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A history of the Laura Ann Sisk Memorial Reading Clinic

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A HISTORY OF THE LAURA ANN SISK
MEMORIAL READING CLINIC

A Thesis
Presented to
the Faculty of the School of Education
College of the Pacific

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts

by
Bonnie Jean Thompson
August 1956

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CHAPTER I

INTRODUCTION

Failure in reading may cause a child not only blighting insecurity in school, which frequently gives rise to serious personality maladjustments, but also an embarrassing, belittling insecurity in his social life at school and in the home. A reading clinic may play an important part in the proper development and future social adjustment of its students.

Fundamentally, reading clinics are organized to provide appropriate guidance for pupils who do not read up to capacity. While it is true that the approach to reading may differ, every reading clinic has as one of its major goals the diagnosis and correction of reading problems.

In a survey of all reading clinics in the United States, it was established that most clinics are university or college controlled, although there are many private clinics in operation.¹ According to the surveyor, "it is apparent that more and more reading clinics are being

¹Walter B. Barbe, "Study of Reading Clinics," School and Society, 82:138, October 29, 1955.

organized throughout the country."² During the past thirty years there has been an increasing interest in the establishment of reading clinics.

In the summer of 1949 the Laura Ann Sisk Memorial Reading Clinic began to provide diagnostic and remedial reading service at the College of the Pacific. This report will present a history of the clinic from its beginning through the spring semester of 1956.

I. THE PROBLEM

Statement of the problem. It was the purpose of this study (1) to present to the College of the Pacific a written record of the history of the Laura Ann Sisk Memorial Reading Clinic since its inception; (2) to trace its growth in scope and philosophy by portraying past and present methods and techniques employed; (3) to analyze the results of clinic practices which were obtained systematically; and (4) to discuss the future plans for the development of the clinic.

Importance of the study. It is the investigator's desire that the data presented may be of practical value to

²Ibid.

the College of the Pacific, to the students entering the field of reading and interested in remedial methods, to those desiring to know about the nature of the clinic, and to those seeking a means of evaluation of past operations in order to plan for the future of the clinic.

Sources of information. Information for this study was secured in the following manner:

1. By interviewing the following people who were directly involved in establishing the clinic or who have had some responsibility for its operation: Dean J. Marc Jantzen, Dean Willis N. Potter, Mrs. Vivienne Sisk, Mrs. Norma Cordet, Dr. Hazel L. Wolhaupter, Miss Amelia Bartz, Dr. K. H. MacPherson, Miss Barbara Bower, Dr. Charles Coffey, and Dr. Ned M. Russell.
2. By investigating past materials on file in the reading clinic and clinical services office.
3. By checking with the business office for the specific purpose of checking the per cent of time spent by several directors.
4. By reviewing college catalogues and college bulletins.
5. By checking with the registrar's office in regard to the number of clinicians.

6. By visiting the public and college libraries to secure information from back issues of the Stockton Record, the only source of local publicity.

Organization of the thesis. The thesis is divided into five chapters. The introductory chapter presents a statement of the problem, discusses the importance of the study, and lists the sources of information. Chapter II includes information on the historical origin of the clinic. In Chapter III an attempt is made to portray the growth that has taken place in the clinic. The directors are listed in chronological order and their philosophies, methods, and techniques are discussed. Also, a brief description of the work done in conjunction with the other clinics is presented. Chapter IV is a report on the reading clinic cases. The final chapter, Chapter V, presents a summary, attempts to draw some conclusions, and discusses plans being formulated for the future of the reading clinic.

Limitations in exploring the problem. Although every effort was made to gather accurate information, the validity of this report should be interpreted in view of possible prejudice by the person being interviewed, or the person interpreting the records. Whenever and wherever possible, figures and facts were verified in as many ways as were available.

CHAPTER II

THE HISTORICAL ORIGIN

For some time prior to 1949 both Dean J. Marc Jantzen and Dean Willis N. Potter had thought in terms of a need for establishing a reading clinic for the College of the Pacific.

Such a clinic could prove to be an asset to the college and the people it would serve. While helping children with reading handicaps it could also provide the college students in the Department of Education and allied departments with practical experience, under supervision, in remedial reading.

Through the generous contribution of Mr. and Mrs. Lawrence Sisk the desire of Deans Jantzen and Potter for a reading clinic at the College of the Pacific became a reality during the first summer session of 1949.

I. THE READING CLINIC IS ESTABLISHED

While teaching psychology of reading, Psychology 170, Dean Potter felt it imperative that a practicum course in the treatment of reading disabilities be established. During the school year of 1948-1949 Dean Potter called upon Dean Jantzen in regard to the founding of a

reading clinic at the College of the Pacific. It was decided to plan toward this goal in the immediate future.

The thought occurred to Dean Jantzen that Mr. and Mrs. Lawrence Sisk of Modesto might possibly be interested in establishing a memorial to honor their daughter, Laura Ann, who had been killed by an automobile on April 25, 1947 at five years of age.

In the fall of 1948, Dean Jantzen discussed his idea with Mrs. Sisk who was doing graduate work at the college at that time. Mrs. Sisk was immediately interested in the project. On Sunday evening, February 13, 1949, a dinner meeting was held at the home of President Burns. The purpose of this meeting was to determine the feasibility of opening a reading clinic at the College of the Pacific. In attendance were President and Mrs. Burns, Mr. and Mrs. Sisk, Dean and Mrs. Jantzen, Dean and Mrs. Potter, and Dr. and Mrs. K. H. MacPherson. Dr. MacPherson, a local optometrist, was present because of his interest in problems of reading disability. He had studied under Emmett Betts at Pennsylvania State University and Samuel Renshaw at Ohio State University.

It was at this meeting that the plans for a reading clinic at the College of the Pacific began to crystalize. One of the major problems which confronted the group was

that of finding available space. It was decided that the problem could be solved by partitioning the alcove at the head of the stairs in Owen Hall. Owen Hall, which had been completed in the spring of 1948, housed both the psychological and educational departments.

With the generous contribution of Mr. and Mrs. Sisk the space in Owen Hall was utilized and equipment was purchased. The instruments purchased included a tachistoscope and telebinocular.

