecting, say, a 350 numerical group of all children, and this would mean public as well as private children—this is all children, which is our children, too—that the child development specialist in her concern for these 350 children will be skillful and

adept at helping to define difficulties in advance of the major problem breaking, but will also have the skilled eye and the focus which will look for the strengths in these children, the undeveloped potential, not necessarily because it is going to be trouble otherwise, but because the resources of these children are the greatest asset that we have.

These are the most vital, the most alive, the most spontaneous, the most genuine of our human creatures. If we can value their strengths and develop their assets, bring out their potential, and we don't have all the answers—research is still working—but if we can bring these out and continue to learn as we go, this is going to be the revolution of the educational system of this country.

I see this as a very promising future for us all. I thank you for ordering these hearings and I have a brief statement I would like to leave.

Mr. SCHEUER. I am sure we were all most stimulated by your brilliant testimony, Miss Goldsmith.

Mr. Gibbons, do you have any questions?

Mr. GIBBONS. No. I want to thank you, Miss Goldsmith. I have been watching closely how attentively you have been paying attention when all the witnesses testified here today and yesterday.

Miss GOLDSMITH. You are a very observant gentleman.

Mr. GIBBONS. I think you have hit on a very fine point, that these development specialists by getting to know this group of 350 children, which will include the well adjusted, and the intelligent, and all parts of our society really, and by providing some continuity from the preschool all the way through the third grade, can develop not only the maladjusted, but can help expand the vistas of the other children. Certainly, that would be one of the ancillary functions that the development specialists would perform.

I appreciate so much, because I know the experience that you must have had to attain the position that you now occupy, your enthusiastic support of this legislation.

Miss GOLDSMITH. I think the basis for this is that the crucial area is the beginning of things. The way we begin is the direction in which we tend to go and my interest has always been in the young child. What happens when you begin to learn language, begin to learn concepts, begin to socialize. These are crucial, crucial years of very great importance, and this is where I have devoted my life.

Mr. GIBBONS. That is all I have, Mr. Chairman. Thank you.

Mr. SCHEUER (presiding). Miss Alberta Meyer, executive secretary of the Association for Childhood Education International?

STATEMENT OF MISS ALBERTA MEYER, EXECUTIVE SECRETARY, ASSOCIATION FOR CHILDHOOD EDUCATION INTERNATIONAL

Miss MEYER. That is correct. My name is pronounced "Meyer," and it is "Miss." I have a prepared statement and copies for the committee. May I give them to you now?

Mr. SCHEUER. By all means, and that will be printed in full in the record and if you wish you can just speak informally.

Miss MEYER. This is a brief statement. So I think I will read it quickly and then comment. My name is Alberta L. Meyer. I am executive secretary of the Association for Childhood Education International, a nonprofit, professional organization of adults interested in

the education and well-being of children. There are approximately 100,000 members organized in more than 600 branches, most of whom are in the United States.

As an organization we are interested in and concerned with children from 2 to 12 years of age. We have a long history of interest and work on behalf of young children, and recognize the vital importance of the early years. We are therefore especially pleased that H.R. 11322 has been introduced to provide for the training and services of child development specialists for elementary schools. We would like to commend Mr. Gibbons for introducing this bill, which so wisely recognizes that identification and treatment of problems at an early age is essential to the ultimate prevention of more severe problems in later childhood and adolescence.

While thus expressing general approval of the purposes of H.R. 11322, our association would like to make the following suggestions: Page 2, title I, section 101(a), defines "elementary school" as one that provides elementary education in any or all grades below grade 4, including education below grade 1.

We are glad to see that "education below grade 1" is specifically included, but would hope the term "elementary school" might be modified to keep the inclusion of "education below grade 1" constantly in the thinking of school people. In most cases, "elementary school" means grade 1 to 6, or grade 1 to 8; even kindergarten is not included in many schools.

Could this section perhaps use the term "primary school," defined as "education from the age of 2 through 8"? In some communities this term is already in use for schools embracing kindergarten through grade 3 or 4. Our association, in searching for a better descriptive word, has used the phrase "early childhood education" and has recently published a small pamphlet on "Basic Propositions for Early Childhood Education," copies of which are attached to this statement.

Page 10, title II, section 203(a): We would hope that a provision could be inserted requiring each State educational agency to assign at least one child development specialist to its own staff. At present, a number of States do not have the services of such a person.

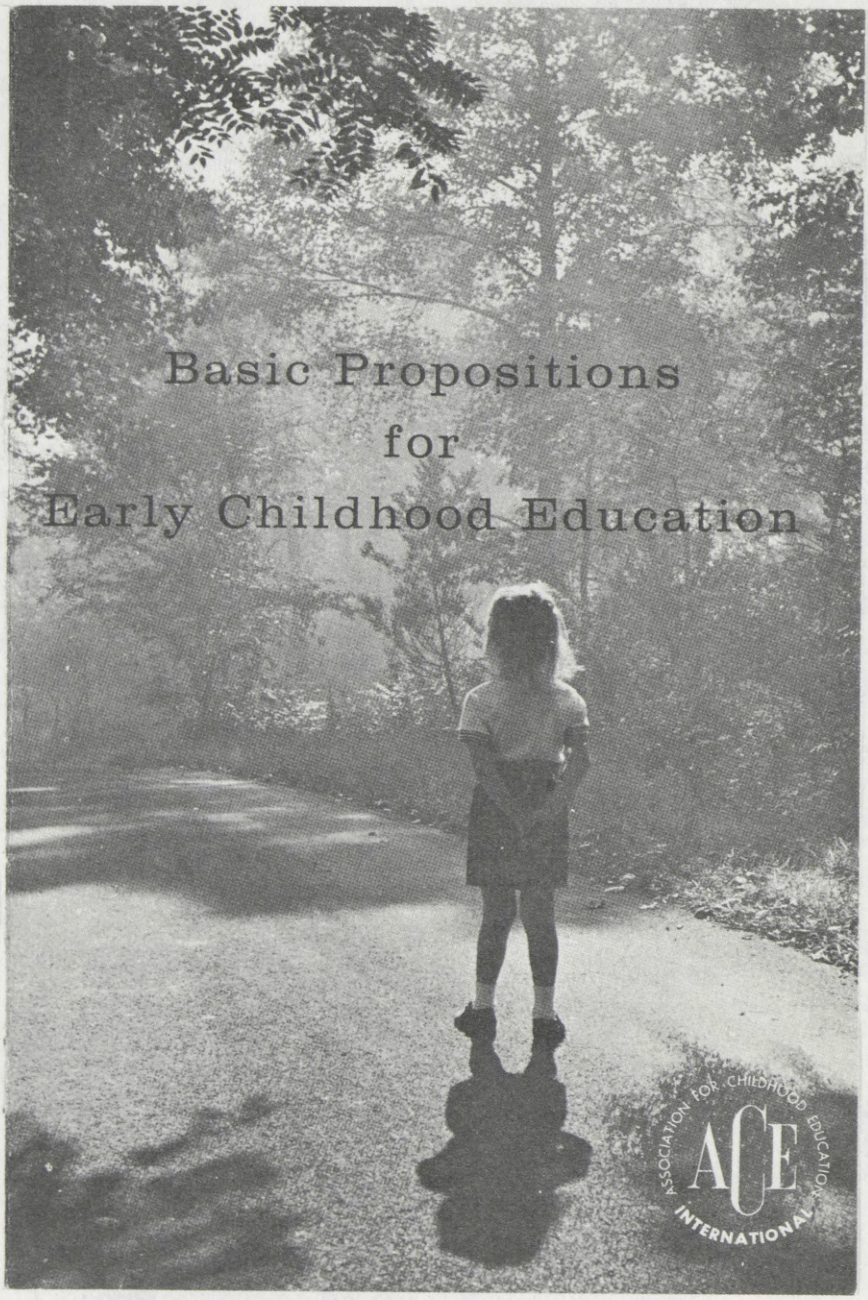
On page 11, title II, section 203(a): Does the maximum of 350 children mentioned here refer to size of school population or the number of individual cases the child development specialist would be expected to work with intensively? If the number refers, as we hope it does, to school population perhaps this could be clarified.

Page 15, title III, section 301(a): We would hope that, in addition to the academic requirements listed, applicants for fellowships be given priority if they have at least 3 years successful teaching experience as nursery school, kindergarten, or primary teachers, and they show evidence of ability to work well with people, and if they give indication of creative and imaginative thinking.

We are glad H.R. 11322 is being considered by this committee. We believe, with Mr. Gibbons, that it can prevent many of the problems which too often become critical during adolescence and young adulthood, and we hope for a favorable report from this committee.

Thank you, Mr. Chairman and members of this committee, for your courtesy in permitting me to present this testimony on behalf of the Association for Childhood Education International.

(The following publication was submitted for the record:)


Basic Propositions
for
Early Childhood Education
ASSOCIATION FOR CHILDHOOD EDUCATION
ACE
INTERNATIONAL

A Position Paper

Written for

The Association for Childhood Education International

By:

Norma Law
Wayne State University
Detroit, Michigan

Mary Moffitt
Queens College
The City University of New York

Elenora Moore
Wayne State University
Detroit, Michigan

Ruth Overfield
Department of Education
State of California

Esther Starks
Ohio University
Athens, Ohio

Associate Editor: Evelyn Weber
Assistant Editor: Sylvia Sunderlin

This is 1965-66 Membership Service Bulletin I, sent as part of membership service to International and Life members and Ace Branches

© Association for Childhood Education International
3615 Wisconsin Avenue, N.W.
Washington, D. C. 20016

Basic Propositions for Early Childhood Education

INTRODUCTION

AT WHATEVER AGE THE CHILD STARTS SCHOOL, HIS BEGINNING SCHOOL years are critical for what he learns and will continue to learn. Present attention being given to early education indicates tremendous possibilities for teaching and learning, possibilities which contain hazards and hopes for young children, depending upon the integrity with which lay and professional communities move forward in developing programs. In its interest and concern for the young child, the Association for Childhood Education International has undertaken the publication of a statement of basic assumptions and knowledge upon which a good program is planned and also to suggest basic guidelines for effective programs.

When educational programs for children (three to six years of age) are developed, it must be realized that these young human beings need certain early developmental experiences before they can take advantage of later experiences. A child needs to follow a pattern of growth natural for him in order to realize his fullest potential as a person. The lives of many young children have been disrupted and disordered to such an extent that they cannot utilize certain learning situations until they can compensate for the gaps in their development.

The kind of person we want to develop is the crux of the matter. Some people look upon school as a place in which to stress intellectual skills, some to stress social learnings and some to stress emotional controls. Unequal stress in any one area is inconsistent with what we know about human development, for the child develops as a total organism. Spurts of growth often occur in one area, but there is an over-all relatedness to development. What is most important for children to experience in these early years is a quality of living that provides for growth that is interrelated and continuous.

"Quality living" gives children an opportunity to broaden emotional relationships with adults who are not their parents. For some children this is a reinforcement of their sense of security in the home; for others, who live so precariously that they already distrust adults, results are much less certain. Children who have developed emotional problems due to home and family relationships find it hard to concentrate on intellectual pursuits.

All children need to find adults in school whom they can trust. It takes time to develop a sense of trust. It takes a teacher who understands a great deal about feelings and who is mature enough to cope consistently with the self-centered, symptomatic behaviors of young children, especially those who have had experiences with less dependable adults. Abundant support and encouragement for intelligent, contributing, healthful and humane behaviors gradually reduce and eliminate those that deter growth.

This is only one example of the kind of living important for young children, for many areas are involved. Desirable living for young children is related to:

- society's purposes in providing education for young children
- knowledge about young children generally
- appreciation of individual differences in human development
- awareness of the impact of the present status of human knowledge on education
- recognition of the crucial nature of early school years
- familiarity with elements of good programs for young children.

FACTORS UNDERLYING PROGRAM PLANNING

Society's Purposes

Society's purposes for promoting early childhood education have varied from era to era. One purpose that has been consistently emphasized through the years is the social adjustment of young children. We are becoming increasingly aware, however, that to help an individual become a more fully functioning person in any society, his total growth must be considered. Intellectual development cannot, for example, be isolated from concern for emotional stability. There is marked interaction between emotion and intellect, and the younger the child the more vulnerable he is emotionally to the adverse effects of an unhelpful environment. A supportive, rich, challenging environment is, therefore, requisite for all children in the early years.

The democratic structure of our society survives and moves forward on the imaginative thinking and practical decision making of collective individuality, a circumstance which holds significant directives for education. The intrinsic worth of each individual becomes a basic tenet which must be implemented in pre-school programs. His social responsibility to contribute to the well-being of other people must be nourished in flexible programs that meet varying social, as well as individual, needs from the beginning.

A positive self-image forms the very basis of democratic group living, for it is only as individuals attain a reasonable degree of self-confidence and self-esteem that they are freed to build positive relationships toward others.

Knowledge of Young Children

Young children grow and learn according to a broad general pattern. Development is a continuous, highly complex process, involving the interaction of a biological organism with its physical, psychological and social environment. Developmental influences vary so much that the growth of each individual is necessarily idiosyncratic. Nevertheless, there is a sequence of development which provides help in understanding the growth of children generally and which aids educators in planning educational programs for them.

Common basic needs form one framework for selecting an environment and planning experiences for young children. Among these are adequate health care and nutrition, love from parents or their surrogates, the development of a favorable self-concept, and intellectual challenge—all essentials in the growing-up process.

Children struggle for independence in their early years. In general, growing independence is a goal for which teachers work and plan. Yet development does not proceed in a purely linear manner; independence is not an absolute value. Children as well as adults need help in attaining a balance between independence and the ability to use help on appropriate occasions. It takes time and sometimes hard work to develop sufficient self-confidence to cope with different kinds of situations. Opportunities for independent action need to be carefully timed and spaced in order to reinforce confidence and prevent discouragement.

The comfort and security found in familiar persons and things free the child for learning. While children reach out and desire independence, they must feel free to accept a state of dependency until they stabilize themselves and feel ready to reach out once more.

Like all individuals, children need life experiences of success which breed confidence and the ability to move ahead with new endeavors. Since early experiences are critical in building a positive self-image, teachers of young children must maximize the opportunities for the child to *succeed* in what he is doing.

In the child's growth toward understanding his world, in his accomodation of himself to reality he works through a variety of different levels in his

use of materials. At first many of the young child's creations are incomprehensible to adults and meaningful only to himself. Gradually and at different rates children use materials at a representational level. The level of development of each individual child must be recognized and suitable materials provided.

Play has purpose and meaning for the young child; therefore, it is a major avenue for developing learning. It is his natural approach to understanding life situations and a means through which he gains new understandings and skills in problem solving. Play promotes motor skills, allows children to expand social growth, provides a measure of autonomy, gives functional practice in language and fosters fundamental conceptual growth. Play enables children to translate knowledge, feelings and fantasies into action, thereby building information and preserving imaginative, creative impulses.

Young children, if not discouraged, are impelled by their own curiosity to reach out to explore. Preserving this urge to learn is necessary if we value the qualities of openness and creativity in individuals. Touching, smelling and tasting as well as hearing and seeing are important means of exploration, discovery and learning. The great art of teaching young children is the knowledgeable guidance of their play to serve their constructive purposes.

Appreciation of Individual Differences

It is agreed that all children differ. Biological inheritance, physical growth and health, social interaction with peers, language development, understanding of the environment, interests and purposes, and feelings about self are some classifications which might be used to explain how each child differs from every other child. Though older children learn to cover up their deviant behavior, individual patterns of behavior loom large among young children. Therefore, it is of utmost importance that teaching in these early years be geared to the individual and what is known about his style of learning and his background. It is also geared to what society really wants the child to become. The goals of the school furnish the guideposts for the curriculum, giving direction to the teaching which must be highly individual for each child.

Styles of learning are discovered through observation and systematic recording of behavior in the classroom. Teachers need improved procedures for studying children, to observe stress situations in the school setting, to gain other meaningful data about the child's development, such as physical and social skills and intellectual needs and abilities. Systematic recording of what is observed is essential for diagnostic and planning purposes, for children's optimal development.

Consultation about children with specialists in other disciplines is imperative to supplement the observant teacher's own study. Personalized discussions and mutual sharing of information and viewpoints by the teacher with the child's parents also are basic in understanding individual differences.

What is known about the unique nature of development suggests that group situations should be small (fifteen to twenty children) so that children may build their individual patterns with confidence. Young children depend upon many one-to-one relationships for significant communication and trust. Small groups and subgroups enable teachers to do more appropriate and more careful planning for each child as he shows a need. Herding together large groups of children in routinized programs denies the basic value of good education for young children and severely limits the communication process so essential to good teaching.

Impact of the Current Status of Knowledge

The explosion of knowledge has had an impact at all educational levels. Each discipline is attempting to select those large ideas that provide structure to its subject matter. Beginning concepts are being prepared for early teaching and in some schools they are being introduced earlier and earlier. There is pressure to adapt children to this content rather than to select and adapt the content to children. Although interdisciplinary study should provide fruitful outcomes for programs for young children, great care and scholarly restraint are needed to relate new knowledge about the structure of the various disciplines to knowledge about how young children learn. We must ask ourselves why we wish to teach certain concepts during the early years.

Children integrate each of their experiences into a totality and, in this sense, learn *something* from any experience. If experiences are to be educational, in the best sense of the word, educators responsible for early childhood years must give thought to *what* children need to learn and then accept responsibility for whether or not they learn it. Surely the *what* must build toward (1) respecting the wholeness of the development of each child, (2) developing the long-range potentialities of each individual and (3) learning to function effectively in society.

Each discipline is competing for the mind of the child and each has been able to furnish some proof of its hypothesis that young children can learn more and learn it earlier. What children learn in laboratory situations may offer some direction for planning. However, several developmental factors must be faced up to before research findings are sifted and perhaps eventually incorporated into the pre-school program. The curriculum in early childhood education is determined by basic human values as well as research.

Depending upon the procedures used to instruct children, learning can be discouraged rather than facilitated. A young child's high interest at a particular time does not guarantee his ability to sustain consistent effort over several days without violating his own bodily rhythm. If he is under strain to learn when his ability to sustain effort is limited, he is likely to develop a dislike for the subject and begin to build blocks to other learnings as well. It is char-

acteristic of young children that they wish to know a little about many things rather than about any one area in depth.

Much professional care must be taken not to pressure children to work with symbols before they have had sufficient concrete experience to make such abstractions meaningful. A broadly conceived, rich kindergarten program builds necessary symbolic readiness.

When academic achievement is stressed over all other values, balanced development is neglected. There is a danger of turning out individuals whose own values do not include responsibility for other people in a world requiring greater understanding of humanity than ever before in the history of mankind.

Children unable to achieve at the same speed as others invariably feel rejected. Often the seeming inability to achieve is due to maturational delays because of uneven development in these early years. Feelings of rejection are damaging to the development of a positive self-concept and may block future learning.

Learning needs to be spread over a long period of time. It cannot be telescoped into these early years through wishful thinking or by adults' prescription. Fundamental concepts grow gradually through a variety of interrelated experiences; conceptual growth is an integrative, not an additive, process.

The Critical Nature of the Beginning Years

Entry into school is a major transitional period in which the young child meets a number of challenges, the successful or unsuccessful resolution of which is likely to have a deep effect upon his developing personality. For the first time the child is not only a member of a family but of a closely structured peer group; his relationships with authority are altered, with the adults in the new situation possibly having different values and expectations from those of his parents. The child learns gradually what kind of value the school has for him. He has his first chance to experience a teacher's help (or lack of it) in learning.

Starting school is bound to have a decisive influence upon the child's personality—his perception of his world, his capacity for autonomy, his awareness of himself. Successful mastery of the many demands of his new situation can add immeasurably to the child's sense of independent mastery and therefore to his ability to cope successfully with future experiences.

The first school years are critical in assessing and deterring the adverse effects of earlier deprivation and cultural disadvantage. In the beginning of each developmental phase there is such openness to new experiences that many of the deficiencies that have accrued at earlier stages may be modified or corrected. Effects of deprivation are complexly determined by the home, the personality of the child and the school experience, but the school can play a

determining role. Early childhood educators have found informality, diversity of achievement goals, encouragement of the child's spontaneous interests and resources, and learning through playful manipulation and discovery to be among the more productive teaching techniques for children in the United States.

It has long been recognized that children profit from exposure to materials of learning. Schools should extend the range of the child's world and provide experiences and materials for perceptual discrimination and sensory differentiation not available to him at home or outside of school. Materials must provide sufficient diversity of experience to promote perceptual and sensory discrimination as well as adequate conceptual development. A rich learning environment is one which is accessible to children through the mediation of knowledgeable adults and through children's active, manipulative self-involvement. Abundant use of common materials such as sand, water, wood, paint, clay, movable boxes, planks, blocks, records and films, is essential.

As children talk, play, dramatize, ask questions and manipulate materials, they advance in many aspects of learning. Qualitative research and case studies indicate substantial progress in language arts and often in content as well. To describe objectively or to measure adequately what specific content is learned is difficult because all content areas are interwoven.

Although much has been said about various systems of teaching, there are as yet no indications that early childhood programs narrowly conceived or designed primarily to accelerate children's ability to perform in one specific area will have much beneficial effect upon their long-range development. There is no proof, for example, that early reading instruction provides any long-range advantage commensurate with the amount of imposed training necessary for early accomplishment.

Information accumulating about the way early thinking and conceptual development take place will open up new possibilities for working with children. Such views must not mean so exclusive a preoccupation with intellectual growth that other aspects are neglected. When concern for intellectual growth is based upon understanding of the total development of the child, he can be freed to become a more wholly effective person through heightened self-concepts and acquisition of more efficient learning skills.

Meaning and understanding are developed slowly and only after a young child has had abundant firsthand, sensory experience. The fluidity of his mental processes has a back-and-forthness that gradually moves toward generalization based on cause and effect as he perceives them. To superimpose an adult generalization too early short-circuits the developmental process. There is serious danger of being misled in the early years by children's verbal agility and quick recall into thinking that they always understand what they talk about.

57-877 O—66——14

IMPLEMENTING THE PROGRAM

The Teacher

Since, as at all educational levels, the key to a good program is an effective teacher, the teacher of young children must have professional qualifications in addition to a broad, liberal education. Professional study includes child development, early childhood education, the curriculum of the elementary school, and student teaching of young children under supervision of a qualified supervisor.

The art of teaching young children calls for flexibility, inner steadiness, clarity of purposes, a thoughtful mind, empathy for and belief in people and a questioning and innovating spirit. The teacher's own personality and his preprofessional background help him establish warm relationships and significant communication with children, parents and other professional workers. Children need a teacher to whom they can relate, one who frees each to be an individual in his own right. Children need to feel free to cry, to be afraid and not hide feelings, free to enjoy, free to fail without loss of self-respect or loss of acceptance as a person. Belief in the influence of personal relationships and communications on children's learning leads the teacher to think critically about systems of materials and devices designed to be teacher-proof.

The professional teacher uses his own study of individuals along with information received from other specialists to assess what each child needs to learn. On-going child study is used to determine special learning experiences for individuals and for small groups of children. Teacher guidance increases the child's learning in his self-selected activities. The qualified teacher views himself as a promoter of child development. While he is aware of the curriculum of the primary grades, he is also aware that his own curriculum is equally distinctive and important.

It is important to develop an atmosphere conducive to learning and the enjoyment of finding out about things. Teaching is helping children develop a way of learning rather than merely filling them with factual knowledge. Teachers who enjoy learning transmit the excitement and wonder of the world around them; learning thrives in an atmosphere where curiosity and experimentation are nurtured by adults. The teacher can provide the language, help to clarify functions, enlarge concepts by knowing what to "pull out" or what to emphasize for each child as he works to understand. When a teacher enhances the child's self-image and strengthens the child's emerging personality, the child may learn to cope with new circumstances and show a willingness to put forth the sustained effort needed to learn. All learning does not come through play, but a teacher uses the play situation so that a child can find reference to certain ideas he is struggling with at the time.

Part of the teacher's responsibility involves establishing a balance of controls allowing young children to live with fluidity and ease while working toward the development of self-discipline. The teacher needs to set, without undue stress, regimentation or unrealistic restraints, limits to children's behavior. Too rigid restrictions may damage the child's natural curiosity and desire to learn; too great permissiveness frequently implies to the child a lack of adult concern. Normally, sympathetic understanding will give a measure of control helpful to the development of the child's own self-control, although occasionally direct control may be necessary.

A teacher needs to be a scholar with a wide range of factual knowledge as well as knowledge in depth. Such a range is important for translating knowledge into concepts appropriate to the child's level of understanding. The teacher needs to be able to identify and integrate information inherent in the child's self-selected activities.

Place of Administration

It is administration's place, in providing good programs for the beginning years, to be responsible for a supportable teacher-pupil ratio—one professional teacher and nonprofessional helpers for fifteen children of nursery school age, one professional teacher and nonprofessional helpers for eighteen to twenty children of kindergarten age, one professional teacher and nonprofessional help for twenty to twenty-five children of primary grade age. Administrators who recognize that no materials or equipment or extra adults can compensate for a lack of significant relationships between the child and his teacher work to maintain appropriate teacher-pupil ratios.

Administration can provide favorable conditions for learning which include forty square feet of indoor floor space per child and 100 square feet of outdoor play space per child. Materials and equipment available for indoor and outdoor learning must be provided for in the budget.

Persons in administration and curriculum development must share with teachers the responsibility for knowledge of and interpretation of findings from research and must select wisely among results those which have implications for program change. Cooperative planning between administrators and professional teachers leads to wise choice of equipment, a well-planned school set-up and a more effective curriculum.

Administrators have an extremely significant impact upon early childhood education by the insistence they place upon hiring qualified adults as teachers.

Parent Participation

Parent participation is vital to a successful program in early childhood education. A sense of joint responsibility shared by parents and teachers forms the basis for building continuity in the child's experience.

The teacher's understanding and empathy so necessary for the young child will be even more effective if they extend to his parents. The best help the teacher can give a child with personal problems is to help his parents accept him as he is and provide supportive guidance at home. All efforts must be extended to strengthen the family's ability to relate positively to the child and his problems.

"Welcome" is the keynote. Parents will participate when the school climate is friendly and they are allowed to feel an integral part of the school plan. An effective relationship is a two-way process; the parent is not always on the receiving end.

Special efforts may be required to build effective relationships with parents in poverty areas. Direct personal contact in a friendly atmosphere may be necessary in order to involve parents whose previous school experiences have not been personally satisfying. Experience has shown that parents from all areas respond when the approach has included understanding and convincing evidence that children will benefit. It is at the pre-school level that effective teacher-parent cooperation can be most readily developed.

THE PROGRAM FOR YOUNG CHILDREN

There is no one best program for all children, but good programs have common elements. These elements include:

- a balance between strenuous motor activity and more passive interests
- a balance between individual and small-group work in contrast to total group activities
- equal stress upon esthetic, social, emotional and physical as well as intellectual development
- adequate equipment, materials and space for children's use indoors and outdoors.

Teaching young children is more process than product. It is important to encourage children's learning and to help them develop efficient learning skills. The content-orientation of the program is not haphazard but is tailored to children's needs and abilities in utilizing it. The success of this learning is dependent upon the teacher's skill in determining from children's comments and other overt behavior their level of understanding. Learning is enhanced when the teacher has the ability to identify and use children's interests and purposes to extend knowledge, and when she is knowledgeable about basic content.

The curriculum in early childhood education has not been compartmentalized or departmentalized. It has been an integrated approach and, as such, it is

important for teachers to have skill in helping lay people see subject matter as part of the whole. Such integration is compatible with the way learning takes place in early childhood. Much of the learning is implicit rather than explicit, although the latter is not excluded. New research here may have much to contribute to curriculum development.

Learning to make choices is an essential part of growing in independence and in becoming a self-directed person. When the teacher supports the child's growing independence, he can develop skills and confidence in his ability to pursue knowledge without help and to determine dynamic personal interests.

A wide variety of experiences for young children should include:

- many occasions for speaking and hearing language spoken in functional discussion
- experiences to develop understandings and investigating skills
- informal experiences with number and quantity
- materials to encourage self-expression in art, music and the dance
- many opportunities to deal with information on a firsthand experience level
- a chance to use media to reconstruct his perceptions of what he has seen and done
- opportunities for building empathy for people.

The primary school years are based on the same values that undergird the child's early school years. An abrupt change to formalized school instruction and routines interrupts and frequently blocks the process of learning set up in early education. It is recommended that the elementary school work to free itself from unchildlike procedures rather than attempt to formalize the early years to match those of the existing elementary school.

Disregard of developmental processes dooms some children to failure. Opportunities might better be extended in the elementary grades for children to move around and handle materials and learn firsthand. Greater attention should be paid to adapting content to individual styles of learning.

CONCLUSIONS

During the beginning school years the young child needs to be valued for what he is; his developing capacities for learning demand respect. An education primarily future-oriented neglects children as they are.

There are hazards in the development of early programs for children. Failure to recognize these hazards can compound all our present educational problems. We must be concerned lest the first school years become nothing but a speed-up process for an earlier beginning of the traditional work of the primary school. A narrow training program based on crayon-and-paper exercises, called readiness for the skills learned in primary school years, misses significant opportunities for learning. Such a program lacks balance and

variety. It substitutes words and pictures for firsthand experiences necessary for accurate conceptual development. We must be concerned lest we create new school dropouts at ages three and four.

To assess the work of the earliest school years solely by paper-and-pencil tests given in later years is foolhardy. Such an evaluation neglects significant and often dramatic personal development in the first school years when spontaneous "playing with ideas" eludes measurement.

Inappropriate compensations and undesirable pressures upon young children can only compound the burdens they already carry. The profession owes them protection as well as support.

It owes them a proper balance of structure and self-initiated activity for early learning. The diagnostic teacher capitalizes on spontaneous play for clues to individual readiness and interest. Alerted by such clues, one is obliged to use his knowledge of children, of individual differences and of subject matter to provide necessary and appropriate experiences for learning in the beginning school years.

Early childhood education is not an exercise or a schedule or a machine. It is young children exploring their world with sensory thoroughness, experimenting with people and places and materials, encouraged by a teacher who respects and uses their ideas and ways of learning to help them discover what has meaning for them in our society.

Mr. SCHEUER. Thank you very much for your testimony, Miss Meyer.

Mr. GIBBONS. Miss Meyer, I think you have made some excellent suggestions here and I hope when we go further into this bill we can perhaps adopt some of them or at least consider them further. The answer, of course, to your question about the 350 children is it refers to 350 children—not 350 problem children, but 350 children.

Miss MEYER. Yes.

Mr. GIBBONS. And I think that is an amendment that needs to be made from the point of clarity. I am sure the record shows and that the history of this legislation means that we are talking about 350 children all told, not 350 problems.

Miss MEYER. I felt sure that it did; but I also felt that reading it because it wasn't quite clear.

Mr. GIBBONS. I agree with you, and I am not familiar with all of the different nomenclature for the definition of primary and elementary schools; but I will go into that deeply and I am sure the subcommittee will. I think you have made a helpful suggestion about priorities for people who would get fellowships here.

Miss MEYER. It was my feeling that people who have had some experience in teaching and who have shown an interest in continuing in this area—and there are many elementary teachers today who have had background in child development—might be given some special consideration in this field. I think one of the previous witnesses this morning commented about the way in which these child development specialists might be received in the elementary school, the need for their being accepted by the elementary personnel. I think if they are known to have had some previous experience that this would make this possibility more likely.

Mr. MEEDS. I have a question, if I may.

Mr. SCHEUER. Yes, Mr. Meeds.

Mr. MEEDS. First of all, I would like to compliment you on your testimony and your experience in this field. It is always very helpful to us Members of Congress to have people of your background come and guide us by your testimony.

Miss MEYER. Thank You.

Mr. MEEDS. I am a little concerned about what perhaps may be a subtle distinction, but something I had seen overtones of in different testimony this morning. I was very impressed by a former witness' statement that the child development specialist should be utilized not only for the purpose of recognizing the emotional problems, but also recognizing the potential and helping to develop that where it can be seen.

Would you agree with that?

Miss MEYER. Yes, I would.

Mr. MEEDS. Under those circumstances, do you feel it would be better if the child development specialist worked primarily with the children or primarily with the teacher?

Miss MEYER. I think probably primarily with the teacher in helping the teacher to see how to modify the school program in order to assist the child.

Mr. MEEDS. Do you think that if the development specialist is working primarily with the teacher he is in a better position to recognize

the potential of the student than he would be if he were working primarily with the student?

Miss MEYER. Naturally he will have to do both. But I think he will get an insight from the teacher as to what the problems are as she sees them, then he would have to work with the child in terms of understanding the child's personal problem, and then back again with the teacher.

Mr. MEEDS. I don't think there is any question when we are dealing solely with problems, but what about when we are dealing with potential? Would you expect the teacher then to relate to the counselor or the specialist, John Jones has a proclivity to art?

Miss MEYER. Well, I think many teachers would probably tell this to the child development specialist, whatever they had observed about the child's potential. I think it is possible of course that some teacher may not recognize his potential. It seems to me it is rather difficult to say what would be done in any particular case, but I do think that, as one of the previous witnesses this morning pointed out, the teacher is the person who can change the environment in which the child has to live within the school, and although the specialist might work directly with the child in helping him to achieve his potential, let us say in art, in some outside school activity, still there could be very well some modification in the school program which would give him opportunity to achieve success in art which in turn might help him to achieve success in other subjects.

Mr. MEEDS. You wouldn't envision then the child development specialist as becoming just subject to call when a teacher recognizes a problem or a potential then?

Miss MEYER. I wouldn't say just subject to call by the teacher. I would hope that when the teacher wanted him he would be available.

Mr. MEEDS. Yes.

Miss MEYER. But I would think the principal and other school personnel who might see a problem arising sometimes might be aware of it before the teacher realizes the need.

Mr. MEEDS. And wouldn't you hope also that the child development specialist would have an opportunity to work with and to observe the students independent of any recommendation by a teacher?

Miss MEYER. I think this might be possible under certain circumstances.

Mr. MEEDS. Thank you.

Miss MEYER. Thank you.

