Programs Office for HANDICAPPED INDIVIDUALS HANDICAPPED INDIVIDUALS

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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Office of the Assistant Secretary for Human Development

Office for HANDICAPPED INDIVIDUALS Washington, D.C. 20201

COURT BANS BIAS AGAINST HANDICAPPED

by Joseph Young Washington Star Staff Writer

A federal court has ordered the Civil Service Commission to include the problem of discrimination against federal employees with physical handicaps in its equal employment opportunity program.

Until now the CSC has contended that the equal employment opportunity program did not provide for any measure of relief for government employees who were victims of discrimination because of their physical handicaps.

However, the U.S. District Court for the Southern District of Texas, Houston Division, has ruled otherwise.

In a sweeping decision, it enjoined the CSC from pursuing its former policy and from refusing to give relief to employees in such cases.

In the case that brought forth its decision, the court awarded a woman employee of the National Aeronautics and Space Administration a retroactive promotion to a grade GS-13 position, with back pay for the time she was denied such a promotion.

The case processed by the American Federation of Government Employees involved a paraplegic woman who was assigned to routine clerical tasks, although she had a masters degree.

She finally was promoted to a grade GS-9 job, but a subsequent reduction-inforce program reduced her grade to a GS-5. She gradually moved up the ladder again to a grade GS-9.

However, two men employees with similar education and experience were promoted to grade GS-13 jobs.

When the woman employee appealed to the CSC, a hearing examiner found that she had been discriminated against because of her physical disability, but said that the commission did not have the authority to force her agency to take the proper corrective action. She appealed this further to the commission's board of appeals and review which upheld the hearing examiner.

The case then went to federal court and resulted in the decision in her favor. It certainly means a better break for those federal men and women with handicaps whose disabilities have made them victims of discrimination.

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THE UNIVERSITY HOSPITAL SCHOOL AS A UNIVERSITY AFFILIATED FACILITY

by Riley Hodges and Lee Hodges

INTRODUCTION

The purpose of the University Hospital School as a university affiliated facility is to provide interdisciplinary training to meet the complex manpower needs encountered in serving the field of developmental disabilities. The major thrust of the facility is to act as a resource center offering a wide array of supportive services to universities in the United States and to communities in Iowa.

BACKGROUND

The University Hospital School

The University Hospital School was established in 1947 by action of Iowa's 52nd General Assembly. The objectives were to provide (a) services for handicapped children and young people, (b) training for prospective personnel, and (c) investigative activities pertaining to individuals with physical disabilities. In 1964, services for mentally retarded children and young children became available.

Those with physical handicaps who are enrolled at the University Hospital School are children and young adults with legal residence in Iowa. Others whose problem is basically mental retardation, receive services on a day basis through arrangements with the Joint County School System.

The goal of the University Hospital School is to serve as a resource for providing (a) exemplary service to the parents and handicapped children, (b) research activities relative to various aspects for those with handicaps, and (c) training opportunities for those expected to work in the field.

Service

Service at the University Hospital School is designed for the purpose of providing pertinent aspects of management for individuals with developmental disabilities from birth to 21 years. Three activities constitute this service emphasis:

Outpatient Program: The Outpatient Clinic is staffed by professionals from a variety of disciplines. Contact with clients is maintained on a basis of periodic evaluation and management through both inpatient and outpatient services. Guidance for parents is an integral part of these services to be carried out in the home and local community. Program recommendations for local facilities, where needed, is an

important consideration. The major objective of this activity is to foster the kinds of services that will equip a client to maximize his abilities to function within his community.

Residential Program: The Residential Program provides a variety of educational and therapeutic services for children and young people whose physical handicaps make it impossible to attend local schools or achieve adequate progress in the community. Since an important goal is to return these individuals to their local communities as soon as practicable, the duration of the stay in the University Hospital School varies according to the needs of the enrollee.

An interdisciplinary program of Hospital School services is provided in the fields of medical-nursing care; nutrition; medical social work; speech and hearing; psychology; occupational and physical therapies; child development; pedodontics; special education; physical education; music; family living; arts and crafts; recreational therapy; and early prevocational training.

Day Program: The Day Program provides special education, therapy and functional training as needed for selected children and young people. Mentally retarded students who reside in the surrounding geographic area are served in the Day Program. The special educational aspects of this activity are arranged through agreements between the Iowa City District, Joint County School System, and the University Hospital School.

RESEARCH

The research objective, to pursue increased knowledge through investigation relative to any aspect of developmental disabilities, handicapping conditions, and related problems, and to provide for the dissemination of pertinent findings, is pursued by all members of the staff of the University Hospital School facility.