In the spring of 1949 Dean Potter began to screen the first students for the reading clinic. The processing of these students will be discussed in the next chapter. The first summer session of 1949 marked the beginning of the reading clinic. Dean Potter served as the first director and Mrs. Sisk acted as his assistant.

The first regular student-clinicians to work with the fifteen children enrolled were: Marguerite Abdallah, Mable W. Barron, Ethel C. Dundore, Mary M. Greenwood, Norma S. Gordet, Audrey Heim, Minnie Johnson, Doris Opdahl, Sibyl L. Pearce, Grace Russell, Robert L. Satterlee, Jean J. Smollett, and Hazel K. Willburn.

II. SUMMARY

The idea of Deans Jantzen and Potter for a reading clinic at the College of the Pacific became a reality. Mr. and Mrs. Lawrence Sisk of Modesto donated the money necessary to begin the operation of the clinic. The clinic was named the Laura Ann Sisk Memorial Reading Clinic in memory of their daughter who was killed in an automobile accident.

The first session began in 1949 with Dean Potter as director and Mrs. Sisk serving as his assistant. Fifteen children and thirteen clinicians were enrolled during the first summer.

CHAPTER III

A SEQUENCE OF CLINIC ADMINISTRATIONS, PROCEDURES, AND POLICIES

This chapter will attempt to present in sequential order the history of the reading clinic from its beginning in the summer of 1949 through the spring semester of 1956. The emphasis will be on the clinic and its operation--with reference to the individual director's methods of remedial instruction, techniques of diagnosis, and philosophy of reading.

In as much as the investigator's desire is merely to present a history of the clinic, no attempt will be made to evaluate the methods, techniques, or philosophy employed.

I. SUMMER OF 1949

The director and his assistant. Dean Willis N. Potter was the first director of the Laura Ann Sisk Memorial Reading Clinic. He had joined the college faculty in the fall of 1947. In September of 1947 he received his doctorate in education from the Pennsylvania State University. At the time of this writing, Dean Potter is director of secondary education and dean of the Division of Graduate Studies at the College of the Pacific.

Mrs. Sisk, who with her husband had made the initial contribution toward the clinic, served as Dr. Potter's first assistant. Previously, as a classroom teacher she had become interested in children with reading disabilities. Mrs. Sisk, under Dr. Potter's direction, aided the clinicians in working more effectively with their clients.

Selection of the first cases. Dean Potter began to screen the applicants for reading instruction during the spring semester prior to the opening of the clinic. The number of clients accepted was limited, as he was not certain of the number of clinicians who would register for the practicum course. Instruction was to be on an individual basis.

The clinic director held an initial interview with one or both of the parents of the cases referred to the clinic. If the problem appeared to be a clear case of mental retardation or merely a discipline problem, the child was not accepted. Where there was some question, Dean Potter administered an intelligence test which usually was the Revised Stanford-Binet test of Intelligence.¹

¹Lewis M. Terman and Maud A. Merrill, Measuring Intelligence (New York: Houghton Mifflin Company, 1937).

Before the session was over, all of the clients had been given individual intelligence tests. Other tests of intelligence used in the clinic included: The Wechsler Intelligence Scale for Children² and the Arthur Performance Scale.³

The Psychology of Reading course. Dean Potter began to give the course, Psychology of Reading, in the summer of 1948. The following description of the course appeared in the summer session bulletin for that year:

. . . study of the psychological processes involved in reading, of the development of the all school reading program, and of the diagnostic and remedial procedures applicable to cases of reading disability in both the elementary and secondary school.⁴

The course was also taught in the fall semester of the 1948-1949 school year, but not in the spring. It was out of these courses that a need arose for a practicum course in remedial reading. Reading and the Educative Process, by Paul Witty,⁵ was used as a general text. Other works

²David Wechsler, Wechsler Intelligence Scale for Children (New York: The Psychological Corporation, 1949).

³Grace Arthur, A Point Scale of Performance Tests (New York: The Commonwealth Fund, 1943).

⁴Clinical Services Summer Session Bulletin, 1950.

⁵Paul Witty and David Kopel, Reading and the Educative Process (Boston: Ginn and Company, 1939).

selected for outside reading included books by Fernald,⁶ McKee,⁷ Betts,⁸ Harris,⁹ Cole,¹⁰ and McCullough.¹¹

This course in Psychology of Reading furnished an overview of the psychological and physiological processes in reading, as well as the basic causes of reading disability, including methods of handling this disability. The course included a study of methods of increasing reading rate, improving comprehension, bettering the pupil's attitude toward reading, and developing a sight vocabulary. General techniques of working with pupils were discussed and analyzed also.

⁶Grace Maxwell Fernald, Remedial Techniques in Basic School Subjects (New York: McGraw-Hill Book Company, Inc., 1943).

⁷Paul Gordon McKee, The Teaching of Reading in the Elementary School (Boston: Houghton Mifflin Company, 1948).

⁸Emmett Betts, The Prevention and Correction of Reading Difficulties (Evanston, Illinois: Row, Peterson and Company, 1936).

⁹Albert J. Harris, How to Increase Reading Ability: A Guide to Diagnostic and Remedial Methods (London: Longmans, Green and Company, 1941).

¹⁰Luella Cole, The Improvement of Reading (New York: Farrar and Rinehart, 1938).

¹¹Constance Mary McCullough, Ruth M. Strang and Arthur E. Traxler, Problems in the Improvement of Reading (New York: McGraw-Hill Book Company, Inc., 1946).

Reading Clinic Practicum. The Reading Clinic Practicum became a two-unit course with the prerequisite of Psychology of Reading or teaching experience. Since most of the student clinicians had previously been enrolled in Dean Potter's Psychology of Reading class, an opportunity was now provided to become acquainted with the functions, operation, organization, and equipment of reading clinics and to employ previously discussed methods and techniques of diagnosis and remedial reading--in actual practice.

Location of the clinic office and reading rooms.