Mr. SCHEUER. Thank you very much for your testimony. The bell is going to go off in about 20 seconds. So we will as I mentioned before recess the session until this afternoon after the final passage of the conference reports and at that time we will hear a panel of witnesses representing the U.S. Office of Education. The panel will include the following:

Dr. Frank L. Sievers, and Dr. Tony Milazzo, Dr. Smith, Dr. Leonard Miller, and Mr. Kenneth Pederson. That will be at approximately 2:30 to 3 o'clock if our estimation of the business on the floor is correct.

(Whereupon, at 11:59 a.m., the subcommittee recessed, to reconvene in the afternoon of the same day.)

AFTERNOON SESSION

Mr. PERKINS. The committee will come to order, gentlemen. Come around, Dr. Sievers and Dr. Tony Milazzo.

STATEMENTS OF DR. FRANK L. SIEVERS, DIRECTOR, GUIDANCE AND COUNSELING, PROGRAMS SECTION IN THE OFFICE OF EDUCATION; DR. TONY MILAZZO, DIRECTOR, PROGRAMS FOR SPECIAL NEEDS BRANCH; DR. HYRUM SMITH, CHIEF, PROCEDURES AND TECHNIQUES UNIT; LEONARD M. MILLER, SPECIALIST, COUNSELING TECHNIQUES; KENNETH PEDERSON, SPECIALIST, EDUCATION OF THE EMOTIONALLY DISTURBED

Dr. SIEVERS. I will identify them if it is all right.

Mr. PERKINS. Go ahead.

Dr. SIEVERS. There is Dr. Hyrum Smith, Mr. Leonard Miller, and this is Mr. Kenneth Pederson. I am Frank Sievers. Dr. Milazzo was so involved with certain things that he just couldn't get away.

Mr. PERKINS. You go ahead. You open up the discussion. First, let me welcome you here along with the distinguished panel. We always depend upon the Office of Education for expert testimony and particularly in this case we are looking forward to receive your views. We feel that a program of this type in H.R. 11322, providing for child development specialists, is long overdue. We are looking forward to hearing your views.

Proceed.

Dr. SIEVERS. We appreciate the opportunity.

Mr. PERKINS. Do you have a planned presentation between you?

Dr. SIEVERS. If it is satisfactory, Mr. Chairman, I will read a planned presentation which is not very long and then my colleagues and I can try to answer all your questions or provide answers to them if we don't have the information available.

Mr. PERKINS. Go ahead.

Dr. SIEVERS. We appreciate the opportunity to testify, in our various professional capacities, on behalf of bill H.R. 11322 cited as the Elementary and Preschool Child Development Act. Our testimony will react to the following aspects of the proposed legislation:

1. The need for such a bill;
2. The impact such legislation could have in helping children;
3. Some professional aspects of the bill, and
4. The competency and level of training.

The need: The need for such a bill is apparent all around us. Our affluent society is causing greater stress among our young children. It was reported last week in Charleston, S.C., in a meeting of southern State counselor educators and State supervisors of guidance, that "school phobia" is steadily increasing each year among our elementary schoolchildren; also reported was a significant increase in the number of children with "school phobia" on homebound teachers' rolls.

Social and emotional problems of children in our elementary schools reach as high as 10 percent, not to mention that there are more than a million children who have special learning and behavioral problems, including the blind, deaf, speech impaired, mentally retarded, physically handicapped, etc. The stress on children accounts for a sharp increase in the number of elementary schoolchildren committing suicide each year. These problems cannot be overlooked. I am sure that we are cognizant of the fact that one out of three youngsters who enters the fifth grade fails to graduate from high school.

Of the major factors for this problem which compound into the loss of over a million youngsters from our schools annually, one is the lack of interest in school. Actually, it means that the majority of these children have not acquired the basic skills and therefore cannot compete with their peers in the schools. Many of these youngsters, if given special attention, and with their special learning and behavioral problems recognized early in the elementary school, would not become our underachievers, dropouts, and juvenile delinquents, but would be stay-ins and strong, enthusiastic students.

Children from urban and rural slum areas frequently miss their chance even before they begin school. Tests show that they are usually a year behind in academic achievement by the time they reach the third grade and up to 3 years behind if they reach the eighth grade. By this time, their handicaps have grown too great for many children and their goals have narrowed, their prospects for lifetime of failure have increased. Preschool programs and early identification of special learning and behaviorial problems have demonstrated marked success in overcoming initial handicaps.

More than one-fifth of our population moves each year from one home to another. This indicates that more than 12 million children were displaced and had to adjust to new surrounding and make new friends. Also mothers have entered the labor market in large numbers to raise the standards of living for their families or because they are the family's sole support. Thirty percent of mothers with children under 18 are working and over 20 percent of these mothers have children under the age of 6. Many of these children suffer from lack of supervision and companionship because of weakened family ties.

Today less than one-quarter of our elementary schools have the services of a guidance specialist, one or more days a week. More than 3 million elementary school children are estimated to be in need of special help. At present, however, there are only about 3,000 school social workers on the staffs of public schools mainly because school systems cannot afford to hire them and they are simply not available to be hired; and a similar situation prevails for school psychologists.

Only 30 percent of the handicapped children have special programs available to them. The Federal Bureau of Investigation indicates the cost of crime to be approaching $26 billion annually. Juvenile delinquency has taken a sharp increase and it is accounting for a sizable portion of the $26 billion. The complexity of the many problems that our school and society faces would indicate a serious neglect in the education and attention of our elementary school children. It would appear that early identification and evaluation of children's differences, special learning, and behavior problems, would enhance their total and far-reaching educational experience.

The impact that it will have on helping children. We estimate the impact of such a program at the primary grade level would be far reaching. Pediatrician Frances Ilg of the Gizelle Institute, through years and years of research with children and their behavior growth and development, strongly indicates that educators do not spend sufficient time in understanding the physical, biological, social, and emotional characteristics of a child. She maintains that the great majority of children who develop problems in school, develop these problems because of inadequate placement on entrance into school.

If children were properly placed according to the characteristics mentioned above, there would be far less frustration and failure of children in our schools. Age alone is not an adequate criterion. Educational psychologists, physicians, and educators agree that the preschool and primary grade years of the child's life are the most formative. Therefore, children of this age require the skill and understanding of someone professionally prepared beyond the preparation that our teachers now receive in order that they may help children meet the heavy demand asked of them by our society.

If early identification and evaluation of our children's special learning and behavioral problems, as well as the talents of all children in the primary grades, the incidence of all the above mentioned problems would be substantially decreased. We are not so naive as to believe that all of these problems can be eliminated, but with a unified and national attack on such problems they would decrease an extensive waste of human talent.

It would appear that the child development specialist as advocated by H.R. 11322 would support and supplement the fine efforts of the classroom teacher to do even a better job of teaching children. If within 10 years, 40,000 to 50,000 CDS's could be employed in our schools, it could approximate a preventive program second only to the recent polio vaccine preventive program of a year or so ago. The impact of these specialists in the elementary school working with our elementary children would be just as far reaching across the country. Any quantities of money spent on our Nation's children can be viewed only as an investment in our country's future by decreasing welfare rolls, crime, juvenile delinquency, et cetera.

I will deal a little bit with the professional aspects.

May I take a moment to compliment our Nation's teachers for their dedication and commitment to our youth. With the innovations, new materials, and programs occurring so rapidly in education, teachers have all that they can do to keep abreast of these innovations and changes. In this day of increased learning, teachers have little time, let alone energy, to work intensively with a few children with special learning and behavioral problems. It has been reported by many elementary school principals who have guidance personnel within their schools, that teachers as well as parents, are requesting more and more of these services.

In a recent national study in the area of elementary school guidance, three-fourths of the elementary school principals surveyed, without a guidance specialist, expressed a need for such services, which demand, of course, far exceeds the supply. This indicates a national need for a competent professional person who could work with children and teachers in the identification and evaluation of

special learning and behavioral problems and talents. This professional person not only could identify and evaluate such problems but can assist children to meet the needs and challenges of their school experiences.

Professionally, the CDS has a broader base of operation than does the school psychologist, school social worker, and elementary school guidance counselor. This person can be any one of the above-mentioned three with, however, additional preparation in depth, and with the assignment of appropriate activities in the preschool and primary grades.

For instance, if a school psychologist were to be accepted as a CDS he would have to have the equivalent of 2 years graduate preparation and be competent in all of the aspects as outlined in the bill. His duties would go beyond that of functioning school psychologists and the same would hold true with each of the other disciplines mentioned. It should be noted, however, that the generic and elementary school counselor is excellent background preparation with some additional training to make competent CDS's.

That is a short statement. It does try to reflect some of our professional thinking, Mr. Chairman, and I and my colleagues would be glad to try to answer any questions.

Mr. PERKINS. Your statement disclosed some very important facts that we should certainly try to do something about. Do you agree with that statement, Mr. Pederson? I know that you are a specialist in the education for the emotionally disturbed.

Dr. PEDERSON. Yes.

Mr. PERKINS. What comments do you care to make?

Dr. PEDERSON. Actually, I am representing Dr. Milazzo who was unable to attend at this time, and Dr. Milazzo had a part in making this paper. So I think it is a good representation from our feelings from the unit on emotionally disturbed.

Mr. PERKINS. How do you view H.R. 11322? Do you see it as a piece of legislation whereby we make available the child development specialist that will do tremendous good in preschools and in the first 3 years?

Dr. PEDERSON. I think I feel very close to this because my background has been as an elementary teacher.

Mr. PERKINS. We can correct a lot of the emotionally disturbed problems, is what my question is.

Dr. PEDERSON. Definitely, and this would be a person that could give the very, very needed support to teachers which I think is sadly lacking.

Mr. PERKINS. Do you feel this legislation is long overdue and we should have had legislation along this line before this time? The gentlemen on the left, what are your views on the legislation?

Dr. SMITH. I think this is long overdue. Having worked with elementary youngsters for a long time, we have found that with assistance to teachers and youngsters, many of these problems can be alleviated. We started, for instance, in a program a number of years ago where the teachers were referring, mainly, cases that are problem centered to personnel such as the social worker and the psychologists. Mainly, these youngsters were being referred to the secondary level to begin with a real effort toward working with the elementary

youngsters. Within about 4 years the referral had changed completely and the referring became very evident in the elementary school and showed that these problems were eliminated during the secondary level.

We feel that, if we could help these youngsters move from the primary grades, elementary grades with the basic skills, we would eliminate a great percentage of crime, delinquency, underachievement, dropouts, and what have you.

Mr. PERKINS. Do you care to comment?

Mr. MILLER. I just wanted to add that a considerable amount of my experience has been in the rural county setup in an area in which we had a big population increase, and I would just like to point out that I don't think we can play up too much in this bill the effect of this population mobility.

Let me give you just an example of some things that were brought out this morning and that are mentioned in your statement. Take Orange County, Calif., which is estimated to be one of the fastest growing counties in the United States. They made a recent study of some of the problems that were happening there as a result of this rapid increase in population. The county made a survey of 3,309 Orange County children and concluded from their sample that 15 percent of all children between 5 and 17 years of age are living in broken homes.

Isn't that fantastic? Orange County, Calif., you know what it is.

Mr. GIBBONS. It is near Disneyland.

Mr. MILLER. Right in the middle of it.

Mr. GIBBONS. That is a pretty affluent society.

Mr. MILLER. Right. Exactly. I was out there a couple of months ago and I just couldn't help but think, is this Orange County which has Disneyland with all these problems? Then they went on to say that there are approximately 6,000 boys without father guidance, with the highest percentage of fatherless boys in grades 6, 7, and 8. I think that it is evident that can be duplicated especially in any one of these counties and this happened in the county. I was in Rockland County, N.Y., where we have had a population increase similar to this.

However, the schools there have introduced a number of specialists in the picture; but the one thing that I think ought to be stressed here is that someone was saying about how this specialist will function. You were saying not just a school today. I can see one other phase that I think ought to be stressed here, which is that this person should be conducting a case conference, case conferences, after school, evenings, Saturdays, which would include parents and all the specialists that need to be in to help study these. Both Dr. Smith and I have been in situations, he in Utah, I in New York State, where we have seen the effect of this case conference approach as an inservice teaching device as well as making the community conscious of what the problems are and then getting the school people to adjust the curriculum and services. I just bring that out.

Mr. PERKINS. A very good statement.

Mr. Meeds?

Mr. MEEDS. I will direct my question to Dr. Sievers. I am interested in what you touched on briefly, cutting across disciplines, how you would distinguish the role of the child development specialists

from what we now visualize to be the school psychiatrist, if we had enough of them?

Dr. SIEVERS. Yes. I would appreciate having you people join in as any responses are made. The psychiatrist, No. 1, has much more training than the child development specialist would have. He is basically a physician and then has a lot of psychology and so on. I would see him as maybe being utilized by the child development specialist at times simply because the CDS as we have started to call him would be a person who did not have this kind of depth in training. He would be identifying those very troublesome kinds of problems and referring them to the psychiatric assistance as it was available, or he could make it available.

I would see a very different role in both of them, one of them serving all of the children and the other one only those very acute psychotic type of problems that he is needed for.

Mr. MEEDS. Now, the difference in how you would distinguish the function of this person from what we presently visualize to be the school social worker if they had them at this level?

Dr. SIEVERS. My colleague, Dr. Smith, has a master's degree in this particular area, and I would appreciate him responding after I finish.

The school social worker has depth in training in this case study technique that Mr. Miller was talking about, but furthermore, his skill is working within the home situation, alleviating conditions within the home that might be unfavorable to success in school, or that might be assisting in curing or alleviating tension within the home, to the end that the child comes to the school at least not emotionally disturbed, not wondering if his mother and father really fought it out or something of this sort. I would see him as a very real ally to this CDS, and not necessarily supplanting what he was doing.

He would be a supplementary resource.

Mr. MEEDS. Perhaps you would like to add to that, Dr. Smith?

Dr. SMITH. I would like to make a distinction such as this. We have these specialists, the social worker, the psychologists, that are trained specifically in their particular areas. These people are needed in the school system. However, we feel that these people if they are utilized properly should work with about 20 percent of the youngsters who are severely emotionally disturbed; the CDS, as we see this person, is more of a generalist. This person can identify, for instance, in a home visit whether this particular case would need extensive casework, and if it does, then they wouldn't spend the time. They would refer it to the social worker who is trained to do this. This would relieve this specialist to work with the 20 percent.

As it is now, these specialists are working with approximately 80 percent of the cases. As they go into the school, they find that in 80 percent of these cases through one, two, three, and four visits, some sort of understanding, reconcilation, clarification, can be accomplished, meaning that really they are wasting their valuable time that they should be spending with the 20 percent. The CDS, as I would view this person, could work with all of these youngsters—the 80 percent, and determine through their professional preparation when to call in a specialist and utilize this specialist to the fullest degree.

Mr. MEEDS. Do you visualize, Dr. Sievers, the CDS as you term them, requiring a good educational background? In other words, the field of education?

Dr. SIEVERS. Since he works in an educational setting, he ought to be so well familiar, it seems to me, with the educational processes that he immediately becomes one with his colleagues, the teacher, the principal, and other persons. Now, how this can be done will vary. Probably, some institutions are doing an excellent job of referral of individuals into an actual school situation and also of having this individual getting him varied educational experiences rather than having taught at the elementary school level in grade 4 or 6 or something of this sort.

I would say it is very essential that he have thorough understanding of the educational process and be so thoroughly familiar with it that he can work in the educational setting successfully. Then on top of that he is so well versed that he is accepted as a colleague upon the team in the school system.

Mr. MEEDS. Would it be correct to say that his primary function would be to make the child emotionally receptive to education.

Dr. SIEVERS. And probably also accepting this very thoroughly, probably also helping the environment of the school, the school itself, to be ready for educating this particular child. Both situations I think have to be dealt with by the child development specialist.

Mr. MEEDS. This would indicate a pretty good educational background. I mean education as a specialty.

Dr. SIEVERS. Yes.

Mr. MEEDS. I think that is all, Mr. Chairman. Thank you.

Mr. PERKINS. Mr. Gibbons?

Mr. GIBBONS. I want to ask you some questions about the bill. And first let me say, thank you very much for taking your time to so deeply study this matter. In the bill, H.R. 11322 as it is presently drawn, do you see any problems in administration of it? Do you think it would work effectively as it is presently drawn? Do you have any suggestions as to what changes should be made in it? You heard some of the testimony this morning. I don't know whether you were able to digest all the suggestions, but I wondered if you had any yourself?

Dr. SIEVERS. As we look at the bill, and myself and my colleagues would like to react to it from a professional point of view, we have had enough experience among the four of us with other programs where there is a State plan in operation such as this bill calls for, where there is assistance to an individual getting further preparation in an institution of higher learning, also assisting that institution of higher learning in developing a program, that we feel that the pattern could be very successful because your State plan would call for, I presume, the State department of education to submit the plan and meeting the regulations, the requirements of the law.

Then the operation there is at the local level and then the preparation particularly going to the institutions of higher education that can meet these kinds of subject matter requirements. It seems to me it is admirable in these respects, from a professional point of view and a practical point of view. I am so pleased to see the bill calling for 1 year of preparation before we try to get the program underway at the local level.

We can be better assured it seems to me of quality in the program because we will have some people who are prepared and then we can move on into the program this way.

Mr. GIBBONS. I was discussing this bill on the floor today with another Member of Congress and that Member of Congress raised a question and I would like to submit it to you. Do you think we have in the United States the facilities for training these child development specialists? Do you think we have them? Can we develop them? What is your view of that?

Dr. SIEVERS. I think we may have a few that could start the training of them very quickly. They could be developed. I notice that at the institutions of higher education, as the NDEA with its institute program, when title V(B) was passed, they adapted themselves very quickly to trying to meet the need that Congress had identified in the National Defense Education Act, particularly in title V, and I would say that they would welcome, No. 1, the opportunity to assess on what they saw as a very real problem in the United States, but second, here is an opportunity for them to have a 2-year program which would give them greater opportunity to develop a well qualified and thoroughly competent individual.

Mr. GIBBONS. On page 17 in title 3 under the title, "Training," the bill provides for the paying to an institution of higher education from the Commissioner the sum of $2,500 per academic year per student who is enrolled in this type of course. Do you think that is a sufficient amount of money to allow institutions to tool up and will this give them a sufficient amount of incentive? Is it too much, too little, excessive, or not sufficient? I would like to have your opinion.

Dr. SIEVERS. I would give an opinion. I think my colleagues in the Bureau of Higher Education could respond to this more appropriately. This would permit the institution of higher education to staff up very adequately, depending upon the number of students they had. This again has been successful in this way in the graduate fellowship program under title 4 of the National Defense Education Act.

Mr. GIBBONS. Another title of the bill, on page 11, subsection (5) of section 203, provides for the payment of specialists And while it doesn't spell out an exact salary, I thought I would discuss with you what I thought the salary should be, and I would like to get your views on it.

Subsection (5) that I referred to says: "Provides that the salary paid the child development specialist will be commenced rather with the salary levels of comparable professional personnel in the State."

I realize that that is pretty broad; but what I had in mind in that connection was that the Commissioner would set a salary scale under the State plan or work with the State to help develop a salary scale that would first of all put this development specialist in the right perspective as far as the school was concerned and to attract the specialist to the job. I envision a salary that was somewhat higher than any of the teachers were paid in that elementary school, but perhaps a little lower, just a little lower, than the principal is paid.

Do you think that this is putting the CDS in the right place? Is this a workable type of arrangement and what are your views on this?

Dr. SIEVERS. I like particularly the salary level comparing with other professional persons of comparable preparation at least. We have a practical problem. If he were paid more than the principal, you can see the obvious difficulties that might arise.

He also will have more preparation than the average teacher has. There is some justification for the salary above that level that the teachers would be paid within the school system. Then, if I heard the testimony correctly, this morning, and your committee would accept this testimony, he would be working evenings, as well as in the daytime. He would have many obligations that probably not all teachers have. All of this would be a rationalization it seems to me that would make this satisfactory and would not cause friction between him and the other staff members.

Mr. GIBBONS. As I see it, this person would not be a certificated teacher under the local State laws. Of course, this person may have formerly been a teacher of that sort and perhaps there would be some difficulties about arranging some of the fringe benefits that a teacher gets. It is my intention as the drafter of this legislation to provide a maximum amount of flexibility so that the department of education can take into consideration the problem of all of these fringe benefits and work out an equitable salary for this person, high enough to attract them and to hold competent people, because we will have a large amount of investment in this person as far as the Federal Government is concerned, when you consider the stipend and the training. I want to attract and hold these child development specialists in these communities, qualified people, and leave to you the ticklish problem of trying to set an adequate salary, somewhere less than the principal, so that the child development specialist will realize that he is working with the school system—perhaps not an integral part of it, but that he is also working in the community.

He is working with the parents and with the child. Do I make myself clear as to what I intended there?

Dr. SIEVERS. Yes. May I just carry your thought just one step further?

Mr. GIBBONS. Yes.

Dr. SIEVERS. I am sure you have considered this, too. He has 2 years of graduate preparation and the salary when you were saying it must be high enough to get him on the job and hold him there, this would be important because approximately 1 more year plus a dissertation would get him a doctors degree. He would be a possible candidate for college jobs, and of course, they need them just as much as any other institution does.

But if the purpose is to hold them, we have to weigh this kind of a salary incentive, too; to keep them there after they have this 2 years of preparation.

Mr. GIBBONS. I wanted to give you the maximum amount of flexibility and I hope that I have. I think only experience will tell us whether we are able to hold these people. I think it is essential that we establish a continuity between the community and the children and this specialist, and there not be somebody who is constantly revolving in and revolving out like a classroom teacher does.

Actually, this development specialist will be adding to his or her enrollment, her 350, a few each year, and a few will be graduating out so he or she will get to know these children pretty well and get to know their families and get to know their special problems and can work with them because of the interest matter. I think the continuity in this rapidly moving society that we have is an essential part of it.

Dr. SIEVERS. I would certainly agree.

Mr. MEEDS. Mr. Chairman, I do think that all members of the committee should be allowed to insert statements in the record of the report of this hearing in regard to this matter.

Mr. PERKINS. Without objection, it is so ordered.

Proceed, Mr. Gibbons.

Mr. GIBBONS. The bill doesn't specifically spell out that the Department or the Department of Education, HEW, could reimburse the States for expenses with these, and I am going to reexamine the language and see that we haven't tied your hands. But I can see that there will be some problems because in some places you would have to put perhaps two small elementary schools, or some rural schools that are spread out, together in a package and the development specialist will have to travel. Because you work at odd hours and because there may be some need for an adequate amount of expense money to support this type of operation, I intend in this legislation that the Federal Government pick up the reasonable cost of it because I want to see this go on without being unnecessarily diluted as so often happens in some of our State matching programs. This is a national problem and is entitled to a total national support in its solution, and if you have any suggestions after you have thought over those I suggest I would appreciate having them.

I am sure the subcommittee would, too.

Dr. SIEVERS. We would be glad to respond.

Mr. GIBBONS. Those are all the questions I have.

Mr. MEEDS (presiding). If you have the information we asked for, we will also hold the record open for that.

Dr. SIEVERS. We appreciate the opportunity.

Mr. MEEDS. We appreciate your appearance and commend you and compliment you for your work with regard to this bill. Thank you very much.

Dr. SIEVERS. Thank you for the opportunity.

Mr. MEEDS. The committee will be in recess until the call of the chairman.

Dr. SIEVERS. If you are not adjourned, Mr. Chairman, I would like to introduce to you Dr. Milazzo.

Mr. MEEDS. Will the record show that Dr. Milazzo was also present.

Mr. PERKINS. The record will so indicate.

The subcommittee is to receive a table prepared by the U.S. Office of Education showing the new obligational authority and expenditures for fiscal years 1966–71 to which, there being no objection, is to be placed in the record.

(The table referred to appears at p. 295.)

(Whereupon, at 4:37 p.m., the hearing adjourned, to reconvene upon the call of the chairman.)

(Pursuant to order of Chairman Perkins, the following communications received by the subcommittee are made a part of the record:)

STATEMENT OF HON. LLOYD MEEDS, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF WASHINGTON

Mr. Chairman, I highly favor H.R. 11322, the Elementary and Preschool Child Development Act. This legislation is aimed at what I feel to be a significant relationship, that which exists between many of the social problems with which we are confronted—school dropout, disruptive behavior, delinquency, crime—and

serious emotional disturbance and educational achievement or underachievement. Numerous studies indicate that such a relationship does exist. All too often the combinations of the child's emotional and physical makeup and his environmental experiences produce explosive effects. The disturbances show up particularly when the child enters into day-to-day associations with his peers in school, and often hinder or block his participation in learning and play.

If these conditions are not detected and corrected in the early years when the child is most responsive to treatment, the condition may worsen as the child grows into adulthood. He may become another figure in the columns of criminal or mental statistics. However, by applying methods of detection and correction in these formative years, many such disturbances can be arrested. H.R. 11322 aims at just this solution.

Specifically, the bill will provide child development specialists who will work with children at the preschool and early elementary school levels. It will be their duty to assist the school personnel in the recognition of emotional, learning, and behavioral problems, and to assist parents and teachers in working out solutions to the difficulties of the individual child. Such provision makes possible a continuous program of assistance for disturbed children through approximately age 9. The words "continuous program" are especially important in that this will eliminate the gaps in treatment which often occur when other methods are employed.

The bill emphasizes the need for "highly skilled" child development specialists. These persons will truly have to be specialists in the technical sense of the word. They will not simply be psychologists, or psychiatrists, or school social workers. They will have to be all of these, and more. To effectively perform their duties, they will need to understand the theories of sociology, psychiatry, psychology, medicine, and education concerning personality, learning, growth and development, behavior, and prevention.

Finally, to produce such highly trained persons, the bill authorizes the awarding of fellowships to persons at the graduate or postgraduate level who show an intense desire to pursue such a course of study. Priority will be given to those students who have established good records of academic achievement in their undergraduate or graduate courses. I feel that we can get those persons who are most competent into the child development programs.

I am taking the liberty of incorporating into the record a letter from experts in the field at the University of Washington which raises many valid points and which makes excellent suggestions regarding the training of such persons.

OCTOBER 19, 1965.

HON. CARL D. PERKINS,
Chairman, General Subcommittee on Education,
House of Representatives,
Washington, D.C.

SIR: I am most grateful to have been given this opportunity to express my views on the bill H.R. 11322, the Elementary and Preschool Child Development Act. I only regret that I am unable to appear before your committee to testify in person. I would, however, appreciate having the following comments entered into the record, if you think it appropriate.

Being unable to appear to testify in person, I have discussed the bill (H.R. 11322) at length with several distinguished colleagues at the University of Washington. These discussions included Dr. Robert A. Aldrich, currently professor of pediatrics and previously Director of the National Institute of Child Health and Human Development, National Institutes of Health, U.S. Public Health Service; Dr. Robert W. Deisher, currently professor of pediatrics and previous Deputy of the Children's Bureau, U.S. Public Health Service; Dr. Charles B. Brink, dean and professor, School of Social Work; Dr. Charles R. Strother, professor of psychology and psychiatry; Dr. Gordon C. Lee, dean and professor, School of Education. The consensus of the discussion, cosigned by all five of these educators and faculty members of the University of Washington, as well as by myself, was transmitted to you by a telegram which read:

"Regret cannot testify personally re H.R. 11322. Bill discussed with cosigning colleagues. Consensus bill incorporates excellent concept but wording precludes adequate implementation. Needs more explicit details of the qualifications and training required to insure specialist competence. Also important, coordination of educational services with existing and future medical, psychological, and social science services. Believe if coordination were delineated bill could represent landmark in social legislation. Therefore, respectfully suggest

hearings be carried over to enable fuller discussion of bill both within and without government.

"(Signed) RALPH J. WEDGWOOD,
"*Professor, Pediatrics.*
"ROBERT DELSHER,
"*Professor, Pediatrics.*
"CHARLES BRINK,
"*Professor, Sociology.*
"ROBERT ALDRICH,
"*Professor, Pediatrics.*
"CHARLES STROTHER,
"*Professor, Psychology.*
"GORDON LEE,
"*Professor, Education.*"

The purpose of the bill is, we feel, excellent; the provision of child development specialists for elementary schools and preschool programs, and the establishment of training programs to develop a cadre of such specialists would fill a very great need in our current society. However, if such specialists are to serve our society well, they must be truly specialists and not poorly qualified and poorly trained pseudospecialists who would be unable to carry out the responsible and complex tasks presented to them.

The task of ameliorating the problems of school dropouts, disruptive behavior, delinquency, crime, and emotional handicaps; of providing a remedy for the educational underachievement of a significant segment of our Nation's children who must as adults cope with an increasingly complex society and carry on the tradition of our democracy is a serious one. It is an educational task of great importance, and a task which we must fulfill if we are to successfully make the fruits of our society available to all in our Nation. But I would suggest that the burden of the task is not solely educational.

The solution to the problem must involve the combined efforts of all those disciplines which have a commitment to the welfare of our Nation's children. This would include the medical, psychological, and social sciences, as well as educators.

As I view current and pending legislation, I am concerned that the burgeoning of attempts to solve these problems tends to develop multiple programs, both at the national and local level, which are isolated rather than coordinated; and which through the diversity of mechanisms involved make it difficult and at times impossible to implement a comprehensive and effective effort of limited manpower resources to answer the pressing needs of the children of our society.

The provision of child development specialists to schools, as outlined in bill H.R. 11322, could, if these specialists were appropriately trained, supervised and coordinated with existing services, make a significant contribution to these national needs. However, I think it important to recognize that child development specialists must be trained not only in the field of education, but also have knowledge and experience in the biologic aspects of human development, and in those aspects of intellectual and social development represented by the psychological and social sciences. At an operational level the child development specialists, as described in the bill, since part of their function will be diagnostic and therapeutic, must work in coordination with the health, psychological and social sciences. If such specialists are to be effective, their qualifications and experience and the training provided for them should clearly reflect this interdisciplinary approach. Similarly, their function at the operational level within the schools should be clearly delineated to insure that at the local level appropriate measures are taken to coordinate their activities with the other State or local agencies and professional groups which are or should be available to provide comprehensive services for the welfare of children. Finally, provision should be made for the continuing education of such child development specialists so that they can return for additional training to be up-dated in such a way that the new knowledge of child development resultant from research can be transmitted to them, and thus be more speedily and effectively translated into terms of social effectiveness.

Wording changes within the bill and minor additions could insure these important matters. For example, in section 102(a) the designation on the advisory council of persons knowledgeable in the medical and social sciences in addition to behavioral scientists and educators might be considered to insure coordination of programs. In section 203(a) it might be appropriate to require

from States desiring to receive grants some evidence of a plan to coordinate the activities resultant from this program with the activities of the State or local agencies involved in child health, welfare and rehabilitation, and those other institutions providing children's services. In section 301(d) the participation of medical, psychological and social sciences in the interdisciplinary training of the child development specialist should be more explicitly delineated, and it might appear appropriate to require institutions providing such training to show clearly that the faculty providing the necessary interdisciplinary instruction were fully qualified experts in the fields of the involved specialties; such specialties to include the disciplines of child health, psychological and social sciences, as well as education.

The continuing education of the child development specialist could be assisted by an additional section providing a period of on-the-job (residency) experience under continuing supervision following the 2-year formal fellowship and a provision for the return of the child development specialist to a training center every 3 to 5 years for an approved additional course of instruction to bring his or her knowledge up to date.

There is an urgent need for child development specialists with this type of broad training and function. Yet I suspect that existing centers of higher learning would have difficulty in training the numbers suggested by the proposed bill. The limitations of facilities and faculty are very real. If we are to train true specialists of a high level of competence in significant numbers, it may well be necessary to match this bill with a bill for funding of construction of additional facilities on the campuses of institutions of higher learning and initial staffing of faculty. As you know, the current population expansion and the ever increasing numbers of students appearing for education at these institutions of higher learning have placed a premium on space and faculty. These institutions cannot probably meet additional demands and maintain standards of excellence without direct facility and faculty funding to initiate such programs.

I believe that legislation such as that suggested by H.R. 11322 could, if modified and made more explicit, represent a real landmark in needed social legislation. But the modifications would, I believe, require fuller discussion of the bill both within and without government than can be possible through the current schedule of hearings and possible congressional action. Since the intent of the bill is clearly important, I would like to suggest, respectfully, in the best interest of our Nation and in particular the children whom the bill might so vitally affect, that the hearings on this bill be carried over to the next legislative session so that the bill can be more fully discussed and those changes made which might allow the intent of the bill to be implemented more effectively.

Very truly yours,

RALPH J. WEDGWOOD, M.D.,
Professor and Chairman.

OUR MOST NEGLECTED MENTAL HEALTH PROBLEM: EMOTIONALLY DISTURBED CHILDREN

(By Mike Gorman, Washington, D.C.)

Last year, the American Psychiatric Association and a number of organizations in the field of child psychiatry sponsored two conferences on planning mental health services for children in the new community mental health center program. As a prelude to their recommendations, they released what they regarded as the most reliable current data on the size and nature of the problem.

There is a seeming national consensus that there are about 4 million children under the age of 14 who are in need of some kind of psychiatric intervention because of emotional difficulties. Of this number, anywhere from a half million to a million children are so seriously disturbed that they require immediate psychiatric help.

Very few of these children are getting the treatment which they need. Although close to 300,000 children were seen in outpatient psychiatric clinics in 1963, in most cases the "treatment" consisted of one or two diagnostic interviews followed by the admission that there were no facilities in the particular area for prolonged treatment.

We have some rather sketchy data which indicate that about 14,000 of these children are confined in State mental institutions. We also know, on the basis of a trend which has been developing over the past 5 years, that by 1970 the number of children aged 10 to 14 hospitalized in these institutions will have doubled.

But those of us who visit a number of State hospitals each year are convinced that these estimates do not reflect the full extent of hospitalization for childhood mental illness. Furthermore, applications to the National Institute of Mental Health for hospital improvement grants over and over again include detailed presentations which document the point that an amazingly high percentage of their long-term residents were first admitted as children or adolescents.