TRAINING

Training is designed to provide learning experiences for college, junior college or university students, and for care center staff. Many opportunities for training those already engaged in working with handicapped children are available through the training activity. Training for parents of students under professional management of the University Hospital School programs is also provided. An attempt is made through instruction and demonstration to prepare the parents to accomplish physical care and educational measures at home, insofar as possible. Periodic reevaluations of the child at the University Hospital School are arranged to systematically reinforce parents in their skill.

As an "outreach" activity provided by the University Hospital School, consultation services are provided to other centers and agencies concerned with the developmentally handicapped child. The goal is to help developmentally handicapped children to reach optimal functioning in their local

community or in other care facilities.

These three activities—service, research and training—combined, provide for undergraduate and graduate students at the University of Iowa from other higher educational institutions throughout the State. Over nine hundred college and university students at graduate and undergraduate levels are involved with significant training activities at the University Hospital School each year.

University Affiliated Facility

P.L. 91-517 (the Developmental Disabilities Services and Facilities Construction Act) was passed by the United States Congress in 1970 and contained two major sections: Title 1 related to problems of direct services to the developmental disabilities—it generated a mechanism for planning and prioritorizing the needs of this group. Title 2 was passed in reference to the university affiliated portion of the law with the objective of providing interdisciplinary training to meet the manpower needs of the field.

P.L. 91-517 was a spin-off from Part B of P.L. 88-164, Mental Retardation Facilities Construction Act of 1963, creating the university affiliated facilities programs. This Act provided for construction of facilities to house exemplary and innovative interdisciplinary programs designed to meet the needs of those with developmental disabilities. The mission of the twenty facilities under this act is to serve individuals of all ages with developmental disabilities by: (1) sharing information about common problems and strengths; (2) providing more unified approaches to funding agencies; (3) assisting in the process of exchange of information, personnel, and data; and (4) ultimately having an impact on the development of new legislation in the field. Because the university affiliated facilities acts contain no provisions to share information, data, or to organize a unified impact on new legislation, a group of administrators and directors of university affiliated facilities met in the Spring of 1968 in Denver, Colorado, to organize the Association of University Affiliated Facilities. Presently, there are 37 university affiliated facilities in the United States. The programs developed by these university affiliated facilities are now beginning to demonstrate their value in the field of developmental disabilities.

CURRENT ROLE OF THE UNIVERSITY HOSPITAL SCHOOL

At the University Hospital School the many concepts and precepts furnished by the university affiliated facilities guidelines have been or are being put into practice through provision of training, technical assistance, outreach programs, service and consultation, and research for developing manpower in the area of developmental disabilities.

Training

The University Hospital School represents a unique concept and an outstanding resource for the State of Iowa. The facility draws together highly skilled individuals from a wide variety of disciplines who share common interests in

the field of mental retardation and developmental disabilities. These specialties serve as a resource in attracting students, community practitioners and the attention of the general citizenry to the field. Community practitioners, parents, volunteers, and interested community persons are provided with models of service which can be adapted to specific practices or situations, and receive and give service/training in upgrading the skills of personnel in the field.

Training is also provided to community and junior colleges such as Kirkwood and Muscatine, to four year colleges such as Coe College and Cornell College, and to universities such as Iowa State University at Ames and the University of Iowa at Iowa City. A significant thrust is now being made with paraprofessionals and nonprofessionals in residential facilities and with other personnel involved in a wide variety of community-based programs.

Technical Assistance

With the large number of specialists at the University Hospital School representing a wide variety of disciplines, technical expertise is provided to agencies and communities which are in need of this assistance. The University Hospital School is now in the process of developing workshops and seminars for the Iowa State Developmental Disabilities Council to help the council to function more adequately in its assigned roles.

The University Hospital School assists the Developmental Disabilities Council in disseminating information to the field, collecting and organizing data and supporting services functions. Additionally, the sharing of ideas and exchange of models of practice and service have been initiated recently.

Outreach

The focus of the University Hospital School has included a very strong community outreach component. Community education has become an important segment of this facility's activities. Special teams have gone to communities to provide in-service training to physicians, school nurses, and parents as well as public school administrators and faculty members with reference to children from the community with developmental disabilities.

The staff has designed outreach models to assist practitioners from these areas in obtaining more complete services of the developmental disability teams. Therefore, extensive use of video tape, traveling teams and telephone consultation provides up-to-date information to the local practitioner.