The newly partitioned office at the head of the stairs in Owen Hall served as headquarters and a conference room. Additional rooms in Owen Hall were utilized for reading instruction. With these facilities an attempt was made to carry out the functions of the clinic in as smooth a fashion as possible.

The client. Fifteen clients were enrolled at the beginning of the clinic. The average case came for one full hour a day unless there was a special reason for extra time. Work was done solely on an individual basis. Further information regarding the individual students will be presented in the following chapter.

The clinician. The methods and techniques that were employed by the clinician varied because the remedial instruction was structured to meet the child's apparent needs. However, presented below are certain basic procedures that were followed to some extent by each clinician with every student.

1. The clinician attempted to establish rapport immediately so that the child felt accepted and at ease.

2. Various diagnostic procedures were used. In addition to information secured from school records, tests were administered during the clinic session in order to determine the student's potential and current ability in various areas of reading. These included such tests as the Gates,¹² Sangren-Woody,¹³ and Gray's Oral,¹⁴ reading tests. Also, every client's vision was screened with the telebinocular.

3. Instruction was begun at the pupil's current grade level or slightly below.

¹²Arthur I. Gates, Primary, Advanced Primary and Survey Reading Tests (New York: Bureau of Publications, Teachers College, Columbia University, 1942).

¹³Paul V. Sangren and Clifford Woody, Sangren-Woody Reading Test (New York: World Book Company, 1928).

¹⁴William S. Gray, Standardized Oral Reading Paragraphs (Illinois: Public School Publishing Company).

4. Successful and challenging learning was considered of utmost importance to every pupil.

5. A daily diary was kept in which the clinician reported the methods and techniques employed and gave a general account of the activities and conversation that had taken place during that session.

6. A daily meeting was held with all the clinicians, where techniques, procedures, and various other items were discussed.

7. The tachistoscope was used daily, but sparingly, according to the need.

8. All the older students were encouraged to do interesting outside reading.

9. Sight vocabulary was developed immediately.

10. Each clinician was expected to meet with his student's parent or parents at least in the beginning and toward the end of the session. Dean Potter stressed that parents learn what was taking place and he developed an outline for parent conferences. The information was designed to explain to the parent the results of a diagnostic analysis of the child's problem, to discuss the procedures being used in the clinic, and to recommend ways in which the parents could assist the child.

These basic techniques were utilized in varying degrees by the directors throughout the clinic's history

and so will not be reiterated in the remainder of the chapter, unless it is felt by the investigator that they differ to a significant degree.

II. 1949-1950

Although the clinic was not in operation during the school year 1949-1950, an important event took place. On May 3, 1949, the following article appeared in the Stockton Record:

EXPANSION OF COP SERVICE-TRAINING PROJECTS OUTLINED TO SERVICE CLUBS

A program for expanding and co-ordinating five clinical service-training projects at the College of the Pacific was outlined to Stockton and Lodi Service Club representatives Friday night.

Simultaneously, COP President Robert E. Burns and Dean J. Marc Jantzen announced that Dr. Ned M. Russell, of Kansas City, had been named to head the expanded program.

Directors of the projects in speech correction, musical therapy, child play therapy, remedial reading, and mental hospital experience, outlined the purposes and methods and typical case histories.

.....

The remedial reading clinic, latest project will open with the summer session, Dr. Willis N. Potter, director, announced. The clinic will diagnose types and causes of reading difficulty and direct corrective techniques for them.

Jantzen told service club representatives that much of the clinic work is virtually unique in Northern California with three of the projects being pioneered at C.O.P.

Jantzen said Dr. Russell, the new co-ordinator, also will serve as psychologist for San Joaquin County Schools as well as co-ordinator. Russell is presently psychotherapist and consultant for the Veterans Administration in Kansas City and was formerly education department head at Union College, Ky.¹⁵

In September of 1949, Dr. Ned M. Russell became the coordinator of clinical services which included the speech, music, play therapy, and reading clinics. In addition to his new position as coordinator, Dr. Russell assumed the duties previously held by Dr. W. N. Mitchell, as head of the Department of Psychology and director of the Play Therapy Clinic.

This is the origin of clinic coordination at the College of the Pacific and shows the beginning of the relationship of remedial reading to the other clinics. However, two or three students during the first session had also been enrolled in other clinics previous to this time.

III. SUMMER OF 1950

During the school year of 1949-1950, the clinic was not in operation. Psychology of Reading was taught by Dean Potter during the spring semester.

The Reading Clinic resumed operation on June 20, 1950. Dean Potter again served as director. His new assistant

¹⁵Stockton Record, May 3, 1949.

was Mrs. Norma Gordet, a graduate student, who had been a clinician during the previous summer, and was an experienced public school teacher.

Twenty clinicians and clients were enrolled for the five-week session. Since many of the clinicians had other classes some of the work with students was accomplished, of necessity, during the afternoon. An attempt was made to schedule the younger pupils for the morning hours to avoid the extreme afternoon heat experienced during this particular summer session.

It was during this year that some group work first took place. Occasionally, two or more clinicians would plan a portion of their work together.

In a bulletin issued by clinical services that summer the following fees were listed for the five-week session:

PUPILS WHO LIVE OFF CAMPUS	
Instructional fee	\$25.00
PUPILS WHO LIVE ON CAMPUS	
Instructional fee (Includes health service and swim fee)	31.00
Room fee	27.50
Board fee (subject to change)	55.00
Supervisory fee	10.00

The clients who lived on campus were with students who were enrolled in speech therapy. Arrangements and accommodations for housing and supervision of the students were handled by the speech department.

IV. 1950-1951

For the first time a limited amount of work was carried on in the clinic during the school year. Under Dean Potter's direction, Leonard Clark, a graduate student, who had been a clinician the previous summer, worked with three clients.

V. SUMMER OF 1951

It was during the summer of 1951 that a significant event occurred. The Rosenberg Foundation of San Francisco awarded a \$30,270.00 grant to the College of the Pacific Clinical Services. The following announcement appeared in the Stockton Record on July 7, 1951:

\$30,270 GRANT TO CCP
WILL AID CHILDREN
S.F. Foundation
Gift Announced

A grant of \$30,270 from the Rosenberg Foundation of San Francisco for new work in personality adjustment projects administered by the College of the Pacific clinical services program was announced today by Pacific President Robert E. Burns.