For example, an analysis of a 5,000 bed State hospital at Tuscaloosa, Ala., reveals that more than half of the male schizophrenic group who have been in that hospital 20 years or more were first admitted between the ages of 14 and 29. The Alabama report estimates that 1 in every 4 young patients "can anticipate being permanently hospitalized for the next 50 years of their lives."

It is my contention that the increasing flood of these young children in the hospitals is not being reflected in existing national data.

If time permitted, I could cite a wearying array of material on the alarming rise in the number of children hospitalized in New York's massive mental institutions—material gained in visits to these institutions over the past 20 years, and additional data gained over the last 4 years as a member of the National Mental Health Advisory Council reviewing hospital improvement applications from this State.

For example, the children's unit at Rockland State Hospital—the second one in the ocuntry started in a State institution—was once of manageable size and compassionate proportions. On my last visit to it—approximately 4 years ago—I was completely discouraged by the overcrowding and the lack of trained staff. Today, there are 700 children under the age of 16 at Rockland State—10 percent of the entire hospital population—and plans have already been completed for an additional 400-bed unit at that hospital to handle the rising tide of disturbed children being admitted annually. At Kings Park State Hospital out on Long Island, there are 360 children aged 5 to 15 residing in separate treatment units, and another 132 children between the ages of 16 and 18 who are jammed into adult wards because there is no program for them elsewhere. And so on, and on.

On innumerable previous appearanecs before legislative committees in New York State, I have inveighed against the building psychosis which seems to obsess all who have any responsibility for the running of the hospital system. More than a century ago, New York was alone among the States in violating the 200-bed celling for mental hospitals adopted by the Association of American Medical Superintendents, and you have been adding to your psychiatric real estate at a fantastic pace ever since.

In 1956, in a talk which I delivered in Syracuse to the First Annual Conference of the New York Community Mental Health Boards—I haven't been invited back since—I accused my native State of being "freighted down with an excess baggage of outmoded concepts concerning the time and place for psychiatric treatment. There is a really desperate need for flexibility and imaginative experimentation in the handling of children who are mentally ill. Sending an emotionally ill child off to a children's unit in a State mental hospital, or even to a full-time private residential treatment center, is frequently the first step in the abandonment of that child. He is frequently cut off from the strength and warmth of his family, his community, and the children among whom he lives."

Two years later, after an 11-day tour of mental hospitals both upstate and downstate, I reported some of my findings to the annual convention of the League School for Seriously Disturbed Children here in this very hotel:

"Where are some of these troubled children?" I asked the audience. "Scores upon scores of them are in your State mental hospitals, crowded on wards with 80 to 100 very sick adults. To any of you who have any illusions about the type of 'treatment' given children in these Gothic institutions, I respectfully suggest that you talk to some of the children in these hospitals. I have, and it is a very bitter experience."

I cannot truthfully claim any success then in breaking through the walls of official and public apathy. The real estate boys up in Albany were busy spending Tom Dewey's final legacy—a $350 million bond issue passed in 1954 designed

to add thousands and thousands of additional beds to the existing psychiatric real estate.

The situation is a little different today. You now have a mental hygiene facilities improvement fund created by the 1963 legislature. This real estate agency has at its disposal $500 million borrowed from the State housing fund at a considerable rate of interest. More than a year ago, the leadership in Albany announced that it intended to add an additional 30,000 beds to a system which already has more brick and mortar per 100,000 people than any State in the country—twice as much, for example, as California, which refuses to build any more custodial beds. Under public pressure, there has been some modification of this building orgy, but the situation still bears careful watching.

This passion for building—combined with severe shortages of psychiatric personnel—has caused lifted eyebrows among many of the leaders of the psychiatric profession. As one of America's most renowned psychiatrists put it recently:

"They must have discovered a new therapy in New York State. The mental patient walks into a building and stands there. There is little or no staff because of personnel shortages. But the patient goes into the empty building every day for an hour and, after a few weeks, comes out cured."

But there is room for hope. Listen my children and you shall hear of the whirlwind tour of a man without fear. Even in the far country west of the mighty Hudson, we have heard of the forced march of Senator Kennedy through Willowbrook and Rome. Unseemly cracks are being exposed in the Victorian real estate and, if this trend accelerates, we citizens may have a real voice in deciding just when and where we want our loved ones treated.

I have a respectful suggestion for those of you interested in planning a constellation of children's services tailored to the individual needs of the child rather than to the mammoth appetite of the building contractors—go to the "backward" State of Michigan which is located in the unsophisticated heartland of America and has les than half the population of the Empire State. I spent a day just a few weeks ago touring its facilities for children, and I came away increasingly bitter at the contrasting picture here in this State.

Hawthorn Center—entirely State-supported—was opened in 1956. It is 20 minutes from downtown Detroit on a wooded 25-acre spread. It handles approximately 80 children on an in-patient basis. They are housed in gaily furnished cottages—the walls are decorated with fascinating paintings done by the children. There are individual rooms for those who need them; the rest are housed in rooms containing either two or three beds. The top floor of each cottage boasts a massive living-recreation room dominated by a floor to ceiling stone fireplace. For the general use of the children, there is a big swimming pool, gymnasium, library, recreational patios, etc.

The day school—presently housed in one of the cottages—will soon move into a beautiful new building. It will be able to handle about 100 children who will be transported daily to and from the school. It has the latest in teaching equipment, including a modern science building. Furthermore, the new school will initiate a pioneer program for children of nursery school age.

But the key to the entire Hawthorn program is personnel—reams of professional and subprofessional people, and all of them able to converse in English. There are 13 full-time child psychiatrists, all of them certified or board-eligible. In addition, there are 12 psychiatric residents, plus countless social workers, psychologists, research associates, etc. There are 25 specially trained teachers or student-teachers of the emotionally disturbed—Michigan was the first State in the Nation to develop a special certification program for teachers of emotionally disturbed children.

It costs money to run this kind of a program—about $2 million a year in State taxes. Expensive? Compared to New York's grandiose $500 million building program, it's a drop in the bucket.

Hawthorn Center is not the solitary jewel in a shoddy crown, it is merely one gem among many in the Michigan program.

The Lafayette Clinic in downtown Detroit—entirely State-supported and one of the finest psychiatric facilities in the Nation—has a superb unit caring for 45 children. It has a staff of eight full-time and seven part-time child psychiatrists. In the very near future, it will open two halfway houses especially designed to bridge the gap between residential treatment and return to school and home. At the University of Michigan, the Children's Psychiatric Hospital—opened two decades ago—has a unit caring for 54 children staffed by 12 full-time and 3 part-time psychiatrists.

In addition, Michigan is currently embarked on a program to build small residential units at each of its State hospitals with close ties to the surrounding communities through the use of additional day care centers at the hospitals. I talked to State mental health officials in Michigan, and they assured me of their determination to hold each of these units down to less than 100 children—thus avoiding the dehumanization which has taken place here and in other States.

Over and above being a pioneer in university programs for the training of teachers of the emotionally disturbed, Michigan reimburses all school districts which establish special classes for these children.

In addition to the State mental hospitals across the country, there are a handful of residential treatment centers which care for about 2,500 children a year. In 15 of our States there are no such facilities, either public or private; in 24 of our States, there are no public units to care for children from low- and middle-income groups.

To sum up, it is an undeniable fact that there is not a single community in this country which provides an acceptable standard of services for its mentally ill children running the spectrum from early therapeutic intervention to social restoration in the home, the school and in the community.

Furthermore, practically no community in this country has reliable data on the number of emotionally impaired children. Deeply aware of this deficiency, the National Mental Health Advisory Council has awarded several grants recently to organizations competent to survey the extent of the problem. From my point of view, the key grant was awarded to Dr. Thomas Langner and his associates at the New York University Medical Center for a 3-year sampling study in Manhattan of the extent of psychiatric impairment among urban children. The survey got underway last month, and we are confident it will turn up the statistical raw material which is a necessary prerequisite to intelligent planning.

As a nation, we now have a precious opportunity to create a new pattern of appropriate services for these disturbed children. Every State in the country is now engaged in completing plans for new community mental health services; it is incumbent upon all of us to insist that services for children be an integral and major segment of these new community mental health centers.

I have received the final version of the New York master plan—all seven volumes of it—and I cannot resist the observation that you again lead the rest of the country in compulsive gigantism.

However, I must admit in all fairness that the underlying thrust of the report is sound—thanks to a revolt of the citizen planners, culminating in the battle of Saratoga Springs this past July, against another Albany-dictated "master" real estate plan. Essentially, the citizen plan proposes the creation of 150 community mental health centers covering all parts of the State by 1975. But again a word of caution: a shiny new center buidilng will not cure one child, even by osmosis. The critical need is the training of professional and nonprofessional workers in sufficient numbers to reach these children in a direct, meaningful way. I have grown weary of submitting master plans for training to the hierarchy in Albany. This is a job the reinvigorated New York State Association for Mental Health and the allied organizations represented at this historic Congress must tackle; if you do not, the whole new community center concept will be buried in architects' blueprints, bricks, mortar, and the like.

I would like to underscore the hope that those of you who are designing these new services divest yourselves of any rigid notions as to what constitutes the "proper" facility for an emotionally disturbed child. Beyond an agreement with a position enunciated in a recent article in the American Journal of Psychiatry that hospitalization in most State mental institutions adversely affects the child because "he promptly loses the right to be a child," I would plead for a wide variety of services suited to the individual needs of each child and to the capabilities of each community.

There is a real danger, for instance, that we will overemphasize the need for residential treatment centers for children, thereby losing sight of the vast majority of disturbed children who do not need such 24-hour hospitalization. In this country, we tend to overemphasize hospitalization as the only way of handling a child who does not conform to the fierce and often conflicting demands of present day living. Psychiatric leaders in many other countries have been quite critical of our inability to handle these children in other ways than by total confinement. We do ourselves a great disservice when we push many of these mildly disturbed children out of the community and into a faceless institution.

You do it here in New York, and I have been an eyewitness to it. Five years ago, I rode a bus taking a group of children from the psychiatric wards at Bellevue—where they had been mixed in with the sickest of adult psychotics—to long-term confinement on the overcrowded wards at Rockland State, and I still shudder when I think of the heartlessness and callous extrusion involved in both the Bellevue and Rockland experiences.

Most of you here today are probably not familiar with "A Study of Children Referred for Residential Treatment in New York State," a report made in 1959 by the distinguished child psychiatrist, Donald Bloch, and his associates to the New York State Interdepartmental Health Resources Board. It is the most incisive description, in all the mountainous child psychiatric literature, of the almost hysterical American urge to shove the troubled child out of the community and into any kind of residential facility, however unseemly. Here is what the Bloch report had to say about what it castigated as "the inexorable trend toward the institutionalization of these children":

"Communities principally look to residential treatment for a solution to the problem of the child who needs placement. In this view of the matter, treatment is a secondary issue. In our study, although less than one-quarter of the children referred to residential treatment centers were admitted, well over 90 percent were ultimately placed in some kind of institution. For these children, the situation had passed a critical point. The forces pushing the child out of the community, the degree of illness, the deterioration of the family, the pathogenic factors in the environment, had overwhelmed the capacity of the community to keep the child living in it.

"Second, we were impressed throughout the study with the terrible cost levied by the lack of an overall, unified, consistent plan for providing service to the seriously disturbed child. For the child with relatively minor difficulties, a single service may suffice to correct the problem. The children being considered here have all areas of their lives riddled with pathology and almost always need multiple services which are coordinated with each other. In general, services to these children are provided in discrete packages; agencies are overspecialized and separated from each other by a referral barrier that is often resistive and sometimes impervious. School refers to court, court to clinic, clinic to placement agency, and so on. Once admitted to the hospital or treatment center, it is difficult or impossible to have the child accepted by an outpatient community agency. Integrated programs of service at the clinical level are literally unheard of."

Dr. Bloch has continued his studies in the handling of disturbed children in New York State, and I have been informed by project officers at the National Institute of Mental Health that his current findings serve to underscore, in greater depth, the original findings he transmitted to State officials 6 years ago.

We need a more flexible, doctrinaire approach to the whole problem of the disturbed child. It isn't all just black or white—successful adjustment or an institution several hundred miles away. It is in the intermediate areas where we can do the most effective job for the majority of these children—in the schools, in the mental health clinics, the day care centers, the courts, and so on. By developing the screening and treatment potential of these familiar agencies, we don't run away from the problem—we face it and we bring many untapped human resources to it.

I am particularly concerned with the enormous untapped potential of the schools in handling emotionally disturbed children. The Joint Commission on Mental Illness and Health, which was unable to devote sufficient attention to the problems of childhood mental illnesses because of a shortage of funds, did issue a monograph titled "The Role of the Schools in Mental Health." It is quite an important document, laying the greatest emphasis upon the therapeutic role of the schools because of their central position in the child's life. In the study itself, there are key sections devoted to skilled nursery education, the spotting of difficulties in kindergarten, the need for immediate intervention when basic learning difficulties become apparent.

To those of us who suggest these new approaches in settings other than rigidly psychiatric ones, there is the usual retort that we can never train enough psychiatric manpower to do this kind of job. I agree. It is sheer folly to think that we can ever train enough personnel to give individual psychotherapy to every disturbed child. It would not only be inadvisable to do so in terms of available manpower, but I submit that it would be totally unwise.

As the joint commission report noted, we must add to the skills of those who deal most directly and continually with the child.

For the past 4 years, an experiment has been going on in Tennessee and North Carolina in which selected teachers are being taught psychiatric skills and then used as teacher-counselors in specialized schools for disturbed children. This experiment follows the pattern of the French experience in which more than 3,000 of these teacher-counselors play a key role in working with emotionally disturbed children in that country. Called Project Re-ED, the philosophy of its originator is stated very forcefully in a recent description of the first 4 years of the experiment:

"The problem of providing for emotionally disturbed children is a critical one requiring bold measures. Society will not continue to tolerate the assignment of disturbed children to detention homes, to hospitals for adults, or to institutions for the mentally deficient * * *. The United States does not have and will not be able to train a sufficient number of social workers, psychiatrists, psychologists and nurses to staff residential psychiatric facilities for children along traditional lines. It will not be possible in the foreseeable future, with manpower shortages becoming increasingly more acute, to solve the problem of the emotionally disturbed child by adhering to limited patterns * * *. For effective work with children, the worker's personal attributes weigh more heavily than his professional knowledge and technical skills. Re-ED represents an explicit break with the predominant philosophy of developing professional people in our society, a philosophy that minimizes individual differences and relies most heavily on extensive and expensive periods of training to assure competence."

While it is too early to make definitive comments on the success of these experiments, there is every indication that it is preventing the institutionalization of many children. The average stay of pupils at the specialized schools in Tennessee and North Carolina is about 4 months; the close and continuing liaison between the specialized schools and the regular school systems in the area provides a natural transition back to full-time schooling when it is deemed advisable.

In order to work more effectively with children in the schools, we need many more teachers specially trained to work with those who are emotionally disturbed. The U.S. Office of Education recently estimated that we need approximately 100,000 of these specialized teachers right now to staff classes of not more than 10 children each for the more than 1 million children it estimates need these individual psychological and educational services. How many do we have now? The best estimate I could get out of the Office of Education was less than 3,000.

I am therefore delighted to report to you that the mental health center staffing legislation which passed the Congress this year also included a tremendous boost in programs for training teachers of the handicapped. Over the next 4 years, $120 million is authorized for this purpose and, since the greatest need is for teachers of the emotionally disturbed as pointed out in the Senate report on the legislation, I am confident that for the first time in our history we will begin to close the gap between the supply and the insistent demand.

The aforementioned legislation also includes $41 million over the next 4 years in support of research and demonstration projects designed to produce more effective methods of teaching and reeducating the handicapped, with a new proviso allowing Federal support for the construction of such experimental facilities.

We can, therefore, look forward in the coming years to a number of new approaches as fruitful in originality as the George Peabody College experiment in Tennessee and North Carolina.

There are so many who could help. For example, as the joint commission report notes, there are 6,000 pediatricians in this country but the great majority of them lack sufficient psychiatric orientation to capitalize on their professional potential.

We have just begun to scratch this great potential of people who can help people. In Washington, D.C., we are using mothers whose own children have completed their education. They are given a year's training in psychiatric concepts and then work on the psychiatric service at Children's Hospital.

In many cities in the country, trained youth workers are going into neighborhoods where trouble exists and applying their knowledge and affection to those children who are in revolt against the "norms" of modern society. As the noted psychiatrist Dr. Kenneth Appel has pointed out, there is a deep and tragic irony in the fact that millions of Americans—unemployed, retired, or otherwise rendered unproductive by society—seek a meaningful role in life, while

millions of our children, our mental patients and others sunk in despair seek a helping hand. Dr. Appel pleads for a linkage between this great untapped human potential and the vast needs of the troubled and submerged in our democracy. Automation may eventually provide most of the material wants of our society, but it cannot ever replace the hand-to-hand and heart-to-heart relationship which is at the core of the helping services.

During this past summer's experience with Project Head Start—which reached more than 600,000 children under the age of 6—thousands of adults and children served as volunteers. As this program resumes this fall and winter, the goal is to reach down to children 3 years of age and to expand voluntary and community participation.

The first several thousand trainees of VISTA—Volunteers in Service to America—are now serving in all regions of the country. A sizable percentage of these dedicated people have chosen to work in the mental health field and, having addressed several groups of VISTA trainees, I can assure you they will make wonderful workers in the vineyard of childhood mental illness.

There have been exciting developments in other areas of childhood mental illness which have highlighted the necessity for a comprehensive survey of existing needs and the selection of a set of priorities for the next decade and beyond.

The first incisive plea for such a national survey came in a resolution adopted by both the American Psychiatric Association and the American Academy of Child Psychiatry as a direct result of a 1963 conference on training needs in the field of child psychiatry. Noting that the survey of adult mental illness by the Joint Commission on Mental Illness and Health had led to a long-needed overview of the problem which resulted in positive recommendations and subsequent legislation, the conference adopted the following resolution:

"In sum, it was the consensus of the Conference that what the Joint Commission had done by way of presenting the Nation with a program to combat mental illness as a whole should now be done in comparable manner and style for the problem of childhood mental illness. The Conference members recognized and accepted their obligation to inform the public of the needs of children and registered their opinion that a national survey should be conducted under the leadership of representatives of the entire spectrum of child-care professions in the field of mental illness and health. They pledged to work for the launching of such a study, looking to the formulation of a national program to combat childhood mental illness and to secure the wherewithal to carry out such a plan."

At the March 1965 meeting of the National Mental Health Advisory Council, the membership of that Council voted unanimously to request the National Institute of Mental Health to explore with all national organizations interested in the emotional health of children the possibility of a joint commission survey comparable in depth and scope to the Joint Commission on Mental Illness and Health study.

I am happy to report that several exploratory meetings have been held, and that a Joint Commission on Mental Health Services for Children has been incorporated.

Legislation to provide $1 million over a 2-year period in Federal support for this survey was passed in the present session of Congress, and it is hoped that the Commission can get going with its very vital work within the very near future.

The quest for a national blueprint of mental health services for children is of vital importance, but it is no substitute for continued efforts at the State and local level to meet the immediate and pressing emotional problems of so many of our children.

I am reminded of the statement made several decades ago by Katharine F. Lenroot, one of the great architects of the U.S. Children's Bureau:

"We are prodigal in our dreams for children, but often miserly in our deeds. And that, I suspect, traces back frequently to an elementary difficulty all of us have at times in knowing how to get from where we are to where we want to go."

We must now move boldly at the local, State, and national level in identifying a broad set of objectives which will get us "from where we are to where we want to go."

I am confident that the Joint Commission on Mental Health Services for Children is the appropriate vehicle for this long-delayed journey into the future, and I know that all of you here today will work with us in other parts of the country to see that it fulfills its terribly important mission.

WILLIAMS ELEMENTARY SCHOOL,
Tampa, Fla., October 19, 1965.

GENERAL SUBCOMMITTEE ON EDUCATION,
Congress of the United States,
House of Representatives, Washington, D.C.

GENTLEMEN: School systems in different parts of the country have been experimenting with various plans for meeting the problem of preschool education through the third grade.

The coalescence of ideas toward the improvement of pupil performance will render new vistas in the improvement of educational opportunities for children. Many of the pressures of cultural deprivation create such an impact on social and individual adjustment that only through your proposed developmental program are we going to deter learning disorders that foster delinquency.

By launching out into the study of a variety of methods we will provide children with wide, rich, and varied experiences. Even though many factors suggest that children should have acquired fundamental reading habits and skills before entering upon the program of the establish "catchall" barriers that would tend to perplex the problem of the educational underachiever.

The adoption of vital and necessary modulation of remedial instructions will provide for individual differences of pupils and open an emotional outlet of expression heretofore prohibited by social inveteracy.

Having worked in public education for the past 16 years and knowing how great the need for a bill of this kind is needed, to provide a program of Federal assistance to elementary schools, I feel keenly obligated to write in behalf of this legislation. (H.R. 11322).

Very sincerely yours,

WILLIAM H. KAY, *Principal.*

FLORIDA HOUSE OF REPRESENTATIVES,
Tallahassee, October 15, 1965.

Hon. CARL D. PERKINS,
Chairman, General Subcommittee on Education,
House Office Building,
Washington, D.C.

DEAR CONGRESSMAN PERKINS: Thank you so much for your invitation to appear before your subcommittee and testify relative to H.R. 11322 introduced by the Honorable Sam Gibbons. I regret that I have a trial commitment scheduled for Tuesday and Wednesday, October 19 and 20, 1965, and for this reason will be unable to be present in Washington. However, I would like by means of this letter to inform you and the members of this committee that I am very much in accord with Congressman Gibbons' objectives as outlined in this bill.

Over the years it has been my experience while engaged in the practice of criminal law both as a prosecutor and as a defense lawyer that adults in conflict with the law invariably have social maladjustments of varying degrees of seriousness which contributed to their violation.

As you know, the vast majority of criminal cases on the dockets of the criminal courts throughout the country involve defendants who plead guilty and who have long records of social maladjustments usually manifested through prior criminal records. I am convinced further that as our population continues to grow and the incidence of crime continues to increase, we must awaken to the fact that we cannot continue to build prisons or obtain prosecutors and judges as economically as we can get to the root of our problem.

Prison is at best a holding action. Prevention is a positive uprooting of the cause. Because our schools are the logical place for the early detection of emotional maladjustment in children I believe that trained personnel in our schools could afford the most logical beginning point in attempting to discover potential delinquents and criminals while there still is time and hope for them and society.

So, I recommend wholeheartedly to your subcommittee that you give favorable consideration to Congressman Gibbons' efforts on behalf of prevention of crime and delinquency as manifested by H.R. 11322.

Sincerely yours,

LOUIS DE LA PARTE, Jr.

STATEMENT OF J. HARRY LABRUM, ESQ., PRESIDENT OF THE BOARD OF EDUCATION, PHILADELPHIA, PA.

I am J. Harry LaBrum, president of the Board of Public Education of Philadelphia, Pa. May I express my appreciation to the Subcommittee on Education for the opportunity of stating my views on the legislation cited as the "Elementary and Preschool Child Development Act," H.R. 11322.

It is indeed gratifying to know that Congress has recognized the great importance of identifying at an early age, in children at the elementary and preschool level, the serious problems of disruptive behavior and emotional handicap which lead to the many problems relating to educational underachievement and school dropout.

The three-pronged approach to this problem under the administration and supervision of the Advisory Council on Elementary School Child Development and the State educational agencies is a valid one.

The Philadelphia public schools have for many years had an excellent counseling and counseling teacher service for children needing help in their adjustment to school and to living with other people. Because of lack of funds, however, and scarcity of trained personnel in this area of early detection of disturbance in children, the preventative phase of this program was never really inaugurated on a citywide basis. Individual experimentation and research with families and agences dealing with very young children have presented some conclusive evidence of the importance of working in this area, but the previously mentioned two factors, lack of funds and scarcity of trained personnel, hindered a much-needed citywide emphasis and research program.

Title II, section 201, which now enables school systems to employ child development specialists for service in the elementary schools under a Government grant will be a great step forward in this area in getting at the root of behavior. Understanding the young child, recognizing some of his primary and secondary behavior patterns, building a school program which takes these behavior patterns into consideration, guiding the child toward his maximum personal achievement in a society where he makes a positive contribution, and involving his parents in this process may divert into positive channels much of the later negative behavior.

Title III, section 301, which establishes fellowships for the training of the child development specialists would provide a much needed corps of trained individuals to work with understanding and skill in the early childhood area.

Title III, section 302, which makes grants available to local school systems for the purpose of conducting training demonstrations and short-term workshops for the purpose of familiarizing teachers, principals, and other personnel in the elementary schools with the coordinated and effective utilization of child development specialists to prevent learning and behavior disorders in elementary schoolchildren is the third imperative in rounding out the project. Involving parents in some of these vital workshops for their improved understanding and functioning would deserve great consideration.

The elementary schools in Philadelphia would certainly profit by receiving a financial appropriation to inaugurate this very basic project on a citywide level among our young children, their teachers, and parents. In the long run, however, the whole school system and city would benefit because of the undergirding and strengthening of human resources in our community.

THE UNIVERSITY OF CHICAGO,
THE DEPARTMENT OF EDUCATION,
Chicago, Ill., October 18, 1965.

Hon. CARL D. PERKINS,
Chairman, General Subcommittee on Education, Rayburn Building, U.S. House of Representatives, Washington, D.C.

DEAR MR. PERKINS: I regret that prior commitments make it impossible for me to attend the hearings on H.R. 11322 on October 19 and 20. I would very much have liked to participate in these hearings and to present my views on this legislation.

I am very much in sympathy with the declaration of policy stated in this bill under section 2. It is an admirable statement, and I do hope that the various parts of the bill will further the major goal you have set in this policy statement. With regard to title II, I believe it is a very good idea to provide for the

use of child development specialists in the elementary schools. I hope that this will extend in most of the States to the nursery school and kindergarten levels. It is my belief that a great deal can and must be done in the age period, 4 through about 8 or 9 years. If it is at all possible, I think it would be useful to be more specific in your statement to include nursery school and kindergarten.

Your title III with regard to training represents an excellent statement, and I hope that it will help secure the kinds of persons needed in this work. I wish that the qualifications included in the instruction and training not be as precisely stated as you have on page 16 of the bill. I believe people should come to this problem from many different fields, including social work, sociology, psychology, and education. It would be well to state the goals to be sought in the development of these workers and not to specify the particular types of courses and competence that a training program should emphasize. It would be most unfortunate if these specifications resulted in too limited a range of training and competence. Rather, there should be a variety of ways in which the child development specialists should be trained and there should be competition among the different training programs to provide the best qualified persons for this work.

I most heartly favor your bill H.R. 11322. I find that the provisions of this bill are, in general, compatible with the views I have expressed in the book, "Stability and Change in Human Characteristics." Especially in the last chapter of the book, I have stated a number of needs and emphases which are consistent with the provisions in your bill.

I wish you success in getting this bill passed, and I am sorry that I cannot be in Washington to testify. Thank you for the invitation to appear at the hearings.

Sincerely,

BENJAMIN S. BLOOM,
Professor of Education.

THE UNIVERSITY OF WYOMING,
Laramie, Wyo., December 28, 1965.

Representative CARL D. PERKINS,
Chairman, House Committee on Education and Labor,
U.S. House of Representatives, Washington, D.C.

DEAR MR. PERKINS: I understand that in the near future your committee will begin hearings on proposals for elementary and preschool child development specialists, with basic concern being focused on Congressman Gibbons' bill, No. H.R. 11322 and various other versions of the same legislation. I have studied Congressman Gibbons' bill and feel that he is recognizing an urgent need in our public schools. I do feel, however, that there are some aspects of the bill which do need some more careful attention before it could be enacted into law. I hope you will not consider me presumptuous to comment on some of these points.

First of all I feel that the bill does need within it some broad definition of the "child development specialist." As I read the bill, I believe it is designed to cover child development specialists of various fields of specialization such as guidance, school social work, school psychometrist, school psychologist, etc. Unless a definition is stated which does define the scope of this particular job, however, I feel we might face some real problems of special groups attempting to get a definition of the term too specifically narrowed to one area of specialization. I feel the general proposals of the bill are sweeping enough and extensive enough to provide preparation in many of these areas and to encourage the development of some combination type programs in some schools.

The second point which concerns me is the scope of elementary school program which is covered by the bill; namely kindergarten through grade 3. If the bill is enacted in this form, I think it will serve primarily as a preparation program for personnel in larger city schools and will be not only detrimental, but perhaps damaging, in drawing away available personnel from medium-size and smaller schools such as those most frequently found in areas like the Rocky Mountain region. In most of the schools of this size an elementary specialist in any of the child development fields normally serves as a consultant for the whole scope of elementary school service from kindergarten through grade 6. Should this new bill be limited just to kindergarten through grade 3, we would leave a real gap at the fourth, fifth, and sixth grade levels in terms of specific preparation or

coverage under any existing programs other than the guidance institute section of NDEA. This section, in turn, seems to be limited in support, since there have been no increase in funds provided for it in the last two amendments to the act, and many people seem to feel that there would be no further extensions of title V–B.

Another aspect which might be recognized somehow in the legislation would be the recognition that many small schools utilize school counselors, guidance consultants, psychologists, and others to serve the entire grade range from kindergarten through 12. Very often these people have their basic preparation in secondary school service, with supplementary preparation at the elementary level. Some provisions for summer institutes and for supervised-in-service practicum expefience or internships for some of these people to broaden the scope of their qualifications to include the lower elementary grades might be an excellent way to expand this type of service to many of the students in sparsely populated portions of the country. I am sure that many of us in counselor education programs would feel that such an addition to the Gibbons' bill would make it much more workable and would meet some of the needs for these specialists much more quickly than the straight fellowship provision as written in the original bill.

I hope these comments may be of some value to you, and would be happy to expand on any of them if you would wish further comments from me.

Thank you for your consideration.

Sincerely,

LYLE L. MILLER,
Department Head, Guidance and Counselor Education, and Director, 1965–66 Academic Year NDEA Counseling and Guidance Institute.

GEORGE PEABODY COLLEGE FOR TEACHERS,
Nashville, Tenn., December 21, 1965.

MR. CARL D. PERKINS,
Chairman, General Subcommittee on Education, Committee on Education and Labor, U.S. House of Representatives, Washington, D.C.

DEAR MR. PERKINS: I am pleased to have an opportunity to comment on H.R. 11322, the Elementary and Preschool Child Development Act.

Let me say first that I am writing as an individual and not as a representative of an organization. I am a psychologist who has long been interested in children. I am principal investigator for Project Re-ED, an NIMH-supported program to develop a new pattern of residential care for emotionally disturbed children. I am also director of the John F. Kennedy Center for Research on Education and Human Development at Peabody College, a center concerned primarily with research on children.

I strongly support the proposed legislation. It remedies a crucial deficiency in current strategies for identifying and assisting children who are in trouble. At the present time we wait until problems have developed to the point that children are disruptive of school or are so handicapped by emotional difficulties that they cannot function effectively. Intervention at this late date is more costly and probably less effective. The proposed legislation would make it possible to discover difficulties at their incipient stages and to give assistance at a time when it is most likely to be effective.

I would urge that the ratio of child development specialists to children be studied in the light of the need to have a worker assigned to a specific school. If the ratios are such that a worker has to serve two or more schools, his effectiveness will be seriously impaired. Experience with other programs indicates that a "floater" never develops the identification and the intimate knowledge of children that will be necessary for a child development specialist to do his job well.

The success of the program will depend almost entirely on the adequacy of selection procedures and on the quality of training programs. Once the child development specialist is on the job, he will work with minimum supervision. Safeguards need to be erected against hastily mounted training programs in institutions of marginal quality. I would urge that arrangements be made for some 10 or 12 selected institutions to devise model selection and training programs to serve as an example for universities that would join the effort at a later phase. I would suggest a conference of the directors of the several training programs to encourage the development of functional uniformities and planned diversities.

With adequate models available, it might be possible to achieve and sustain high standards of selection and training in the total program effort.

A problem of major concern will be the provision of supervision for the child development specialists. In some few fortunate circumstances they may work in a school system that has a pupil personnel program sufficiently strong to provide leadership by school psychologists and other highly trained specialists. However, this cannot be relied upon because such people are in very short supply. I think the training programs should put very heavy emphasis on the responsibility of the child development specialist to obtain local consultation from psychiatrists, psychologists, social workers, curriculum specialists, and others when faced with a problem that exceeds his professional capacity. A sensitivity to limits of competence should be a major characteristic of the child development specialist, to be achieved through training programs. I would hope, then, that the law would provide him with funds to obtain local consultation. On such a basis, the child development specialist could avail himself of the best professional talent in his community, talent that would ordinarily not be available to him through staff consultation or supervision.

In the interest of the children of America, I strongly urge the passage of this legislation. I am sending an identical letter to Congressman Gibbons.

Sincerely,

NICHOLAS HOBBS,
Chairman, Division of Human Development.

STATE OF CONNECTICUT,
STATE DEPARTMENT OF EDUCATION,
Hartford, Conn., November 5, 1965.

Hon. CARL D. PERKINS,
Chairman, General Subcommittee on Education,
U.S. House of Representatives, Washington, D.C.

DEAR MR. PERKINS: Thank you for your considerate reply to my wire. Your letter arrived while I was working away from the office and this is the first opportunity I have had to reply to you.

I have several doubts about the wisdom or feasibility of proposed H.R. 11322 concerned with the provisions of child development specialists. The child development specialist appears to be essentially an elementary guidance person or the counterpart of the very good elementary school principal. The bill assumes that the child development specialist employed and controlled by State and Federal agencies is the answer to problems now being found among young children in both public and private schools. Even if enough such superhuman persons could be located or trained, I doubt if we would make more than a dent in the many problems which young children, their families, and teachers face in today's world.