With reference to outreach, the University Hospital School has focused on two areas of activity: (1) upgrading institutional programs and services in order to return those with developmental disabilities to the community, as soon as feasible, and (2) providing model programs for the community to use for more effectively and efficiently meeting the needs of individuals with developmental disabilities upon their return to the community.

Service and Consultation

A considerable portion of the University Hospital School activity is designed to provide service and consultation to service agencies. The staff has made models available for clinical service activities that are replicated in the field. The staff is frequently called upon as consultant in special cases, to assist and to develop management plans for individuals whose problems are difficult to diagnose. Therefore, the University Hospital School is involved with community programs and with Iowa State residential facilities. In-service training and informational meetings are provided as vehicles for stimulating cooperation and coordination among local child service agencies.

Research

Through University Hospital School research activities, new approaches to teaching and providing care for individuals with developmental disabilities are developed and evaluated. Research programs are varied. Some staff members are conducting research with the physically handicapped and others are conducting research in the field of mental retardation. The research capability of the University Hospital School is an important part of the total program. The future direction of the University Hospital School programs will capitalize on the strengths of the university affiliated facilities programs for providing training, technical assistance, advice, and service consultation.

IMPLICATIONS

Interdisciplinary training as a format has been in existence at the University Hospital School for only two years. During the first year the measurable impact of the program on trainees and/or staff was not very significant. However, during the past several months, because of outreach activities, helping to identify and meet the needs of the developmentally disabled, significant advances in the field have been evident.

Training of students at all levels, and inservice training for professionals to upgrade knowledge and technique utilization of a wide variety of teaching approaches has begun to have an effect throughout the entire University Hospital School training effort. There has been a spin-off effect from this facilities training program which is having long range ripple effects that may take years to fully assess. A closely coordinated effort involving the community, the university, the state, the nation, is necessary. With this effort provided by the University Hospital School significant numbers of persons will be adequately trained to serve the needs of developmental disabilities.

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CORPS PRESS RELEASE

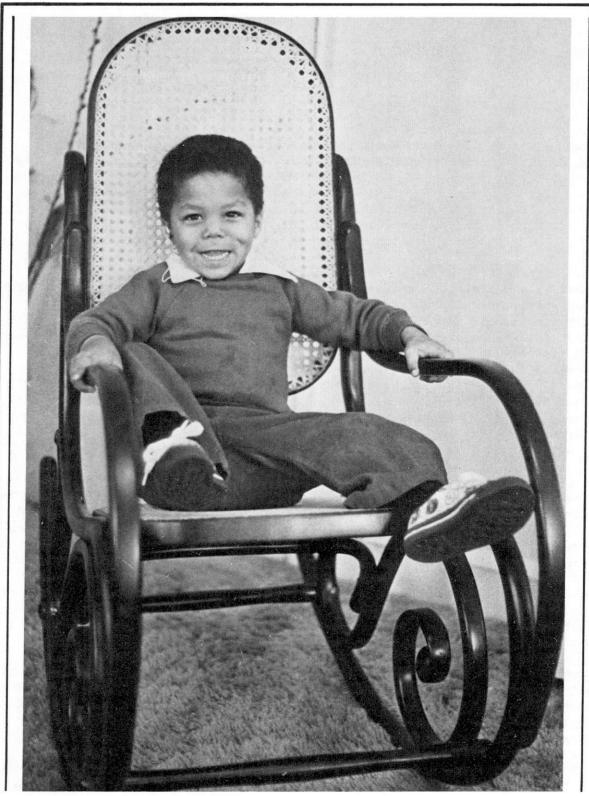
The University Council for Educational Administration (UCEA) is launching a placement service for educational leaders that directs special attention toward women and members of minority groups, Dr. Jack Culbertson, UCEA Executive Director, reports. This non-profit service, called the Computerized Research and Placement System (CORPS), is being partially supported by the Ford Foundation. It provides employers of the United States and Canada access to a sexually, racially, and ethnically balanced pool of candidates who are qualified for leadership positions in a wide variety of educational settings.

Job candidates in CORPS are advanced graduate students of educational administration, special education administration, and higher education leadership who expect to complete doctoral or education specialist degree requirements this year and who will be available for employment in September. By means of the computer matching service housed at Purdue University, placement information about candidates who meet specific requirements of position vacancies is sent within a week of receipt of candidate search requests from employers. In addition to complete placement information, a vita, and the location of the university placement file for each qualified candidate, employers utilizing this placement service receive a directory of women and a directory of minority group members who are registered in CORPS.

