

FOCUS ON EXCEPTIONAL CHILDREN

THE HELPING TEACHER/CRISIS TEACHER CONCEPT

William C. Morse¹

THE ROLE OF THE HELPING TEACHER

To understand the fundamental purpose of any special education program, it is necessary to examine the nature of its origin. Who stimulated its development? What problems was it designed to solve? Typical new programs come from state department offices or designated committees.

The crisis teacher idea was conceived by a staff of elementary teachers in a high problem incidence school during a series of case conferences being held with a consultant. The purpose was simple: to provide a more adequate educational program for pupils with socioemotional problems through adding conjoint assistance to the regular classroom.

DEVELOPMENT

As the group examined the classroom dilemma, they came to the following conclusions. While case conferences and consultation had a function, something more was needed to produce change. Individualized, external therapy helped some but often left the classroom behavior virtually untouched. The morale and productivity of a teacher depended upon finding more effective ways to cope with the most difficult children. The impact of a few pupils on the learning climate and the experiences of peers could be devastating. The typical "discipline" route, whether administered by teacher or administrator, was seldom a corrective influence. Somehow the problem behavior had to be cast in a new format to encourage social learning rather than punishment.

At this point in time, the system proposed a first special class for the emotionally disturbed to deal with the situation. This group of teachers resisted nominating candidates based upon three considerations. First, they could not imagine how a

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teacher could conduct a class of "ten of these." It would be utter chaos. Second, most of the children they were concerned about and felt responsible for were not a problem one hundred percent of the time. Third, given one class of ten for a large population, these teachers were too realistic to see this as any relief. At best, their whole school might have two places in such a class. Parenthetically, it is interesting that periodic examination of current statistics by the Michigan Association for Emotionally Disturbed Children indicate that less than a third of the disturbed children are getting help. The national overall figure for special education at best is about 50%. Thus, these teachers were realistic about the promise of special education through classes.

This led to an examination of the myth of the grade level classroom where children were supposed to fit. There is a fantasy that one teaches the "fourth grade" or "fifth grade," and teachers will sometimes protest inability to move to a new level which they cannot possibly teach. After a cursory psychological examination of the variance in ability, achievement, motivation, and social development in the various classes, it became only too evident that we never did away with one-room schools. The fact is, as any teacher knows, there are 26 classrooms if there are 26 children; but to make 26 highly appropriate and productive classrooms coalesce in one room reminds one of the trials of Job. The marvelous adaptability of most of

the 26 growing, immature human organisms and one mature one usually keeps the classroom operation from disintegrating.

Perhaps the real reason the classroom can maintain at all lies in the affinity of most children and adults as social beings. Associating with our kind seems to gratify a certain social hunger. The teachers delineated three aspects to the group as a setting for learning.

1. Much of the learning which takes place is really individual but perforce takes place in the presence of classroom peers. This generates a great deal of comparison with how others are doing and injects a whole substrata of emotional life even when not cultivated by the teacher.
2. One can learn from peers who, in various ways, help one understand. In the classroom of 26, each pupil has the potential of one/twenty-sixth of the adult and assistance from 25 peers, though help from the latter sometimes gets categorized as cheating.
3. There are some things one cannot learn without social intercourse; these include social skills and the proper practice of much affective life. Adults are basically suspicious of the power of group life since the adult, as a minority, finds it difficult to coerce, dominate, or even lead the group. But there is always contagion, imitation, formulation of group roles, and the emergence of group codes on the overt or covert level.

For the most part, teachers are group workers who unfortunately have had little help in the utilization of groups in learning. The solution implied by the new class for disturbed children was simple—regroup the deviant ones in smaller arrangements called special classes. If we take the percentage of special children at 10%, we would remove 2.4 children and leave the rest called normals for the regular teacher.

In their seminars, the teachers sought another solution. As long as we teach children in large groups with a minimum of teacher input per child, there will be some children who cannot function effectively at certain times. The teacher of the large group cannot be expected to handle everything put into a given classroom. The particular pupil has a right to a greater time and expertise investment at times of crisis. The other class members have a right to their fair share of the regular teacher's investment. The teacher has a right to respite care and conjoint efforts for the child in distress. And all of this

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should take place as a natural education assistance process without labels, punishment, or implications of failure.

The Plan

These realizations began a phase of more creative discussion. What really would help the regular classroom to become a more adequate learning environment? The term mainstreaming had not been invented in 1960, but these teachers focused on the essence of that process by listing their observations concerning the disturbed-disturbing child. Several propositions were advanced.