The Elementary and Secondary Education Act allows for strengthening State departments of education through personnel and other resources. Along with vocational, OEO and Head Start funds, the development of programs for young children with staff and some orientation training are made possible—particularly for those in the "disadvantaged" categories. Funds are needed to extend and broaden such places and services to help assure better quality planning for more children in, or not yet in, school and to alleviate more of the existing problems. For example, only half of our States provide funds for kindergarten education and several States have no public school kindergartens—to say nothing of prekindergarten programs and services which, with quality planning, can contribute to realizing children's potential. Additional problems include class size, with teachers responsible for as may as 25 to 50 children in each of two sessions (or more) daily; adequate or acceptable space to house groups of young children; mature persons adequately oriented and educated to direct young children's programs and to coordinate the assistance of aids and volunteers.

If the sums of money envisioned for H.R. 11322 could be made available by the Congress, I feel they might better be used to assist school personnel or the local educational agencies to carry out the responsibilities intended for the child development specialists. Some possible ideas which come to mind are funds for inservice training of teachers through workshops, seminars, and other funds for substitutes, aids, volunteers (and for training and their orientation)

in order that teachers have time, help, and greater flexibility in studying the needs and behavior problems of children, in planning more appropriate programs for individual children, in working more closely with parents of the children; funds for staff, space, and facilities to reduce class size drastically, particularly in programs for primary age children and younger; funds for consultant, supervisory or coordinating staff (such as assistant principals, child development personnel or other) as needed locally to help assure more sensitive planning for children.

It seems to me there should be ways and the funds to enable constructive and more flexible planning locally to meet the needs of young children—rather than to sink large funds of money into the wide-scale employment of a specific group of people at the State level.

The Congress is to be commended for its increasing interest in education and the purposeful attempts you are making to provide constructive planning for children during these young, very crucial years.

Sincerely,

HARRIET C. NASH,
Consultant, Early Childhood and Parent Education.

STATEMENT BY FRANK CAPLAN, PRESIDENT OF CREATIVE PLAYTHINGS, INC., AND THE LEARNING CENTER, INC., PRINCETON, N.J.

Mr. Chairman and members of the subcommittee, I am Mr. Frank Caplan, acting secretary of the National Council for the Early Years. The national council has its headquarters in Washington, D.C. and was formed by citizens interested in early childhood education who attended the White House Conference on Education in July 1965. The organization was formed for the express purpose of focusing attention on legislation affecting early childhood education being proposed at the local, State and Federal levels of our government.

May I add my own voice in representing a growing membership of educators, parents, pediatricians, psychologists, and representatives of other disciplines interested in young children in praising the work of the 89th Congress and particularly the members of this subcommittee for the leadership it has shown in providing American education with the concrete support resulting from the passage of the Elementary and Secondary Education Act of 1965. In representing the National Council for the Early Years during these present hearings on H.R. 11322 I would like to refer for just a minute to the former hearings which lead to the ultimate passing of the Education Act of 1965. Testimony which was given at that time by Benjamin Bloom of the University of Chicago and myself, among others, began to focus the attention of Members of Congress on the importance of a child's early years. The intent of Congress to support the development of early childhood programs was ultimately made crystal clear in the language of the final version of the Elementary and Secondary Education Act of 1965 by specifically pointing out to superintendents of schools throughout the country that preschool programs could be financed under title I of the bill.

I would like to state again that the National Council for the Early Years praises Congress for drawing specific attention to the importance of these preschool programs. There is no doubt in any of our minds that our ultimate success in finding answers to the important questions now facing us concerning the education of culturally deprived children is to be found in our ability to reach children while they are very young and to develop educational programs of substance for these children.

We have seen a very dramatic phenomena take place during this past summer. Educators, representatives of the disciplines, volunteers, and community leaders have mobilized, under the auspices of the Office of Economic Opportunity, to engage over half a million young children in early childhood programs not available as recently as a year ago. Thousands of centers were opened, staffed and equipped within a few weeks' time. College campuses, the country over, became early childhood centers overnight for the training of personnel to work with the deprived. Perhaps for the first time in the history of early childhood education in this country, openminded people approached problems across disciplines. This has been good for the individual child in his center and it has been good for teacher education because we now face problems for which answers do not presently exist.

It is obvious that the Nation has shown a desire and an ability to act. The question now is: can we achieve quality as well as quantity in our approach?

You have before you the beginnings of another piece of legislation which is directed toward achieving quality, for it proposes development and financing of a training program for early childhood specialists and child development experts. Dr. Keith Osborn of Merrill Palmer, Mrs. Charlotte Winsor of Bank Street College and other learned early childhood educators have offered testimony concerning the role to be played by these specialists. May I add my own words to theirs in stressing the need for a long-range training program. One of the greatest deficiencies we now face is lack of leadership. Nearly half the States still do not have publically financed kindergarten programs. Over half of our State departments of education do not have departments of early childhood education. Our traditional course of action, in view of these facts, has been to divert educators from other levels to direct early childhood programs. We have just come through a summer where we have seen secondary school principals become administrative directors of Head Start centers. I do not mean to detract from the fine jobs these individuals have done; rather I mean to emphasize the paucity of trained early childhood specialists.

Members of this committee will need to consider many approaches to helping the country salvage its manpower through preventive education just as the medical profession has tended to emphasize detection of disease in its early stages. H.R. 11322 represents a step in this direction. It also indicates a determination on the part of this committee to provide for a comprehensive training program for specialists in early childhood education. This is the best guarantee that the work thus far completed will be perpetuated beyond the demonstration stage of our ability to mobilize large numbers of children in a hurry.

It is my belief and the belief of the members of the National Council for the Early Years that an equally impressive demonstration can be accomplished in the development of a strong early childhood curriculum. This will be, by far, more difficult and ultimately more costly than the program we have just experienced.

Our organization urges you to consider including into the bill a $25 million provision for research and program development for early childhood education. This could be achieved by the establishment in the Office of Education of an Early Years Research Council whose job would be to set up 10 to 20 regional interdisciplinary teams of specialists, curriculum leaders, industrial design workers, that would periodically review the challenge of early childhood environments and its program in light of new technological developments. It would actually examine the on-going curriculum of the preschools and kindergartens (I hestitate to use the word "curriculum" for such a self-choice environment) and it would provide guidelines, teacher training manuals and equipment recommendations for enriching the programs and environment of these important years.

Much mention has been made by experts like Dr. Lourie and others that emotional disturbances and will to learn are discernible in the first year of life. We in the national council feel that provision should be made in this bill for a grant to the Children's Bureau for a sum not less than $50 million for an extensive parent education program to make the home equally educationally inviting as is our nurseries and kindergartens. A child's first teacher is the parent and his first schoolroom is his bedroom, kitchen, and basement playroom. The kind of touch, taste, and manipulation environment that parents plan, the studied approach to the will and enthusiasm of children—all these have a profound influence on the will to learn and creativity of a child. Making provision for local community early years workshops where parents can share experiences and learn of better ways of handling very young children is imperative if we are to tackle their educational and behavior difficulties. It will take courage to face our present inadequacies. It will require gigantic funding. But it will save hundreds of thousands of children from dropping out of school before they reach the first grade. This last statement may shock you, but I firmly believe that a child has learned some of the most fundamental things he will ever know before his seventh birthday. If we do not reach him during these early years, we have lost him. If we do not reach him with the most able educators and child development specialists, we can produce, we may add to his already existing problems.

Congress and education face a harsh reality. Early childhood education has been the weak link in our Nation's educational system. It will require massive support to strengthen the field.

The National Council for the Early Years intends to use every means at its disposal to focus public support upon the program which members of this com-

mittee have begun to believe in so deeply. We compliment you again for your vision and urge you to rapidly report this bill out of committee so that it may secure congressional and nationwide support.

THE AMERICAN PARENTS COMMITTEE, INC.,
Washington, D.C., January 19, 1966.

Re H.R. 11322.

Hon. CARL D. PERKINS,
Chairman, General Subcommittee on Education, U.S. House of Representatives, Rayburn House Office Building, Washington, D.C.

DEAR MR. CHAIRMAN: The American Parents Committee wishes to record our support for H.R. 11322, the Elementary and Preschool Child Development Act.

At our annual national board of directors meeting held in New York City in November 1965, this bill was recommended for support, with its subsequent approval by unanimous vote.

The legislative intent is consistent with the guiding principles of the American Parents Committee—to provide each child with the opportunity for maximum individual development. The removal of emotional roadblocks to learning is, we feel, of critical importance. Early identification of individual problems can also mean significant achievement toward our national goal of juvenile delinquency prevention.

We would suggest, however, because of the total scope of the legislation, that implementation might be better placed under the direction of the Department of Health, Education, and Welfare, rather than the Office of Education. The 44 years of specialized experience available from the U.S. Children's Bureau of HEW would, we hope, lend valid support to this recommendation.

Respectfully,

BARBARA D. MCGARRY,
Executive Director.

U.S. HOUSE OF REPRESENTATIVES,
Washington, D.C., October 27, 1965.

Hon. SAM M. GIBBONS,
U.S. House of Representatives,
Washington, D.C.

DEAR SAM: Please excuse the delay in responding to your recent letter asking for my comments on your proposed Elementary and Preschool Child Development Act.

I could not agree with you more that early detection, correction, and prevention is necessary in order to effectively eliminate some of our most pressing social problems and social ills. I have always felt that programs for the purpose of direction and guidance for youth at ages 4 and 5 might be the most effective and I might add inexpensive way in which to prevent dropouts and delinquency at 14 and 15. You can be assured, therefore, that I will watch very carefully and enthusiastically the progress of your bill through the Congress.

There are a few questions which I would like to raise and a couple of suggestions that I would like to make. In the question and answer sheet which you have provided with the bill, you have specifically stated that it would not be desirable to have the States participate in the program by requiring State and local matching. After the work on the Teacher Corps proposal I am more convinced than ever that a matching requirement is a desirable provision. I realize that this sometimes results in an inequity in that the very neediest school districts are unable to provide sufficient matching and therefore are unable to participate in a program really designed for them.

One alternative to approaches in the past would be to possibly authorize 100 percent Federal subsidy in the first 2 years and gradually drop the matching rate to 50 percent in later years. I am not sure from a reading of the bill whether you intend this proposal to be merely a 5-year program or whether you intend it to continue on ad infinitum. Regardless of what is contemplated, I believe it still desirable to have some sort of State or local efforts.

In connection with the fellowship program or training program I am wondering if you might give consideration to what I consider to be a very desirable

feature incorporated into the fellowship program for teachers. You will recall that in addition to the grant of $2,500 per student the Commissioner of Education is also authorized to make grants to institutions for the establishment, strengthening, or improvement of the institution's graduate program. Since under your proposal institutions will be asked to conduct programs which may require considerable revision of existing programs, it may be that some support should be given to the institutions for the revision expenses or improvement.

As I said earlier, I intend to follow this legislation very carefully and you can be assured of my continued interest in the proposal.

Thank you so much for providing me with this opportunity to comment on a very fine piece of legislation. Congratulations!

Sincerely,

EDITH GREEN.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., October 12, 1965.

HON. SAM M. GIBBONS,
Member of Congress, Longworth Building,
Washington, D.C.

DEAR SAM: You were most kind to send me a copy of your bill on child development services. I would be very happy to introduce companion legislation and to testify on its behalf.

I have been extremely interested in the broad aspects of crime prevention and I feel as you do that much more attention is needed to the behavior of our young people.

Best wishes, and

Believe me,

Always sincerely,

CLAUDE PEPPER,
Member of Congress.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., October 11, 1965.

HON. SAM M. GIBBONS,
Congress of the United States,
Longworth House Office Building,
House of Representatives.

DEAR SAM: Thank you for the copy of your bill H.R. 11322, the Elementary and Preschool Child Development Act.

I heartily concur in the need for this legislation; I have prepared a companion bill to drop in the hopper immediately.

I appreciate your thoughtfulness in sending me the bill.

Sincerely,

GEORGE W. GRIDER,
Member of Congress.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., October 12, 1965.

HON. SAM M. GIBBONS,
Longworth Building,
Washington, D.C.

DEAR SAM: I am much impressed with your preschool bill and its many features of grave importance at this moment in our history.

You can count on my help.

Sincerely yours,

JOHN H. DENT,
Member of Congress.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., October 20, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR SAM: Your H.R. 11322 is a constructive piece of legislation and has a lot of thought behind it. I congratulate you on taking the lead in this difficult but very important field.

If there is any way I can help, I will certainly do so.

Best regards,

MORRIS K. UDALL.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., November 6, 1965.

Hon. SAM M. GIBBONS,
Longworth House Office Building,
Washington, D.C.

DEAR SAM: Thank you for your letter of October 8 concerning H.R. 11322. Please excuse my delay in answering you, but you know what a rush there was prior to adjournment.

I am very impressed with your Elementary and Preschool Child Development Act. You have come up with what may be the best answer to the crime and mental healt hproblems which are so prevalent among our young people. After studying the bill I can see the great deal of careful research which you have put into this piece of legislation. Congratulations on the insight you have shown into some of our country's greatest problems.

I would like to cosponsor this bill, and plan to introduce it during the early days of the second session. Please call upon me if I can be of further assistance.

Sincerely,

JOHN CONYERS, Jr.,
Member of Congress.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., October 23, 1963.

Hon. SAM M. GIBBONS,
Longworth Building,
House of Representatives,

DEAR SAM: In reference to your bill on education, H.R. 11322, which you sent to me for an opinion, I think this is an excellent approach to prevent future unfortunate occurrences and, with your permission, I would like to cosponsor this legislation.

Today's children will need all the help and guidance they can get, and those less fortunate ones will need even more.

Sincerely yours,

ELMER J. HOLLAND,
Member of Congress.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., October 11, 1965.

Hon. SAM M. GIBBONS,
House Office Building,
Washington, D.C.

DEAR SAM: Thanks very much for your letter of October 7 enclosing the information on your bill concerning a new approach to the prevention of crime.

This certainly sounds like an exciting idea and I want to compliment you on your tremendous efforts on this project. I think it is a fine idea and hope that that it will be well received by the Congress.

I have not yet had time to study your material in full detail but want to do so yet this week as I think I would like to join you as a cosponsor.

Best wishes.

Sincerely yours,

DONALD M. FRASER.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., October 27, 1965.

Hon. SAM M. GIBBONS,
Longworth Building, House of Representatives,
Washington, D.C.

DEAR SAM: Congratulations on your bill, H.R. 11322.

As usual I think you're probably on the right track. I shall follow the hearings on your bill with great interest and if I get any ideas I will discuss them with you before the bill comes up to the committee in executive session.

You know I have had to drop my membership from the Perkins subcommittee, but I have always had and will continue to have a very great interest in the education side of our committee.

Kind regards.

Cordially yours,

FRANK THOMPSON, Jr.

THE UNDER SECRETARY OF COMMERCE,
Washington, D.C., October 26, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR SAM: Thank you very much for your letter of October 22 and the very interesting material in connection with H.R. 11322, the Elementary and Preschool Child Development Act. I certainly agree with you that this is what the President means when he talks about the Great Society, and I deeply appreciate your taking the time and trouble to send this material to me.

If I can be of any assistance in the future, I hope that you will not hesitate to let me know.

My very best wishes.

Sincerely,

LEROY COLLINS.

UNIVERSITY OF MARYLAND,
COLLEGE OF EDUCATION,
College Park, November 18, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

MY DEAR MR. GIBBONS: Prior to receipt of your letter of November 2 I had heard of the Gibbons bill, and Dr. Eckerson of the U.S. Office of Education let me read her copy of it. My reaction at that time was delight and enthusiasm for the legislation you proposed. The only change in my reaction since then is toward greater delight and enthusiasm, coupled with an eagerness to support this legislation in any way I can. In token of that eagerness, I have prepared a statement in accord with your invitation, and this statement is enclosed. I add parenthetically that in the absence of guidelines related to the substance and length of the statement, I decided for brevity rather than length, therefore, for general rather than detailed substance. If some longer, more detailed observations are warranted, I shall be happy to prepare them.

My extreme interest in your proposal is probably demonstrated in the enclosed statement. It may be of additional interest to you to know that in 1964 the personnel services department, of which I am a member, began an experimental program to prepare persons titled child development consultants, whose duties in elementary schools are almost identical with those stipulated in your proposed legislation. Their preparation is not only experimental, but so are their functions, both aspects being under intensive research which will continue for 2 years. Incidentally, one of our next steps in our continuous exploration, innovation, and

demonstration might be an undergraduate, preprofessional program in applied behavioral and social sciences. With this kind of undergraduate program we could well prepare child development specialists with 1 year of additional graduate work, I am certain.

I am full of excitement about all kinds of developments, but I must bridle my pen lest I extend this letter beyond its purposes. As my communications friends would put it, I am vibrating in phase with you and your efforts. Be assured that I will help as I can if you see any way I can.

Yours truly,

RICHARD HILL BYRNE,
Professor of Education.

encl: Statement

STATEMENT BY RICHARD HILL BYRNE, ED.D., PROFESSOR OF EDUCATION, UNIVERSITY OF MARYLAND, AND DIRECTOR, EASTERN REGIONAL RESEARCH AND DEMONSTRATION CENTER OF THE INTERPROFESSIONAL RESEARCH COMMISSION ON PUPIL PERSONNEL SERVICES

Most any citizen is saddened by the knowledge of large numbers of adults whose behavior shows their denial of dignity as humans, demonstrates human distortion and waste, and even worse, harms other individuals, thus harms society. Those whose education, training, and profession is in some human development field, such as education, are not only saddened by this knowledge, but frustrated, because they know the origin of such undesirable behavior, and generally under present circumstances are unable to do but little about preventing or correcting such behavior.

It is equally frustrating for those in the humanistic field to see large sums of tax funds spent on correctional efforts, which often are too late to be effective, when they have known for years that if some similar amounts could be spent on prevention, less correctional funds would be needed. And that is only the minor point. To such persons the human value has always been paramount, thus the important outcome of preventive expenditures would be fewer humans denied the opportunities to become effective, contributing citizens; fewer denied the opportunity to acquire a sense of human worth and dignity.

I find H.R. 11322 a legislative proposal which I can support not just because it provides for actions which are sound on human development principles, but because it offers at long last some effective means for helping assure the positive development of human lives instead of attacking disabilities after they have been built into our citizens. A Public Health Service is warranted on the principle that it is better to maintain good health than just to correct bad health. In my view there can be no argument related to the establishment and maintenance of good educational development except supportive arguments. Corrective health services will always be needed, and so will corrective services in the area of behavior. The humanistically oriented persons pleads only for the setting up of all steps within the constitutional, democratic principles of our society which will minimize the need for remedial steps. He seeks such steps because he hopes that each child can become an effective human with an ever-evolving sense of his own worth and dignity as a human.

It is axiomatic to say that the major patterns of adult behavior are set by the sixth year, yet the positive influences of public education typically do not begin their potential contribution until the sixth year. If this fact of the early determiners of adult effectiveness were not commonly believed, there could have been no Operation Head Start.

Yet Head Start was but a mere start. At least it was a nationwide acknowledgement of the fact that one's experience up to age 6 set the tone and direction of much of one's later life. But such preschool experiences cannot be a one-time thing. It would not be enough to give undernourished children a good diet only in the summer. If they need good food, they need it all the time. Moreover is it enough to say that only certain children and families can benefit from and deserve preschool assistance? To say so is better than to say that no children and families should benefit. But why limit such assistance? If some children can profit, then all can. It is not enough just to lift some children up to the average when the average can always be raised—when the potential effectiveness as humans of all children might be increased.

The important role given to the pediatrician and to "well baby" clinics testifies to our conviction that getting off to a good start in life is essential. Few today would urge parents to go it alone with their new baby when help is available.

Some decades ago they had to go it alone because little was known of infant diseases. There were no pediatricians because there was no body of pediatric knowledge. There was also a high infant mortality to which parents were resigned, but which today we would find unacceptable.

Getting off to a good start in education is equally important. It is the hope of society that each child will spend at least one-sixth of his life in formal study. That is the minimum education needed (12 years) to be economically effective, it is commonly held. In times past we knew little about psychological human development, learning, and the relationship between preschool years and the early years of education. Teachers had to go it alone. That no longer is necessary. The massive body of knowledge relating to the effectiveness of children as learners cannot be known by teachers, but can be known by specialists prepared to assist teachers and families. This proposed legislation faces the Congress with the decision as to whether or not this body of knowledge is going to be known by specialists and made available to teachers and parents countrywide (rather than in isolated instances) so that all children can get off to a good start in schooling, and some off to a better start than would otherwise be the case.

This bill cannot be supported as a cure all—or prevent all—any more than the Public Health Service could be expected to serve such a utopian function. On the strength of our present research knowledge, however, I am confident that its implementation would be the difference between effective or ineffective humanness and citizenship for countless children, and the difference between just adequate learning or superior learning for many others. Perhaps there is more that we can sometime legislate so as to assure the development of adequate individuals. Surely there is no less that we can do now than provide this long-needed support for helping all children get off to a good start.

DAYTONA BEACH, FLA.,
October 15, 1965.

Hon. SAM GIBBONS,
Washington, D.C.

DEAR MR. GIBBONS: The Daytona Beach Morning Journal carried an AP report on your proposed Operation Good Start.

As a retired teacher now doing private tutoring, may I urge you to pursue with all diligence the need for success in the first three grades to prevent future dropouts, delinquents, and potential "Harvey Lee Oswalds."

I taught for 30 years in third grade in Madison, Wis., and was able to identify at that age those who later had police records in their teens. I keep newspaper clippings to prove this. The schools in Madison were far above the average, yet we were unable to prevent this happening.

Trained specialists is the only way to help. Regular classroom teachers, no matter how skillful, can't cope with 30 to 35 pupils and give time to the child needing this special attention.

I am now tutoring eight private pupils—five from fourth grade, three from sixth who cannot read on fourth grade level.

Volusia County has made a wonderful beginning with two reading centers under the pride program. I do wish you success.

Sincerely,

(MRS.) MAUDE HAVENOR.

THE FLORIDA STATE UNIVERSITY,
Tallahassee, November 19, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman from Florida,
House of Representatives Office Building,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you very much for your letter of November 2 and the opportunity to make a statement on the bill that you have recently introduced to provide a national program from preschool through the third grade. This is an excellent conceptualization of developmental principles and the possibility of its implementation generates enthusiasm with us who have worked in the area of delinquency and crime control for a long time. As you can tell

from the attached statement, I think this is the most perceptive and penetrating legislation that I have seen in a long time. My congratulations go to you for introducing it.

Kindest regards.

Sincerely yours,

VERNON FOX,
Head, Criminology and Corrections.

STATEMENT BY VERNON FOX ON "GOOD START" LEGISLATION

This bill to provide a program of Federal assistance to elementary schools by providing child development specialists for elementary schools is one of the most perceptive and penetrating proposals that I have seen in the area of delinquency control. All students and practitioners in the area of human behavior contend that the basis for personality is developed in the first few years of life, particularly infancy, early childhood, and middle childhood. All attempts to predict delinquency have been based in the evaluation of relationships of developing personalities to other people in these early formative years. Delinquent behavior, as such, begins to appear around the ages of 7 or 8, appears more distinctly about the time of puberty around 11 or 13 years of age, and becomes full blown in adolescence. This bill recognizes these principles.

One of the most difficult dilemmas in public action in the field of mental health and delinquency control is the decision between trying to make sound administrative procedures developmentally feasible or trying to make developmental principles administratively feasible. The most successful programs follow the latter course, that of recognizing developmental principles and molding administrative procedures around them. This bill does this. The developmental principles conducive to early detection of emotional disturbance that would later result in mental ill health or delinquency would be picked up in the elementary school by child developmental specialists. Very few schools outside large metropolitan areas can afford this service.

The body of knowledge is already accumulated. As in all areas of human endeavor, there is a tendency not to implement all our knowledge. We know better than we do. It is especially gratifying to us who have been working all our lives in the area of delinquency and crime control to see the possibilities of such implementation that this bill encompasses even considered by the Congress of the United States and even more gratifying to anticipate its passage and successful implementation.

TALLAHASSEE, FLA., *October 22, 1965.*

Hon. SAM GIBBONS,
Member of Congress from Florida,
Tampa, Fla.

DEAR SAM: Your sponsorship of a program to discover and treat emotionally disturbed children at an early age is another enormously heartening, genuine public service effort on your part.

In the long view, of course, it can be more fundamental than many of the other fine efforts in education and welfare that have been made this session.

Thank you again for your earnest, able public service.

Sincerely,

JIM ETHERIDGE.

MIAMI BEACH, FLA., *October 24, 1965.*

Congressman SAM GIBBONS,
Tampa, Fla.

DEAR CONGRESSMAN GIBBONS: I have just read a newspaper article discussing your proposed child development program. Congratulations. It's like a breath of fresh air. I have always hoped that someday someone in the national bureaucratic hierarchy would realize that to prevent the problems of dropouts, pushouts, and unemployed youth the problem should be attacked from the point of view of emotional disturbances, and should be concerned with identifying the disturbances at an early age when prevention rather than rehabilitation can be successfully effected.

Regarding your assertion about the misuse of guidance people, and the watering down process at local and State levels, I can speak from experience. I was a full-time guidance counselor on the MDTA youth project in Dade County for 1½ years. Two dedicated counselors did a yeoman's job with the 16- to 21-year-old underprivileged youth who were in the program, because we concentrated on the "whole" individual, with his emotional and/or personal and/or vocational problems. Help was especially needed in the emotional area and this is where we directed it. We got away with enforcing our theory of helping the boy in the area he most needed help, because no one was particularly interested in this pilot program. Now that the second project is underway, the school system has moved in and taken over. Any innovating ideas we instituted have been filed away; all the valuable research data we were accumulating and working on (Washington was interested in statistics, but the State and local government weren't) is piled up in a closet, and the one counselor who was allowed to remain (in accordance with the watered down stipulations for MDTA) isn't doing any counseling—he's too busy with clerical procedures.

I am working on my master's degree in counseling and guidance this semester at Barry College. I am fulfilling an internship in guidance and counseling in case I want to go back into the school system. I am doing part of the internship at a home for girls where I work with the residents and also do inservice training with the staff. I had a year's supervised training in a clinical setting with two psychiatrists and a clinical psychologist in Hollywood, Fla. This summer I was associate director of a University of Miami training institute for the Federal employment security people training youth opportunity center staff, and acquainting them with the culture of poverty.

When I have my master's degree, I am seriously considering using part of my husband's medical building (he is a practicing internist) and try to set up a counseling, testing, and remedial educational center for young people.

I have no defined motive for writing to you at this time. I am interested in your proposal, and my own concept of what I'd like to do apart from the school system and the employment security services, or even, mental health services, seems to fit in somehow with your proposal.

Let me say this: If I can be of any help, or if you have any ideas how I might fit in with your proposal when it becomes an actuality, then I would like to help. File this letter away under "H," and perhaps someday I may prove useful.

In the meanwhile, good luck with your wonderful proposal. Let's hope it doesn't get watered down at the Federal level.

Sincerely yours,

THELMA MEDOFF
Mrs. Lawrence R. Medoff.

STATE OF COLORADO,
DEPARTMENT OF EDUCATION,
Denver, Colo., December 13, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for allowing me to respond to the proposed legislation which you have recently introduced.

I am well aware of the problems which this bill is meant to resolve. The bill is an excellent one, and it has several outstanding features. The first is that it recognizes the need to identify the children with problems at an early age and to immediately attempt to rectify or modify the behavior of that child. The second is that it acknowledges the need for well-trained specialists to adequately understand and effectively deal with the problem. The bill further indicates sound planning in that the first year emphasizes the training of such personnel so that they do become available. The third feature is that the specialists at the local level will receive supervision and consultation from their counterparts at the State level. The fourth feature is that of training teachers and principals in how to work effectively with child development specialists.

These combined features make H.R. 11322 a superb bill. It clearly avoids some of the pitfalls of some legislation that provides money for programs without first providing adequately for the training of qualified personnel. These qualified professional workers will make possible the sound development of programs for

children with problems because the schools will know from adequate evaluation and assessment, the kinds of children with which they are dealing.

Schools desperately need the kind of assistance that this bill would provide. May I commend you for having written it. I hope that soon, I may extend my thanks to Congress for having passed it.

Sincerely yours,

BYRON W. HANSFORD,
Commissioner of Education.

STATE OF MONTANA,
SUPERINTENDENT OF PUBLIC INSTRUCTION,
Helena, Mont., December 14, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Congress of the United States,
Washington, D.C.

DEAR REPRESENTATIVE GIBBONS: I have your recent letter advising me of your interest in the early detection, correction, and prevention of learning disorders that may result in delinquency and other disruptive behavior. I appreciate the opportunity to have reviewed your proposed legislation and to comment with regard to it.

I appreciate, too, your interest in this entire field, and your constructive approach to it. It is gratifying to note increasing nationwide understanding of the relationship of learnings in the behavorial sciences to human success; I am sure that the interest and concern of people like yourself has given real impetus to the more comprehensive approach to the solution of problems more and more apparent daily.

It would appear that the bill which you propose would be of substantial help in focusing attention on prevention, and in supplying competent personnel to provide these preventive services. The bill is to be commended for starting with "firsts," such as the funding of training programs, essential to the provision of adequate child development services.

It appears also that this bill would supplement, not duplicate, other programs being on the problems of optimum socio and educational accomplishment, by making available the personnel whose services seem to be implied, but not provided for, in several other program measures.

Any legislation that recognizes serious needs in our total program patterns, and envisions and establishes sound methods for meeting those needs, cannot but contribute to eventual improvement in educational, social economic—human—achievement.

Again, thank you for your letter and for offering me an opportunity to voice my support of efforts to effectively relate the findings of research in many fields to the development of our human resource potential.

Sincerely,

HARRIET MILLER,
State Superintendent.

AMERICAN PSYCHIATRIC ASSOCIATION,
Washington, D.C., December 22, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Longworth Building,
Washington, D.C.

DEAR REPRESENTATIVE GIBBONS: You wrote to me on November 5 and again on November 10 concerning your bill H.R. 11322, providing for child development specialists. The mill grinds slowly within this organization and it has taken me until this time to produce an informed opinion by experts within the association. I have enclosed that opinion.

Thank you very much for your efforts in an area of great importance.

Sincerely,

WALTER E. BARTON, M.D.,
Medical Director.

COMMENTS FROM THE AMERICAN PSYCHIATRIC ASSOCIATION ON H.R. 11322

The concept of the school counselor has proven to be quite valuable in junior and senior high schools, particularly where the counselor is sufficiently knowledgeable concerning personality growth and development and mental health principles and has the skills to work collaboratively with the community health and mental health facilities. In those few schools where the well-oriented counselors have been brought into the upper elementary grades, the program has often been successful in providing liaison between mental health services and the schools. The counselors can serve as effective consultants to teachers and parents in handling adjustment difficulties of children and identifying children with more serious pathology for appropriate referral and treatment. In the Project Head Start programs this past summer it was demonstrated that a counselor program could also be effective in these areas with preschool children. It particularly demonstrated, in some of the programs, the greater value of the trained counselor.

As we interpret the training of child development specialists as proposed in H.R. 11322, it aims essentially to make available counselors, specially trained to work with children, in the late preschool and early elementary levels. Applying the skills of school counselors to the earlier age levels certainly meets with our approval. We would feel that, propertly utilized, such child developmental specialists could reinforce our front lines of service to young children, function in the areas of prevention, case finding, teacher and parent counseling, help to handle crisis situations in the classroom, and provide a liaison between the school services and the community and other social programs.

It is reassuring that the bill stipulates the training of these counselors must include a grounding in the skills which will prepare them for this role. It is therefore felt to be important that psychiatric and other mental health personnel should be involved in the advisory board to the proposed program, in the group preparing curriculum for the training and in the group which consults at the State and local level where the child development specialist would function.

It may not be realistic to structure these programs so that the counselors are assigned at the State level.

THE UNIVERSITY OF MICHIGAN,
DEPARTMENT OF PSYCHOLOGY,
Ann Arbor, Mich., December 16, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman, 10th District, Florida,
Tampa, Fla.

DEAR SIR: I've read your bill (H.R. 1322) with much interest and want to congratulate you upon a very forward-looking piece of legislation, one which will have great impact upon our country if it is enacted. In fact this legislation seemed to be so important that I've discussed it with a number of my colleagues and the remarks that follow are notes from these discussions.

We believe this bill is a creative attempt to solve some long-term problems of society. As such, it deserves our strong support. Some features of the bill that seem to us to be improvements over similar legislation in the past are: (1) The attempt to identify someone who will work broadly with young children rather than within the confines of a more narrowly defined role such as diagnostician; (2) the focus on a wide range of developmental needs rather than a specific problem; (3) the definition of training in terms of subject matter pertaining to normal and pathological processes in child development rather than a more conventional focus on educational methods and techniques.

Several suggestions that we would make follow:

1. Careful thought should be given to the need for provisions in the bill to enable colleges and universities to take on this additional program. The inhibitions and inertia of educational institutions against starting new programs such as these which require major expansion of facilities, at a time when many of them are already straining against the pressures of rapid expansion, should be recognized. To help overcome this inertia it may be necessary to provide long-range assurance and supporting funds to facilitate the required expansion of training facilities (staff, equipment, and buildings).

2. We agree with the idea that the child development specialist should be responsible to the State board of education rather than to the local school system. There are some problems associated with this arrangement, however, that will

need attention. For example, who will be responsible for hiring and supervising the child development specialists? What should his qualifications be and where should he be located? Though the child development specialists will be consultants there should be higher level consultants available to them as well as facilities for continuation of their training while on the job. How can such continuous training be assured? These problems will be greatest in the smaller communities where the specialist might be operating totally on his own unless special efforts are made to prevent this. One possible solution is to have a doctoral level person in clinical or school phychology, perhaps appointed by the county board of education, who would be responsible for hiring, supervising, and providing continuous training for the child development specialists working in the schools in his area. Provision would of course have to be made for funds for salaries, office space, secretarial services, etc., for these psychologists.

Closely related to the above point is the need for summer workshops and other concentrated efforts to continue the education of the child development specialists, as well as to enable them to benefit from the accumulating experiences of the more successful programs.

3. We would urge that provision be made to keep the curriculum from getting caught up in State board certification requirements. The child development specialist should be expected to become intimately acquainted with schools as organizations, but actual experience and training in teaching should be seen as only one of any number of possible prior experiences that a person might bring to this field. The requirements for the child development specialist should be clearly separated from the requirement for teachers—rather than added to them.