This placement service is expected to be of particular help to employers who are searching for replacements for key administrators or program specialists, who are embarking on innovative programs or establishing new services, or who are implementing affirmative action/equal opportunity employment programs. CORPS is designed to be of service to virtually all types of educational organizations: K-12 systems, building and district level; state and federal agencies; intermediate and regional service units; special education agencies or programs; community and junior colleges; four-year colleges and universities; and foundations and education-related industries. Of the several hundred job candidates registered in CORPS, many are qualified for professorships in educational administration as well as for administrative posts.

In addition to the placement function of CORPS, the data bank serves as a rich resource for research about educational administration. Job candidates provide information about their background and experiences and about the preparation programs in which they are enrolled so that research about various dimensions of administration, in keeping with UCEA's mission to improve preparation programs in educational administration, is facilitated. Over time, trend analyses and projections based on the CORPS data bank are anticipated.

Further information about the UCEA Computerized Research and Placement System can be obtained from: Dr. Paula Silver, CORPS Coordinator, The University Council for Educational Administration, 29 West Woodruff Avenue, Columbus, Ohio 43210, Telephone (614) 422-2565.



Erich Damon Clark, a winsome four-year-old, is the 1975 National Poster Child of the National Association for Hearing and Speech Action. Erich, who became deaf from spinal meningitis when he was 11 months old, is the son of Mrs. Carol Clark of Washington, D.C. He is a pupil in the preschool program of the Kendall Demonstration Elementary School on the Gallaudet College campus.

-Photo by Pre-College Programs/Gallaudet College

RESEARCH AND TRAINING CENTERS IN MENTAL RETARDATION

(Part IV)*

NEW YORK UNIVERSITY
RESEARCH AND TRAINING CENTER
IN DEAFNESS

Jerome D. Schein, Ph.D., Project Director Doris W. Naiman, Ph.D., Director of Training

ACTIVITIES IN MENTAL RETARDATION AND DEAFNESS

The New York University Deafness Research and Training Center has studied some of the special problems presented by the population that is both deaf and mentally retarded. It is cooperating with other agencies and institutions to sponsor special research, demonstration, and dissemination activities related to this doubly handicapping condition.

Deafness and Mental Retardation was published by the Deafness Center in 1972. It contains the Proceedings of the Special Study Institute sponsored by the Deafness Center in cooperation with the Bureau for Physically Handicapped Children, New York State Education Department, and the Department of Mental Retardation, New York State Division of Mental Hygiene.

This report contains the papers that were presented during the Special Study Institute on Deafness and Mental Retardation held at the New York State School for the Deaf in Rome, New York, on May 18-19, 1972. Approximately 100 professionals working in the two fields of deafness and mental retardation were in attendance at the institute, which was the first of its kind in the State. The purpose of the institute was to discuss program alternatives for the education of deaf mentally retarded children, and to consider such related issues as identification, size and scope of the problem, instructional approaches, innovations in curriculum planning, instructional media, and program funding sources. Included in the report are sections on Vocational Rehabilitation and recommendations from the group discussions held during the institute.

Education and Rehabilitation of Deaf Persons with Other Disabilities is a new publication of the Deafness Center now in press. It contains sections on many aspects of the problem including a model for preparation of personnel to work with this population, rehabilitation services, educational services, audiological services, and the special difficulties of ethnic minorities.

The Deafness Center is now cooperating with the Yeshiva University Curriculum Research and Development Center in Mental Retardation to adapt their Social Learning Curriculum to make it suitable for use by deaf mentally retarded

^{*}Part I of this series by Joseph Fenton, Ed.D., Social and Rehabilitation Service, appeared in the November 22, 1974 edition. Part II appeared in the February 21, 1975 edition, and Part III in the May 15, 1975 issue.

children. Deafness Center staff members are serving as consultants to three classes of deaf mentally retarded children at New York City Public School J.H.S. 47 for the Deaf to assist in adaptation of the curriculum for this population.

In a staff development and inservice training project for residential schools for deaf children, special attention was given to providing for children who are both deaf and mentally retarded or multiply handicapped in other ways. School staff reported that working with these children in their schools presented many problems, and they felt that comprehensive planning was needed to provide adequately for these children. In view of the fact that at the present time there are few facilities for multiply handicapped deaf children, the project participants felt it would be good if their schools could accept the children whenever possible and do the following: (1) have careful and thorough admission procedures so that both afterclass and inclass staff will have needed information; and (2) provide inservice training to give the staff special help in dealing with these children.