.....

The grant will buy new technical equipment, provide for a new full time staff appointment, two graduate

clinical assistants, more clerical help, and the engagement of special lecturers and experts.¹⁶

.....

The grant is further described in a newspaper article of October 24, 1951, titled "Work on Clinical Grant to COP Observed by Foundation Director." The article speaks of the visit by Mrs. Leslie Ganyard of San Francisco, executive director of the Rosenberg Foundation. Mrs. Ganyard observed the various clinics in operation and afterwards spoke to the clinical services group. In this article the following description of the Rosenberg Foundation is given:

. . . The Rosenberg Foundation is a California philanthropic corporation created in 1935 by the will of native son Max L. Rosenberg. Broadly defined as for the aid of groups, organizations, and communities fostering new projects for the advance of human welfare, Mrs. Ganyard stressed during her visit here that the foundation grants center largely in projects promoting child welfare. She said the Rosenberg Foundation is the only one of its type the work of which is confined to California.¹⁷

The grant had a decided effect upon the reading clinic and its operation.

When the grant was announced the five-week summer session was underway. Dean Potter was still director and Mrs. Norma Gordet again served as his assistant.

¹⁶Stockton Record, July 7, 1951.

¹⁷Stockton Record, October 24, 1951.

For the first time the Reading Clinic Practicum was offered for three units to those students whose program permitted more extensive work.

VI. 1951-1952

The 1951-1952 school year brought about several changes in the reading clinic.

Dean Potter was granted a leave of absence to accept a State Department assignment as visiting professor of psychology at the Syrian University at Damascus. Dr. Ned Russell assumed the administrative responsibilities for the operation of the clinic.

Miss Amelia Bartz, special instructor for the Educationally Handicapped in the Stockton Unified School District, taught the Psychology of Reading class during the fall semester. Fourteen of the class members were teachers who had been recommended by their school administrators to receive tuition fellowships offered through the Rosenberg Grant, the idea being to expand the clinic, not only in service to children, but to teachers as well.

The following teachers were listed by the Pacific Weekly as having received these fellowships: Mrs. Iline B. Guss, Mr. Glenn E. Buckley, Mrs. Geraldine Kickbusch, Miss Marjory Mehl, Mrs. Elizabeth Strong, Mrs. Ruth West, Mr. Marcus Williams, Mr. Edwin E. Niessner, Mrs. Dorothy Bailey,

Mrs. Bernice Vaughn, Mr. Thomas Lloyd, Mr. Richard Yeager, Mrs. Anita Grennan, and Mrs. Alice Wade.¹⁸

Miss Bartz acted as consultant in the reading clinic during the fall semester. She felt that remedial reading was "only good reading--plus!" and that lack of an adequate sight vocabulary was one of the biggest stumbling blocks at the elementary and secondary level. For this reason she emphasized the importance of having the clinicians begin at once to develop word recognition skills.

Miss Barbara Bower, a graduate student, received the first reading fellowship as student-assistant, offered through the Rosenberg Grant. Miss Bower worked with two clients. Other duties included taking an inventory of materials in the clinic, writing bills, handling necessary correspondence, making diagnoses, and some parent interviewing.

Several important additions to the clinical services staff were made possible at this time because of the Rosenberg Grant.

Mrs. Fay Goleman was appointed to serve as psychiatric social work consultant to the entire clinical services

¹⁸Pacific Weekly (College of the Pacific Student Publication), November 30, 1951.

group. Mrs. Coleman's services proved an asset to the reading clinic.

Dr. Rudolph Toller, local psychiatrist, former head of the Stockton State Hospital and at the time engaged in private practice, offered his services in the staffing of inter-clinic cases. Dr. Irving N. Berlin, psychiatrist at the Langley Porter Clinic in San Francisco, also was utilized as a consultant during this school year.

It was during this year that work was first done with a college student in remedial reading. The client was unsuccessful in college work due to a reading handicap and was referred to the clinic. A very extensive program of instruction for him was carried on by Miss Bower and also by Mrs. Alice Little, a clinician.

VII. SUMMER OF 1952

For the first time in the clinic's history the practicum course was offered both sessions during the summer of 1952.

Dr. Hazel L. Wolhaupter, coordinator consultant for the Modesto City Schools taught the two courses, Psychology of Reading and Reading Clinic Practicum. This was the first summer that it became possible to take the two courses concurrently.

Procedures and techniques which Dr. Wolhaupter had her clinicians follow were similar to those of previous directors. Dr. Wolhaupter emphasized the use of experience charts and strongly felt that the materials made by clinicians and clients would prove more valuable than mechanical devices.

She asked her clinicians to make a special effort to see that the child mastered something every day that he could take home. A feeling of success by the client was considered an important part of the remedial instruction.

Miss Bartz, who had taught the Psychology of Reading and Reading Practicum during the school year, assumed consultant duties during the second session.

Miss Bower continued as fellowship-assistant during both summer sessions.

VIII. 1952-1953

In the fall of 1952, Mrs. Sisk became director of the reading clinic. Miss Bower served as her assistant. During that semester Miss Bower continued to work with her two students and Mrs. Sisk screened applicants for the spring semester.

Mrs. Sisk received her A.B. at San Jose State College in 1934. She had done graduate work at the College

of the Pacific from 1947-1950. In 1949, she had been Dr. Potter's assistant, had originally endowed the clinic, and had shown a continual interest in it since its inception. It seemed fitting that she should assume the directorship when a vacancy occurred.

Again, the methods and techniques that were followed were similar to those used by previous directors with a few minor exceptions. Mrs. Sisk emphasized the kinesthetic approach to reading problems and frequently had the clinicians employ what she termed a "modified-Fernald" technique. She was of the opinion that those children who had failed or become partially or wholly disabled in reading, no longer had merely an educational problem, but had developed a personality problem caused by constant failure. Because of this contention every effort was made to utilize the services of the various other clinics throughout Mrs. Sisk's administration.