4. There is need for more clarification of the relation between the child development specialist and other specialists operating in the school system, e.g., school psychologist, guidance counselor.

5. The large number of child development specialists expected to be trained in the next few years seems unrealistic. For such a program to succeed we think the stress should be on setting up the proper groundwork, getting the right people, and in general phasing in slowly. Large numbers of specialists are probably not readily available.

6. A more definite statement is needed regarding the qualifications of institutions offering training, with particular regard to the readiness and capacity of institutions which have never offered graduate training.

7. Though the program may be supported by the informed judgment of experts, its breadth and complexity are such that the prior knowledge and opinions of experts are not enough. Thus this bill should provide enabling funds for setting up facilities to evaluate its effectiveness (beyond the keeping of records suggested). The evaluation research might be done by a Federal agency or contracted out. Such research should also help make it possible for the program to benefit from feedback from earlier stages.

8. The job of child development specialist will have to be defined in high status terms and compensated accordingly in order to attract the most capable students. Efforts should also be made to create a positive image of the position in the eyes of faculty members, who will be very important in encouraging students to consider it as a career.

Thank you very much for sending the bill to me. I wish you success in your efforts to secure its passage.

Sincerely,

W. J. McKeachie, *Chairman.*

George Peabody College for Teachers,
Nashville, Tenn., December 8, 1965.

Hon. Sam M. Gibbons,
U.S. Congressman, 10th District, Florida,
Longworth Building, Washington, D.C.

My Dear Mr. Gibbons: This letter is in reply to your request that I write you my reactions concerning the bill introduced by you to Congress: H.R. 11322.

This letter is being written entirely as a private individual. At a somewhat later time I hope to write you a letter as the president of the Division of School Psychologists of the American Psychological Association. This, however, will require some response from the executive committee of the division. My remarks, which follow, grow out of my experiences over a period of years with the training of school psychologists, my research and educational background as a

developmental psychologist, and my more recent research concerns with the early educational development of deprived children.

But first of all, I would like to say that I am highly in favor of the objectives of your bill. Certainly the early years are ones in which children are most amenable to change; it makes good sense to focus the major effort at this level. Also, I think it is possible in a carefully designed program to build sufficient competencies within 2 years of graduate work that such persons would be able to perform the duties you suggest, provided they have adequate supervision and there are consultative services available.

My general reactions more than anything else center around the hope that in moving into such a program we may avoid some of the mistakes of the past, and make a major step forward in providing adequate psychological and guidance services for young children and their parents. The things that I would like to suggest, therefore, are more by way of items which might possibly be seen as modifications of the bill, or cautions to those administering the bill. These follow:

1. *Training programs.*—The quality of training programs is crucial to the success of such a broad plan. I believe we could make haste most rapidly in developing good training programs, if it is possible during the first 2 years of operation of the bill to set up some small number of excellent pilot programs which could serve as models for the many, many programs necessary if we are to come anywhere near the number of persons you wish to have trained. These training programs should make use of the best competencies of developmental psychologists, of school psychologists, of school social workers, and persons who are specialists in the field of guidance.

2. *Supervision and/or consultation.*—Since the intent of the bill is that persons should work not only with beginning but also with serious learning, behavior, or emotional problems, it seems essential for the welfare of children, that the child development specialists should either work under some relatively extensive supervision, or else have available to them major blocks of consultation time, in which they can check their procedures with individuals who do have special competence in working with serious behavior disorders in children. If such supervision and/or consultation is left up to the ingenuity of State and local agencies, I am sadly afraid that adequate supervision or consultation will not be forthcoming. It is highly expensive, and we do not at present have enough persons available who can perform such functions of consultation or supervision adequately. This suggests that one possible approach might be to develop training programs not only for the child development specialist but also for persons who need to gain added competencies to serve in a consultative role. This I realize is a difficult thing to work out, but I think it might be a determining factor in the genereal success of the program. A lack of adequate supervision or adequate consultation time has plagued the other pupil personnel services, and starting afresh might give an opportunity to plan in a way that would make possible an adequate amount of such resource persons for the individuals working in the schools.

3. *Articulation with other pupil personnel services.*—If I understand the functions of the proposed child development specialist, these functions overlap in high degree with the functions of school psychologists, school social workers, and elementary guidance workers. Such persons today are in such short supply that we can certainly use other workers in the field most profitably. The danger, I think, lies in creating a new specialty (that is in essence a combination of old specialties with an age group focus) without planning some careful articulation with the pupil personnel services which are already available. One of the greatest problems of pupil personnel services today and of the past is that they have grown Topsy-like, without careful planned articulation. The systems which are wealthy enough to afford a fairly adequate ratio of persons in the pupil personnel services find that a great deal of duplication goes on. The school psychologist, the school social worker, the elementary guidance worker, and even the school nurse may be engaged in many activities which are basically the same. With the shortage of adequately trained personnel this is tragic. I would hate to see this past history repeated.

4. *The inclusive age range.*—I am a little concerned about the cutoff point at third grade. As you perhaps know, the most common age group seen in child guidance clinics is 9 years. The problems fourth grade children experience are ones that probably began earlier, but I wonder if this fourth grade concentration suggests than an abrupt cutoff point may be unfortunate. There

might be some way of planning so that there would be a tapering off with the major emphasis perhaps in kindergarten and grades 1 and 2, and then some tapering down through third and fourth grade.

5. *The advisory committee.*—As in any new program of a massive sort, the major element in the success of the program will be the work of the proposed advisory committee and the activities of those persons to whom the commissioner delegates the responsibility. I would hope very much in such groups of individuals there would be representation from among the psychologists trained at a high level in clinical work with children, developmental psychologists, school psychologists, and persons with high level training in social work, particularly case work and school social workers. There are other groups, I am sure, who are also relevant, but psychologists (developmental, child-clinical, and school) and the social workers still seem to me the most important to be involved in the advisory council and also in the work which the commissioner will need to delegate to some individuals in such a massive program as is being proposed.

Again let me say that I am in favor of the general objectives of the act. My immediate concern would be one of seeing if the bill and/or its implementation could take care of some of the considerations that I have mentioned.

Sincerely yours,

SUSAN W. GRAY.

THE AMERICAN PSYCHOANALYTIC ASSOCIATION,
New York, N.Y., December 8, 1965.

Congressman SAM GIBBONS,
Longworth Building, Washington, D.C.

DEAR CONGRESSMAN GIBBONS: In accordance with the request in your letter dated November 10, 1965, the American Psychoanalytic Association has examined the legislation H.R. 11322 which would provide for child development specialists from kindergarten through the third grade.

The American Psychoanalytic Association is interested in all preventative measures that might be taken, or directed, toward the early detection, correction, and treatment of emotional disorders in children as well as in adults. We have, in fact, a prevention project in our organization which has this same ultimate goal. Therefore, we are heartily in favor of the principle of your legislation.

However, the membership of my organization has expressed considerable reservation about the means that your proposal suggests to carry out this commendable goal. Questions were raised about the advisability of creating a new group of "child development specialists" whose training is something to be evolved and whose role and function in the school system would have to be determined through a trial and error method. We wonder if it would be possible to achieve the same desirable goal through an extension of already existing programs for training psychiatrists, psychologists, phychiatric social workers, etc., so that more such personnel can be made available to the various school systems within the present structure of approved professional training in this field.

Questions were also raised about the desirability of having a program such as this, which includes the possibility of treatment, carried out under the Office of Education since it was felt that this approaches a medical problem which might better be handled through authorized medical channels either at a national level (the National Institute of Mental Health) or a local level of programs under the support and responsibility of the appropriate medical authorities.

Therefore, I wish to inform you that while we are in agreement with the purposes of your bill we feel that the efforts might be better channeled through already existing training programs rather than through the creation of a completely new specialty requiring untried and uncertain methods.

I trust this information will be of assistance to you and would be glad to discuss this matter with you at greater length should the opportunity arise.

Sincerely yours,

VICTOR H. ROSEN, M.D.,
President.

NORTH CAROLINA STATE UNIVERSITY,
SCHOOL OF LIBERAL ARTS,
Raleigh, November 8, 1965.

Representative SAM M. GIBBONS,
House of Representatives, Congress of the United States, Washington, D.C.

DEAR MR. GIBBONS: House bill 11322, calling for Federal assistance in a program to add "child development specialists" to the staffs of elementary schools, is consistent with the objectives of a long-term effort to enhance the school's effectiveness for developing the human resources of our Nation.

During the depression years the Nation mounted an impressive attack on economic and social problems associated with denial of equal opportunities for all to demonstrate their potentialities for effective participation in our society. Real progress was made, but several deficiencies in the general approach revealed themselves over the long run. Too much attention was devoted to the symptoms and not enough to the fundamental causes of social and personal problems. The national crisis necessitated haste in program implementation to the effect that careful evaluation of fundamental assumptions was not always present. There was overemphasis on immediate results. There was excessive faith in the view that social problems are only the sum total of socially or culturally deficient individuals.

My interest in H.R. 11322 is stimulated by my professional concern with criminology. However, my conception of criminology as a field of study and social action does not isolate me from other areas of public concern. Contemporary criminology recognizes that juvenile delinquency and crime are expressions of the workings of our total sociocultural organization. To understand and deal with crime, one must study the fabric of total society because the etiology of crime is not distinct from the very processes which create socially approved behavior. Furthermore, we have learned that we must not stigmatize the potential delinquent by the very actions we take to prevent future criminality. If we do, the "cure," ironically, aggravates the "disease." Therefore, the predelinquent (and even many of the criminals) can be handled more effectively by programs which assign him to some social role other than that of the criminal or future criminal.

On the basis of this sketchy introduction, I recommend passage of H.R. 11322 for these reasons:

1. It directs action at the youngest ages at which the child comes in contact with public schools as his first extra family experience with community social controls. The earlier the contact, the greater the opportunity to influence personality formation.

2. It places delinquency prevention within the scope of normal experience for the child, since his social and personal problems are dealt with by placing him in an essentially teacher-pupil role system. The possibility of parent and community support will be enhanced.

3. It recognizes cultural differences among communities by giving major administrative control to State or similar public agencies who administer schools. Furthermore, by placing control in the hands of educators, the myth is broken that these matters are the exclusive concern of welfare or charitable agencies.

4. It recognizes the necessity to introduce knowledge in a wide range of disciplines. Of major interest to me is the recognition of social sciences as a key form of knowledge for child development specialists. This breaks with the usual conception of the child psychologist or counselor as one who is concerned only with individuals, per se, and largely ignores the social environment impinging on the child.

5. It emphasizes training of competent personnel who possess the scientific concepts, skills, and educational experience essential to true and capable professionalism. Very properly, it emphasizes the necessity to "tool up" academic programs in institutions of higher education. Only when such institutions provide a sufficient number of qualified personnel will we achieve permanent progress in guaranteeing the preservation of human resources. A more reliable system of career development, more closely integrated with the realities of community and school life, must be created to move the dedicated student into and through the university to effective employment in the schools. In this way, H.R. 11322 provides for continuity of social reform.

Sincerely yours,

ELMER H. JOHNSON, Ph. D.,
Professor of Sociology.

OHIO STATE UNIVERSITY,
Columbus, Ohio, November 11, 1965.

Hon. SAM M. GIBBONS,
Congressman, 10th District, Florida,
Longworth Building,
Washington, D.C.

DEAR CONGRESSMAN: Allow me to make the following statement for the record, endorsing the provisions and the spirit of your House bill 11322.

In this mobile world, it has become increasingly difficult for a large number of families to bring their children through the period of early childhood with a strong enough self that can take care of the pressures, frustrations, deflections, and swift moving changes which are now part of every American child's milieu. The shortage in the strength of the self really amounts to an inability to steer one's self and to handle one's self effectively in a fluid world. Years ago, the growing child obtained considerable reinforcement for his social development from an extended family, from relatives close by, from the neighborhood, and from the village. But he does not receive this bolstering, to any great extent, any more. He is on his own. He must paddle his own canoe and if he cannot paddle well he is up against it in the learning process. He is likely to become a retarded reader. He is likely to read at the fourth-grade level when he is in the seventh grade. He is likely to drift. He is likely to get into trouble. He is likely to run away from home. He is likely to truant from school. He is likely, in later childhood and in early adolescence, to fall in the arms of the street-corner gang. He is likely to be complained-on to the police for delinquency. He is likely to get in the juvenile court several times. And finally he is likely to be a dropout.

There is no question that the American public school now has become the principal supplementary agency for child development. The school has the child for a longer period of time each day than any other agency or group. It is logical that a child development program, such as H.R. 11322 envisages, would be of enormous help. Kindergarten teachers, first-grade teachers, second-grade teachers, school nurses, school doctors can sense very clearly that a 5-, 6-, or 7-year-old child has got off to a poor start. Your proposed child development supplementation would give the schoolteachers a very necessary resource for helping them to overcome the shortages in the development of the child's self.

I heartily endorse the provisions of your bill. We definitely need the tie-in between HEW, the State educational departments, the universities who do the training, and the local schools. I am sure that the greatest focus of attention would be placed on children who grow up in areas of the city in which parents have been the most ineffective in child rearing.

Kindly keep me informed as to the progress of your bill.

Sincerely yours,

WALTER C. RECKLESS,
Professor of Sociology.

THE PENNSYLVANIA STATE UNIVERSITY,
University Park, Pa., November 12, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman from Florida,
House of Representatives,
Washington, D.C.

DEAR REPRESENTATIVE GIBBONS: As a professor and researcher in the field of child development for a good many years I have acquired a fair degree of experience and some expertise and reputation in this field. Of course I welcome the concept of "child development specialists" set forth in your proposed bill H.R. 11322. I think the provision of help for training and the specifications of advanced training for these specialists are thoroughly sound.

I am sure your researches have shown you that this bill impinges on a number of crucial issues in American education, not the least of which the conflict in philosophy between what may be called early childhood education and child care, the latter more commonly coming under the purview of the profession of social work.

Moreover, a number of professionals including child psychologists, social workers, school psychologists, and similarly well defined professions, all of them with clearly defined standards, contribute already to the specific purposes

which your bill envisages. However, I think it is time for a concerted attack. Whether this is to be done through the development of a new professional specialty or through the closer coordination and implementation of the efforts of professional specialties already existing may be a matter for some debate. I am sure professional organizations will wish to debate this.

I am impressed, however, by the fact that your bill will clearly centralize the responsibility for this important problem in the public schools. The school is the common denominator, reaching all children, and it may now be time to extend its responsibility downward.

One of the most important features of your bill, in my thinking, is the concern for work with parents and parent education. This is absolutely necessary, and our new specialists, or the specialists now concerned with children from various professional viewpoints, must come to a deeper realization of this issue and greater skill in coping with it.

I am sure you have already been in touch with the important professional organizations which are interested in this problem, among which are the American Psychological Association, the National Association of Social Workers, the Child Study Association of America, and the Society for Research in Child Development, and others. If I can be of further help to you in this important matter, please let me know.

Yours cordially,

DALE B. HARRIS,
Head, Department of Psychology.

THE UNIVERSITY OF TEXAS,
Austin, December 8, 1965.

Congressman SAM M. GIBBONS,
House of Representatives,
Congress of the United States,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Please pardon a belated response to the invitation in your November 5, 1965, letter. I am in basic agreement with the purposes of H.R. 11322, which sets up provisions for a program of Federal assistance to elementary schools for child development specialists and for a program to train such specialists.

I would concur in your findings that the first few years of school are crucial in a child's life, and that learning disorders are far more prevalent than we have previously had reason to believe. The relationship between school dissatisfaction and acting out behavior which leads to delinquency and criminality is already well documented. As a person who has had considerable experience working with older children who have had various types of learning disorders (especially reading difficulties), I can attest to the tremendous problem of trying to break down acquired bad habits of learning and study and to institute remedial procedures. Adolescence is not the place to start. Based on my understanding of your bill it eventually would be possible to identify and furnish remedial work to children in the lower grades commensurate with their intellectual level. This is certainly a laudable aim and one with which I personally am in sympathy and one which, if properly conducted, would furnish invaluable resources to elementary schools throughout the country.

In training such personnel it would be important that they have basic psychology courses and that they be exposed to a wide repertoire of remedial procedures. Of primary importance should be the flexibility of the teachers and the training institutions. I would be extremely cautious of one method or one approach. The more we get into this problem the more we know. It is therefore almost mandatory that there be some followup of both training institutions and the child development specialist in the field.

I personally wish to support the bill and wish to commend you for taking the initiative in proposing support for this type of activity.

In submiting my statement for the record I wish to make it clear these are my views based on my experience and do not necessarily represent those of my department or the University of Texas.

Sincerely yours,

IRA ISCOE, Ph. D.,
Professor of Psychology and Education.

SUPERINTENDENT OF PUBLIC INSTRUCTION,
STATE OF WASHINGTON,
Olympia, November 19, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman, House Office Building,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: I and several members of my staff have examined your proposed legislation and we believe that it has a great amount of merit.

We definitely would favor such legislation and would urge that Congress so enact. We feel that more and more education needs specialists in order to achieve quality of education that is so necessary. Your proposed legislation will be a great boon to achieving our goal in the education and training of outstanding specialists.

Cordially yours,

LOUIS BRUNO,
State Superintendent of Public Instruction.

DUQUESNE UNIVERSITY,
Pittsburgh, Pa., December 17, 1965.

SAM M. GIBBONS,
Congress of the United States,
Washington, D.C.

DEAR MR. GIBBONS: This is in the nature of a confession. I received your letter with its plea for a statement for the Congressional Record, if I believed in your bill for providing assistance to elementary schools. I gave it much thought; I was delighted that a person with such concern and insight is in Congress but I did not write a statement or rather, I did not send in my statement. I was afraid that it was so naive, politically, that it might do more harm than good.

In recent years, I have been writing very simply and directly to teachers, therapists, and others immediately involved in the human predicament, so that I have gotten out of practice even in the academic parlance.

I should add that what you propose, is exactly what I needed, to my mind, to spot and rectify or cure or stop an ill before it wrecks a life, even one life. Even if the children whose learning disorders keep them from profiting by their education, do not become delinquent; even so, a life, the life of an American for whom the country is responsible, has been allowed to go to waste. The dignity of man, the right to a meaningful life, has been disregarded.

This is why I support your bill, and am glad you are there.

Sincerely,

DOROTHY LEE, Ph. D.,
Adjunct Professor, Psychology.

UNIVERSITY OF SOUTH FLORIDA,
Tampa, Fla., October 20, 1965.

Hon. SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR SIR: Your House bill 11322, providing for Federal assistance for improving educational opportunities for elementary schoolchildren, has been brought to my attention. I support the bill and feel that it could go far toward helping children in need of assistance in dealing with emotional, learning, or behavioral problems.

At USF we are planning a graduate program in psychology which we hope to get underway by September 1966. We are anxious to provide graduate training which will give the student a basic foundation in experimental and clinical methods and personality theory in addition to clinical skills. Since the child development specialist described in the bill would need such training, I thought you would be interested in our plans.

Please know that I, and the other psychologists on campus, support you in this important legislation.

Yours very truly,

PAUL R. GIVENS,
Chairman, Psychology Department.

SIDNEY J. MERIN, PH. D.,
Tampa, Fla., October 4, 1965.

Hon. SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR SAM: I have been following with considerable interest your work regarding Operation Goodstart as well as the work being done in Operation Headstart.

Long before our mutual association as directors of the Hillsborough County Mental Health Association years ago I have been convinced of exactly what you are attempting to do now regarding the determination, relatively early in the child's school career of the possible existence of mental and emotional disorders. These problems are a distinct drain not only on our economy but on the mental and emotional potential of our Nation. This, together with the considerable problems in delinquency and other antisocial activities as well as the drain on people as a result of personality conflicts, reflects a critical, even crucial contemporary need. There is no question in my mind, as a professional psychologist, that such determination, years before problems can be noted overtly, can be made and indeed is necessary. I am sure that my colleagues in this profession would be most willing to support me in my above comments and I along with them would be willing to aid you in the formulation of programs as might be necessary in the execution of your legislative proposals.

I have been in the Tampa Bay area for some 17 years and am familiar with its problems, its growth, and its potential.

Please feel free to call upon and use my skills as a clinical psychologist in any way you feel I might be of service to you and to your committee's work on this problem.

Hoping to hear from you in the near future, I am,

Sincerely yours,

SIDNEY J. MERIN, Ph. D.,
Consulting Psychologist.

THE UNIVERSITY OF IOWA,
Iowa City, Iowa, November 22, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
Tampa, Fla.

DEAR CONGRESSMAN GIBBONS: I have received your letter of November 2, 1965, with which you send me a copy of H.R. 11322. I have carefully read this bill and have grave misgivings regarding it.

In my opinion, it would tend to substitute the morality of the so-called expert and the professional educator for that of parents and promote the further federalization of education. This is too high a price to pay for any programs designed to prevent crime and delinquency.

The home, despite modern stresses and strains, remains the most effective agency of social control. Undermine the exercise of parental authority and all else will fail—regardless of the elaborate trappings of the welfare state.

Besides, the 9th and 10th amendments are still integral and viable parts of the Constitution—the strange contortions of the Warren court to the contrary notwithstanding. If you would work for a better America and the preservation of the Republic, do your utmost to reduce the monstrous concentration of power in Washington.

As you can judge from what I have said, I am unalterably opposed to H.R. 11322, although I certainly respect your views and congratulate you on your desire to curtail crime and delinquency in the United States.

Sincerely,

ROBERT G. CALDWELL,
Professor of Criminology.

OFFICE OF ECONOMIC OPPORTUNITY,
EXECUTIVE OFFICE OF THE PRESIDENT,
Austin, Tex., December 28, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: I should like to thank you for sending me a copy of your bill H.R. 11322, and I have read it with great interest.

I am convinced that your philosophy of approaching the solution of our problem at the level of prevention, rather than correction, is extremely valid. You are to be commended for your concern and for your efforts, and I hope that your bill meets with approval.

My only concern about the bill is the problem of training effective specialists. This will present some problems, but over a period of time it can be accomplished.

I would appreciate being informed of future developments of your program.

My best wishes to you for a successful year.

Yours truly,

MARSHEL ASHLEY,
Regional Administrator of Head Start, Region V.

THE AMERICAN ORTHOPSYCHIATRIC ASSOCIATION, INC.
New York, N.Y., December 21, 1965.

Hon. SAM M. GIBBONS,
Congress of the United States,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: The executive committee of the American Orthopsychiatric Association reviewed with interest your letter of November 5 with respect to bill H.R. 11322, as well as the content of the bill itself.

We wish to advise you that we feel that you are making a very important contribution in the development of this bill and in the support of some very necessary programs in the field of education that bear directly on issues of the mental health of the children of our country.

We would like to urge that for the first 2 years of operation of any type of program such as you are developing, that provision be made to set up funds for the training of child development and school staffs. It is our thinking it is extremely important that training models be developed using some of the existing centers for setting up such training models.

We are particularly impressed by the way in which your bill provides for parallel types of training programs for child development specialists and school administrators. We also heartily endorse the emphasis on the need for collaborative work between the child development staff and school staffs.

It is our thinking that the effectiveness of the program you propose rests on the development of training programs in the early stages. For example, we noted with interest that this aspect of your proposal comes at the end of the bill. We would like to urge that priority be given to both the development of training programs and of training models.

We would very much appreciate your keeping us informed as to the developments with your bill, revisions that are made, and would in addition appreciate having a copy of the final record.

If there is any other way in which we can be of assistance, please do not hesitate to call on us.

Our best wishes for the success of your efforts,

Cordially yours,

BENJAMIN H. HADDOCK,
Secretary to the Board.

UNIVERSITY OF SOUTH FLORIDA,
Tampa, Fla., November 18, 1965.

Hon. SAM GIBBONS,
House of Representatives,
House Office Building, Washington, D.C.

DEAR MR. GIBBONS: I enjoyed hearing you at the appreciation dinner at the University of South Florida and afterward indicated my interest in your crime bill and offered to correspond with you concerning it should it seem to your advantage.

Briefly, I am a sociologist who has had some contact with this area over a period of years. I was on the Board of the Community Services Divison of the Illinois Youth Commission District 3, which means Peoria and Tier Counties, and while serving in this capacity made numerous talks around the State explaining the work of the commission and the philosophy which underlay it.

I would be most happy to assist you in any technical capacity or help you make contacts with people who have superior training and experience to mine in this area. Looking forward to hearing from you at your convenience, I remain,

Yours truly,

WM. BRUCE CAMERON,
Director, Social Sciences Division.

UNIVERSITY OF FLORIDA,
Gainesville, October 26, 1965.

Hon. SAM M. GIBBONS,
Congress of the United States,
House of Representatievs, Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you very much for the copy of H.R. 11322 which you recently sent me. I have read this bill with a great deal of interest and I am delighted to know that you are seeking its passage.

In the past 20 years psychologists have been arriving at new understandings of human growth and development which have the potentiality to make it possible for us to solve some of the problems of human behavior and misbehavior with a great deal more effectiveness than was formally true. There is a real need for the dissemination of these ideas on the one hand and the production of more fieldworkers to put these concepts into practical use on the other. We are much impressed with the breakthroughs in the physical sciences that make it possible for us to take long strides forward in a short period. Similar breakthroughs, however, occur also in the social sciences and when they do need to be exploited with the greatest possible dispatch. The gap between the best we know in the field of the social sciences and its application to human affairs needs to be reduced as much as possible. I believe the provisions of your bill would be a long step in that direction.

If this bill is still alive in the next session of Congress I will be very happy to testify in its favor if you would like to have me do so both as a psychologist and professor of education as well as president-elect of the Association for Supervision and Curriculum Development of NEA.

With every good wish for the continued success of your efforts.

Sincerely,

ARTHUR W. COMBS,
Professor of Education.

UNIVERSITY OF FLORIDA,
Gainesville, November 9, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman, House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you very much for allowing me to read the text of H.R. 11322 and other material relating to it. I was very pleased that your proposed bill would provide needed services to preschool and first-three-grader children in our public and private elementary schools. As far as I am concerned, you have identified a problem which could be readily overcome by Federal assistance.

That learning disorders and behavioral problems exist in our young school-age children is indisputable. Just recently I had the privilege of assisting one elementary school principal screen all new first graders for evidences of visual, auditory, speech, and emotional problems which may result in learning disabilities. Approximately 15 percent of these children were identified as requiring the kinds of help which child development specialists could afford them. Unfortunately, there are no such professionals available to this school.

Since going to school is the occupation of children, continued failure by the individual child with learning problems is one of the most frustrating situations he must cope with in his lifetime. It is no wonder that certain of these children later develop into aggressive, hostile, and/or delinquent adolescents and teenagers. They find it difficult to compete with their peers; they are pressured and rejected by their parents and they seek help from teachers who are too busy or not properly trained to assist them with their specific problems.

The child development specialist, trained in both psychological and educational principles relating to young school-age children, would be a boon to any school and any parent who has had sleepless nights due to the concern over their child's educational plight.

At the College of Education of the University of Florida, we are presently training (with a 1-year graduate program) teachers to work with seriously emotionally disturbed children. I would speculate that we would more than welcome the opportunity of establishing a new 2-year program for training the child development specialist.

I strongly support your efforts in regard to your proposed bill, H.R. 11322, and you may quote the above for the record if you so desire. Feel free to call upon me at any time.

Respectfully yours,

ARTHUR E. ALPER, Ph. D.,
Associate Professor of Education; Coordinator, Emotionally Handicapped Child Program.

THE NATIONAL ASSOCIATION
FOR MENTAL HEALTH, INC.,
New York, N.Y., November 16, 1965.

Hon. SAM M. GIBBONS,
Congress of the United States,
House of Representatives, Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for your November 5 letter inviting an expression of my views about H.R. 11322 introduced by you in the House.

First, may I tell you that I have discussed with our president, Mrs. Winthrop Rockefeller, and she has asked me to convey to you her appreciation for your interest and leadership in introducing your bill. I join her in this expression and I am pleased to offer the following comments:

Since the school is a primary social institution in the life of a child, it is not unrealistic to believe that the major breakthrough in meeting adequately the mental health needs of children will come only when the schools are equipped to fully discharge their responsibilities in this area. Your bill will contribute immeasurably toward this.

There is another aspect which should not be overlooked. As you know, the enactment of title III, Public Law 88–164, and subsequent amendments to that, provide for substantial Federal grants to help in the training of teachers of handicapped children, including the seriously emotionally disturbed, as well as for the development, promotion, and support of research and demonstration projects for the education of these children. This represents a substantial investment by the Federal Government which will be protected if your bill is enacted. Experience has shown that even where a school system employs a specially trained teacher for the education of emotionally disturbed children, such a teacher alone cannot be fully effective unless her efforts are supported by adequate pupil personnel services. The availability of child development specialists in public school systems provides an important element in the range of services required within the school if the mental health needs of its pupils are to be fully met.

We hope that your bill will be enacted into law.

Sincerely,

MICHAEL E. FREELUND,
Director, Childhood Mental Illness Service.

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
TRAPNELL SCHOOL,
Plant City, Fla., October 20, 1965.

Hon. SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: It is coincidental that your H.R. 11322 information material arrived when it did.

A few weeks prior to receiving your letter several of us elementary school principals have gotten together to see what can be worked out on a local level along the same lines as your bill would provide.

This is a good piece of legislation, Mr. Gibbons, and it is sure to produce some tangible results.

It is unfortunate that it will take so long to implement, the need is definitely here now.

If you have any suggestions as to how we may obtain funds to get this "ball" rolling immediately, I will appreciate hearing from you.

Our thinking was to provide a minimum of one classroom teacher, with some specialized courses, per school, and provide a specialist to service one or two schools.

We feel the need is greatest for many "semispecialized" classroom teachers and a few specialists.

Keep up the good work, Mr. Gibbons. I'll be most interested in being kept informed of your activities along these lines.

Sincerely,

ANDREW H. ZIEGLER, *Principal.*

DEPARTMENT OF ELEMENTARY SCHOOL PRINCIPALS,
NATIONAL EDUCATION ASSOCIATION,
Washington, D.C., December 1, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
House of Representatives, Washington, D.C.

DEAR MR. GIBBONS: I have had a chance to read H.R. 11322. Personally, I think the action suggested in this bill is long overdue. You may count on my personal support and that of our organization to help this bill become a law at the next session of Congress.

We will be working with the NEA Legislation Division to urge the passage of this bill.

Sincerely yours,

ROBERT W. EAVES,
Executive Secretary.

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
CITRUS PARK SCHOOL,
Tampa, Fla., October 13, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: I wish to thank you for the opportunity granted me to examine bill H.R. 11322. I have carefully studied the bill and wish to make the following statement.

It has long been a belief of mine that the type child development specialists, as described in your bill, has been needed in the elementary school.

If space were to permit I could list innumerable stories about children coming from both culturally advantaged and disadvantaged homes who could have profited from this type service.

I certainly hope that House bill No. H.R. 11322 receives favorable consideration in the committee and on the floor.

In addition to the statement that I am making I am referring this to the legislative committee of the Hillsborough County Elementary Principals' Association and requesting that they also submit a statement for the record.

If I can be of any further assistance, to help promote the passage of this important bill, please feel free to call on me.

Respectfully,

RICHARD J. COLE, *Principal.*

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
BLANCHE CAHOON SCHOOL,
Tampa, Fla., October 12, 1965.

Hon. SAM M. GIBBONS,
Congress of the United States,
House of Representatives,
Washington, D.C.

DEAR SIR: Your bill, H.R. 11322, and the questions and answers from the Congressional Record of September 30, 1965, have been reviewed with great interest.

The awareness on your part and that of the National Institute of Mental Health and the Office of Education is greatly appreciated by the educators of the Nation. There is definitely a tremendous need for the early identification and correction of disorders that lead to delinquency and disruptive behavior. You certainly have our support for the passage of this bill which in years to come will train child development specialists to improve our educational opportunities for boys and girls.

We trust the Committee on Education and Labor will endorse its passage wholeheartedly.

Sincerely yours,

LEE STOKES, *Principal.*

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
HENRY GRADY ELEMENTARY SCHOOL,
Tampa, Fla., October 28, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR SIR: Though I was unable to get a statement ready by October 20 on the Elementary and Preschool Child Development Act, I wish to do so now.

It certainly seems to be a very enlightened type of legislation. Many children could be helped to develop into useful citizens if only they were given a helping hand early in life. Often a child who receives no help until secondary age has been defeated by factors in his environment which could have been detected earlier.

We at Grady School follow your activities with special interest and take pride in your leadership.

Sincerely,

MILDRED KINDRED, *Principal.*

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
CLAIR-MEL ELEMENTARY SCHOOL,
Tampa, Fla., October 11, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
Longworth Building,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for your letter of October 8 in regard to the bill which you introduced (H.R. 11322).

I read thoroughly the copy of the Congressional Record and the copy of the bill. It seems that finally someone feels as we in the field of elementary education; that many of the problems at the secondary level would not exist if we had the proper "tools" at the elementary level. This bill will provide one of those very important tools.

Where a similar type of help has been available to us for children, the value is evident. Many potential problems have been solved by the Child Guidance Center and clinical psychologists to whom we have referred children. Having the type of assistance you propose available in the school would be so much more valuable.

I am pleased to have this opportunity to endorse this legislation. I sincerely hope that it is passed and is implemented according to the schedule you propose.

Respectfully,

HARRY MOLZ, *Principal.*

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
DOVER SCHOOL,
Dover, Fla., November 15, 1965.

Representative SAM M. GIBBONS,
U.S. Congress,
Longworth Building,
Washington, D.C.

DEAR SIR: Due to some difficulties, your letter and copy of bill H.R. 11322, was not answered in time for the subcommittee meeting on October 19 and 20, 1965.

In discussing this bill with lay people and educators, most of them feel we need the services of child development specialists to diagnose the many problems of children beginning first grade through the third grades. Identifying and correction of these behavior, antisocial, and emotional problems, if they can be helped, will eliminate many of our juvenile and crime problems. The expense of helping a child to a happy successful life, and a useful productive citizen will be more than repaid by his or her services to this country.