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REHABILITATION RESEARCH AND TRAINING CENTERS IN MEDICAL REHABILITATION

Byron B. Hamilton, M.D., Ph.D., Director of Research, Northwestern University RT Center in Medical Rehabilitation - Chicago John Gordon, Ph.D., Study Director, Temple University RT Center in Medical Rehabilitation - Philadelphia

A STUDY OF THE MEDICAL AND ALLIED HEALTH SERVICES OF DEVELOPMENTALLY DISABLED YOUTHS AND ADULTS

In June 1972, two RT Centers in Medical Rehabilitation, Temple University (RT-8) and Northwestern University (RT-20) began a joint study entitled, "A Study of the Medical and Allied Health Services Delivery System for the Developmentally Disabled Youths and Adults." This study represents one of the cooperative ventures of the Special Centers to assist Federal agencies in the solution of high priority areas of concern. The objective of this project is to provide scientific data on the needs of this segment of the population by determining what services are available to them at present, what the gaps in these services are, the problems and difficulties which make these services inaccessible or unavailable to them, the sources of funds for these services, the agencies or organizations which are responsible for delivering these services, etc. The project studies both urban and rural sample populations from all socio-economic levels and exhibiting various types of disabilities (cerebral palsy, mental retardation, epilepsy) so that the data emanating from the project can be utilized on a national scale. The services for the Developmentally Disabled that are mandated by the Developmental Disabilities Act of 1971 can be provided only if the needs are properly identified and documented, the existing services characterized and the unmet needs and gaps in services consequently defined.

This project was expected to be completed in July 1974. The two RT Centers engaged in the study worked jointly on a common protocol and methodology so that the data will be uniform. A Clinical Evaluation Form which includes medical, psychological, dental, social, occupational and physical therapy examinations together with recommendations from each discipline for each particular client was completed early in the project. To date, Northwestern University RT Center has completed evaluations on 120 developmentally disabled adults (half of whom are mentally retarded) and Temple University on 80 clients, ages 16 - 40 years. The health and social-vocational problems of each one have been properly tabulated and characterized by type of disability. In addition, the "prescription" for the prevention or the solution of the problems identified has been written out for each client. In Chicago, the demographic and health services used by some 700 developmentally disabled adults have been characterized, and a registry of nearly 700 Chicago agencies known to provide services to the developmentally disabled has been developed. This registry will include the location and type of services that are being provided by the agency so that it can be the basis of a developmental disabilities service referral system for the Chicago metropolitan area. An onsite survey of at least 50 of these agencies was included as part of the protocol in order to determine in detail the type and extent of services provided, their sources of funding, and patient referral problems. All this information will be made part of the final report and it is expected to be useful in planning improved services for the developmentally disabled population.

Northwestern University (RT-20) and Temple University (RT-8) will make a combined final report on the project so that the data will cover a sample population of 200 and by cross-validating the results, the information can be used as a sound basis for legislative or other planning purposes.

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GEORGE WASHINGTON UNIVERSITY RESEARCH AND TRAINING CENTER IN MEDICAL REHABILITATION
Washington, D.C.

John P. Naughton, M.D., Project Director Fred Leonard, Ph.D., Director of Research Winfield Scott, Ph.D., Director of Training

DEVELOPMENTAL STIMULATION TRAINING PROGRAM AT FOREST HAVEN D.C. CHILDREN'S CENTER

Rosalie Ingenito, OTR, Chief Occupational Therapist

With the hope of better treatment for her granddaughter, an interested grand-parent stimulated what has become an ongoing staff training program sponsored by the George Washington University RT Center (RT-9) for Forest Haven, the District of Columbia facility for the mentally retarded. The program takes place in the Martha Eliot Infirmary where there are almost two hundred severely and profoundly retarded non-ambulatory residents of all ages.

In the past, the infirmary provided good custodial care for its residents. They were kept clean, dry and well-nourished but most spent the day lying in cribs and were fed pureed foods while lying down. Little stimulation was provided by the busy staff and many were afraid to handle the children to any great extent for fear of injuring them. Deformities had developed from poor positioning and lack of exercises.

Reinforced by the new knowledge that many of the most severely mentally retarded are capable of developmental improvement, weekly visits were made at first by a George Washington University Medical Center occupational therapist with whom initial contact had been made. After various techniques of sensory and motor stimulation were demonstrated, the need for a planned multidisciplinary program for staff training became evident. Subsequently, arrangements were made through the George Washington University RT Center to start a one morning a week instructional program beginning October 1972. An occupational therapist, a physical therapist, and a speech pathologist (who did not continue throughout the program) provided instruction to two registered nurses, one of whom was to become the instructor of later groups, eight nursing assistants, and one volunteer.