Mrs. Sisk taught the Psychology of Reading class during the fall semester and the practicum course during the spring semester.

An additional room was added to the clinic office in the spring semester. Extensive alterations in the room were made possible through funds from the Rosenberg Fund and also from an additional donation from Mrs. Sisk and her husband, Lawrence Sisk.

IX. SUMMER OF 1953

The Rosenberg Foundation was still continuing its support in the summer of 1953. Since the grant in 1951, clinical staff meetings were weekly events, where inter-clinic problems could be discussed and case conferences held.

For the first time, Psychology of Reading was offered in both sessions.

The largest number of clients and clinicians in the clinic's history were enrolled during the first session of the summer. The first attempt at group work was made at this time by Mrs. Sisk, assisted by Miss Bower. Only those children with extreme reading disability, severe behavior problems, and those in the primary grades were given individual instruction. This made it possible to accept more applicants for remedial instruction. According to Mrs. Sisk, group work necessitated careful selection of children and teachers.

New director. Miss Bower assumed Mrs. Sisk's position as director during the second five-week session. She taught Psychology of Reading and the Reading Clinic Practicum.

In the clinic, work was done strictly on an individual basis that session. Miss Bower carefully supervised each

clinician. Miss Bower's instruction stressed the necessity of a sequence of development in vocabulary and she insisted that every clinician was to work out a complete case history on the child.

X. 1953-1954

Mrs. Sisk returned in the fall semester of 1953 to direct the reading clinic and to teach Psychology of Reading. The new fellowship-assistant was Miss Bonnie Thompson, an under-graduate student with teaching experience. The clinic was in operation the entire year and most of the work was on an individual basis.

XI. SUMMER OF 1954

Psychology of Reading and Reading Clinic Practicum were offered during the first session only, from June 22-July 23.

Twenty-two clinicians were registered for the practicum course. Mrs. Sisk again found it satisfactory to work in small groups of four or five.

Miss Judy Wangelin, an under-graduate student and former clinician was the assistant.

XII. 1954-1955

Mrs. Sisk served as director during this year. Miss Thompson returned as her assistant.

On August 31, 1954, the Rosenberg Foundation Grant was terminated. Beginning with the fall semester the college assumed the full financial burden of operating the clinic.

Extensive use was made of service provided by Dr. George Ingebo, who was head of the clinical services testing and counseling section. Also, a number of difficult cases were brought to the clinical services staff to complete diagnosis of treatment and arrange for a planned inter-clinic program of treatment.

XIII. SUMMER OF 1955

The first session was Mrs. Sisk's last term as director of the reading clinic. Again, a great deal of group work was done and it was possible to accommodate fifty clients. Mrs. Gladys Francis, a principal in the Modesto City Schools, served as her assistant.

It was during this session that Dr. Charles C. Coffey, who had recently received his doctorate from the University of Washington first observed the clinic in operation.

Dr. Coffey assumed directorship during the second session. For the first time the clinic had a full-time director. Clarence Walther, a graduate student in psychology, served as his assistant.

In as much as there were thirty clients and ten clinicians, work was done in groups.

Dr. Coffey became Assistant Professor of Education and Psychology. He had received his A.B. and Ed.B. from Washington State College in 1942 and his M.Ed. and Ed.D. from the University of Washington in 1951 and 1955, respectively.

XIV. 1955-1956

Dr. Coffey followed what he referred to as a seven-step plan in screening children for admission to the clinic. These steps included: (1) the admission interview with the parent and child separately, (2) the potential client's reading of the Gray's Oral Paragraphs, (3) The Gates Tests, (4) the telebinocular test and the following tests which Dr. Coffey had developed, (5) Problem-Solving List, (6) Primary Interest Check List, and (7) Reading Skill Tests.

Dr. Coffey described the techniques employed in the Reading Clinic as "corrective reading within a developmental framework." He impressed upon his clinicians the

important role that oral reading plays in diagnosis.

Dr. Coffey initiated the first formal follow-up procedure during the fall semester. A follow-up survey was sent to parents and teachers of students who had been enrolled in Dr. Coffey's summer session. As a result of the survey, conferences were held with interested class teachers and clinical case records were explained and made available to them.

In the fall semester four clinicians and ten clients were registered. In the spring there were four clinicians and eight clients. Scheduling was arranged so that individual instruction was given.

Miss Carolyn Cima was graduate-assistant in the fall and Miss Clare Fritsche, a senior student served in that capacity during the spring. The assistant's responsibilities included working with the children, organizing materials and attending seminars.

Although work had been done with college students in the past a more thorough program was planned during this year. Thirty-two college students were referred and handled during the year on the basis of screening tests, recommendations of advisors, instructors, and deans. Their problems were diagnosed by Dr. Coffey and an appropriate program was planned to meet their needs.

XV. SUMMARY

Dean Willis N. Potter was the first director of the Laura Ann Sisk Memorial Reading Clinic in the summer of 1949. He served until the fall semester of 1951. Work with children was done on an individual basis.

In the fall of 1949, Dr. Ned M. Russell became the coordinator of the clinical services and the relationship of the reading clinic with the other clinics was officially established.

The first work was done on an unofficial basis during the school year 1950-1951 by Leonard Clark, a graduate student.

A \$30,270.00 grant was announced which provided for the clinical services by the Rosenberg Foundation of San Francisco from 1951-1954. This grant was responsible for several important improvements in the remedial reading program and also aided in integrating the various clinics on campus.

It was during the summer of 1951 that the practicum course was first offered for two or three units.

In 1951, Dr. Russell assumed administrative responsibilities and Miss Amelia Bartz taught the Psychology of Reading and acted as consultant in the reading clinic. Also, during this year, Miss Barbara Bower received the

first reading-fellowship as student assistant through the Rosenberg grant. Another first during this year was the work done with a client who was a college student.

Dr. Hazel L. Wolhaupter was director during the first summer session of 1952. And for the first time in the reading clinic's history the clinic was open during the second session. Miss Bartz was again director for this session.

Mrs. Sisk began as director in the fall of 1952 and served until the end of the first summer session in 1955, except for the second summer session of 1953, when Miss Bower headed the clinic.