1. Even the very disturbed child is not "all disturbed all the time," meaning there are only certain periods when the disturbed pupil cannot function in the larger group setting. These periods may be at certain regular times or in the press of a crisis. But most of the time the disturbed child can benefit and fit into the regular class.
2. What is needed is direct assistance. Consultation is one thing, but real help is another. Psychologists and the like might offer advice, but they did not know what it was like to try to administer a classroom with these kids in the room.
3. In the "olden days" the principal took over these children, talking to them and tutoring them. The role of the contemporary administrator as middle management leaves very little time for more than a quick once over. The help these teachers wanted should be always available, yet the principal is often otherwise occupied or at meetings.
4. A repressive "disciplinary" approach does not work. Sending a child to the office, or some other exclusion, seldom helped the youngster.
5. The direct service helping person should be omnipresent, not itinerant, and be trained as a teacher, but a special teacher. The helping person should be able to respond to the disturbed child in crisis but be able to help with both academic and emotional problems for all children. Many of the disturbed youngsters needed direct counseling help with their self-concept, but just as many could find growth through therapeutic (as contrasted to academic) tutoring.
6. There were times when the "helping teacher" could assist best by coming in and taking over the classroom while the regular teacher worked through a phase of a problem with a youngster.

7. Help should be based upon the reality of how the child was able to cope with the classroom and not on categories, labels, or diagnostic criterion. It was pointed out that many normal children need help during a crisis in the classroom or in their lives, just as the chronic and severely variant youngster does.

What these teachers asked for in essence was an over-group person who would deal with disturbance regardless of the manifestation. These teachers requested an educator, not a clinician, to give the emergency help when needed. There was even a willingness to each take an extra pupil or two in order to save the cost of the new type of special teacher. To have help available when it was needed was seen as the best total assistance. In 1961, the crisis/helping teacher became one method of delivery of special education services recognized by the state code.

MIDDLE PHASE

Soon after the program got underway, "crisis teacher" became "helping teacher." No school felt comfortable having a crisis environment, although one way of getting this resource in the early days was to compete with other schools in documenting the highest problem index! As it happened, the first helping teachers were not certified special educators for the disturbed. They were "naturals" with an unusual combination of common sense and green thumb empathy which enabled them to become exemplary disseminators of service and innovators in practice. While the design had merit, more credit was due to the skill of the first helping teachers than to the format. The classroom where they worked contained resources for pupils and teachers. A divided glassed-in corner enabled private individual conversations to take place while the other children were working on self-sustaining activities in the larger section. The unusual talent of the early crisis teachers masked the difficulties inherent in the new role. As the function became institutionalized and legitimated as special education, it became evident that no formal program design is a substitute for individual capability. Nor is there any substitute for cultivating faculty interest in any school starting such a program. Unless the added teacher role is seen as essential, it will remain isolated in the school milieu.

As the idea of the helping teacher matured and spread, a wide range of individual practice emerged. Some of this variation would be under the heading of "best use of unique self-attributes and style," while other variations

represented escape into single functions such as academic tutoring or play therapy. The service concentration was on the social and emotional disturbance based on behavior in the school setting. Studies indicated that the range of those who became "regulars" for sustained help ranged from 2 in one school to 24 in another out of some 350 pupils. The crises ranged from 4 to 600 per year in various schools.

First Referrals

An eclectic core makes up the role of the helping teacher. Like all mental health services, the task is never ending. The more help available, the higher the goals. Needs outstrip resources. The basic training required by the state was certification as a teacher for the emotionally disturbed. At first children were referred by teachers or administrators on the basis that the pupil could not cope with the classroom situation (acting out or academic tasks) or appeared to be in need of encouragement and support (the low self-esteem and depressed types). The diagnostic services of the school psychologists and school social worker were employed to provide diagnostic information, family involvement, and individual counseling as the need became evident. Parents were informed of the availability of the service and were invited to seek consultation or particular help for their child. In rare instances, children came on their own. For example, a group of girls petitioned for some meetings like the "bad boys" were having. They wanted sessions to talk over their problems too.