The program aims were to teach the concepts of normal developmental sequence and the need for more stimulation of retarded persons to achieve the same goals as normal children. Staff had to be able to evaluate the children's level of function in the gross and fine motor areas, play activities, use of oral structures, and speech and language. Treatment techniques were to be incorporated into patterns of daily care as much as possible.

To encourage maximum interest, staff trainees chose the two children with whom each would work. Initially the time was spent demonstrating treatment techniques, gradually incorporating more participation on the part of the trainees. The majority of trainees were not comfortable with a formal academic style so that lectures were given toward the end of the program. A reference library was provided and appropriate films shown.

At the end of the initial six month period the children were reevaluated and a staff attitude questionnaire circulated. The results clearly showed that there was unanimous agreement that staff now looked on all residents as individuals with some learning potential. This change in attitude increased the staff's interest in their work.

In a number of children, there were measurable changes in various areas of developmental level. To a lesser degree, one child, who still lacks complete head control, now demonstrates some play behavior at the one year level and can follow some commands. Even children who have not exhibited great change show more social behavior, smiling more frequently and are more amenable to handling.

It was still obvious that there was a need for a feeding program which would incorporate good sitting position, use of as advanced a diet as possible, and training in voluntary use of oral structures, and even self-feeding. A ten week concentrated feeding program was begun, chiefly with the staff who

had participated in the first program. They were taught to evaluate the child for appropriate sitting position, diet appropriate to the individual's use of oral structure, and proper feeding equipment. Techniques were taught to encourage use of lips, chewing, voluntary swallowing, etc. The staff evaluated residents and reported to the group, first in groups of two and then individually. Much less demonstration was given by the therapists than previously.

The staff was frustrated by the lack of opportunity this approach offered to follow through with all residents over a period of time. Not everyone felt capable of conveying techniques to other staff members. Since that time, however, at least one child has been taught to feed himself independently.

As a result of the training program, a number of other changes have taken place in the infirmary program. There has been an increase in the total amount of stimulation and attention given to residents; a foster grandparent program was started (13 grandparents seeing 26 children); and legislative changes have resulted in the regular assignment of the first part-time and now, full-time educational personnel (presently among our trainees). Also, speech personnel are assigned to the infirmary and funds have been obtained for equipment such as special chairs, a large shag rug for sensory stimulation and gross motor activities, mirrors, pillows for positioning and others. The Boy Scouts became involved by making lapboards. Of special significance is the addition to the institution of a physical therapist and some physical therapy aides.

Currently the class consists of two registered nurses, the teacher (who will become a trainer), and the new nursing assistants.

Other tangible results were:

- A class of five nursing assistants have been trained by one of our trainees.
- 2. A proposal for a multidisciplinary trainer staff to train all new nursing assistants has been submitted by the head nurse to appropriate Forest Haven personnel. The infirmary speech personnel have already participated in the latest class.
- 3. Feeding programs have been initiated on three of the four units with a total of fourteen children involved. Foster grandparents, teachers and evening staff are participating as well as nurses and nursing assistants. Some of the children have begun to advance from puree toward regular diets.
- 4. The atmosphere of the infirmary has changed from a place of quiet wards of children lying on their backs to a place with color, sound and activity. At times the playroom, which replaces one of the wards, is full of adults playing and working with the children.



NATIONAL PARAPLEGIA FOUNDATION TO MEET IN FT. WORTH, TEXAS

The National Paraplegia Foundation announces its 1975 Convention to be held in Ft. Worth, Texas - August 4-8, 1975. Care and Cure - A Call to Action is the Convention theme.

NPF also released its 1974 Annual Report. The report noted the occurrence of spinal cord injury to be increasing - approaching 11,000 cases per year. In addition, the report noted that the insurance industry alone is now spending close to \$2 billion a year on the treatment and care of spinal cord injuries, and that the life time expense for an individual case is now approaching \$400,000.

NPF has also published the proceedings of the fourth conference - Continuing Education in the Treatment of Spinal Cord Injuries - IV. Such conferences bring together consumers and professionals interested in the problems of the paraplegic and quadriplegic to provide a maximum exchange of information.

The National Paraplegia Foundation is located at 333 North Michigan Avenue, Chicago, Illinois 60601.

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NEW PUBLICATION

Beginning with the Handicapped by Verna Hart, E.D. (Associate Professor, Coordinator, Program for Early Childhood Education for the Handicapped, University of Pittsburgh).

