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The author feels that more research is needed in this area.

Integrating handicapped and nonhandicapped preschool children: Issues in program development

by Mary Kay Zabel



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Concern for the educational situation of pre-school children with special needs was evident in this country as early as 1930. In that year the White House Conference on Children, convened by President Hoover, issued a 'Children's Charter,' outlining the aims and goals held by the Conference. These included:

XIII. For every child who is blind, deaf, crippled or otherwise physically handicapped, and for the child who is mentally handicapped, such measures as will early discover and diagnose his handicap, provide care and treatment, and so train him that he may become an asset to society rather than a liability . . .

XIV. For every child who is in conflict with society the right to be dealt with intelligently as society's charge, not society's outcast . . .

Provision was also made for young children in our society:

VIII. For every child a school which is safe from hazards, sanitary, properly equipped, lighted and ventilated. For younger children nursery schools and kindergartens to supplement home care.

(The Story of the White House Conferences on Children and Youth, pp. 10-12.)

Although it has taken some time, programs are now coming into being which combine these three objectives and attempt to serve the handicapped preschool child.

Many state legislatures have mandated programs for handicapped young children, and the Handicapped Children's Early Educational Assistance Act of 1968 provided a major boost for early education, but the major push for educating exceptional pre-schoolers came from Head Start.

Handicapped children were accepted into Head Start classrooms beginning in 1965, when the federal program was launched as part of the "War on Poverty." Until 1973, however, these children represented less than 5 percent of Head Start's total enrollment. Enrollment of pre-schoolers needing special education and other special services was mandated by the 1972 amendments to Head Start legislation (P.L. 92-424) which required "that not less than 10 percentum of the total enrollment opportunities in

the Nation . . . shall be available for handicapped children" (Klein and Randolph, 1974). This requirement marked the beginning of the application of mainstreaming to early childhood education (Nazzaro, 1974; Cohen, 1975; Bogdan, 1976; Garfunkel, 1976), and by 1973, 29,000 handicapped children joined Head Start classes. While the wisdom of this Congressional mandate has been questioned (Bogdan, 1976), the fact remains that this legislation brought great numbers of handicapped children in contact with their non-handicapped peers.

Of course, Head Start programs have not been the only preschools to integrate normal and handicapped children. Numerous programs have been reported in the literature, including those of Winkelstein, et. al. (1974) and Bricker and Bricker (1973; 1976) integrating retarded children; Pollack and Ernst (1973) and Strattner (1974) for hearing impaired or deaf children; and Lewis (1973) for various disabilities.

In addition to already existing programs, passage of PL 94-142, with its pre-school program incentive will no doubt result in the formation of more programs integrating handicapped and non-handicapped pre-school children.

Two reasons often presented in support of non-segregated programs for handicapped young children are, first, that early exposure to handicapped children will foster tolerance and acceptance by both the non-handicapped young children and their parents (Bricker and Bricker, 1976; Wolfensberger, 1972), and second, that the presence of non-handicapped peer models will contribute to the learning of young handicapped children. (Bricker and Bricker, 1976; Allen, 1974) Both of these rationales seem sound and sensible on the surface, but if they are to be used as reasons for creating mainstream programs, they must be examined critically.

Attitude studies

It is often assumed by special educators that early exposure to handicapped individuals will do much to alleviate fear and prejudice in non-handicapped individuals. One argument often presented to support the establishment of mainstream programs is that such programs will acquaint normal children with those who are handicapped. The assumption is that this early experience will make the non-handicapped group more tolerant and accepting, both as children and as adults. This is certainly a worthy goal, but there is very little research to support it. Studies examining change in attitude are fairly rare in education, and sociological studies tend to concentrate on the handicapped as a minority group.

One of the few studies even attempting to define the attitudes children have about other "exceptional" children was conducted by Billings in 1963. She used 54 randomly selected elementary school children, 18 each from first, third and sixth grade. Two projective techniques were administered to each of the subjects in an effort to identify existing attitudes (and to explore possible factors influencing their development) toward crippled children. Analysis of the data from these two instruments indicated that responses fell into two well-defined classifications: 1) social responses indicating acceptance or rejection of the crippled person and 2) value responses, indicating a judgment of the crippled person such as "He is no good" or "She can't do anything", etc.

Two of Billings' hypotheses were supported: 1) At-

titudes of noncrippled children toward crippled children are significantly more unfavorable than their attitudes toward noncrippled children; and 2) Attitudes toward crippled children are a function of the grade level (age) of the child holding the attitudes. In relation to this second hypotheses, the data revealed that the number of unfavorable responses increased as the children got older. The difference between the number of unfavorable responses at grade 1 and grade 6 was significant, ($p < .05$).

The third hypothesis Billings tested was not supported by the findings. She suggested that attitudes toward crippled children are a function of the social-emotional adjustment of the child holding the attitudes—i.e., children rated as well adjusted by their teachers are more favorable in their responses. Rather than finding a positive relationship between these two variables, however, inspection of the data revealed a significant negative relationship ($p < .01$). That is, the students judged to be high in adjustment were the same students who were most unfavorable in their attitudes toward crippled children. Little difference was found between the favorable and the unfavorable attitudes of the children who rated low in adjustment.

While there are some methodological difficulties with this study (lack of control of previous contact with a crippled person, reliability of instruments) these findings are especially relevant for early childhood educators. Since Billings found a definite decline with age in the tolerance of normal children for physically handicapped peers, perhaps there is a need to support and reinforce the tolerance shown by the younger sample. Perhaps the most valuable findings of this study are the data showing that children do have unfavorable attitudes about handicapped (crippled) children, and that these attitudes decline with age.