Basic Approach

The basic approach is psychoeducational, with an interest in the whole of the child's life in and out of school. The diagnostic "can of worms" has been discussed at length elsewhere (Morse, 1974); it can be said here that, in place of a categorical emphasis, a grid of dimensions concentrated on the present functioning in the various aspects of the affective, cognitive, and motor domains. Explanatory etiological materials were put to the service of understanding the child's current status. The assets and resources of the individual and his life space were compiled. These in turn led to the formulation of immediate and long-term goals with appropriate educational interventions. The evaluation and replanning phase constituted the final aspect. The focus was on resolving the

child's problem in whatever way was most feasible. In addition to traditional efforts, the use of "big brothers" for identification, peer tutoring, group activities, and family support are illustrative.

The psychodynamic and behavior modification approaches were entertained since the system was not theory bound. Intervention choice is a consequence of diagnosing the problem and available resources, with an emphasis on eclectic thinking (Cheney & Morse, 1972). The resolution might include a detailed tutorial sequence or psychotherapy or both, but in every case alleviating the classroom situation received primary attention. Stiver (1974) studied the manifold ways of helping teachers, based upon a modification of Catterall's taxonomy (1970). He found the teachers dealt with all types of problems: socioemotional, academic, classroom behavior, academic motivation, peer problems, learning disabled, and pre-delinquent. It was clear that most helping teachers used techniques which were an extension of regular educational procedures, with an emphasis on support and encouragement. Some employed play therapy while others emphasized the academic approach, one hopes on the basis of differential diagnosis. However, the match between the intervention and the indicated problem was not always clear. Gabriel and Sarnecki (1969) found the clientele mostly disruptive and the attention to parent involvement high.

Basic Orientation

The basic orientation was the contemporary life space of the child rather than a case history-historical emphasis. The point of beginning focused on what is going on in school—"You look sad," "You got upset, and we should see what we can figure out about it." For most children adequate diagnostic information to start work was available from observation and data in the life space, the child's reality. The everyday things which happened or conditions which were evident served as the point of departure. Often there was already more information than one knew how to utilize. A Rorschach to attest the anger, a children's apperception test to discover depression, a self-esteem inventory to reveal despair—these are not necessary. The problems were known, but solutions were elusive. Show and tell, stories and pictures, crumbled assignments, social role evidence, authority hostility—do we always need tests? On the other hand, there were always certain children whose natures no one could fathom. Sometimes what appeared to be a clear and

simple situation turned complex. More complete diagnosis then became essential to provide reasonable intervention plans. The diagnostician was asked first to observe, to talk to the regular and helping teacher, and then to be selective in formal assessment to answer particular questions. Social workers had the function of more intensive work with the family situation. On the basis of both diagnostic and pragmatic experience, referrals to more specialized aid such as the special class, group activity, intensive individual or family therapy, tutoring, or Big Brothers might be discussed with the parents. If the evidence indicated that outpatient, day school, or inpatient care was an option, this too would be brought into the picture.

LIFE SPACE INTERVIEWING

The basic mediating tool for dealing with affective problems was Life Space Interviewing (Long, Morse & Newman, 1976), which differs from most techniques in flexibility and is designed to fit work in an action setting. Life Space Interviewing also provides "diagnosis on the hoof," because it leads to continual reevaluation of strategies. The interview was used as a functional way to deal with crises or the sustained problems. While considerable time would be devoted to individual pupils, group interviews would be the mode chosen when the problem involved two or several youngsters. When it came to interventions appropriate for the school environment, how a medium was used—rather than what the medium was—formed the basis of differential help to children. Reading therapy is more than remedial reading, and both are school appropriate. Children have art class, but noninterpreted self, family, and free drawing might assist in externalization of a problem. Recess equals play, and play therapy is a normal extension. Teachers talk a lot to children, with counseling an extension. Children form groups for their activities, and the school can design more specialized types of groups.

Interventions

The first question was always how to use a school medium as an intervention. The substance of this point of view has been described at length (Cheney & Morse, 1972). The way to improve a child's self-esteem might be to concentrate on tutoring in a skill, to assist in finding a friend, to unwind some internal confusion, or it might be all of these together. Expressive use of play, art, music,