This program will be of tremendous importance to education in the development of trained specialists and corrective action to be offered to many children who do not have an opportunity for a good start in school.

Please be assured that your foresight in planning this legislation will be greatly appreciated, especially by those who will gain by the services to be offered.

Sincerely,

PAUL F. WOODS, *Principal.*

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
MARTHA KING ALEXANDER ELEMENTARY SCHOOL,
Tampa, Fla., October 26, 1965.

Hon. SAM GIBBONS,
Longworth Building,
Washington, D.C.

DEAR SAM: Inasmuch as yours of October 8, did not arrive until October 22, I am late with a reply.

I am very favorably impressed with the aims and objectives of H.R. 11322.

For several years we here at Alexander School have been delving into just such a type of program which would identify the youngster your legislation would most affect. Our studies point out conclusively that social disorders are discernible at a very early age. In most cases, there has been as close correlation between abnormal social behavior and learning deficiencies. However, a mental deficiency is only one of the many disorders which could contribute to maladjustment. One who completely understands child development as well as community resources (and whose sole responsibility is in the realm of bringing about a change in attitude) would certainly be of a preventive nature.

As I reflect on the records of many of our youngsters thus identified, I become more convinced of the worth of such legislation to help us begin to meet the needs of these youngsters. Apparently, we have done a fine job with identification but have not been so successful with a solution to problems. Such a specialist as you describe in your bill, would probably be very valuable in the area of correction.

Just to envision such a person on our staff free to work with the culturally deprived, the health problems (physical as well as mental), to know where a pair of shoes might be located, to know whether malnutrition might be the problem, or whether placement in a special class was the solution, to know the location of possible foster homes if this be the answer brings a big smile to my countenance.

Keep up the good work. We are all very proud of the fine effort you are making toward the cause of education.

If I can be any further assistance, do not hesitate to enlist my services.

Sincerely,

HENRY D. RAINES, *Principal.*

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
ROOSEVELT ELEMENTARY SCHOOL,
Tampa, Fla., October 28, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
Longworth Building,
Washington, D.C.

DEAR MR. GIBBONS: Thank you for your concern for the early detection, correction, and prevention of disruptive behavior of small children. Many of us have been seeking assistance and have realized that we need personnel to diagnose and treat learning disorders of these children.

I sincerely hope that you will be as successful in developing and implementing this program as you have been in the legislation of the Economic Education Act.

With pride in your past accomplishments and with anticipation of more help in assisting us with early childhood problems, I am,

Very truly yours,

LAURA ELLEN WEEKS, *Principal.*

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
GORRIE ELEMENTARY SCHOOL,
Tampa, Fla., November 2, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
Congress of the United States,
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: With interest I read your bill H.R. 11322 concerning provision for a child development specialist in the elementary school. It certainly is one of the ways to help emotionally disturbed children. We need these specialists; however, there is no substitute for an interested, understanding teacher who has a class load small enough so that each child can receive the recognition and personal attention he craves. This interest must be an all-day experience.

This year we have an 11-year-old boy whose father, a custodian, drives a distance of 20 miles each morning and evening because for the first time his boy is an accepted member of a class with the guidance of a teacher he feels is interested in him.

Experiences for some children are limited by poverty. Poor personal appearance keeps the child from developing and building a good self-image or concept of himself. In situations such as these, beauty, care of clothes, and opportunities to teach cleanliness and orderliness should be given through these early years at school by a classroom teacher with the help of the specialist. These needs of the potential dropout and disturbed child can only be taken care of with a limited number of pupils per teacher. Could you work on this phase, too?

Sincerely,

(MRS.) JESSIE MCKENZIE, *Principal.*

STATEMENT OF MISS JOANNE F. ROCCO, ORANGE GROVE SCHOOL

The proposed bill, H.R. 11322, cited as the Elementary and Preschool Child Development Act has come at a time when it is no longer possible to ignore the growing rate of school underachievers, dropouts, delinquents, and the more subtle varieties of disruptive behavior and learning problems.

These problems present themselves in the educational realm, but they are by no means confined to the school alone. The home and the community are also faced with the task of meeting the needs of problem children.

Because this is true, the bill proposed here appears to be aiming in the proper direction. By designing a program of early identification and prevention carried out in the schools by child development specialists, this bill is, in fact, recognizing the interdisciplinary nature of the problem and implementing it at the highest level.

The bill, as written, is well defined and all inclusive. It should receive the serious attention of all educators who strive for prevention as well as rehabilitation. It should receive the support of all citizens who recognize the relationship of education to the future of our Nation.

TAMPA, FLA., *October 22, 1965.*

Hon. SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR SIR: My enthusiasm runneth over. This morning the Tampa Tribune carried an article regarding your proposed legislation, appropriately named Operation Good Start.

We all realize that childhood is the period for building sound emotional and mental health, but teachers simply haven't the time or training to solve many behavioral problems. I well remember a small, lonely boy who colored all pictures black. He had several problems, and surely his world must have appeared dark and dismal to him.

I honestly believe this is the most important piece of legislation to appear in Washington for a very long time.

Good luck.

Sincerely,

Mrs. PAULÉTA M. CHEATHAM.

THE GUIDANCE CENTER OF HILLSBOROUGH COUNTY,
CHILD DIVISION,
Tampa, Fla., October 21, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman, Congress of the United States, House of Representatives, Washington, D.C.

DEAR MR. GIBBONS: Thank you for your letter of the 15th of October.

It sounds like a fine program to me.

From my interest in mental health, perhaps this will reduce a lot of serious physical conditions, and thus reduce some of the emotional conflicts always present with serious illness.

I also appreciate your letter informing me of this program.

Sincerely,

JERRY J. FLEISCHAKER, M.D., *Director.*

CONNECTICUT MANUFACTURING CO., INC.,
Waterbury, Conn., October 11, 1965.

Hon. SAM M. GIBBONS,
House Office Building,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: This is to acknowledge your letter of October 1, enclosing a copy of your H.R. 11322 for which I thank you very much.

In my opinion, this bill fills a great need in the detection, prevention, and treatment of the emotionally upset and potentially disturbed young child. May it have a successful passage through the Congress; and please accept my congratulations on your perspicuity and courage.

As you may know, I am to put on paper a beginning of my ideas on the "preparation for parenthood" and submit it to Dr. Eli Bower. This I shall do within the next 10 days as I plan to be in Washington on October 28 and hope to confer again with Dr. Bower.

Sincerely yours,

(Mrs.) V. G. SCHROEDER BURNHAM.

SUNCOAST MEDICAL CLINIC, INC.,
St. Petersburg, Fla., October 18, 1965.

Representative SAM GIBBONS,
House of Representatives,
U.S. Government,
Washington, D.C.

DEAR REPRESENTATIVE GIBBONS: I was excited to read an article in the Tampa Tribune about your plans for Operation Good Start. This falls like manna from Heaven on our ears. We have been espousing this concept for several years now and getting almost nowhere with people who are only concerned about the present day situation and not about prevention.

I am a private practitioner of pediatrics but I work very closely with the Pinellas County school system and especially with Dr. Eleanor Ladd, who is the director of our county educational testing services. I also work closely with one of our local optometrists. We three have been volunteering our afternoons off to screen children in private kindergartens and in Operation Head Start kindergartens this past summer to detect various inadequacies of children. It is so tragic for us to see these children come to our office in fourth grade, seventh grade, and in high school who have had problems that we could remedy had we seen them earlier. Suffice it to say that perceptual abnormalities, developmental immaturities, psychological problems, abnormalities of body kinesthetics, and mild degrees of cerebral dysfunction, etc., are all detectable if we but only look at children during these early crucial years.

We would be most anxious to discuss this further with you and would be willing to travel to your home in Tampa to have an audience with you if you felt that we could be of assistance in furthering this especially at our local levels.

Again, many thanks for a political boost that was very exciting for us to hear about.

Sincerely,

RAY C. WUNDERLICH, Jr., M.D.

BARTOW, FLA., *October 12, 1965.*

Hon. SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: I'd like to take this means of expressing to you my heartfelt thanks for sponsoring the recently announced programs concerning the identification and treatment of educational (emotional-mental-social) problems of the students of public school age. I sincerely hope that those of us on the local scene will have the determination to act favorably in joining with you and use this overdue treatment.

As a teacher in the public schools (junior high) and in the adult education program (prison school), I am very much aware of many of the needs in early treatment. When we wait until the dropout occurs or we wait until a man is imprisoned to begin treatment in "rehabilitation" it is extremely doubtful that the desired results will ever be attained.

Again, I say, thank you very much.

Sincerely yours,

OLEN W. RAIFORD, *Teacher.*

PINELLAS COUNTY BOARD OF PUBLIC INSTRUCTION,
EDUCATIONAL SERVICES DIVISION,
Clearwater, Fla., October 21, 1965.

Representative SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR REPRESENTATIVE GIBBONS: I want to add my congratulations to the many you must have received for your preventative plan to train people in child development. I wish you the earliest possible success in getting the bill passed. Glad Mike Bower is supporting the plan as he is a powerful ally.

Your plan is the kind of early preventative program which can actually change the course of the Nation. I'd like to be directly involved if it passes.

Yours very truly,

ELEANOR M. LADD, Ed. D.

MARYLAND STATE DEPARTMENT OF EDUCATION,
STATE OFFICE BUILDING,
Baltimore, Md., November 17, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for your letter concerning the bill which you introduced providing for a "Good Start" program. We are tremendously interested in this bill and appreciate very much the opportunity to express our views to you. We are discussing the many implications of the bill here in our department since we are anxious to have the reaction from our instructional personnel as well as our staff members responsible in the areas of guidance and pupil services. We shall be happy to present a written statement to you in the near future and would also like to explore the possibilities of being able to talk with you about the bill. I shall contact you again directly relative to the possibility of setting up such an appointment.

We are most appreciative of your leadership in the highly important area of meeting the needs of our children and youth.

Sincerely yours,

SARAH L. LEITER,
Supervisor of Pupil Services.

STATE OF INDIANA,
DEPARTMENT OF PUBLIC INSTRUCTION,
November 10, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR SIR: I am in receipt of your letter dated November 5, 1965, and I am more than happy to react to your proposed legislation, Elementary and Preschool Child Development Act.

As an educator involved with emotionally disturbed children on the State level, I am well aware of the need of early identification of the disturbed child and the desirability of corrective action during the infancy of weak personality development.

Manifestations of learning disorders result in the growth of many social ills that deter the realization of our society's potential. Remediation of these potential social illnesses should be enacted now to aid in the prohibitive costs of institutionalization, crime and unemployment that will plague our Nation in the future.

Reliable research has indicated the accuracy of teacher identification of the young child with an emotional conflict that impedes academic growth. Teachers are cognizant of these children and have the willingness to aid, but the regular classroom teacher needs support, consultation, and the benefit of a more specialized individual. Such an individual is identified in your bill H.R. 11322.

Your bill would provide a real service to the young children of our country and to our society, present and future. I fully endorse your proposal and offer my services in any way possible to aid in the enactment and implementation of your bill.

Very truly yours,

DOUGLAS L. SLUSHER,
Supervisor, Programs for the Emotionally Disturbed, Division of Special Education.

STATEMENT BY BERNARD SPODEK, ED. D., ASSOCIATE PROFESSOR OF ELEMENTARY EDUCATION, UNIVERSITY OF ILLINOIS, URBANA, ILL.

For a long time educators concerned with the education of young children have been aware of the relationship between education and development as well as the impact of the early childhood years on the total pattern of human development. In recent years there has been a growing concern nationally for improving the conditions under which young children are educated and reared not only as a means of meeting needs of individuals but as a way of attacking the problems of our society. H.R. 11322, the Elementary and Preschool Child Development Act, will provide a valuable resource in this attack.

An increased body of research and theory is developing to support the notion that the early childhood years, primarily between the ages of 3 through 9, represents one of the most important formative periods in the life of the child. The experiences that a young child has at this level will have an impact on his later school achievement, personal adjustment, and on the contribution he will make as an adult to society. Children with behavioral problems, who may become school dropouts, juvenile delinquents, or who may become maladjusted can be identified during this early childhood period with a high degree of success.

It is also important to note the impact that schools can have on the life of the child at this period of development. Practically all children ages 6 through 9 attend school in the primary grades, a majority of children age 5 attend public kindergartens, and an increasing number of children ages 3 and 4 are attending nursery school. Often these first years in school represent the first time that children are establishing meaningful relationships with professionals as well as with objective adults in the larger communities. Children's problems that are often overlooked by parents are often identified by teachers. Unfortunately these teachers too often lack the resources to deal adequately with these problems. These early years of school can have a greater impact on children, in helping them develop normally and healthily, if the resources for the identification and solutions of children's problems are available early enough.

The key to the solution of developmental problems lies in their early identification as well as in program of prevention. Long experience in medicine, welfare, and mental health has demonstrated that preventive programs are not only less expensive in the long run but are also less destructive to individuals and society than are programs of later remediation and treatment. The provision of child development specialists in schools for young children would allow for necessary programs of prevention and identification.

While teachers are often aware of the problems that children bring to school they generally lack the knowledge and skills that need to be brought to bear in dealing with these problems. The training of teachers does not provide for the development of the necessary skills and knowledge to deal with developmental problems. Also, given the broad range of tasks expected of teachers, and the number of children that they must deal with daily, teachers are already far too overloaded without expecting them to assume new responsibilities, especially responsibilities that require specialized skills.

The provision of a child development specialist that will act as resources for teachers and parents is a very valuable addition to school services. Such a specialist working in the capacity suggested in the bill will not undermine the role of parent or teacher, but will rather augment each role, providing the people responsible for the rearing and education of the child with an additional skilled hand.

Since the child development specialists will help teachers, parents, and school personnel become knowledgeable about community resources for children and family, the bill will also strengthen the relationship between school and community and between home and community. One of the significant aspects of the bill, therefore, is that it will help to coordinate all the resources, home, family, and community, that can help support the healthy development of children. This means that the total resources of a community can be marshaled when the need arises while unnecessary duplication of services can be limited.

While the provision for child development specialists in schools would by itself be a positive step toward providing for the fullest education of children, the bill goes a step further in supporting training programs at the graduate level for the preparation of child development specialists. Early childhood educators have been made painfully aware of the relationship between adequate numbers of trained staff persons available and the extension of new services. We have seen the problems that have arisen in Headstart as the program had to hunt for already scarce personnel with adequate training. The support of the training of the child development specialist in the bill is a valuable portion of that bill and will work to insure the success of the idea embodied in the bill. The kinds of skills and competencies expected of the child development specialists will require training at the graduate level and will need to be based upon adequate procedures of selection and recruitment. The provision for stipends will allow for such selection procedures. Hopefully, universities that now have programs in child development will have the responsibility for providing the best possible programs to prepare these specialists.

In summary I would like to say that I wholeheartedly support the concept embodied in H.R. 11322, the Elementary and Preschool Child Development Act. This bill can provide the resources to make the education of young children a more meaningful and more significant activity. It will support schools and families in their work with children, and coordinate school, family, and community resources to meet the developmental needs of children. Such a program will help children at the years when there can be maximum impact in the developmental pattern, and will act as a preventive measure, avoiding the serious extension of early developmental and learning problems into later years.

STATE OF FLORIDA,
DIVISION OF ECONOMIC OPPORTUNITY,
Tallahassee, October 1, 1965.

Hon. SAM GIBBONS,
Member of Congress,
Room 122, Old House Office Building,
Washington, D.C.

DEAR SAM: Please permit me to personally congratulate you for the legislation that you are diligently working toward as per enclosure. Should there be any variance in the true facts from what is on the printed page, please send me a copy of such material that you have prepared that will give me the complete story.

Further, if I can be of any help in generating grassroots support in a professional way, please give me the word. I understand you are scheduled in Clearwater next week for the State health convention and I shall look forward to seeing you there.

Sincerely,

WALTER KEYES, *Director.*

STATE UNIVERSITY COLLEGE,
Buffalo, N.Y., December 14, 1965.

Hon. SAM GIBBONS
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: Congratulations on introducing the H.R. 11322 bill relating to the Elementary and Preschool Child Development Act. This is an area which needs strengthening in our schools. I would like to encourage you to push the idea forward as quickly as possible.

If I can be of any help to you, please feel free to call on my services.

Very truly yours,

LORRAINE LANGE,
Director, Elementary Education Division.

NEW YORK UNIVERSITY,
SCHOOL OF EDUCATION,
New York, N.Y., November 22, 1965.

Mr. SAM M. GIBBONS,
U.S. Congressman,
Room 1232, Longworth Building,
Washington, D.C.

DEAR MR. GIBBONS: I have reviewed the bill which you have introduced to provide a good start program concerned with the early detection, correction, and prevention of learning disorders which at times result in delinquency and other disruptive behavior.

This bill is to be highly commended. It has long been recognized that failure in the early years is cumulative in effect, and that many adults who do not function as constructive members of our society are those whose early difficulties were ignored.

Project Head Start has been an excellent beginning, but unless children can continue their schooling during the primary grades (and beyond) in situations which give adequate attention to their individual learning problems the Head Start gains will be lost. Your bill provides the very continuum which is needed. There is no doubt that teachers will be able to work more effectively with children if they have the assistance of a child development specialist.

In this Nation we have recognized the importance of learning; we need further recognition of the fact that children cannot learn when they are unable to cope effectively with the pressures of their environment. The child development specialist who can give aid to the teacher in her work of facilitating learning can make a significant contribution to education and to society.

I am pleased to have this opportunity to express my support of the good start program you have proposed.

Sincerely,

BLANCHE PERSKY,
Professor of Education.

BROOKLYN COLLEGE OF
THE CITY UNIVERSITY OF NEW YORK,
Brooklyn, N.Y., November 12, 1965.

Hon. SAM M. GIBBONS,
House Representative, Longworth Hall,
U.S. Congress,
Washington, D.C.

DEAR MR. GIBBONS: Thank you very much for your letter and for sending me a copy of the bill you are sponsoring.

I am very happy to think you wish to stimulate young children to learn more effectively so that they will become increasingly absorbed with their schoolwork. Generally speaking, good students become so interested in obtaining an education that they find their study both fascinating and a means to successful employment later—and thus avoid a delinquent career, as you suggest.

If possible, I wish you could increase the coverage of your bill. Many students also slump in high school, particularly when confronted with the mysteries of algebra (with its abstract concepts) and with foreign language. Some provision for tutoring high school students who are doing poorly through extending the services of the faculty would seem important. The current projects in volunteer tutoring are splendid, but some plan for tutoring children who are bogged down in their lack of comprehension and have no one at home to explain what the teacher has failed to make clear should be a very important way to prevent dropouts. And, of course, teachers should teach better.

All good wishes to you in your attempts to substitute effective learning as an antidote to delinquent behavior.

Sincerely yours,

MABEL A. ELLIOTT,
Adjunct Professor of Sociology,
Formerly of Chatham College.

RUTGERS, THE STATE UNIVERSITY,
DEPARTMENT OF SOCIOLOGY,
New Brunswick, N.J., December 1, 1965.

SAM M. GIBBONS,
U.S. Congressman, House of Representatives, Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for your letter of November 5, 1965, inviting me to comment on your Elementary and Preschool Child Development Act which you have introduced in the House of Representatives. This bill is timely and necessary and deserves immediate, positive action by the Congress. I sincerely hope that such action is forthcoming.

Recent sociological findings have indicated that much of the behavior of problem youth is the result of the social experiences that have impinged upon them and have become part of their mental picture of themselves—i.e., their self-concept. One's self-concept arises in part out of familiar interaction and the reaction of other people who are important to the individual. With this idea it is not difficult to understand that if there is enough social identification and if adult figures are available to the child for positive behavior emulation, he will define himself satisfactorily within the framework of the larger society. The school, of course, plays an important role in this aspect of a child's personality development. When classes are too large, when personnel are scarce, and when teachers lack the necessary child development training it is difficult for the school to provide the best possible learning environment in which each child may best develop his personality and academic capabilities.

Admittedly, adequate social identification is not a great problem for some children. They come from stable, cohesive families; they are indoctrinated with middle-class values; they are rewarded or punished justly by their parents; and they emulate the wholesome behavior of their parents. If one of these ingredients is weak, it may well be compensated for by the school, the church, or other community agency. What these children may need is periodic reinforcement to strengthen their already good self-image, and this reinforcement is usually given by the teacher in the normal course of activities.

Unfortunately, problem children do not experience this kind of situation. Most of them do not come from stable, cohesive families; most of them are not convinced of the goodness of middle-class norms; and most of them can see little reason to emulate positive adult behavior. Therefore, the self-concept that arises from their familial interaction is weak, and they are more susceptible to the deviant influences they encounter in the neighborhood and on the street. Their school performance is generally poor, and this fact further compounds their feelings of unworthiness and self-deflation. Child development specialists, available in the schools, could undoubtedly have a significant impact on these children who need more from the school situation than the regular classroom teacher can provide. Individualized or small group programs aimed at strengthening the child's self-concept so that it will serve as a buffer against deviant influences could become a reality if the needed personnel were available and properly trained. The Elementary and Preschool Child Development Act appears to be a major step toward that goal.

As you have indicated in the Congressional Record of September 30, 1965, the problem of spotting the children who need help is rapidly being overcome. Many studies have shown that, in addition to predictive tests, a mother, a teacher, or, at a later age, a child himself can predict with great accuracy his future behavior. The teacher's judgment appears to be especially important. This fact and its implications can be of great value to inschool rehabilitative measures such as would be instituted by child development specialists made available through your bill.

Although the majority of our youth are not dropouts, delinquents, or maladjusted in any significant way, we as a society cannot be satisfied. The great number of children who are not taking full advantage of their educational opportunities are doing irreparable damage to themselves and the Nation. Without a doubt, if intervention techniques are not effectively implemented when these children are young, the later social costs can be staggering. This bill is aimed at early intervention by highly trained personnel within the elementary school setting during the time when children who need help are most likely to be influenced by such special efforts. There is at this time no nationally supported program that attempts to achieve this goal, an oversight that must soon be remedied.

Sincerely,

FRANK R. SCARPITTI, Ph. D.,
Assistant Professor of Sociology.

STATE OF NEW JERSEY,
DEPARTMENT OF INSTITUTIONS AND AGENCIES,
Trenton, December 7, 1965.

Hon. SAM M. GIBBONS,
House of Representatives, Congress of the United States, Washington, D.C.

DEAR CONGRESSMAN GIBBONS: We are pleased to have our attention directed to H.R. 11322 introduced in the Congress on September 29, 1965, and to have this opportunity to endorse this proposal.

Sufficient evidence has now been produced in the fields of psychology, education, and sociology that we do have adequate knowledge of how to deal with young children with incipient behavior problems if this knowledge can be brought into focus for such children. Skills in the use of this knowledge and its application to specific children must be learned and although there is much work yet to be done in the development of such skills, this bill does direct attention to a vital need and proposes that as a nation we try to do something about it.

Evidence that the problem can be dealt with best during the early years of elementary school and on a preschool level is overwhelming. One might quarrel with specific provisions of the bill and modifications in the program will undoubtedly become necessary as experience is gained with this effort. Nevertheless, the bill deserves the earnest consideration of Congress and the support of all citizens.

Sincerely yours,

ALBERT C. WAGNER,
Director, Division of Correction and Parole.

CALIFORNIA STATE COLLEGE AT LOS ANGELES,
November 10, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman, 10th District, Florida,
Longworth Building, Washington, D.C.

SIR: Your letter with its enclosures of the bill (H.R. 11322) and your remarks from the Congressional Record fill me with enthusiasm and gratitude that someone in a position such as yours is concerned and intimately acquainted with the problems that you discuss. I like the whole proposal very much. You asked me for a statement expressing my views on the bill and I can say unequivocally that I think it would fill an urgent and critical need.

I find that most of the thoughts that I have in connection with it have to do with the implications of the bill rather than the bill iself. Everyone would agree that something should be done to prevent failures in educational development, delinquency, maladjustment, psychotic, and criminal behavior. It appears to be implicit in your thinking that the precursors of these conditions in adolescence can be identified and treated at the childhood levels. I agree with this point of view thoroughly, but the supportive data for such an opinion are unfortunately highly subjective, fragmentary, dispersed, and somewhat controversial.

As I see it, a gigantic research investigation must be carried out in order to establish with scientific reliability the connections that do exist between childhood behavior and adolescent difficulties.

A sociologist at Berkeley, whose name escapes me at the moment, recently made the statement that potential delinquency can be predicted with about 80 percent accuracy by the age of 6. If this is true, and I have no reason to doubt it, we must systematize these characteristics, identify them, and treat them.

The second important problem that I see concerns methods of treatment. I have recently traveled from coast to coast visiting university training centers and public and private schools for children with learning and behavior problems. The criteria for identifying such children are now fairly well developed, but I find great divergence of opinion with respect to etiology, diagnoses, and treatment. There is a particular confusion with respect to the category of "emotional disturbance." A strong trend throughout the Nation seems to be to label any child with unsatisfactory adaptations in emotional life as "emotionally disturbed," and implicit in this label for many professional people is the assumption that the disordered emotionality derives almost exclusively from distortions and dislocations of family life, and that the indicated treatment is by way of referral of family and child for some form of counseling and psychotherapy.

It has been my considered opinion for several years now that this sweeping point of view urgently needs revision. The advances in medicine and psychiatry clearly indicate the influence of an organic condition in thousands of children with learning and behavior problems. No less a child psychiatrist than Dr. Louri, of Washington, D.C., made the statement in June at a conference that I attended there (sponsored by Matthew Trippe, Office of Education) that in his opinion approximately 80 percent of children referred for learning and behavior problems are influenced by organically based conditions.

It no longer makes sense to attempt to divide these problems into arbitrary categories of emotionally disturbed and neurologically impaired. It is all too obvious that neurological impairment has, as one of its major effects, a disorder of emotional life. Furthermore, the psychotherapeutic approach does not by any means always bring beneficial results and, even where it does, it usually is too late and too little.

You are proposing, as I do, to attempt to stem the rising tide of disorder through educational means. Such an approach requires that teachers learn how to cope with most of these conditions in the classroom. I strongly believe that the kind of therapeutic education that I envision as a result of your bill can ultimately make a momentous difference in the incidence and gravity of juvenile problem.

I commend your energy and intelligence in the work you have done thus far, and I include every good wish for its speedy consideration and implementation.

I am not only in charge of a training program for teachers of severely emotionally disturbed children, but a former teacher of elementary and high school children. I still hold valid teaching credentials in the State of California. It would be possible, I think, to secure a year's leave of absence for this purpose.

Thank you for writing to me. I hope that my statements have been of value to you .

Very truly yours,

ALICE C. THOMPSON, Ph. D.,
Associate Professor of Psychology,
Director, Learning and Behavior Problems Project.

SAN JOSE STATE COLLEGE,
San Jose, Calif., November 24, 1965.

Mr. SAM M. GIBBONS,
House of Representatives,
Congress of the United States,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: This letter is in reply to your request for my viewpoint on your bill 11322 relating to the good start program. My reaction to the bill is a very positive one. You have recognized the fact that it is at the kindergatren-primary level where guidance and remedial practices can be most effective, and that behavior change at a later stage is much more difficult to effect.

The type of specialist you propose could do much, not only in direct services to children, but also in helping teachers, counselors, parents, and other personnel be more effective in their work with children. As your bill is described, there should be no conflict with or duplication of NDEA and elementary guidance as it is described there. Rather the child development specialist should provide a valuable supplement to the regular guidance services.

Possibly one reason I feel strongly about this is because my wife is actually functioning in this capacity now. It is not that there were existing programs available, but rather that we carefully tailored her training and experience in that direction. We have seen so many good results from her efforts that we wish that this type of opportunity were possible for many more people and school districts.

We have been trying to develop such a program for our summer session on an experimental basis. Difficulties of finance, however, when we have attempted to point the workshop at the K–3 level have made it difficult to convince people of its feasibility.

The only possible modification that comes to my mind at this time relates to section 101(b). The emphasis is on problem behavior and remedial action. Possibly this is important to assist in passage of the bill. While recognizing the importance of remedial diagnostics and treatment, I believe there is a more postive approach that will be useful with a broader spectrum of the students. This approach stresses the identification of assets in people—areas where they have potential—and then capitalizing on those assets. The feelings of success tend to generalize and make individuals perform better in other areas. We have much evidence to support this approach. It not only makes the performance of the nonbehavior, problem children better, but it is basic to any remedial work. In other words, it can make the performers as well as the nonperformers more effective. It seems to me that the child development specialist would be a natural to assist other school personnel in this developmental approach. At present there are few school personnel properly educated to do this.

One other area of question that possibly has been brought before you already is one that school psychologists or school social workers might raise. They could be expected to say that what the child development specialist would propose to

do is a function that they are already doing. I don't think they could support such an assumption—because neither their training nor the work they actually do falls into the child development specialist category.

As you can see, my enthusiasm for your proposed program, as I understand it, is very high. I should say that I checked through with friends of mine in National Mental Health, the U.S. Office of Education, and in your home State of Florida. Their responses have indivated both your interest in children and your sincerity in wanting to help them. It is always gratifying to find that combination present among lawmakers or others.

Thank you, then, for soliciting my opinions on your bill. I shall be happy to help you in support of it and to cooperate in any way I can.

Sincerely yours,

JOHN A. BARR, Ph. D.,
Coordinator Counselor Education.

LAW SCHOOL OF HARVARD UNIVERSITY,
Cambridge, Mass., November 12, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: Mrs. Glueck and I have gone over H.R. 11322 and think it an important and overdue bill.

In our numerous researches into delinquency we have found the first 5 or 6 years of life absolutely crucial to the child's development of personality and character which are hard to change as he grows older. We have also found that many an emotionally disturbed or delinquent child failed to be recognized sufficiently early in life and was denied guidance and therapy at a stage when the twig could still be bent. We are therefore enthusiastically in favor of this bill.

We think that the provision for an Advisory Council on Elementary School Child Development a sound one, and believe the provision for encouraging the increase of well-trained child development specialists reflects both realism and farsightedness. Too often, I need hardly tell you, the public and legislators think that all that has to be done to cope with a serious problem is "to get a law passed." But laws do not enforce themselves, and proper human and administrative implementation of a statute means everything.

With all good wishes, I am.

Sincerely,

SHELDON GLUECK,
Roscoe Pound Professor of Law, Emeritus.

UNION FREE SCHOOL DISTRICT No. 16,
TOWN OF HEMPSTEAD,
NASSAU COUNTY,
Elmont, N.Y., November 16, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
10th District,
Tampa, Fla.

DEAR CONGRESSMAN GIBBONS: Your letter of November 5 and enclosures are acknowledged. I appreciate the opportunity to comment on your proposed bill H.R. 11322.

I am in complete agreement and would strongly support the general provisions of the bill. There is no doubt in my mind from our experience here in Elmont and in other areas of the country where we have helped establish programs, in early identification and adaptation to the educational needs of schoolchildren, that educators need assistance in both the areas of how to identify what is operative with children and then how to adapt the educational enterprise to these needs. The critical shortage of clinic people, including psychologists and psychiatrists, clearly indicates that the country cannot rely on these people quantitatively. Costs involved in utilizing their services, even if there were enough of them, are another factor that many communities would find difficult to accom-

modate. Therefore, their knowledges and skills, to the extent practicable, must be extended to other professional people in greater supply and through the use of nonprofessionals. Your bill would do much to develop a pool of people with the skills necessary to assist school people to identify early those children whose underachievements and other symptomology suggests the possibility of them becoming school dropouts, delinquents, and seriously handicapped.

I endorse the allotment of Federal funds to the State educational agency for administering the plan with the provision that the child development specialist become an employee of local school districts under the jurisdiction of local boards of education and chief school administrators. Supervision of the assignment of the child development specialists should remain with the State educational agency to insure that these people are used solely for the purpose intended, although supervision of their day-to-day ongoing activities would be vested in the local board of education and its chief school administrator.

The second reason I feel your bill should be strongly endorsed is that it moves in the direction of providing the schools with the resources needed to make them more effective in identifying early what is operative with children that is undesirable and then being in a position to interfere with the process. There is now functioning throughout the country a multiplicity of agencies, many with partial Federal support, dealing with various aspects of children's problems. This has led to a fragmentation of the child so that in many cases what is known about the child and what the agencies are doing never gets pulled together in terms of the child as an individual. The child development specialist could very well become the coordinator of the efforts of these agencies so that their resources are integrated in terms of a coordinated remediation of what is operative with the individual child. The child development specialist could interpret all of this to parents so that they begin to understand the total prescription. As we are functioning at the moment, in many communities parents and their children are referred from one agency to another and from one specialist to another who do not get together in terms of the child as a total entity and a human being. The schools, in my opinion, are the only institution in our culture large enough, and with a staff already partially oriented to children's developmental problems to begin to cope with the numbers involved. What your bill will do is provide the schools with resource personnel within the framework of the school systems and not by the establishments of another agency that might or might not be coordinated with the schools' efforts.

The opportunity to support H.R. 11322 is appreciated.

Sincerely yours,

GEORGE T. DONAHUE, Ed. D.,
Assistant Supervising Principal.

NATIONAL KINDERGARTEN ASSOCIATION,
New York City, December 31, 1965.

Hon. SAM M. GIBBONS,
Congress of the United States,
House of Representatives, Washington, D.C.

DEAR MR. GIBBONS: We have reviewed the provisions of the bill you recently introduced entitled "Elementary and Preschool Child Development Act" (H.R. 11322). Enclosed is our official statement for the record. You will note that we are entirely in favor of this bill but that we have suggested certain amendments that we feel are essential if the bill is to correct the situation for which it is intended.

Thank you for the opportunity to submit a statement for the record. If we can ever be of additional assistance, please let us know.

Sincerely yours,

WILLIAM F. WESTLIN, M.D.,
President.