The author dedicates the book "To parents who are the child's first teachers and to teachers who are substitute parents." The point is well made that every child is entitled to a chance to succeed to his maximum ability level. A task analysis approach is used and teaching techniques are presented in the areas of self-care skills, motor training, adaptive behavior and language development. The author expresses the premise that all children can learn if the tasks are analyzed carefully enough and presented according to the child's level of development.

Publisher: Charles C Thomas

301-327 East Lawrence Avenue Springfield, Illinois 62703

Price - \$6.95

NEW RESIDENTIAL FACILITIES IN MINNESOTA

Progress in the development of residential facilities for physically handicapped citizens has been announced by Louis M. Groenheim, Director, Physically Handicapped Office, State Department of Public Welfare.

Now under construction is Courage Center, a 64-bed facility in Golden Valley, Minnesota. The Center will serve high-level, nonretarded cerebral palsied individuals who are young adults. The objective is to provide rehabilitation and cultural enrichment for a period of one to five years. The cost is \$1.7 million which includes a year-round swimming pool. Already operational is the library, gymnasium, cafeteria and living room area, and supportive services: occupational therapy, physical therapy and speech therapy.

The St. Anthony Rehabilitation Inn is a residential facility designed to provide long-term care for young adults with spinal cord injuries, cerebral palsy, muscular dystrophy or multiple sclerosis. The Inn will be a 120-bed facility offering living units of 15 residents in eight wings. The location is six blocks from the University of Minnesota, and the estimated cost is \$2.3 million for "bricks and mortar."

The Phoenix Project is a non-profit organization set up to serve the mentally retarded as well as multiply handicapped young adults with developmental disabilities. It will accommodate 48 residents separated into four wings of 12 individuals each. The estimated cost of the facility will be in the area of \$2 million. The two and one half acre site is located on a bluff near the west side overlooking the airport and downtown St. Paul.



NEW PUBLICATION

Zoning for Family and Group Care Facilities by Daniel Lauber with Frank S. Bangs, Jr.

The Planning Advisory Service Report examines the rationale behind such facilities as halfway houses, group homes, and foster homes. The report surveys existing zoning practices and offers recommendations for a legal and sane zoning treatment of these uses. Most cities have overly restrictive zoning regulations which tend to prohibit these residential facilities from desirable residential districts. Zoning for Family and Group Care Facilities recommends that these facilities be allowed in all residential areas, including single family zones, subject only to specific controls governing licensing, density and concentration of facilities.

Published by: American Society of Planning Officials 1313 East Sixtieth Street Chicago, Illinois 60637 - Price - \$6.00

NEWS BRIEFS

Transatlantic Deaf Telephone Communication

The Department of HEW and the Department of Commerce participated in a Transatlantic telephone call at 7:30 a.m. on May 12, demonstrating special telephone equipment for deaf people to mark the opening of the U.S. Telecommunications Exhibition at the Trade Center in London where more than sixty U.S. firms are presenting their latest state of the art technology to the British market.

The FCC approved this single call which was initiated in London by Honorable Jack Ashley, a deaf member of Parliament, and was received in the HEW Snow Room by Dr. Boyce Williams and Dr. Robert Weitbrecht, deaf inventor of the crucial telephone coupler.

Secretary Weinberger participated and invited the British Ambassador, Members of the Congress, and other members of government and private organizations to share this historic occasion. In London, U.S. Ambassador Elliot Richardson participated.

Deaf Conference

The Association for Computing Machinery—Special Interest Group on Computers and the Physically Handicapped, with financial support from Burroughs Corporation, Eastman Kodak Company, and IBM, sponsored a Conference on Computing Careers for Deaf People in Washington, D.C. recently. Participants included employers, deaf persons employed or training in the computer field, educators, vocational rehabilitation personnel and Civil Service Commission officials. Approximately 500 deaf persons are presently employed in the broad area of data processing. It is expected that this number will grow much larger as training opportunities for interested deaf individuals increase and as employers become aware of the substantial contributions deaf people are in a position to make.

NEW PUBLICATIONS

The Deaf Population of the United States by Jerome D. Schein and Marcus T. Delk.

The first detailed account of the numbers and characteristics of the deaf people of America since 1930. It includes data on size of population, family composition, education and communication, occupation, economic status, and morbidity and mortality. A most important book for all serious researchers and all professional personnel in health related fields.

Published by National Association of the Deaf, 814 Thayer Avenue, Silver Spring, Maryland 20910.

Dictionary of American Idioms (Revised Edition), Maxine Tull Boatner, Ph.D., and John Edward Gates.