and language arts often with no interpretation might be appropriate. Bibliotherapy sometimes was employed. Role playing, rewards, and restrictions could be utilized. The plan might call for a "Big Brother" program to enhance the identification potentials. But the intervention had to fit the best understanding of the child rather than the child fit a favored style of intervention. This eclecticism makes considerable multidiscipline planning necessary. All avenues of help—direct and indirect—were scrutinized, though too often the procedure a professional might recommend was not available in reality. It was early discovered that what intervention would produce what change often remained a mystery, often because there was no control or even knowledge about what was taking place in the pupil's life stream. Fortuitous positive and negative conditions often are more powerful than the best laid therapeutic plan. There were none of the myopic prescriptions which atomize the child into little bits and pieces, though the helping teachers made concrete and specific lessons. It is likely we erred on the side of amorphism and lack of specificity, though the goal was for plans that provided the worker cognitive maps and not isolated bit performance objectives. While the approach was dynamic in that motivations and needs were attended based upon normal and aberrant developmental psychology, practice was not bound to any single theory. Differential diagnosis led to differential interventions based on what the child needed. High structure or low structure could be indicated. Counseling was appropriate, but so was behavior modification if it fit the needs of the child at a given stage. The eventual goal was to increase the child's self-decision and self-management over the long haul. Relationship and the humanistic envelope were considered essential, regardless of the given specific tactic employed.

Conjoint Consultation

In a few years the golden age of the helping teachers' focus on pupils became passe. Really, it always was apparent that the problem was only partly in the pupil or only sometimes the pupil. But the implication of this was avoided for a time. Helping teachers did not engage in the fad of change agency. Ecological psychology (Rhodes, 1972) had not yet received the prominence it now holds, but Redl's concept of life space and situational provocation led to the hard part of this business of special education—the conjoint consultation role of the helping teacher. It meant dealing with one's colleagues, people

you knew and with whom you worked. This consultation of equals was a whole new procedure for which the rituals of the migrant authority consultant are not appropriate. Peer consultation is a most difficult role and caused a reexamination of the way one changes a system or parts of it to better serve a pupil. Those who live in a system know the hazards of self-proclaimed advice.

The focus of this new style of consultation became mutual problem solving, on the theory that the vast majority of teachers do want the best for their charges and will have creative solutions if they can see the total problem clearly. Sometimes three-way consultations with the pupil and regular classroom teacher were helpful. At other times case conferences were conducted with outside participation. Since the consultation was conjoint sharing of the effort of the helping teacher and regular teacher, any perception the regular teacher had was part of the reality. Of course, the solution might not focus on the child; it might focus on the classroom social situation, curriculum, or method. The technology of "consulting" virtually to yourself with your peer constituted a continual challenge and led to a whole new effort at both self-understanding and system analysis. If there is any one generalization from this phase of the helping, it is that you cannot win them all; but patience and persistence can make an impact on the ideology and practice of most elementary schools. If the helping teacher brings accurate psychological understanding to the situation, it will have power because it adds insight and helps solve a problem. The persuasive element is useful data. If we can make the teacher's work more meaningful and purposeful, desired change is more likely to result.

Liaison Services

There is also a helping teacher function in integrating the extra educational services or outside services which are germane to helping a child. When outside agencies are doing work with a child or family, there are usually specific implications for school practice. This is the liaison role of the helping teacher. A good many outside agencies are notorious for ignoring or even blaming the school. Since, from the ecological position, each special child is in a total milieu (we hope treatment or help oriented), it becomes essential for all influences to work together. This function takes time and the building of trust with parents, agencies, and special personnel. There is also the matter of proper channeling of special services within the school

system. Often the special school personnel operate out of "downtown" or a district office. When they come to a school, there is need to maximize their time and integrate their efforts. It is not uncommon to find several agencies working with a common situation all in isolation, or several school services working with a child with no centrality. Then there is the whole matter of integrating the services of paraprofessionals, parent tutors, peer helpers, and the like. Even in well-serviced schools, there is no way to cover the needs of pupils without the use of non-paid personnel and services. These need to be coordinated, trained, and sustained and constitute part of the liaison service of the helping teacher.

Prevention

Prevention has never been large in the ideology of special education. As is even more apparent today, a pupil has to have it bad to be eligible. From an ecological point of view, especially in the area of the emotionally disturbed, prevention is critical. It was not long before the helping teachers began to tire of always mopping up after the fact. They recognized the vital need to engage in prevention. This meant dealing with the ideology of the school, curriculum, parent relationships, and mode of discipline. Here it became necessary to work out the substance of a mental health climate for the school (Morse, 1975) and study the process of change such as outlined by Sarason (1972a & 1972b). In many areas the school mental health resource has moved outside the school in terms of community mental health consultation services for schools. This has tended to replace direct service to children by mental health agencies. Some external personnel are most naive about aiding teachers, and the helping teacher serves as the "in house" consultant to prevent the waste of this resource. A related prevention development has been the rapid growth of affective education, sometimes as much hazard as promise (Morse & Ravlin, in press). Again, the helping teacher as the school mental health agent has a role to play in staff education for affective education.