During Mrs. Sisk's administration the first real attempt at group work was made, also the largest number of clients and clinicians in the clinic's history were enrolled during one session.

In the second session Dr. Charles C. Coffey, current director, assumed his position as the first full-time director the clinic has had. During 1955-1956 an extensive program to aid college students was initiated and the first official follow-up was made.

CHAPTER IV

READING CLINIC CLIENTS

This chapter is designed to present material and information concerning the reading clinic cases throughout the clinic's history.

It is the investigator's belief that the best way to gain an overview of the work done by the reading clinic is to present, from available records, a report on the cases examined and instructed and to illustrate briefly cases handled.

I. REPORT FROM THE RECORDS CONCERNING CLIENTS

Several difficulties were encountered in surveying the reading clinic files. Since the records were in many instances incomplete, it was felt that statistical summaries would be inaccurate and of little significant value in portraying the history of the clinic. However, as a result of the survey of records in the file, certain general statements regarding the clients can be made.

Representation of the sexes. The number of folders for males is more than twice that of females. This would be anticipated, as research has shown that more boys than girls have difficulty in reading. Helen Robinson points

out that "most clinics and reports of studies agree that the majority of reading failures seem to be boys."¹ A number of theories regarding this have been advanced, including such possibilities as cultural and constitutional factors. Monroe found that 84 per cent of failures were boys,² Preston reported 78 per cent,³ and others report varying percentages.

Areas served. An inspection of the files yielded the following information concerning the clients' homes. The majority of the students came from the Stockton area. Eighteen of the Stockton Unified District schools were represented. The next largest group came from a radius of fifty miles. The following towns were outside of this fifty mile radius: Arvin, Alameda, Tulare, Firebaugh, Quincy, Placerville, and Ross. There is one file which lists a fourteen-year-old girl from Longview, Texas.

¹Helen M. Robinson, Why Pupils Fail in Reading (Chicago: The University of Chicago Press, 1954), p. 96.

²Marian Monroe, Children Who Cannot Read (Chicago: The University of Chicago Press, 1932).

³Mary I. Preston, "The Reaction of Parents to Reading Failures," Child Development, 10:173, September, 1939.

Age. The youngest client recorded in the files was a child five years old. The oldest pupil listed was twenty-one. However, it is known that for a short period of time a man in his fifties, with aphasia, was referred by the speech department and received help in the reading clinic.

Referrals. Again, very few files contained information stating how the clients had been referred. In most cases, those files that did have this information were school referrals. The investigator learned from the directors that other sources of referrals included: friends whose children were or had been in the clinic, other campus clinics, local physicians and community social agencies, and self referrals.

Social position. Most students appear to come from middle-class homes. This is concluded from information located in the folders regarding the occupation of the clients' fathers. According to the records only one father came from the laboring class. Although there is insufficient information regarding the occupation of parents, it is certain that the percentage of clients coming from the lower class was small. Many children of professional people such as teachers, dentists, and doctors, were referred to the clinic.

Race and nationality. Several different nationalities have been represented among the clients of the reading clinic. The distribution of clients by race or nationality cannot be calculated accurately, in as much as the records made at the time of intake were generally incomplete.

II. REVIEW OF SPECIFIC CASES RECEIVING READING CLINIC HELP

The following illustrative case histories were extracted from the files. It would be almost impossible in any one report to list all the causes of reading disability. However, an attempt has been made to show several of the more outstanding cases and also the more common types of reading problems involving deficiency in several areas. It should be kept in mind that no two cases are exactly alike, nor does any one cause usually act in isolation. Since every individual varies, there is no truly "typical" case. Even when group work was carried on in the clinic, an attempt was made to handle individual needs.

The following cases have had names and personal information altered to prevent identification. For the purposes of this paper only a very brief report is made and there is no attempt to give a complete case history.

Vision problem. One lad, eleven years of age and in the fifth grade, was brought to the reading clinic by his mother. She was greatly concerned and stated that his teacher said he was only doing second and third grade work.

The boy was given the usual diagnostic tests-- including the telebinocular visual screening test. Although the original telebinocular test blanks are not to be found in the boy's folder, the clinician reported that the first test results appeared "to depart from the normal, very definitely." After showing the director the results, a second test was administered and again a significant deviation from normal expectation was noted, although the elementary school record indicated, on two occasions, that he had 20/20 vision.

This difference is accounted for in an article by Dr. Kinney, Director of the Health Department of Pasadena City Schools, in which he points out that although the telebinocular is not a diagnostic instrument, it has a definite advantage over the Snellen Chart, frequently used in the public schools, in that it tests "usable sight"-- binocular vision, while the Snellen tests the sight of each eye separately. The inability to coordinate two eyes, muscle imbalances, and fusion difficulties are not

demonstrable by the simple Snellen skills.⁴

As a result of the clinic findings, the boy received a thorough optometric examination which revealed a perceptual difficulty and the vision problem of far-sightedness. Glasses were fitted to correct the far-sightedness and appropriate training was recommended for the perception difficulty. An appropriate program was instituted in the reading clinic to help him catch up to grade level.

Mirror vision. One very interesting case was that of an eight-year-old boy who was discovered to have mirror vision. The clinician working with the child noticed that he had a tendency toward reversals, a right to left approach, and confusion of words and letters.

Psychometric testing was done under the guidance of the director, and appropriate remedial methods were employed. Mrs. Fay Goleman acted as a liaison person between the school and clinical services. The lad was also enrolled in play therapy. A staff conference was held in which Dr. Irving N. Berlin, the consulting psychiatrist, was present.

⁴paul B. Kinney, "Problems of Visual Reading," Claremont College Reading Conference. Seventeenth Yearbook. (Claremont, California: Claremont College Curriculum Laboratory).

When it was reported that tests and observations had indicated that this child had mirror vision, Dr. Berlin stated that it was his opinion that difficulties in perception would be due to psychological factors, rather than physiological ones, unless some specific physiological defect could be uncovered. Following this conference a check-up was made by an oculist who discovered no physiological defects which could explain the mirror vision.