Rapier, Adelson, Carey & Croke (1972) attempted to measure change in the attitude of 142 children (grades 3, 4, 5) toward physically handicapped children. A group administered rating scale which contained twenty pairs of polar adjectives describing children's characteristics was given. The children were asked to respond to one of three verbal categories, e.g., don't need help, need help, need lots of help. The children were specifically directed to circle one of the three phrases in each row "that best tells about physically handicapped children". The scale was administered to the children by the classroom teachers in June, before the opening of an orthopedically handicapped unit on the elementary school's grounds. The rating scale was readministered about one year later to the same children who were then in grades 4, 5, and 6. At that time, all of these classrooms had had at least one orthopedically handicapped child integrated into the classroom for part of most of the day during the year. Also, the non-handicapped children had observed or had contact with handicapped children on the playground and in the auditorium for school events and programs.

There was a shift in attitudes among non-handicapped children after a year of integrated school experience. They perceived handicapped children as not as weak, not in need of as much attention, and more curious than they originally thought. Before integration, 34 percent of the non-handicapped children thought orthopedically handicapped children needed lots of help, but after integration only 20 percent continued to maintain that attitude. As the authors point out, it should be noted that on some of the items the majority of the non-

handicapped children had positive attitudes before integration; and there was no evidence that contact with handicapped children diminished those attitudes.

The major drawback to this study may be found in the nature of the instrument. By using only a self-report system, the experimenters may have been getting what the children knew they wanted to hear. Still, the Rapier study represents one of very few attempts to deal with evaluation of attitude change, and it is important to note that some change was measured, even though some children may have had only minimal contact with the exceptional children.

The handicapped children in both of these studies were of normal intelligence and had obvious physical handicaps. Mainstream preschool programs, however, usually contain children who are mentally retarded, hearing impaired, emotionally disturbed or multiply handicapped. Research is needed on the changes in attitude prompted by exposure to these types of children whose handicap is often more difficult for the preschool child to understand and accept.

Peer modeling studies

A second consideration often cited in the defense of mainstream programs in general, and especially at the preschool level, is the availability of normal peer models.

Research conducted in the area of social learning theory by Bandura and others (Bandura and Walters, 1963; Bandura and Rosenthal, 1966; Walters and Thomas, 1963) has demonstrated that human beings do learn by observing models. Furthermore, one learns most from a model who closely resembles oneself—or a peer model. The availability of normal models for handicapped preschool children could be a strong argument in favor of creating mainstream programs, instead of segregating handicapped preschoolers so that their only models are other handicapped children.

Studies investigating the amount of interaction between handicapped and non-handicapped children in integrated settings have been reviewed by Snyder, Appoloni and Cooke (1977). Such studies have been conducted with retarded, behavior disordered and disadvantaged pre-school groups. The authors conclude that the research with pre-school groups is consistent with that of older elementary groups which indicates that integrated settings do not necessarily result in increased cross group imitation and social interaction between the handicapped and non-handicapped children (Snyder, Appoloni and Cooke, 1977).

One study which attempted to assess the amount of peer imitation by handicapped and non-handicapped preschoolers was conducted by Peterson, Peterson and Scriven (1977). Their handicapped population showed "serious developmental delay" and all the children involved in the study attended an integrated preschool. A series of tasks was taught to the first child, then the next child learned it from him, and so on through the class. Findings indicated that both non-handicapped and handicapped children were more likely to imitate a non-handicapped peer than a handicapped one, and the authors' hypothesis, that non-handicapped children constitute the most effective models for both non-handicapped and handicapped pre-schoolers, was supported.

In this study, however, the task was specifically taught to the first child, and other children were told to learn it from the child modeling it for them. This supports

a point made by Snyder, Appoloni and Cooke, as well as several other researchers. In order for peer imitation to be a successful learning tool for handicapped pre-schoolers, systematic teaching and reinforcement must accompany it. As Bricker and Bricker (1976) emphasize, Bandura's research has indicated that children are more likely to imitate behavior that produces observable reinforcing environmental events. The teacher must structure the situation so that such reinforcing events are immediate and obvious. It is not enough to put handicapped and non-handicapped children together in the same room and hope for imitation of desired behaviors.

K.E. Allen (1974) in a discussion of the Model Preschool in the Experimental Education Unit of the Child Development and Mental Retardation Center at the University of Washington describes the case of Julie, a 4 year-old girl who entered the program with delayed motor responses, infantile speech patterns and an extensive repertoire of inappropriate, maladaptive social behaviors. During the early days of Julie's enrollment in the integrated preschool program, no sign of improvement was noted, but when a systematic behavior modification program was set up, she acquired new behavioral skills and was able to interact with the other children successfully. Simple exposure to normal peers was not enough to overcome her behavioral disability, but when exposure to normal peers was coupled with a systematic remedial program, progress was noted.

Discussion

The two main arguments for early childhood mainstream programs—increased tolerance by the normal peers and positive models for the handicapped children—seem to be "common sense" reasons for establishing integrated programs. However, little research data has been presented to clearly define these advantages. While the Rapier study shows an increase in positive statements about physically handicapped children after interaction with them, the Billings study indicates that systematic teaching and reinforcement may be necessary to maintain those attitudes.

The peer interaction and modeling studies cited above emphasize the importance of having specially trained teachers to deal with both the handicapped and non-handicapped children in the integrated classes, since if each group is to benefit from the presence of the other, systematic teaching of peer imitation will be necessary.

If educators are to convince their colleagues and the public at large that mainstreaming is a beneficial way to educate the majority of handicapped and non-handicapped young children, there must be research evidence clearly showing this. Relying on assumptions that "seem like good ideas" will simply not do. Evaluation is necessary at all levels and steps of any mainstreaming program and we should begin with a serious evaluation of the proposed benefits of the program itself.

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