In summary, the helping teacher role started with direct service to pupils and moved to a conjoint consultative relationship with the classroom teacher. This broadened to a concern for collating various services in the pupil's life space. Prevention soon became added to the other activities, as the helping teacher became the resident school mental health agent. Obviously, the role became large and complex with demands beyond the ability of one person to deliver.

ACCOUNTABILITY

Programs should be accountable. There has been relatively little research on the efficacy of the helping teacher design. In the first place, assessing a one-function impact in a total life milieu is virtually impossible. Evaluation research on mental health programs is among the most difficult of tasks (Guttentag & Struening, 1975).

There are several observations which clarify the state of affairs evaluation in school programs for the emotionally disturbed. Schools, through special education, have been given the mandate to solve the pupil's problem regardless of whether or not it is a school problem or regardless of the availability of resources. Even though the helping teachers were willing to go "wherever the problem led"—be it therapy for an internalized problem, work with the regular teachers, peer relations, or home conditions—it is clear that the school cannot be expected to counter forces over which they have no purchase. This is why dealing only with behavior without attention to etiology is nonproductive. It is not at all easy even to rectify the school environment or to help a child learn self-control or social skills. But this is simple compared to dealing with a family which cannot cope, economic despair, or the many unreachable families and conditions. True, one does not give up; but expecting the impossible is misleading as well. The helping teacher intervention plans have to be based on reality. Predictions and prognosis are difficult since there are so many ways to bring help or to fail.

Program Value

In an effort to begin evaluation there have been studies of the perceptions about the value regarding the helping teacher program. It is clear that teachers value direct service of this type over other modes of classroom assistance (Lynch, 1975); how could it be otherwise? Principals have elected to have this type of a co-worker, given this choice or that of an assistant principal. Interviews with children indicate a range of perceptions from not really understanding what is being attempted to "she helps me not fight." Also, there is evidence that those children who have school-originating or school-accerbating problems can be helped much more readily than those with outside-generated problems stemming from home consternation. While the helping teachers consult with parents, they seldom take the role of family to other services which are in short supply both as to

quantity and quality. Also, many who need services resist even when they are available.

Intensive evaluative interviews were conducted with a small group of sixteen pupils in helping teachers' case loads. Some of these pupils were in early phases, and others had been in the program for the school year or longer. The interviews included a discussion of the problems the pupil felt he had, what the helping teacher did, what (if any) changes took place, and how the parents felt about the program. The youngsters were most open. Boys saw mostly behavior problems—fighting and the like; girls saw mostly academic difficulties—many feared they would fail. In general, their views coincided with the conditions as outlined independently by the helping teachers. Most of the pupils had serious difficulties. Several had failed at least once, and others were diagnosed to be in hopeless situations by the psychiatrist. The students in their interviews spoke of their sibling hostilities, parental problems, school discouragement, and lack of hope. They felt they were getting aid in academics and could give specifics relative to assistance in behavior control. All but two said the help was useful. On the Coopersmith self-concept scale, the averages for self, social, and school were all at the 30th percentile or lower. Some individuals were at the very bottom of the scale. Only in a few instances was any direct work done with parents.

On a scale of moral development or value internalization, this group of pupils rated lower than most other disturbed populations. These pupils were more anxious about school, had lower morale about school, saw themselves more as troublemakers, and felt their adult relationships were more negative than did other groups of disturbed children in school or hospital programs. They did perceive themselves as more adequate in peer relationships than those in other groups, however. The lower the anxiety, the higher the self-esteem.

After a year or more in the helping teacher program, the regular teachers rated pupil progress greater in social adjustment than in school achievement. Self-esteem was rated improved. Of course, they started so low that even with improvement there was still a long way to go. Several pupils were seen as making no changes as all. Improvement is indicated in the way the pupils felt regarding being able to cope with school and interpersonal relationships. With the recent accountability emphasis in special education, certain limited information has been collected on school behavior and self-esteem which indicates improvement. Since the special and regular teachers are also involved as helpers and do the ratings, these data have limited value. On records kept of behavior infraction

incidents in junior high, there was improvement in some cases but not all. And *why* the improvement did or did not occur was easy to explain after the fact, but has little general predictive value. This led to follow-up studies of the high risk pupils (Newman, 1975).