STATEMENT BY WILLIAM F. WESTLIN, M.D., PRESIDENT, NATIONAL KINDERGARTEN ASSOCIATION

The National Kindergarten Association wishes to go on record as being in favor of the Elementary and Preschool Child Development Act (H.R. 11322). It is a well-known fact that the learning, emotional, and behavioral problems of the adolescent and adult have their origins in early childhood. The child

learns more in his first 8 or 9 years than he will in the remainder of his lifetime. Chances of success in correcting learning, emotional, and behavioral difficulties are greatly enhanced by early detection. The present organizational structures of our school systems do not provide the means to detect and correct other than the most overt cases of underachievement and emotional and behavioral problems.

The National Kindergarten Association would like to see the Elementary and Preschool Child Development Act include provisions to encourage States to provide kindergarten facilities for all children. At the present time nine States do not provide public school kindergartens. Only 25 percent of the 35,000 school districts in the United States have public kindergartens. Nearly half of the 5-year-olds in this country are denied the kindergarten experience. A truly "good start" requires kindergarten training. There is abundant evidence that the child who has attended kindergarten makes a better adjustment to school and achieves more in first grade than the nonkindergarten child. The time to pick up learning, emotional, and behavioral problems is before demands are placed upon the child in first grade.

The National Kindergarten Association believes that H.R. 11322 should be amended to provide the following:

1. Only those States providing public school kindergartens for 10 percent of the eligible children in that State would be eligible for funds in fiscal 1966.
2. Only those States providing public school kindergartens for 25 percent of the eligible children would be eligible for funds in fiscal 1967.
3. Only those States providing public school kindergartens for 50 percent of the eligible children would be eligible for funds in fiscal 1968.
4. Only those States providing public school kindergartens for 75 percent of the eligible children would be eligible for funds in fiscal 1969.
5. Only those States providing public school kindergartens for 90 percent of the eligible children would be eligible for funds in fiscal 1970 and beyond.

These amendments to H.R. 11322 would guarantee that by 1970 hardly a child would be denied the opportunity to a "good start."

AMERICAN ASSOCIATION OF SCHOOL ADMINISTRATORS,
Washington, D.C., November 23, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you very much for your letter of November 9, the copy of H.R. 11322, and your explanation of this proposed legislation which was inserted in the Congressional Record.

We have examined this proposed piece of legislation very carefully and can tell you that we are heartily in accord with its general purposes. You most certainly are to be commended for this effort. We are especially pleased to note that the bill emphasizes assistance and support to teachers and parents within the school setting rather than attempting a takeover of basic parental and professional responsibilities.

You are also to be commended for the fact that this bill does not require matching funds from the States. Matching negates the effectiveness of legislation in those States and communities where there is the greatest need.

We are assuming that it is your desire to put the administration of this bill into the same framework as Public Law 89–10, the Elementary and Secondary Education Act—this framework being grants by the Federal Government to the States, which in turn make grants to the local public educational agencies for services or supplies which are equally available to public and nonprofit educational agencies. To establish a different framework for this piece of legislation would, we believe you will agree, cause a great deal of confusion.

In our reading of H.R. 11322 we note that, no doubt through inadvertence, a different framework of administration has been established, notably in title II, sections 201 and 203. We believe that this could be changed rather readily to place the administration of this legislation in the same channel as Public Law 89–10. For instance in title II, section 201, line 11, after the word "acted"

insert "by local public educational agencies." Again in section 203(1)(A) line 11, change the word "State" to "local educational agency." In line 12 after the word "assigned" insert "by the local educational agency." The rest of that paragraph after the word "agencies," in line 14, could be eliminated.

These suggested changes would have the effect of having Federal funds granted to the State which would then, in turn, make grants to the public school agency which would employ child development experts in the ratio specified. The services of these child development experts then would be equitably divided between the local public schools and the nonprofit educational agencies in the community, but the control and supervision would rest with the local public school agency.

There may be other minor revisions which a legislative writer would discover which would be necessary to carry out this spirit behind the administration of the bill.

If the bill is thus revised to place it in the same administrative framework as Public Law 89–10 as suggested above, I believe that you could be assured that our association would make a formal statement of endorsement and pledge assistance in implementation of the bill.

Sincerely yours,

FORREST E. CONNOR,
Executive Secretary.

THE STATE OF WISCONSIN,
DEPARTMENT OF PUBLIC INSTRUCTION,
BUREAU FOR HANDICAPPED CHILDREN,
Madison, Wis., November 16, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: This is in reply to your letter of November 2, 1965 concerning H.R. 11322 relating to Federal financial assistance for the training and employment of elementary school child development specialists.

Your legislative proposal is most provocative and fiscally well developed.

I fully agree with your idea that the elementary schools of this country need help in detecting and resolving the early emotional dysrhythmia and the predelinquent behavior of thousands of children.

Your procedures for providing Federal support for the training of workers in this field is sound in that it uses the State department of education as the "pivot" to make these Federal funds available to local and State school systems.

The concept of a child development specialist is not completely defined as those of us in functional school administration might desire and information relating to competencies of these professional workers would aid the school administration group. I see some vagueness also in relation to the primary emphasis in the formal and practicum training of these new school workers. Would these specialists have a primary orientation in education, social work, psychology, sociology, or special education, or a combination thereof?

The only other question that I would raise in regard to this fine proposal is the method of installing and supporting these workers in the many nonpublic schools of our country. Many States, including our own, have rather rigid standards on the use of State funds, regardless of their original source, for sectarian and private instruction.

I commend you for your creative effort in trying to assist the schools in resolving the complex problems of the millions of elementary students in our American schools. I'm sure special educators and generalists all over the country see great possibilities in this proposal. All it needs is the understanding of school people, parents, and our U.S. Congress.

Cordially yours,

JOHN W. MELCHER,
Director.

WAYNE STATE UNIVERSITY,
Detroit, Mich., November 15, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

MY DEAR MR. GIBBONS: The fact that H.R. 11322 has been introduced in the House of Representatives to provide for the training and services of child development specialists for elementary schools interests me very much. Certainly its emphasis on the identification and treatment of child development problems at an early age is most commendable. As you point out, there are several research projects to support your point of view.

There are some questions which I would raise in clarification. As I read the bill, its concerns are directed to the primary school rather than elementary school which usually serves K–6. The primary school, or early childhood education, refers rather more accurately to those ages about which the bill seems most concerned; namely, 3–9. Another point about which I am uncertain is related to what the 350 children represents. Is this the anticipated caseload of the child development specialist, or the enrollment figure of the primary school in which he or she is to work? My hope would be that the qualifications for the child development specialist would insist upon not only psychology and development knowledge, but also some evidence of competence in teaching in the primary school, perhaps 3 years. My feeling would be that this would strengthen the specialist's work immeasurably in terms of working with teachers in imaginative ways for the benefit of troubled children.

I have appreciated having an opportunity to react to the bill.

Sincerely.

NORMA R. LAW,
Professor, Elementary Education and Director of WSU
Nursery School at Jeffries Homes.

SAN FERNANDO VALLEY STATE COLLEGE,
Northridge, Calif., November 16, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
House of Representatives, Washington, D.C.

DEAR MR. GIBBONS: Thank you for your invitation to react to H.R. 11322. I had already read the legislation in response to an invitation from the chairman of our guidance-psychological foundations department.

The legislation is commendable in addressing itself to two exceedingly important problems, early identification of children who may not be succeeding educationally and provision for preparation of specialized personnel.

I would like to see the functions of the child guidance specialist made clearer. When I read the bill I interpreted it as meaning that the specialist would work with teachers and other school personnel in a consultative and inservice capacity. In talking with others, particularly those who noted the 350 child-to-specialist ratio, it appears that others see the specialist as working more directly with children.

Certainly the composition of the advisory group will be very important, and should include a high proportion of district personnel, including classroom teachers who can develop guidelines and ways of working which will be of greatest practical help to the teachers.

Coordination with colleges to develop adequate preparation programs will be vital.

Finally, although I know that many persons would like to see the services include all of the elementary grades, I agree with your reasons for focusing on the early years and avoiding a dilution of services. If we can prevent learning failures we will gain most, and prevention should be undertaken at the earliest possible levels.

Again, thank you for the opportunity to respond. We are hopeful that this legislation will soon make possible much needed services.

Sincerely yours,

ELIZABETH H. BRADY,
Associate Professor of Education.

TAMPA, FLA., *October 27, 1965.*

Representative SAM M. GIBBONS,
Longworth Building, Washington, D.C.

DEAR MR. GIBBONS: I wanted to write and add my approval and support to your efforts at doing something about emotional problems in the early years of a child's schooling. As a child psychiatrist, I often see the teenager who is in serious trouble with the rules and regulations of society. At these times I am impressed that something should have been done much earlier. Occasionally I do see a very young child whose parents are either motivated or wise enough to realize the handwriting on the wall. More commonly, the situation boils over and the parents are then forced to seek help.

I do hope in setting up your program you will be able to combine a number of things. Many times, seeing a psychiatrist is simply not enough and we need a total approach program. It will also be important to recognize that families with these kind of problem children often are hesitant about recognizing the problem as well as seeking any help. Quite often the child's problem is a reflection of some uneasy feelings within the family itself and this makes it very difficult for the family to take a look.

While we are on this subject, it would be very helpful to have a similar rehabilitation program for the older teenage child. These children with severe behavior disorders many times need a place outside of the home where they can go and grow up all over again. By this, I mean they need to have a long enough association with emotionally healthy people so they can form a relationship, much like the child does with the parent, and thereby internalize the values of these new parent figures. The more extreme problems would need this kind of environmental setting. The less extreme ones could be handled if the total family would get into what we call family therapy. In this, the key members of the family are seen together in an effort to untangle the problems. In addition, of course, it is often necessary to have much help from other agencies, against a total approach. Hopefully, the community mental health centers may be able to fill this need.

I appreciate your interest in these areas and would be glad to communicate further with you, either personally or otherwise if you wish.

Sincerely,

W. C. RIPPY JR., M.D.

HILLSBOROUGH COUNTY PUBLIC SCHOOLS,
KNIGHTS ELEMENTARY SCHOOL,
Plant City, Fla., November 3, 1965.

Hon. SAM M. GIBBONS,
House of Representatives, Washington, D.C.

DEAR SAM: I'm sorry that I didn't receive the copy of H.R. 11322 in time to reply by October 20. In fact, I received it on October 22.

Of course, I am in favor of such legislation. To my recollection, few efforts by Federal Government have been made to aid the educational program at the crucial primary level. This plan of yours is most commendable in that respect. We who attempt to guide and develop children in their formative years have been aware for a long time that too little has been done for the very young child.

Any plan of such magnitude as you propose is fraught with the danger of becoming unwieldy; the success will depend on conscientious administration and the degree of skill of the trainees. It will not change the home environment of the children it is designed to help, but no single plan could possibly be a cure-all.

I wish you success in this endeavor.

Sincerely yours,

FRANK F. WHITTON, *Principal.*

STATE OF ILLINOIS,
OFFICE OF THE SUPERINTENDENT OF PUBLIC INSTRUCTION,
Springfield, December 17, 1965.

Hon. SAM M. GIBBONS,
U.S. House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: I am transmitting this letter in response to an invitation to write to you concerning House bill 11322 of the 89th Congress, 1st session, which provides a program of assistance to elementary schools for child development.

The directors of special education, guidance, school social work, school psychology, and elementary education have examined in detail this important new legislation.

We in Illinois have assumed a developmental approach in working with children in our pupil personnel services. In kindergarten and primary grades, our approach is somewhat different than the generally conceived ideas of the elementary school counselor as described by the American Personnel and Guidance Association in testimony before your committee. Indeed, our approach has been more research on specialists and has rapidly developed into specialists very similar to those desribed in this new legislation. We have termed these people as "primary school counselors" and have described an educational and experience background that would coincide closely to the proposed legislation.

We hope that if the Congress in its judgment enacts into law this new concept, that has tremendous implications for our youth, that some of the work accomplished by our staff members and our universities and colleges might be considered in further identifying these pupil personnel workers and their responsibilities.

If I, or members of our staff can be of assistance to you or members of the committee, please contact us at your convenience.

Sincerely,

ROBERT H. ZELLER, Ed. D.
Assistant Superintendent,
Division of Pupil Personnel Services.

STATE OF COLORADO,
DEPARTMENT OF EDUCATION,
Denver, Colo., December 1, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for allowing me to respond to the proposed legislation which you have recently introduced.

In performing my duties as director of the Division of Special Education Services, and as a member of the Juvenile Parole Board for the State of Colorado, I am well aware of the problems which this bill is meant to resolve. The bill is an excellent one, and it has several outstanding features. The first is that it recognizes the need to identify the children with problems at an early age and to immediately attempt to rectify or modify the behavior of that child. The second is that it acknowledges the need for well-trained specialists to adequately understand and effectively deal with the problem. The bill further indicates sound planning in that the first year emphasizes the training of such personnel so that they do become available. The third feature is that the specialists at the local level will receive supervision and consultation from their counterparts at the State level. The fourth feature is that of training teachers and principals in how to work effectively with child development specialists.

These combined features make H.R. 11322 a superb bill. It clearly avoids some of the pitfalls of some legislation that provides money for programs without first providing adequately for the training of qualified personnel. These qualified professional workers will make possible the sound development of programs for children with problems because the schools will know from adequate evaluation and assessment, the kinds of children with which they are dealing.

I do feel that it is important that the present wording be clarified to indicate clearly that the child development specialist be employed by the local school district, that district to be reimbursed by the State education agency. The actual administration of the program should be vested with the local school district.

Schools desperately need the kind of assistance that this bill would provide. May I commend you for having written it. I hope that soon, I may extend my thanks to Congress for having passed it.

Sincerely,

JOHN A. OGDEN, ED. D.,
Director, Special Education Services.

STATE OF COLORADO,
DEPARTMENT OF EDUCATION,
Denver, Colo., November 17, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for providing me with an opportunity to examine a copy of bill H.R. 11322, which you introduced recently. I have read it with a great deal of interest and believe that it is a very challenging effort to meet a most urgent need in the education of our children. Let me say that I have three distinct, positive reactions to your bill:

1. Emphasis is properly placed from a preventative point of view, inasmuch as it is commonly recognized that early childhood years, just the ones your bill specifies, are the crucial ones in the life development of an individual.

2. Placing priority on the training of specialists seems wise, as it is very likely that it would take some time to develop an adequate supply of persons competent in this area.

3. The amount of funds proposed would provide a very comprehensive effort. Of course, with many other educators, I share the point of view that this kind of attention to our children and youth is the surest guarantee of the future of our Nation.

Several questions occur to me in connection with the study of your bill. I mention only two, and at the same time, fully recognize that the answers to these questions would probably have to be arrived at one step at a time:

1. How would congruence of your program with the National Defense Education Act and the Elementary and Secondary Education Act be effected? (I think what I am concerned about is consistency in the overall planning.)

2. I note stress in the Congressional Record on the need to evaluate the effort of this bill along with other educational efforts after a period of experience with them. Would it be helpful to have some program of evaluation and research in the bill?

May I again express my thanks for the opportunity to examine this bill. I trust that my observations, along with those of many others whom I know you are contacting, will be of some benefit to you in this very worthwhile undertaking.

Respectfully yours,

H. EDGAR WILLIAMS,
Director, Guidance Services.

THE UNIVERSITY OF CONNECTICUT,
THE SCHOOL OF EDUCATION,
Stoors, Conn., December 1, 1965.

Hon. SAM M. GIBBONS,
Congress of the U.S., House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Your letter of November 5 is certainly of great interest to us who are involved with the education and/or prevention of the emotionally disturbed. The importance of this approach is enhanced for this bill begins to take delinquency out of correction and into that of prevention. Un-

doubtedly for too long a time the program of the dissocial child has been left in the hands of corrective agencies who, in the most part, have failed to grasp the concepts inherent in the causes of delinquency. A major concept of this bill is the spelling out of the role of emotional disturbance in delinquency. In other words, while one has said that a particular child was delinquent because he was caught and adjudicated, seldom has one looked into reasons why this had occurred.

Your bill has much merit in that it attempts to get at the preventive aspects. However, I feel that more emphasis has to be given to training these "child development specialists" to realistically work with the parents of these youngsters who are to be served. Your statement regarding the importance of the first three grades is true but the work done in the home will positively or negatively reinforce the work to be carried out by these "specialists." The extent to which positive parental relationships are established is to a large degree going to determine whether or not the program is respectively a success or failure.

Further, I feel that the strength of your bill is somewhat weakened when in essence the "developmental specialist" is placed in a state of limbo regarding the area of instruction and discipline. This is due to the fact that these two areas have respectively been traditionally delegated to supervisors and principals respectively. I do not wish to imply that what you want them to do is wrong, however, I feel that this has to be done by others and that the bulk of this specialists roll has to revolve around teacher-child-parent relationships so that consistency of action takes place. For it is my feeling that with consistency positive reinforcement will ensue so that positive habits will become the rule rather than the exception.

May I state that I strongly support Project Good Start. However, I feel that all studies conducted under this bill should have built-in evaluative instruments so that the success or failure of the program may be able to be ascertained at a future date. In regards to the results of such a program as proposed by your bill, I would have to concur with you that this should lead to better education and in turn to prevention of emotional disturbance and/or delinquency.

Thank you so very much for allowing me to make whatever contribution this letter may make. As you undoubtedly must be aware, I am quite interested in the problem and would like to be kept informed. In view of this I also would like to offer any assistance that I may be able to, for your project has the type of merit that engenders support.

Sincerely yours,

A. J. PAPPANIKOU,
Associate Professor of Education.

MICHIGAN STATE UNIVERSITY,
COLLEGE OF EDUCATION, DEPARTMENT OF
ELEMENTARY AND SPECIAL EDUCATION,
East Lansing, Mich., December 6, 1965.

Hon. SAM M. GIBBONS,
U.S. House of Representatives,
Washington, D.C.

DEAR REPRESENTATIVE GIBBONS: I have read your bill, H.R. 1132, to support the training of child development specialists. As one who has been intensively involved in and dedicated to the education of emotionally disturbed children and the training of teachers for children with behavioral disorders, I certainly support the philosophy of your bill and endorse your action and your remarks in the September 30, 1965, Congressional Record. The toll of failure to learn in the early grades of schooling is seen daily in our adolescents who are now on waiting lists and in fact are in institutions for the emotionally disturbed and delinquent.

May I suggest the following in regard to your bill:

(*a*) Some manner of special recruitment of males as child development specialists. Adequate male identification is necessary but we see very few in our teacher training programs.

(*b*) In your letter you indicated support from the National Education Association. If you have not already done so, you might include the Council for Children with Behavioral Disorders (a division of the Council for Exceptional

Children) for a supporting statement. I am certain that there would be considerable interest on the part of the behavioral disorders group. Dr. William Rhodes of the National Institute of Mental Health at Bethesda is the current president.

If I can be of additional support to your effort, please let me know. My own work carries me into many schools and there are constant requests for consultative service. There are too few qualified persons to do the necessary preventative work and it appears as if your action will help to meet the pressing need.

Sincerely yours,

JOHN L. JOHNSON, Ed. D.,
Assistant Professor, Elementary and Special Education.

DEPARTMENT OF SOCIOLOGY,
UNIVERSITY OF ILLINOIS,
Urbana, December 1, 1965.

Mr. SAM M. GIBBONS,
U.S. Congressman,
Tampa, Fla.

DEAR CONGRESSMAN GIBBONS: Your good start program for subsidizing the employment and training of specialists in the correction of children's learning defects can be a step toward making many children more successful in school, hence more successful in legitimate vocations, and in conventional social life. These kinds of success in alternatives to delinquent activities would contribute to the reduction of crime.

My only concern is that these services should be concentrated in those school districts where income is lowest, as brought out well in Patricia Sexton's "Education and Income." These are the children for whom school services and home supplementation of school services are most deficient. Work of such diverse groups as New York's Homework Helpers, the 3 PM project in Phoenix, and Chicago's store front study centers in Hyde Park shows that some of the most effective correction for these difficulties consists of programs after school hours, recruiting aid of somewhat older youth, and of housewives in the school neighborhoods.

Sincerely,

DANIEL GLASER,
Professor, Head of Department.

HARVARD UNIVERSITY,
GRADUATE SCHOOL OF EDUCATION,
November 15, 1965.

Hon. SAMUEL M. GIBBONS,
U.S. Congressman,
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: Thank you very much for your letter and the copy of the Elementary and Preschool Child Development Act. I read the bill with a great deal of interest and enthusiasm. I think the funds appropriated will contribute considerably to the reduction of mental illness in children. I also foresee lively interchanges among educators and psychologists concerning this bill; this in itself will be of considerable usefulness. I do not doubt for a moment that a training program can be devised to achieve the stated aims within the 2-year period. It is obvious that existing training programs do not meet the social need.

I have one question to raise concerning a point on page 15, line 7. It is stated that those applicants will be given priority whose undergraduate studies are closely related to the subject field. I gather the intention is to prefer people whose undergraduate work has been in psychology and related subjects. My experience with graduate students has made me doubt the necessity of this kind of specificity. Some of my best students have not had an undergraduate background in any of the related fields but have come to us from history, literature, and the exact sciences. The specificity is unnecessary also, because it would create more problems than it is worth. If the administration of the training programs will indeed reside with the universities, and if institutions of higher

learning will determine the curriculum, then it is not logical to stipulate selection procedures. The selection of students is usually left within the realm of the universities and I think you might wish to make clear your stand on this issue.

Thank you again for this most interesting document.

Sincerely,

MARY ENGEL, Ph. D.,
Assistant Professor.

UNIVERSITY OF FLORIDA,
Gainesville, November 17, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
Washington, D.C.

DEAR MR. GIBBONS: Thank you for giving me an opportunity to react to House bill 11322. I understand that both Dr. William Alexander and Dr. Ira Gordon of our staff did write to you, so I did not avail myself of the opportunity. However, I appreciate your giving me the chance to be heard.

One thing that I hope we can avoid is competing forces in the school in curriculum workers and guidance counselors. We need program planners who combine the competencies of both fields. I guess one concern that I am expressing is that the role of the child development specialist in your bill is not sufficiently well defined.

Once again, thanks for letting me have an opportunity to react. I have always appreciated the support that you have given public education.

Sincerely yours,

KIMBALL WILES, *Dean.*

THE FLORIDA STATE UNIVERSITY,
Tallahassee, December 10, 1965.

Hon. SAM GIBBONS,
U.S. Congressman, House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: I appreciate the opportunity to express my support of the proposed Elementary and Preschool Child Development Act (H.R. 11322). For many years, those of us working in the fields of early childhood education and child development have been convinced that present agencies and school programs have assumed that the early years are relatively unimportant. Yet, research in child growth and development and learning has clearly indicated the fallacy of this assumption. Perhaps it would be more nearly correct to say that those appropriating funds, rather than the professionals, were the ones not convinced of the importance of the early years. This bill, for the first time, would put financial support for this neglected area of education and personal development in proper perspective in relation to the support of the remainder of the educational system.

It is commendable that the bill would be concerned with all young children as the present emphasis on the disadvantaged child could possibly create a new and undesirable form of social segregation. It is also desirable to clearly distinguish a child development specialist from the existing specialists such as guidance personnel, school psychologists, general supervisors, and social workers. I would like to see more emphasis on spelling out this distinction in order that university training programs would be required to be interdisciplinary and more concerned with parent involvement, developmental aspects of personality, and community functioning than is now the case.

The high standards of professional competency required by the bill must be maintained for financial adequacy without personnel adequacy can spell failure for the program. The selection of universities to do the training is very important since understandably only a few universities have developed interdisciplinary approaches and laboratories adequate for the task.

This bill is essential to complement the recent commendable Federal legislation if the benefits envisioned are to be attained by all children.

Sincerely yours,

RALPH L. WITHERSPOON,
Professor and Director,
Institute of Human Development.

STATE OF FLORIDA, DEPARTMENT OF EDUCATION,
Tallahassee, October 19, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
House of Representatives,
Washington, D.C.

DEAR SAM: I welcome the opportunity to respond in behalf of H.R. 11322, and I strongly endorse the principle embodied in this legislation of identifying and attacking early the problems that usually result in dropout, delinquency, and other social and emotional ills. As a former teacher, and for the past 17 years as superintendent of the Pinellas County schools, I am well aware of the need for comprehensive services for children with learning and behavior problems. There are some teachers who can cope with the many needs of the children in their classes. However, most teachers cannot adequately meet the day-to-day teaching responsibilities and still have the time and the understanding to provide for the special needs required by these children.

Recognizing this need, as superintendent of a local school system, I worked steadily to provide an outstanding program of special education and pupil personnel services so that every child might have the opportunity to learn to the best of his ability. Through our special education program we provided for all those who needed a special curriculum, special methods, or special educational management that could not be provided in the regular classroom alone. Through pupil personnel services, we attempted to identify the problems both behavior and learning by working with the pupil, the home, and the teacher. Some needed to be assigned to our special educational program, but just as many, if not more, could be helped within the regular classroom, when these special services could be brought to bear on the problem.

I cite this personal experience not only as a matter of pride, but rather to assure you that I know from firsthand experience the need and value of special services as outlined in H.R. 11322. Since assuming the State superintendentship for Florida, an astounding figure has been brought to my attention. Our division of research has informed me that during the 1963–64 school year, 63,992 pupils were not promoted. Assuming each of these pupils required 13 years to complete schooling, the cost of reteaching these pupils would be $23,694,808. To add to the problem, a large number of these children become our dropouts, our problems in delinquency and crime, and our children with severe emotional handicaps, not to mention the problems of unemployment alone. This legislation, I feel, can be a strong deterrent factor.

The bill as proposed has many strong features and is evidence of excellent planning.

1. It recognizes the value of prevention through early identification and initiation of services, and it recognizes education as the agency that has the initial contact and should have the resources to attack the problem. So often in the past, efforts have been directed at rehabilitation, and correction of secondary pupils through other agencies often after the problem has been well established. Directing efforts toward the young child is a refreshing feature that those of us in education have long been awaiting.

2. It places initial emphasis on training of personnel and State planning before providing large sums of money for services. This should help prevent diluting the field with substandard personnel. In this respect, the administrating agency of the Federal Government must assure that only appropriate training programs are funded and that State plans assure appropriate use of these personnel.

3. It provides funds for the State educational agency to hold inservice training programs to orient classroom teachers and child-development specialists in the team approach to the problem. Strengthening the role of the classroom teacher will broaden and extend the effectiveness of these services.

There are some problems involved that need to be identified and these relate mostly to personnel:

1. Can we find an adequate number of the type of people needed to pursue this program of study on a full-time basis for the stipends being proposed? Stipends have been provided in guidance, social work, school psychology, and special education for a number of years. What has been the experience of these programs in obtaining personnel?

2. How can we assure that the training program at the university is in touch with the reality of the situation? Might not provisions be made to use university personnel as consultants in community programs at the service level rather than just planning and policymaking?

3. The effectiveness of the child-development specialists will depend on liaison with the classroom teacher. Should not more of the funds be allotted to States for inservice training?

In closing, I wish to reiterate my support of H.R. 11322. I have long been a proponent of such services, and I look forward to any provision that will extend this service to all pupils rather than just the few who happen to reside in school systems that can afford such quality education.

Sincerely,

FLOYD T. CHRISTIAN, *Superintendent.*

GOVERNMENT OF THE DISTRICT OF COLUMBIA,
DEPARTMENT OF PUBLIC HEALTH,
Washington, D.C., November 16, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: Thank you for providing me with an opportunity to read the bill you have introduced providing for the training and utilization of child development specialists. The program is well conceived and the development of this legislation obviously reflects extensive knowledge of the need.

I thoroughly agree we must find a way to manage developmental maladjustment problems in their earliest phases if we are ever going to solve behavioral and mental disturbances which lead to delinquency, criminal behavior, neurosis, and psychotic illness. Your preventive approach is fundamental to our modern community mental health concept with emphasis on outreach into the community, consultation to parents and schools and early intervention.

As you have indicated prevention involves the earliest possible recognition of problems and early effective, corrective action. Every effort should be made to get at primary causes. We, perhaps, do not yet know enough about the latter but we do believe some success might be achieved if the mother can be approached during the prenatal and postnatal period and the mother-child relationship assessed during the infancy period. This means the availability of specialty skills such as those you are recommending in maternal and child health programs, particularly in well-baby clinics and similar situations where the mother-child relationship can be observed in its early beginnings. Our mental health program is now directing much attention to these areas by coordinating its efforts with the functions of the public health nurses and, the services of our maternal and child health program.

I would hope that the child specialists your bill would provide may work closely with the health facilities provided in these areas for the mother and the child, and thus approach the problem at very early developmental levels. Perhaps this is a suggestion that could be included in the bill, extending the thrust and effectiveness of the program back into preschool levels of the mother-child relationship.

With regard to the employment of child development specialists I am entirely in accord with such utilization of ancillary personnel. It is our experience that mental health aids and other subprofessional staff can play a vital and effective role in early recognition, guidance, and correction of problems. I believe, however, the bill should provide some degree of emphasis on professional supervision and would suggest a reference to the skill of child psychiatry, possibly brought into the program in consulting and supervisory capacities.

You describe the requirements of the training program which properly must provide instruction in child growth and devlopment and specifically mention personality theory, behavior problems of children and learning disorders. I believe there is, at this time, no concensus as to the appropriate content of such a training curriculum, nor would it be an easy matter to determine who is best qualified to teach such programs. Perhaps, therefore, the bill should contain some research funds for studies directed toward the development and establishment of appropriate training programs. I believe research and support for pilot programs in these areas is desirable and would hope this might be included in the bill.

I cannot emphasize too strongly my support of your emphasis on prevention and remedial counseling together with utilization of community resources. It is only through such measures that we can ultimately hope to reduce the

enormous burden of personality and mental disorder both in terms of human suffering and the inordinate cost of remedial measures.

Very sincerely,

MURRAY GRANT, M.D., D.P.H.,
Director of Public Health.

STATEMENT OF ROBERT B. ROWEN, PH. D., DIRECTOR, SCHOOL SOCIAL WORK, NEW JERSEY STATE DEPARTMENT OF EDUCATION

The intent of the proposed legislation, Elementary and Preschool Child Development Act, is most commendable. I have spent the past 15 years working with children of various ages and levels of development in settlement houses, in courts, and in public school settings.

There is considerable research available which would support the intent of the proposed law. Namely, that the earlier a child who has or who might have a problem blocking educational achievement, is recognized and treated, then the chances of success are increased. The problems which the child in the primary school normally presents are not deep seated, nor do these problems necessarily require the intensive services of the school social worker or school psychologist, and, even when these services are required, available personnel may be lacking. However, one cannot minimize the need for special services to teachers and parents for these children. The child who is late or absent certainly could be the dropout in later years. Just as the child whose behavior is unacceptable is not going to change in later years unless his value structure or environment has been altered. No one can dispute the fact that our penal institutions are filled with individuals some of whom if they had been identified as children and provided with services, perhaps, would be useful members of our society at the present time.

The recognition or diagnosis of a problem often is meaningless unless a proposed solution is offered. In this bill the solution is twofold: first, local school districts will be encouraged by reimbursement to establish such programs, and, secondly, funds will be provided to train the personnel to work in these programs. These are both important aspects since seeding money usually encourages a board of education to establish a program which they feel is philosophically sound but has been delayed because of financial resources. Little needs to be said about the funds for training, this is an evident fact. Graduate education is expensive and most graduate students need financial assistance for themselves and family.

If the bill, therefore, becomes law, I can visualize a preventive service in the primary school which has long been sought and needed both by the children and the teachers.

ROBERT B. ROWEN, Ph. D.,
Director.

UNIVERSITY OF THE STATE OF NEW YORK,
STATE EDUCATION DEPARTMENT,
Albany, N.Y., December 8, 1965.

Hon. SAM M. GIBBONS,
Congress of the United States,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: I have received a copy of your bill H.R. 11322 and appreciate very much your sending it to me and providing the opportunity to review it.

Your statements that early detection, correction, and prevention can assist immeasurably in eliminating some of our social ills are very sound. Moreover, there are many who feel that such a program should begin even before a child enters school. Also, your plan for the training of professional personnel has much merit.

With regard to the implementation of your proposal, administratively at least in New York State, it could create problems since we advocate that educational resources, programs, and personnel come under the purview of the local board of education and the chief school administrator. The manner in which you are suggesting that the child development specialist would be employed could create

a dichotomy in administration, since the child development specialist would not be directly responsible to the local chief school administrator of the school district.

It might be possible, however, to modify your proposal so that State agencies would receive allocations which can be distributed to local educational agencies for the purpose of employing child development specialists. The modifications for the use of child development specialist, the development of the plan for the early identification of physical, mental, and emotional handicapped children in early years, the direction in which the plan is implemented, and the supervisory activities related to implementation should be a major responsibility of the local educational agency with the State agency providing consultative assistance, additional supervisory, and supportive services. The child development specialist would be directly responsible to the chief school administrator of the local educational agency as an employee of the local board of education. The idea of your proposal to help children is meritorious. I shall be most anxious to learn of the action on your proposal.

Sincerely,

IRVING RATCHICK,
Coordinator, Title I, ESEA.

TEACHER'S COLLEGE,
COLUMBIA UNIVERSITY,
New York, N.Y., November 11, 1965.

Mr. SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: Thank you for your letter of November 2, 1965, and the invitation to submit a statement for the record.

My views on the bill numbered H.R. 11322 (the Elementary and Preschool Child Development Act) grow out of my experience as a high school teacher and counselor in this country and in Egypt, as a child development consultant in an elementary school for 2 years, and as a member of the faculty of the Department of Guidance and Student Personnel Administration of Teachers College, Columbia University, since 1951. I am responsible for the current program, which I developed in 1955, for the preparation of elementary school counselors.

As one might reasonably expect, I am most enthusiastic about the bill in general, but have a few questions. First, I should like to support certain emphases in particular:

1. The concept, child development, which appears in the title, stresses a positive and sound approach. Our democracy is strong to the degree that each of its citizens develops his uniqueness to the fullest.
2. The bill takes into account the factor of early causation in the development of school related problems.
3. The term "child development specialist" emphasizes the function and purpose of this person, rather than his title (psychologist, social worker, guidance counselor, school nurse, e.g.). This should help avoid needless and useless bickering about titles and areas of sovereignty and help us get on with the job that needs doing.
4. The description of functions is broad and inclusive and recognizes the need for a professional person in the elementary school who can serve as mobilizer of resources for individual development.
5. The award of fellowships to individuals rather than grants to institutions with approved packaged programs allows for desirable flexibility. Students at varying points of their professional development are equally eligible for assistance.
6. The omission of teaching as a prerequisite encourages many promising candidates to enter the field who otherwise would be eliminated. However, supervised teaching experience in the elementary or nursery school should constitute part of the program of training for those without previous teaching experience.