An understanding and cooperative classroom teacher cooperated with the remedial clinic instructor who employed a kinesthetic method highly recommended by Fernald.⁵ The training proved successful.

Reading readiness. A young boy, six years of age and in the first grade, was referred to the reading clinic by the school.

During the parent interview held by Dr. Russell, it was learned that the child had a short attention span, had not been successful in kindergarten, and now was having difficulty in the first grade. Dr. Russell arranged for the boy to be processed through the various diagnostic

⁵Grace Fernald, Remedial Techniques in Basic School Subjects (New York: McGraw-Hill Book Company, Inc., 1943).

sections of the clinical services including: music therapy, testing, and the reading clinic.

An examination by the testing department revealed that the subject had normal intelligence. In the reading clinic it was established that the child would profit from a carefully planned readiness program. In this particular case, the director made several observations in the child's school classroom which substantiated the clinic's findings. After careful consideration of all factors, the director was convinced that the boy would need a considerable length of time before making an adjustment to first-grade school work and it was recommended that he be placed in kindergarten during May and be promoted to the first grade the following September.

This case illustrates that some children need more than an average length of time to become prepared for a regular reading program. The importance of the reading clinic's diagnosis and recommendation in this case is illustrated by Witty who points out that:

It is recognized that efforts to force children to read before they have achieved readiness results simply in bringing about confusion and discouragement. Moreover, it leads in some instances to serious consequences, such as distaste for reading and emotional blockings that interfere noticeably with success in reading at later periods.⁶

⁶Paul Witty and David Kopel, Reading and the Educative Process (Boston: Ginn and Company, 1939), p. 46.

Aphasia. A fourteen-year-old Mexican youth, just entering adolescence was referred to the reading clinic. A case history revealed that at the time of his birth his mother went into a diabetic coma and he went into a similar coma, which lasted for approximately forty-eight hours.

Robert West, a visiting professor at the College of the Pacific, who is considered an expert on aphasia, made the following diagnosis:

1. Organic alexia, or basic inability to attach meaning to written symbols.

2. Amnesic aphasia, or lack of the ability to verbalize or to understand the concepts of spatial or temporal relations; also psychosocial relations.

3. Severe inferiority feelings and general demoralization caused by:

a. Racial discrimination.

b. Poor family background.

c. His failures in school in reading, writing, spelling, and in any situation that involves language.

Although the client had an approximate Intelligence Quotient of 120 on a W.I.S.C.,⁷ Dr. West told the director that the boy would be expected to have an extremely limited reading vocabulary during his lifetime.

⁷David Wechsler, Wechsler Intelligence Scale for Children (New York: The Psychological Corporation, 1949).

The lad was also enrolled in play therapy. An interesting change took place in the boy's attitude. When he first came to the clinic he was belligerent and unkind to the clinician. After several weeks his attitude changed considerably. The same clinician worked with the boy at least twice a week and sometimes three times per week. He learned to respect her as an individual, reportedly improved in his attitude toward his peers, and took a personal pride in his appearance which previously had been so poor.

The use of experience stories proved very successful in this case, as he had a keen memory and felt that he had improved in this area.

The kinesthetic approach was utilized frequently. One of the most interesting results obtained was when the clinician discovered the boy's extreme desire to learn to drive an automobile. She started to work on words pertaining to driving. He learned to recognize such words as slow, pedestrian, stop, go, school, zone, detour, caution, railroad, crossing, street, one-way, zone, bus, and mile. Many methods were utilized, but the kinesthetic approach proved most successful.

Work with this boy was discontinued after he moved to another section of the city. However, considering the

limitations set forth by Dr. West, the two years of therapy showed evidence of some success.

College student. Work with college students was carried on intermittently during the clinic's history. The following is an example of this work. The young man, a freshman at College of the Pacific, was having difficulty in doing college level work, although his I.Q. was 129 on a Binet.⁸ His father and mother were both college graduates. Although the boy had an eye defect, it was felt that this was not the main cause of his problem. The reading clinician felt that there was considerable evidence showing that his problem may have been brought about as a result of emotional instability. Instruction for this student included skills of reading history, skimming, outlining, dictionary work to increase vocabulary, and work with the tachistoscope to increase reading rate. Outside reading, improved study habits, and organization were also stressed.

The report of the clinician indicates that the program carried out to aid this young man was comparatively successful.

⁸Lewis M. Terman and Maud A. Merrill, Measuring Intelligence (New York: Houghton Mifflin Company, 1937).

Other clinic cases. The preceding cases illustrated some of the specific types of cases seen throughout the clinic's history. Appropriate methods were devised after the extent of reading retardation had once been determined by methods previously described, and specific difficulties of each pupil had been identified. Difficulty in word recognition, lack of an adequate vocabulary, slow reading rate, and comprehension troubles, were the more common problems encountered by clients. The amount of difficulty experienced varied from client to client. Most reading problems were not caused by an isolated factor; rather, multi-causality was involved.

The methods employed to develop word recognition were numerous and selected to suit the individual needs. The more common practices included the Fernald kinesthetic technique, Monroe's phonetic approach, and work with the Dolch Sight Vocabulary.

The problem of developing an adequate vocabulary and understanding of individual words was attacked by such methods as learning to use a dictionary, making word-card boxes, and work with common roots, prefixes, and suffixes.

The use of the tachistoscope proved a valuable aid for increasing the reading rate of some of the clients.

Comprehension difficulties were attacked in many ways. For example, exercises in silent and oral reading with appropriate questions which a sentence or group of sentences answer, reading to verify a given statement, and reading to draw conclusions from facts given, were a few of the methods employed.

III. SUMMARY

Since reports on all past clients are not available, a complete statistic summary is not presented in this report.

However, a survey of the files compiled throughout the clinic's history shows the number of males to be twice that of females. Most of the students of the clinic have been from metropolitan Stockton. The largest group to be served came from the surrounding fifty miles. According to the files, the youngest client was five and the oldest, twenty-one. However, a man in his fifties was known to have been enrolled in the clinic.

The files were incomplete concerning referrals. In most cases, where information was available, the referrals were made by the school.