In order to develop more adequate methods of studying the impact of interventions from a psychoeducational point of view, the technology of the N of 1 has been evolved. Each pupil is an experiment in and of himself, even as the behaviorists have said though on a different basis. We know from clinical examination that the program impact ranges from superficial to total changes in life direction. This may be as much due to particular conditions in the total life and times of the child when help is given as to the competency of those giving help or the efficacy of the intervention. Accountability without reality assessment is a charade.

There are several current efforts to develop the technology to differentiate effective from shoddy delivery service. It may be that one evaluative procedure will turn out to be as much a study of process as product. If one can demonstrate astute interventions delivered at a quality level, we have one criterion to examine. At least this will prevent falling into the trap used in evaluation of special classes where the good and the bad classes and the appropriate and nonappropriate placements were evaluated in one grand mess and then using only the cognitive domain as an efficacy standard. One additional criterion of the helping teacher design might be, does it help the learning of the other children in the pupils' classroom? Does it help the teachers?

SUMMARY

As the helping teacher program has evolved, it has come to be based on the following assumptions.

1. The work does not depend upon categories or labels. It is functional and generic to social-emotional malfunction in the mainstream and the consequent need for individualized, intensified support.
2. The design requires a full-time school resident person responsible at all times. Consequences are evident the day after. The helping teacher program cannot function on a migratory worker basis. The advocacy role is most effective through rendering of direct service.
3. The program offers several categories of direct ser-

vice: to the child, teacher, peers, and parents. While consultation may be utilized, it is of the nontradition conjoint type described.

4. The helping teachers have been concerned with the total milieu and primary prevention in the system. Discipline and child management are of major concern.
5. While the work is crisis sensitive, it is no longer dominated by this aspect though crisis help is always available.
6. The program is dedicated to a blend of affective-cognitive interventions with a premium on relationships.
7. Cooperative work is necessary both with other school specialists and outside referral services. No helping teacher expects to go it alone.
8. The plan envisions co-team teaching of the special and regular teacher. There is no intent to replace, only to supplement. The best staff education will come as a result of offering direct help; through service comes change. That the job is overwhelming, all agree. But the direction has stood the test of time.

PRESENT DILEMMAS

Considerable support from teachers and administrators continues for the helping teacher design though evaluation is still in its early stages. But changes in special education have significantly altered the program in the last few years. In fact, it is evident that the basic concept may not survive.

Impact of Mandatory

Perhaps the most drastic change has been the alteration of special education with mandatory legislation. While there are states with noncategorical programs, these are not characteristic. The result is no service without a category. Originally, the helping teacher gave help where it was needed because it was needed, with no categorical concern. It was a mainstream technique before the term was invented. Now, since we are in the age of mistrust, more effort often is spent on proof of need than on the help given. Because of past misuse of special education and violation of parent and child rights, we are in the time of reaction formation. There have been as many as 23 persons at a planning and placement meeting to prove the

need of help for the pupil. Some of these sessions lasted for extended periods of time. In another example, there have been a series of 5 such meetings for one pupil because they could not decide what to do or could not do what was decided. The result is, this child's program has become meetings about a program. It is all understandable from our past sins, but we may be sinning again just as much in the new style. The reason behind all of this is not only to protect the child from helpers who do not help or give parents rightful involvement. It goes beyond that to the fact there is not enough money appropriated to actually do the job which has been mandated. It is no coincidence that mandatory and mainstreaming are the current Siamese twins. At the same time, since the schools now have total responsibility, many new multiply handicapped, seriously impaired children are being "discovered." The cost of adequate total, all-age programming will be astronomical by present standards—hence the gatekeeping function of categories which forces the helping teacher, paid by special funds, to work only with certified youngsters. At any rate this condition is unresolved in the helping teacher program to date.

Many states talk of abandoning categories but have at the same time evolved a new set of categories without recognizing the fact. The old category system was vertical. One was trained to work with emotionally disturbed from mild to retarded in the same sequence. Most states still use this labeling system of categorization. The worse off the child, the more likely the service. But the delivery of service (in theory though often not in practice) has moved toward a horizontal categorization. Regardless of the kind of a special education problem, it is indicated as mild, moderate, or severe with multiple impairments further confusing the issue. The original helping teachers focused on the emotionally disturbed with categorical training in that area which is not at all adequate for a horizontal delivery system. Since the cooperative responsibilities of mental health and special education have never been resolved and since the original helping teacher served in both capacities, it may be the program will survive only if there are sources of support other than special education funds. At least part of the helping teacher's time should legitimately be in the combined special education-mental health role.