This dictionary has been designed as a supplement to existing school dictionaries. It is a dictionary for reference in understanding English phrases which cannot be understood from definitions of the separate words given in ordinary school dictionaries. The book has been planned for the use of students and teachers in the upper grades in schools for the deaf, but it is also useful for teachers and students of English as a foreign language.

Published by National Association of the Deaf, 814 Thayer Avenue, Silver Spring, Maryland 20910.



AIRPORT ACCESSIBILITY

James S. Jeffers, Executive Director, Architectural and Transportation Barriers Compliance Board, of the U.S. Department of Health, Education, and Welfare, met with officers of the Airport Operators Council International (AOCI) at their Spring meeting in Lafayette, Louisiana. He was encouraged to witness the concern of the participants to the needs of air travelers who are disabled and their willingness to play an instrumental role in effecting improved accommodations for disabled travelers.

AOCI has agreed to supply the information for the preparation of a comprehensive resource book detailing accessibility provisions in the Nation's airports.



MELANDER APPOINTED TO NATIONAL DDA COUNCIL

Mr. Robert Melander of East Hartford, Connecticut, has been appointed to the National Advisory Council on Developmental Disabilities. He will fill one of the vacancies created by the expiration of five terms, December 31, 1974. He is former chairman of the National Association of Mental Health's Childhood Mental Illness Committee. He has worked personally and on behalf of the National Society for Autistic Children to secure the rights of autistic children under the Developmental Disabilities Act.

The Council has a new chairperson succeeding Elizabeth Boggs. She is Jewel Hamilton of Houston, Texas, who is well known for her interest in autism, and who was one of the Secretary's original appointees.



ACCESSIBILITY: PRINCE GEORGE'S COUNTY

In Prince George's County, Maryland, where there has been a history of awareness of the need for accessibility and architectural barrier-free design, responsiveness to this need is resulting in positive action in a number of areas where accessibility for the physically disabled has been neglected.

Through the efforts of the County government's Office for Coordination of Services to the Handicapped, many projects are underway which will promote increased accessibility and usability of public facilities, recreation facilities, educational institutions, shopping areas, and housing. In conjunction with its Citizen Advisory Committee, the Office is urging public officials. and private businessmen to respond to the needs of the physically handicapped.

The response to these efforts has been most encouraging. Soon after taking office in December of 1974, County Executive Winfield M. Kelly, Jr. asked the Office to prepare legislation which would strengthen the County Building Code's provisions for accessibility and architectural barrier-free design.

Dick Dunne, Director of the Office, formed a task force to draft this legislation. The task force was headed by William Shepherd, who is also chairman of the Advisory Committee to the Office, as well as Chairman of that Committee's Accessibility Subcommittee. Mr. Shepherd, who is physically handicapped, was joined by two other physically disabled representatives, by an architect, a County building inspector, the Executive Secretary of the Governor's Commission of Employment of the Handicapped, a member of the staff of the Recreation Department's Special Services Division, and an assistant in the Office for Coordination of Services to the Handicapped.

The draft legislation produced by this task force is based on the new State building code for facilities for the handicapped, recently enacted by the Maryland Department of Economic and Community Development.

The County task force strengthened provisions of the State code which it felt did not go far enough in requiring accessibility, and added new provisions for areas not covered by existing laws.

Among other things, the draft amendments increase the percentage of housing which must be made accessible to the physically handicapped, requires accessibility in all public facilities, and requires designated parking spaces and curb cuts in public parking areas. Also included are provisions to require accessibility throughout all multi-story buildings, and a section dealing with accessibility in recreation areas, especially in swimming pools.

The members of the task force are confident that they have produced a strong, yet workable piece of legislation, which, if enacted, will make Prince George's County a leader in requiring accessible facilities for all of its citizens.

Architectural Barriers

The Rehabilitation Services Administration, Department of Health, Education, and Welfare, and the American Institute of Architects have completed development of a syllabus on Architectural Barriers, "Into the Mainstream." This document will be sent early this summer to all individuals and firms which are members of AIA and all cooperating schools of architecture, design, and engineering. Its purpose is to sensitize, orient, and begin to educate architectural and engineering students and newly hired draftsmen and architects to the needs of disabled individuals. It is an elementary orientation document; it will also serve to whet appetites and inform students in rehabilitation counseling about the ways community leaders can prepare to receive even greater numbers of severely disabled who are being rehabilitated through the State-Federal rehabilitation program. Forewords by RSA Commissioner Adams and the President of AIA spell out the training potentials of this basic document. RSA is planning a targeted distribution to rehabilitation training and service leaders in the country.

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