Second, I should like to raise two questions:

1. Why not include grades four, five, and six? The earlier elementary years are crucial, but followup is too. Also, the possible administrative problem in years to come when the supply of child development specialists for the upper elementary grades will be considerably smaller than that for the lower grades needs to be considered. What happens in a school where a fifth grader needs the services of a child development specialist?

2. The definition of the term "institution of higher education" would eliminate certain institutions with appropriate resources for the preparation of child development specialists. Teachers College of Columbia University, for example, awards only master degrees and doctorates. The bill says the institution "(3) provides an educational program for which it awards a bachelor's degree." Teachers College has been preparing school psychologists since 1923, elementary guidance workers since 1937, and child development consultants since 1955.

I should like to thank you for your interest in quality education and in promoting a bill that holds promise to make education more meaningful to every American boy and girl.

Sincerely yours,

RAYMOND A. PATOUILLET,
Associate Professor of Education, Department of Guidance and Student Personnel Administration.

UNIVERSITY OF ROCHESTER,
COLLEGE OF ARTS AND SCIENCE,
Rochester, N.Y., November 15, 1965.

Congressman SAM GIBBONS,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: We have read, with considerable interest, both your proposed legislation, H.R. 11322, calling for Federal help to elementary education through the creation of training and placement opportunities for child development specialists, and the statement relevant to this legislation which appeared in the Congressional Record of September 30, 1965, pages 28420–28422.

We believe that the proposed legislation is carefully conceived and sorely needed, and that its passage and implementation would represent an extremely important long-range contribution to the welfare and effectiveness of our society. Regrettably, when it comes to major mental illness, delinquency, and antisocial behavior, our society has traditionally been oriented to after-the-fact rather than before-the-fact approaches. We have found that running at top speed is not enough to keep up with ourselves. The proposed legislation, H.R. 11322, represents an important reversal of this unfortunate trend. Here, the emphasis is on early detection and prevention and the focus of such efforts is, as it should be, with the young child in one of society's primary and omnipresent institutions—the school. We further believe that the proposed legislation is entirely consonant with the growing recognition among the helping professions of the need for a cmmunity-based, preventively oriented approach to major social problems.

Our own work, carried out at the primary grade levels in the public school system of Rochester, N.Y., for the past 6 years indicates (*a*) that there are demonstrable beneficial effects of a preventively oriented school program, which show up in terms of achievement, behavioral, and personality indexes in the child and (*b*) that the child with early detected emotional difficulties will, left unattended, spiral downward in all areas of school functioning within the relatively short course of his first 3 school years.

It is important to point out, in this context, that comprehensive surveys of available professional manpower, as well as future extrapolations indicate that present major lacks in this area are likely to become exacerbated in the future. Provision for training of large numbers of child development specialists for work in the primary grades of our Nation's school system, would not only provide a reversal of the foregoing alarming trend, but might also provide a resource for the training of nonprofessional and volunteer personnel to perform relevant and appropriate functions in the school setting under the aegis and supervision of the specialist.

It seems quite important, if the purposes of the legislation are to be fulfilled, that two basic precautions be emphasized. First, the clear-cut emphasis of the proposed legislation is, as it should be, on early detection and prevention. Such an emphasis is vital, yet it may, in practice mean working with youngsters with relatively less evident symptomatology or pathology. This may be extremely difficult for "have-not" school districts when they are pressed because of well entrenched, very real, and sometimes dramatic problems. Hence there may be the inclination of some districts to try to use the specialist where the need

seems to be most urgent. In that case the child development specialist could become another school psychologist or social worker or guidance counselor. It therefore seems most important, to us, that if the innovative aspects of this important legislation are to have maximal opportunities of reaching fruition, that the newly conceived role of (*a*) early detection and prevention and (*b*) working with the very young, be preserved and guaranteed.

Second, it seems extremely important that some concept of evaluation be assured in the proposed program. Too often, benefits deriving from innovative and exciting programs are not sufficiently additive because we have nothing more than the "enthusiastic impressionism" of participants. If we are to be able to evaluate the effects of this vital legislation 10 years hence, a mechanism for formal assessment of its program and public dissemination of its findings seems essential.

We should like, however, to leave no room for equivocation with respect to the proposed legislation which we view as a vitally significant proposal in the direction of a saner society of tomorrow. We believe that it now only reflects a fine grasp of a major current social problem, but is also entirely consonant with current professional thinking regarding needed directions of future movement in this area. We applaud the intelligent and foresightful effort that has gone into its planning, hope for its enactment, and stand ready, in whatever way possible, to further such an outcome.

Sincerely,

EMORY L. COWEN,
Professor of Psychology, Director of Clinical Training.
MELVIN ZAX,
Associate Professor of Psychology.

ABSTRACT, EARLY DETECTION AND PREVENTION OF EMOTIONAL DISORDERS, M. ZAX AND E. L. COWEN, UNIVERSITY OF ROCHESTER

Several fundamental assumptions relevant to the mental health problems of modern society underlie our work, and should be made explicit at the very outset. These include the following:

(1) The emotional well-being of members of our society is currently one of our major national problems.

(2) Presently, existing approaches to the resolution of these problems, weighing heavily on one to one diagnosis and therapy in instances of evident and entrenched symptomatology are inadequate, not only because of their limited effectiveness but also because they fail to reach large segments of the population.

(3) A change in emphasis to mental health techniques (probably less drastic and time consuming ones) which will reach vastly larger segments of our population is called for.

(4) A principle focus of community oriented mental health programs should be with the very young in our society.

(5) The school setting, all things considered, constitutes the most probable and potentially fruitful (but not the only) arena for large-scale community-oriented mental health work.

(6) Our emphasis must shift from one to one of diagnostic and therapeutic techniques with the relatively few, extreme, aberrant cases, to primary prevention and immediate secondary prevention with very large numbers of young children.

(*a*) Such work may call for significant changes in present conceptions of the optimal role of the professional mental health specialist, in the direction of educative, training, supervisory, consultative and resource functions.

(*b*) Such work may require introduction of large numbers of a new type of subprofessional mental health specialist, thus geometrically increasing the number of helping people and the contracts with people requiring help.

(*c*) Such work may introduce changes into the traditional school structure and teaching environment.

(*d*) Such work will rest in good measure in the further development of techniques for the early identification of emotional handicap.

Our own work, past as well as current, has been guided by this orientation and this way of perceiving the social problem. Our first step was to set up, in a single elementary school, a program for early detection and prevention of emotional disorders with particular emphasis on the primary grades. Evaluation

of this program over a 5-year period had led us to two principal conclusions: (1) There appear indeed to be salutary aspects of the prevention program tapping adjustive, performance, achievement, and social status measures in youngsters exposed to such a program over a 3-year period; (2) young children evidencing emotional handicap at the very start of their school careers (first grade) appear to be caught up in a continuing downward spiral relevant to all aspects of their school functioning. By the end of the third school year these youngsters are: performing less adequately in school, showing greater signs of maladjustment in terms both of objective tests and behavioral ratings, obtaining lower scores on standard achievement tests, evaluated more negatively both by teachers and peers, and manifesting more physical complaints in the school situation, each in comparison to their nonhandicapped peers.

The foregoing findings point up the rich potential of a community preventive approach in the school setting (perhaps others as well). The very high incidence of early emotional handicap and its already serious consequences within the first three school years, suggest that there is here a fertile domain for intense exploration of secondary preventive measures. The development of a dual emphasis on prevention and early detection (including early application of secondary preventive measures) should be regarded as a vital cornerstone in any comprehensive social effort to deal with mental health problems.

Our current activities represent, to us, a logical outgrowth of our guiding assumptions and prior findings. We have established a program in the school setting wherein the professional specialists are indeed engaged in educative and consultative activities, rather than direct clinical services. Housewives have been recruited and trained as mental health aids, and have been placed in the classroom setting where they are in daily contact with emotionally handicapped youngsters in need of a close one-to-one relationship, which the teacher cannot provide. After-school activity programs for emotionally handicapped youngsters referred by the school have been set up. These groups are manned by undergraduate volunteers who work intensively with children who have been referred to the program. Advanced graduate students in clinical psychology are serving as consultants and resource personnel for these volunteers. The overall program is designed not only to establish early detection of emotional handicap, but to make possible an immediate secondary preventive intervention designed to forestall the seemingly inevitable downward spiral in the emotionally handicapped child, otherwise almost necessarily ignored. Although these programs have been in operation for only a relatively short period of time, there appears to be increasing evidence available suggesting that their effects will be highly constructive ones. Although our work at the present time is limited to the primary grades of the elementary school, we feel that we are making progress toward the development of social models which may be effectively and meaningfully expanded to other settings as well.

STATE OF SOUTH CAROLINA, DEPARTMENT OF EDUCATION,
Columbia, S.C., November 24, 1965.

HON. SAM M. GIBBONS,
U.S. Congressman, House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN GIBBONS: The Elementary and Preschool Child Development Act (H.R. 11322) introduced by you in the 89th Congress is one of the most needed programs in education today. Many of the most difficult problems experienced by children have their beginnings at this age level. If adequate professional assistance is given at this level many of the more difficult problems would not occur.

Although we are more concerned immediately with correction and prevention of problems, we recognize that professional assistance must be provided for all children in the normal process of growth and development. The increasing complexity of our society makes this approach imperative.

Under title V, National Defense Education Act, secondary guidance programs have been established and improved. The recent amendments to this act to include grades 1–12 was a very commendable action; however, only enough additional funds were provided to include five or six pilot projects in elementary schools. Your bill makes excellent provisions for pupils grade three and below. A serious gap occurs in our efforts to provide assistance to pupils in grades four, five, and six. It is suggested that efforts be exerted to remove this gap in our proposed professional assistance to pupils.

Serious questions are raised concerning provisions under section 203(2)(A), the employment of the child development specialists. I believe that the State should specify the certification or professional qualifications of the specialists and the duties to be performed consistent with the provisions in the act. Local school systems would be responsible for the employment and supervision of the specialists. State personnel would be responsible for supervision and leadership in the approval of local programs and the improvements of these programs. Arrangements could be made by the local public school system with private nonprofit schools for similar services of the specialists.

You are to be commended for your efforts to provide this needed service to pupils.

Sincerely,

W. B. ROYSTER,
Coordinator, Guidance Services.

STATE OF OHIO,
DEPARTMENT OF EDUCATION,
Columbus, November 30, 1965.

Hon. SAM M. GIBBONS,
House of Representatives,
Washington, D.C.

DEAR MR. GIBBONS: I have studied the bill accompanying your letter of November 5, 1965, and have also had it reviewed by various members of my staff.

I am happy to report that, in our opinion, the concept embodied in the bill is sound, and we would, therefore, support the enactment of such legislation. I would, however, raise a question relative to paragraph 2 of section 203.

I am inclined to think that the laws of Ohio, and, for that matter, numerous other States, are such that they have no authority to employ teachers and to assign them duties in the elementary schools of the State.

I would suggest that this section be amended to provide the State with funds which could, in turn, be allocated to local school districts for the employment of specialists by local boards of education who meet standards prescribed by the State education agency.

Respectfully yours,

E. E. HOLT,
Superintendent of Public Instruction.

THE OHIO STATE UNIVERSITY,
COLLEGE OF EDUCATION,
Columbus, Ohio, November 12, 1965.

Mr. SAM M. GIBBONS,
U.S. Congressman, Washington, D.C.

DEAR MR. GIBBONS: I am extremely pleased with the amount of attention you have given to the problem of providing a good start for preschool and early elementary schoolchildren. The idea of providing child development specialists to be available for consultation with parents and teachers is a dream that all of us who are interested in human welfare have had for many years. I sincerely hope that your efforts may bear fruit and that the dream will come true. Your aspiration of having 55,000 child development specialists working in this program within a 10-year period seems realistic if the program can be adequately supported. As a child development specialist I have one suggestion which you might want to consider. It is my feeling that 2 years of graduate work beyond the baccalaureate degree is a minimum of training for the development of the necessary skills for advising parents and teachers. Might I suggest that your program also include provision for supervision of the child development specialist by trained child development specialists with the Ph. D. degree. These more highly trained supervisors could continuously upgrade the child development specialist by in-service education and by helping them to keep in touch with the most recent research findings in related disciplines. The Ph. D. supervisors could also design the necessary research for evaluating the adequacy of the program, and keep it responsive to the many advances that are being made annually by research workers in psychology, sociology, and the other behavioral sciences.

May I wish you the very best of success in your promotion of this worthwhile effort and commend you for spending so much time on this potential contribution to human welfare.

Sincerely,

GEORGE G. THOMPSON,
Professor of Psychology.

THE STATE OF UTAH,
DEPARTMENT OF PUBLIC INSTRUCTION,
Salt Lake City, December 8, 1965.

Hon. SAM M. GIBBONS,
U.S. Congressman,
House of Representatives, Washington, D.C.

DEAR CONGRESSMAN GIBBONS: I appreciate receiving your letter of November 5. We are especially interested in your bill, H.R. 11322.

We believe that this bill has considerable merit. We very much need pupil personnel services at the elementary and preschool level. At the same time, we are convinced that pupil personnel services on the elementary school level should be somewhat different from those provided at the secondary level. The teacher in the self-contained classroom should be given a very significant role. Your proposed bill seems to recognize this and would provide the kind of assistance that a teacher needs in rendering adequate pupil personnel service.

We especially appreciated the provision in the bill to go through proper channels through the State education agency in each State.

We wonder if you have considered the possibility of this bill being an amendment to title V–A of the National Defense Education Act. This title of this particular act is intended to improve pupil personnel services. It is, however, too restrictive in terms of trying to handle the training and in-service work. It also falls very short of providing the services recognized by your proposal. We would, however, avoid having two sources of Federal support to provide child development specialists if your bill did become a part of title V–A. Since this bill now provides funds for pupil personnel service it would appear to us to be reasonable to amend this particular title rather than to have two separate sources of Federal assistance.

We do have some concern about the apparent lack of provision for local control. Perhaps we may be interpreting the bill incorrectly, but it would seem to provide for employment of child development specialists by the State rather than by local educational agencies.

We would surely express our support of your proposed bill and congratulate you for your understanding of a very serious problem that exists.

Sincerely yours,

T. H. BELL,
State Superintendent of Public Instruction.

NATIONAL COMMITTEE AGAINST MENTAL ILLNESS,
Washington, D.C., October 18, 1965.

Hon. CARL D. PERKINS,
House of Representatives,
Washington, D.C.

DEAR MR. CHAIRMAN: I very much appreciate your kind invitation to testify before the General Subcommittee on Education on H.R. 11322—the Elementary and Preschool Child Development Act. I deeply regret that a previous commitment in Wisconsin prevents my appearing before your distinguished committee.

I have been concerned about the problems of educational underachievement, juvenile delinquency, and emotional disturbance in children for the past 20 years. I take the liberty of enclosing a copy of a speech entitled "Our Most Neglected Mental Health Problem: Emotionally Disturbed Children," which I delivered to the First Annual Congress for Mental Health this past Saturday. In essence, this speech calls for the training of thousands of additional skilled personnel to handle the problem of emotional disturbance in the schools and in the community. You may wish to include this talk in the record of your hearings.

I have studied H.R. 11322 quite carefully and I find its essential provisions both necessary and admirable. The emphasis upon training child development specialists who are now so scarce is excellent, as is the proviso concentrating

their usage in the first three grades. Section 301, which provides fellowships for the training of such specialists, is the only realistic way in which we can tackle this enormous shortage of child development personnel.

I commend your committee for holding hearings on this bill, and I commend Congressman Sam Gibbons for introducing it. If I can aid your committee in any way in securing passage of the bill, I would be honored if you would call upon me. I have had some experience in helping to get legislation passed, and I would be only too willing to work with you in lining up votes on both the House and Senate sides.

Sincerely yours,

MIKE GORMAN.

NOVEMBER 24, 1965.

Re H.R. 11322.

Hon. EDITH GREEN,
House of Representatives,
Rayburn House Office Building,
Washington, D.C.

DEAR MRS. GREEN: Thank you for sending me a copy of H.R. 11322. I have long felt that services of a child development specialist in the elementary schools was an item of extreme importance. Let me explain.

In the first place, we are perfectly capable of detecting those children who will have difficulty learning to read, who are predelinquent (or have delinquent tendencies), who are moving in the direction of adjustments that will cause them to be less adequate later on in school (e.g., personality constriction), etc., etc. We can detect most of these children in the primary grades without the least bit of difficulty, but it does require an astute person to do this.

Secondly, the national movement in guidance does not have within its framework of reference the concept of a guidance person in the elementary schools who is a child development specialist. I have argued this point at great length with many experts in guidance and it simply is not within their framework of thinking to perceive in the more discriminating manner of a child development specialist. Experts in guidance usually take the point of view that you can take a counselor from the high schools and put them in the elementary schools equally as well; counseling is counseling, regardless of whether it is high school or elementary school. I thoroughly disagree with their concept and consider it to be a non-problem-solving approach where we actually need people who can make a clinical analysis of a child's adjustment and learning processes and design a new, positive learning environment which will enable the child to move into a world wherein he is having continuous, progressive success.

We do a great deal of work precisely in the area of child development study, analysis of learning problems, designing a modified environment for the child in his classroom and in the school and it works with an extremely high degree of success. While guidance personnel often express the feeling that you "have to buy guidance on faith," I feel that it is not at all necessary to buy anything of this nature of faith; we can accept a referral as a specific problem, delineate its exact nature, consider alternative solutions, put them into effect, and check on our results. I predict that the child development specialist will replace the counselor-guidance trained person in the elementary schools.

I like the bill as it is very much. I particularly like the requirement that these specialists work in the first three grades; usually such efforts are directed at the intermediate or high school levels when it is too late to do a great deal of good for the youngster without an extreme amount of effort. Frequently it is too late to be of any help. When we pick up these children in the primary grades we can commonly make important changes quite readily.

I wish to lend my most enthusiastic support to this important project.

Very truly yours,

A. WESTON NIEMELA,
Director, Special Education and Guidance.

AZUSA UNIFIED SCHOOL DISTRICT,
Azusa, Calif., October 28, 1965.

Congressman PERKINS,
House of Representatives Post Office,
Washington, D.C.

DEAR MR. PERKINS: Dr. Harry Smallenburg of the Los Angeles County Schools Office has suggested that I forward to you a copy of the comments on H.R. 11322 which I previously had sent to him. These comments are enclosed.

I feel that the bill is an excellent bill and will meet a real need in most school districts. The areas of major concern that I have on the legislation might be group together as follows:

1. The administration of the financing relative to the legislation should be kept as simple as possible.

2. As much control as is practical over the employment of personnel, intiation of the program or projects, and the type of people to perform the functions set forth should be kept at the local level, reserving for the State educational agency approval and evaluation of the projects.

3. The type of personnel who would be considered as "child development specialists" should be interpreted broadly enough to include those with special training in social work and administration, as well as those who specialize in counseling, psychometric or psychological services. The need for different types of persons will vary from community to community, State to State, and even from school to school.

4. Limiting the services of personnel employed under the provisions of the bill to grades 1 to 3 would appear to be impractical. However, the advisability should be recognized of early identification of pupils. Nevertheless, it would probably be more feasible to have the period of time covered coincide with the elementary school years, which would mean grades 1 through 6 or 1 through 8.

Again, I reiterate that this bill will meet a real need and appears to be an excellently conceived piece of legislation. You have our wholehearted support.

Very truly yours,

NELSON C. PRICE,
Director, Special Services.

COMMENTS ON H.R. 11322

1. Title I, section 101.

The definitions are generally excellent as are the purposes of the act. However, it is possible to interpret the qualifications of the persons to be used in these capacities as applying only to those holding the pupil personnel credential (in California). Under given circumstances, credentials involving social work or school administration might actually be more appropriate. Provision for using a broad interpretation should be clarified.

2. The definition of the term "State educational agency" as found in paragraph (j) in section 101 would seem to imply that personnel employed would be directly responsible to a State agency, and would be employed by them to the exclusion of the local agency. A considerable amount of flexibility should be built into this interpretation to prevent the necessity for uniform application throughout the State requiring the development of a statewide bureaucracy at the expense of meeting the particular needs of a local community. Section 203, paragraphs (1) and (2), may further complicate the problem.

3. The provisions for allocation of moneys (fiscal arrangements) appear to be simple enough to give added assurance that the money will be used to help children rather than to provide for extensive organization to administer the funds.

5. Section 203, paragraph (3), sets forth the provision to provide help only to those pupils from the third grade and below. Most elementary schools are organized on etiher a six- or an eight-grade basis. This type of legislation would seem to be discriminatory against those children in the institution who are not in the third grade or below. They would be denied service. Two possible solutions seem to appear. These are: (*a*) Provide that the service be limited to children in the sixth grade and under; or (*b*) that the Federal Government will provide funds only for that portion of the specialist's time which is devoted to the work with children in grade 3 and under. There are other educational and psychological reasons why it would be questionable to limit this service to children in the third grade and under at this time.

6. The proper accounting of Federal funds paid to the State (and, consequently, the accounting of funds spent in the local educational unit) should be kept simple enough to require a minimum amount of administrative and clerical time. A fault of many existing programs is that while the legislation provides no funds for administration, the implementation of the program requires a considerable amount of administrative time and, therefore, cost. If the program is to have maximum effectiveness, there should be provision for adequate administration of the program as well as for people to work on the firing line (I am not advocating a large administrative overhead but only a sufficient amount to obtain maximum efficiency within the program).

7. The provisions for approving and disapproving State plans appear to provide adequate protection for individuality, for pioneering ideas, and guard against arbitrary decisions for or against the approval of specific plans.

8. Referring to the purposes of the bill, the plan for training personnel, and the plan for preparing school districts and communities for use of this specialist, the importance should be stressed of including among the specialists people with a high degree of competency in administration. Many of the functions assigned to the specialist will be taking over those formerly in the realm of the activities of the school principal.

Proposed Bill for Child Development Specialists

(By Carroll E. Kennedy, Jr.[1])

As the 89th Congress ended its 1st session, bill H.R. 11322 had had 2 days of hearing. What progress these bearings will have after the Congress reconvenes and what the status of this bill will be at the time these comments appear in the Home Economics Journal is, of course, uncertain.

For home economists concerned with child development, the fact of this bill appearing in Congress is of significant note. By its very existence this bill calls attention of our legislators to the crucial importance of child development as a part of the teacher's work with the child. It highlights the fact that growth involves both mastery of subject matter and the development of effective attitudes, relationships, and interpersonal competencies. The language of the bill, "* * * to assist teachers, parents, and school staff to become knowledgeable about community and other resources for the use of such children and families * * * " suggests the intimate relationship between family and school experiences.

While there is a certain negative tone to the bill in that it is focused in terms of the identification of problems and the correction of pathologies—rather than expressing the positive growth potential that this child development emphasis can have for all of the children with whom the teacher will have contact—such a preventive emphasis may be necessary in order to communicate sufficiently the sense of urgency to get it through Congress.

In summary the bill proposes to set up a 2-year graduate training program for the preparation of child development specialists and to provide moneys to assist States to employ child development specialists at the ratio of about 1 child development specialist to every 350 children. The child development specialist will serve as a consultant to the classroom teacher in assisting the teacher to work more effectively with children in her class who are having emotional, learning, or behavior difficulties. An item of positive note is that the specialist will be concerned with assisting the teacher to have increased background and guidance as the teacher is involved in the multitudinous daily contacts with the children. This is in contrast to the specialist taking the child out of the class situation to work with him. This is encouraging in terms of providing a continuity, as contrasted with the fragmenting effect that a variety of specialists dealing with the child might have. It further underscores the crucial role of the teacher as a significant adult in the life of the child. Hopefully, it emphasizes the role of the teacher as being involved with both the child and with the child's family.

While the guidance and support that the child development specialist can provide for the teacher would seem to be of considerable significance, if we were thinking of utilizing this understanding to the greatest advantage of the child, we

---

[1] Dr. Kennedy is assistant professor, family and child development, and also a member of the counseling center staff at Kansas State University, Manhattan, Kans.

would need to take into account the situation in which the teacher works. Consulation with the child development specialist will frequently (we would expect) increase the teacher's sensitivity to the various developmental opportunities and crises that the child encounters in the course of the day. If the teacher would hope to help the child to cope with these situations in a creative fashion the teacher would often need to be free to work with the child individually for a brief period of time. Having the responsibility for guiding the overall classroom activities, the teacher is often not free to attend to the individual. Thus, ideally, if for every teacher that is receiving the assistance of a child development specialist there could also be provided (either through some program of community volunteers or preferably through a teaching internship which involves college students) an aid in the classroom to assume responsibility for the supervision of the class as the teacher from time to time responds to certain individuals in a more extended fashion, the effect of the consultants' services would be greatly multiplied.

The possibilities for meaningful assistance to early child development (the bill stipulates that the services of the specialist be restricted to preschool and teachers of children in the first three grades) seems considerable. If the Elementary and Preschool Child Development Act should come into being it would pose a significant challenge to graduate faculty in departments of child development to conceptualize a program of graduate training which would contribute to the preparation of child development specialists with sensitivity to the many facets of his consultative situation. The specialist would need to be attuned not only to the processes of child development and conversant with resources for special assistance to children and families, but he would also need to be sensitive to the educational milieu, to the pressures experienced by teachers and to the delicate but crucial interaction between home and school. Certainly he would have to possess the counseling skills necessary for entering into a helping relationship with the classroom teacher. It is exciting to contemplate the possibility of a child development specialist working in a continuing relationship with 10 to 12 classroom teachers.

Representative Gibbons, of Florida, is to be congratulated for bringing this concern to the House of Representatives. We in the family and child development departments around the country will follow with interest this bill's progress through Congress. Its debate provides opportunity for persons interested in child development to contribute suggestions for ways of more effectively extending resources in this area. Such suggestions may be in the form of a statement concerning this bill forwarded through your Congressman to the House Committee on Education and Labor.

School Counselors and Child Development Specialists

(By Carroll E. Kennedy)

The House Committee on Education and Labor had completed 2 days of hearings regarding bill H.R. 11322 when the 1st session of the 89th Congress ended. What the status of this bill will be when these lines appear in print is hard to forecast. In any event, the presence of this bill in Congress encourages a review of certain aspects of counselor preparation and of the goals of school counseling. Specifically, it suggests a consideration of the place of child development courses in the counselor's preparation. It also points to the consultant function of the mental health specialist with the classroom teacher.

CHILD DEVELOPMENT SPECIALISTS

The bill proposes to set up a 2-year graduate training program for the preparation of child development specialists and to provide moneys to assist States to employ child development specialists at the ratio of about 1 child development specialist to every 350 children. The child development specialists will serve as consultants to the classroom teacher in assisting the teacher to work more effectively with children in her class who are having emotional, learning, or behavior difficulties. (1)

Counselors are going to be asked how different is the person described in this bill from the elementary school counselor and how might the goals and activities of the two persons differ. The person described in this bill is an individual with an area of specialization in the processes of child development with par-

ticular emphasis in preschool and early childhood. His function is to assist teachers in their work with children. The language of the bill focuses particularly upon preventive activities (as contrasted with what might have been a more generally developmental tone).

Optimistically one can envision the child development specialist as a person with particular understanding of the perceptual, affective, physiological, and cognitive processes, as they develop during early childhood, working in a continuing relationship with 10 to 12 elementary school teachers. While, again, the language of the bill gives the impresson of the specialist alerting the teachers to signs of pathology and of assisting in referrals, there is also the suggestion that the primary focus is to help the classroom teacher to have more confidence and resources for responding to the children in the classroom. One can envision, then, the continuing conversation between the specialist and his group of teachers as dwelling upon the processes of child growth and development as these teachers encounter them in their day-by-day experiences with children. (2)

There is also in the bill an indication of the close relationship that must exist between classroom and home and of the child development specialist as an assistant to the teacher in the teacher's understanding of and working with parents. Thus one might conceive the purpose of the child development specialist to be that of helping the teacher enlarge his capacities so that he may more effectively serve as the integrating adult through whom various services and specialist work in assisting children.

Whether this is the function that a child development specialist would serve or whether this is simply this writer's imagination is a legitimate question. A more significant question is how such activities relate to the activities of elementary school counselors.

GOALS OF SCHOOL COUNSELORS

The preparation of such a bill suggests that some responsible persons see a crucial need for some sort of consultative, supportive, developmental resource for the classroom teacher. Should this be another specialist or is it possible for the present array of mental health specialists to meet this need? The writer's first inclination is to think in terms of enlarging the vision and field of preparation of the school counselor. (3)

Consideration must be given, however, to how much experience can be crowded into a master's level program of graduate education. (In order to provide sufficient personnel for the necessary kind of teacher-consultant ratio, the position needs to be at the master's level.) Is it possible to include sufficient work in the areas of human development and special education along with existing courses? A further consideration is the feasibility of teachers' viewing counselors in the consultative capacity (rather than as a referral source).

In reality these are not peripheral considerations relating only to a clarification of specialities. These are considerations regarding the nature of public school counseling. The question is whether counselors intend to see themselves as working primarily in direct contact with children or whether they intend to see themselves as working more frequently with teachers to support and extend the teachers' capacity for assisting the developmental experiences of children. In pointing out the uncertainty presently existing regarding the nature of elementary school counseling, Stefflre suggested the possibility of a research project in which one school would hire a counselor to function in a way similar to the secondary school counselor, another school would hire a counselor to function as a consultant in child development and a third school would hire a social worker to do therapy with children. (4) Bills such as H.R. 11322 highlight the imperative for some such clarification in terms of future directions in counseling.

There can be little doubt that the classroom teacher is the most significant adult, other than parents, in the child's life. There can also be little doubt that the effectiveness of the teacher to enter into helping relationships is significantly influenced by the time available to the teacher, and by psychological freedom of the teacher to deal with the variety of pressures impinging upon the teacher and students from the school and community environments.

To some extent, continuing modifications in programs of teacher education can help prepare teachers with increased understanding of the processes of human development and with skill in helping relationships. Modification of school situations so that a teaching intern is present to maintain classroom continuity as the teacher from time to time works individually with a child in an opportune

moment of growth and/or crisis will also enlarge the capacities of the classroom teacher. On a day-by-day basis, however, a significant need will still exist for the special services of school psychologists, social workers, principals, and supervisors. But even as there is danger of the child being fragmented by the variety of agencies, so it is important than a resource be available to help the schoolteacher integrate and interpret his observation and contacts with individual children and the opportunities and pressures presented by school, family, and others in the community. The teacher is the frontline person in the mental health program. He is the person to provide the wholeness and continuity of the school and community's contact with the child and his family. We will do well, then, to help him continue in his professional growth by continuing consultative relationship focusing upon the experiences that he has.

It seems reasonable to assume that public school counseling might extend its resources to children most effectively by providing this kind of inservice program for teachers. This does not seem to be a part of many school programs now. This brings us back to the question of can it be or should it be? Given the variety of other responsibilities now expected of guidance workers, to what extent can counselors become consultants in child development? Should we as counselor educators encourage modification of counselor education and changes in on-the-job activities toward this end? Or should we encourage the creation of a complementary corps of child development specialists?

We have an opportunity to express our thinking and experience in this regard by writing to the House Committee on Education and Labor through our Congressmen.

(Carroll E. Kennedy is counselor on the staff of the KSU Counseling Center and is also assistant professor in the Department of Family and Child Development, Kansas State University, Manhattan, Kans.)

REFERENCES

1. Gibbons, Sam, "Proposal for Elementary and Preschool Child Development Act" H.R. 11322, 89th Congress, 1st session, Washington, Government Printing Office, 1965.

2. Kennedy, Carroll E. "Lest We Burn Out" Personnel and Guidance Journal, volume XLII, No. 6, February 1964, page 621.

3. Kennedy, Carroll E., "Preparation for Counseling Outside the School," Personnel and Guidance Journal, volume XLIV, No. 2, October 1965, page 191.

4. Stefflre, Buford, "Theories of Counseling," New York, McGraw Hill, 1965, page 271.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE, OFFICE OF EDUCATION

Elementary and Preschool Child Development Act, H.R. 11322

	1966	1967	1968	1969	1970	1971
New obligational authority:						
Title I, State administration		$300,000	$1,250,000	$3,250,000	$7,000,000	
Title II, use of child development specialists in elementary schools		3,750,000	22,500,000	60,000,000	97,500,000	
Title III, training:						
Training of child development specialists	$18,750,000	56,250,000	75,000,000	93,750,000	131,250,000	
Special training for school and community personnel in the use of child development specialists	500,000	500,000	500,000	500,000	500,000	
Administration:						
Personnel compensation	120,000	336,000	435,000	479,000	488,000	$400,000
Other	40,000	112,000	145,000	159,000	162,000	133,000
Subtotal	160,000	448,000	580,000	638,000	650,000	533,000
Total, new obligational authority	19,410,000	61,248,000	99,830,000	158,138,000	236,900,000	533,000
Expenditures:						
Title I, State administration		300,000	1,250,000	3,250,000	7,000,000	
Title II, use of child development specialists in elementary schools		3,750,000	22,500,000	60,000,000	97,500,000	
Title III, training:						
Training of child development specialists		18,750,000	56,250,000	75,000,000	93,750,000	131,250,000
Special training for school and community personnel in the ue of child develop ment specialists	250,000	500,000	500,000	500,000	500,000	250,000
Administration	144,000	419,000	567,000	632,000	649,000	545,000
Total, expenditures	394,000	23,719,000	81,067,000	139,382,000	199,399,000	132,045,000
Number of positions	16	40	46	50	50	41
Man-years of employment	12	34	44	48	49	40

KANSAS STATE UNIVERSITY LIBRARY
MAR 10 1966
MANHATTAN, KANSAS