At any rate, thus it has come to pass that the helping teacher is the first-line worker after the regular classroom and is now to deal with all areas of disability and all children who have the potential for mainstreaming. As is well known, outside of the pragmatic test of trying, there is no test for the mainstream potential. The moderate to

severe categorization is again a false hope. The ego intact, antisocial, value alienated child may not fit any category. But at the same time this type of youngster has more need for a separate controlled milieu to bring to bear interventions than would be necessary for many seriously disturbed children of another nature. The test is not categories or levels but the question of what critical interventions are required and how can these best be delivered—mainstream or no? In certain cases it may be easy to provide help as an adjunct to the regular class, while in other instances this may be impossible. The result of the old or new category systems often is to induce charade programs which, even as they are envisioned, are holding operations or avoidance rather than service. It is clear that we must reexamine this issue to maintain the helping teacher role.

The helping teacher started out as a functional program seeking to help the whole school enterprise through assistance wherever it was needed. The training for being a helping teacher now must be noncategorical or better "all categorical." This is a great burden, but it has been known for a long time that most children have multiple handicaps. It is reality. Training must also include an intensive emphasis on what can be done in the regular classroom and through consultation. Probably this means the selection of helping teacher candidates will have to be different than for other special education roles.

Secondary Level

Another major issue is the applicability of the helping teacher format to junior and senior high school. While the helping teacher format can function best in a moderate sized elementary school, the pressure is on for services to adolescents in the junior and senior high schools. There has been experimentation to adapt the helping teacher concept to the highly complex environments of secondary schools. We know the adolescent is highly resistive to any separation from the normals or being seen as different.

Several problems emerge from this. The secondary social system is more resistant to change and often resents giving its resources for children when they need to use the school facility in iconoclastic ways. The need for integration of counseling and administrative roles along with the psychologists, school social workers, and other resources makes for a multifaced team operation. Communication bogs down. A great deal of energy goes into continual bailing out the mainstreamed special student. The impact of academic problems is more pronounced.

Conferences with the "willing" teachers to place children take a lot of time. There should probably be several helping teachers in these settings, but the number of labeled pupils will not support this even though the incidence of those needing help will. Much of the time these teachers conduct a free floating classroom where special students who cannot cope come—at the point when they have been excluded or failed—to have tutorial sessions and assistance. Group work is being tried, and job placement (work therapy) is an important resource (Ahlstrom & Havighurst, 1971). The age level problems and the institutional size combine to make the helping teacher role very difficult at the secondary level. One of the most effective secondary programs was worked out with the staff as a whole and started with a set of understandings on rights of pupils and teachers. The whole service was oriented around a humane rescue system; it depended as much on the unusual talent of the helping teacher as the format. Again, a great deal seems to depend on the principal, even more so than at the elementary level.

Service Priority

Another major new problem is what priority of services to give because the role has become overwhelming. What should come first, given a scarcity of resources? An advisory committee of teachers and parents is needed for each helping teacher to study the school and discuss how the needs of the pupils can best be served. Left on their own, helping teachers are at the mercy of their own preferences or principal pressure. It is a system service and must be so oriented.

It is clear that there are many forms of episodic assistance and many patterns. The overall evolution of the helping teacher has culminated in a helping teacher service with a room having space for simultaneous group activity and independent work, including as well space for private individual conferences as needed. Elements of the resource room are being incorporated so that self-operating materials can be used whenever possible. But this still requires the attention and relationship from a warm, empathic adult. In all probability an elementary school with 300 children will need a service for at least 30 children. Some of these children could benefit by much more intensive help than either school "one on one" or short time group work provides. Here the ideal team is another person working a fluid classroom somewhat on the order of that developed by Hewett (1968), working in tandem with the traditional helping teacher service. The

issue of expense is always raised, but the answer is we already have multiple and isolated services in many schools. These need to be integrated into one mini clinic service rather than continue as separate and itinerant programs which we now find. But in all probability, we cannot expect to meet the increasing school needs of children without additional investment.

CONCLUSION

The challenge of being a helping teacher is attractive to the most creative and exciting in the special education field. However, if the helping teacher role cannot be redesigned to overcome the negative implications of certain new trends in special education, it will not survive in any recognizable form regardless of all the interest.

It is interesting that, at this time when the original concept is both being eroded and distorted, there is a national group, the National Council on Assistance to Classroom Teachers, Inc., which has been working for several years to stimulate the expansion of the helping teacher mode of service delivery (Mr. Richard Greenspan, Executive Secretary, National Council on Assistance to Classroom Teachers, Inc., 303 West 66th Street, New York, NY 10023, telephone: [212] TR-3-7221). The impetus came not from special education but from survival needs of the public schools, particularly in the urban centers. If we are going to support teachers in the present public school system, they must have assistance; and the helping teacher format is a natural medium.

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CLASSROOM FORUM

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The center approach to teaching and learning intrigues me. In my Primary II classroom, in addition to my average and accelerated students, there are several identified exceptional children as well as many other children with learning problems. Although I am interested in setting up centers for all my students, I am confused about how to start. I am also a bit skeptical of using this approach with exceptional children.

A classroom organized around centers is an effective way to individualize for your entire class. Centers can be set up according to ability level as well as interest areas. As you are setting up the centers, consider the following:

1. Choose only one area in which to begin centers.
2. Give a diagnostic test in the chosen area to determine the needs of each child in your class.
3. Display the results of the diagnostic tests so that you readily recognize groups of children with the same strengths or weaknesses. (Remember, individualizing does not mean individual tasks for each of your 34 students every minute of the day. At times, individual tasks are appropriate. At other times, small group tasks are appropriate. Sometimes, entire class participation in a task is needed.)
4. Plan skill-oriented centers and skill-oriented games of differentiating levels. Be sure that all centers and games reinforce skills taught in the directed teaching lessons. Some centers may be exploratory centers in which the student draws his own conclusions and discovers concepts. These centers, however, should also be related to the directed teaching sessions.

- a. At first, provide structure in the centers. Display a set of directions at the center. Number the steps of the center to coincide with the directions. (Place a #1 on the folder that contains the task cards, #2 on the folder that contains the matching parts, #3 on the can that contains the grease pencils, #4 on the self-check folder, #5 on the box that contains paper towels for cleaning the task cards.) Pictures demonstrating the process may prove useful for younger children.
 - b. In planning skill-oriented games, initially use a format that is familiar to the children (tic-tac-toe, concentration, jumping board games). Later, more original games may be used. (A special treat for all concerned is to have a group design a center for another group. This ability comes after an extended experience with the center approach.)
5. Plan a "treasure hunt" through each of the centers in which the child will be working. Give each child a "treasure map" which requires that he work at least one example at each center and that he answer questions about the directions. The class may be divided into their proposed groups (not more than four or five) for this activity. A leader may be assigned to each group to assist with reading and following directions. This will give the teacher a chance to observe how well the tentative groups work together as well as determine the appropriateness of the structure, format, directions, and academic skills required for the centers. Be sure to allow sufficient time for this activity.
 6. Plan a schedule which includes directed teaching time with each group as well as time for reinforcing skills. Although there are many good schedules, you may wish to include some or all of the following activities:
 - a. Directed teaching time in which new concepts and skills are introduced.
 - b. Completion of practice work packets in which directed teaching time is reinforced through dittos or worksheets.
 - c. Center work.
 - d. Free choice.
 - Games
 - Early finisher's task—a task that is challenging yet fun for those who finish a center early; it is used to reinforce those children for organizing their time wisely.
 - Fun dittos—math coloring dittos, dot-to-dot, or maze dittos may be used.
 7. As students learn to follow the directions at each center, introduce a "chalkboard center" in which the child must follow directions written on the chalkboard. A model of the completed product continues to be very useful. (Use primary paper; write primary size and style; head paper with name, date, and subject just as the child's paper should be.)
 8. Color-coded packets for differing levels within a center may be added to further individualize a child's program. This is particularly effective if the teacher uses a visual approach in one packet and a tactual-kinesthetic approach in another packet, each reinforcing the same concept.
 9. Change centers and games frequently to keep them challenging.
- Initial work with centers must be structured and well organized. They must include detailed instructions and display many models. Later, more responsibility may be placed on the child to organize and to use his time wisely. Directed teaching time must be carefully planned and faithfully used.
- After the center approach has been used in one subject area and is operating smoothly, other subject areas may be added.
- Constant evaluation of the process of working in centers as well as measuring the academic progress of the children is essential.
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