Most students were served from all socio-economic groups and would seem to fall in an expected normal curve.

Various racial groups and nationalities were represented throughout the history, but it was not possible to calculate the percentage from available material.

Specific types of problem areas seen in the clinic were varied, illustrated by the following cases: vision and perception, mirror vision, reading readiness, aphasia, and emotional disturbance; one case described work with a college student.

General reading problems with which all clients were confronted included: difficulty in word recognition, vocabulary development, comprehension, and reading rate. Numerous methods and techniques were utilized to overcome these deficiencies according to the individual needs of those served by the reading clinic.

CHAPTER V

SUMMARY AND CONCLUSIONS

An attempt has been made by the investigator to present a history of the Laura Ann Sisk Memorial Reading Clinic. The organization and function of the clinic were portrayed in relation to the part played by the directors, their assistants, and the clinicians throughout the years.

I. SUMMARY

Dean J. Marc Jantzen and Dean Willis N. Potter are credited with the idea of establishing a reading clinic at the College of the Pacific.

Mr. and Mrs. Lawrence Sisk of Modesto made the initial contribution toward the clinic to honor their daughter, Laura Ann, who had been killed in an automobile accident two years before. This money was used to purchase a telebinocular and a tachistoscope, and to utilize space for the clinic in Owen Hall.

During the first summer session of 1949 the Laura Ann Sisk Memorial Reading Clinic was in operation for the first time. Dean Potter served as director with Mrs. Sisk as his assistant. The practicum course was offered for two units with the prerequisite requirement of Psychology

of Reading or teaching experience. Fifteen clinicians and thirteen children were enrolled during this session.

Instruction for the clients was on an individual basis.

The clinic was not in operation in the 1949-1950 school year. However, it was in the fall of 1949 that Dr. Ned M. Russell assumed the newly created position of clinic coordinator--which marked the official beginning of clinic coordination at the College of the Pacific.

The clinic was again in operation during the first summer session in 1950. Dr. Potter's new assistant was Miss Norma Gordet.

Leonard Clark, a graduate student, did a limited amount of work in the clinic during the 1950-1951 school year.

During the summer of 1951 the \$30,270.00 Rosenberg Foundation grant to the clinical services at the College of the Pacific was announced. It was during this summer that Dean Potter served as director for the last time. For the first time the practicum course was offered for two or three units.

In 1951-1952 Dr. Russell assumed administrative responsibilities for the operation of the reading clinic. Miss Amelia Bartz, from the Stockton Unified School District, assumed consultant duties and taught Psychology of Reading.

Miss Barbara Bower received the first Rosenberg reading fellowship as student-assistant during this year, and important additions to the total clinical services' staff were made possible through the funds from the Rosenberg grant.

The practicum course was offered both sessions in the summer of 1952. Dr. Hazel Wolhaupter was director in the first session, and Miss Bartz in the second. Miss Bower continued as the fellowship assistant.

Mrs. Sisk taught Psychology of Reading during the fall and the practicum course during the spring of the 1952-1953 school year. The clinic facilities were enlarged that spring. Mrs. Sisk continued as director through the first summer session of 1955, the only exception was when Miss Bower served as director during the second five-week session of 1953. Her assistants throughout this time included Miss Bonnie Thompson during the two regular school years and Miss Judy Wangelin and Mrs. Gladys Francis during the two summer sessions. Mrs. Sisk initiated the first large-scale group work.

August 31, 1954 the Rosenberg Foundation grant terminated and the college assumed the full financial burden of operating the clinic.

Dr. Charles C. Coffey became the first full-time director of the Laura Ann Sisk Memorial Reading Clinic at the beginning of the second summer session in 1955. Mr. Clarence Walther was his assistant. The Misses Carolyn Cima and Clare Fritsche were his assistants in the 1955-1956 school year. The first concentrated work with college students was done in the 1955-1956 school year.

A survey of reading clinic files revealed the fact that many records were incomplete. However, the investigator was able to make several observations concerning the clients. More males than females were represented. Most cases came from the metropolitan Stockton area, with the next largest group within a radius of fifty miles. The majority of referrals came from the schools. The clients, generally, came from middle-class homes. Various races and nationalities were represented.

Many interesting cases have been seen and helped in the reading clinic. Vision problems, mirror vision, reading readiness, aphasia, emotional problems, and difficulties in word recognition, vocabulary development, comprehension, and reading rate are examples of problems with which clients have been faced in varying degrees and have frequently overcome.

II. PLANS FOR THE FUTURE

Immediate plans for the future disclosed by Dr. Charles C. Coffey include the offering of a graduate course in Reading Clinic Practicum, which will encourage research at the graduate level and additional reading clinic experience, and closer liaison between the school and clinics with a more intensive follow-up program in order to ascertain methods which have been most effective.

In the 1956-1957 college year plans are underway for expansion of remedial instruction for college students. Experimentation will be conducted with homogeneous grouping of college students who can work together on mutual problems.

Tentative plans are being formulated for the first reading workshop to be held at the College of the Pacific in April of 1957. In attendance will be individuals who have served in the reading clinic, classroom teachers, and reading specialists. The purpose of the conference will be to share experiences, procedures, and techniques, to report on research in reading, and to view machines and aids currently employed in remedial practice.

III. RECOMMENDATIONS

From the investigator's point of view, the past records were quite incomplete. During the current administration an effort is being made to overcome this situation. The face sheet developed by Dr. Coffey, enables one at a glance to secure information regarding the client. Possibly, a supplementary page containing the diagnosis and program of attack, along with a brief summary at the culmination of a case would also be useful.

The reading clinic was limited to one room, including office space until 1953, when an additional room was provided. In recent years, as the number of clients increased, additional temporary quarters have been required. During two summer sessions, 1954 and 1955, it was necessary to utilize space in temporary war-surplus buildings, located some distance from the clinic office. (More recently, classroom space in Owen Hall, designed for use by Lincoln High School students, has been used.) This situation is far from ideal in providing an adequate physical setting for remedial work. During the 1955-1956 school year, the education staff under the direction of Dean J. Marc Jantzen and Dr. Rollin C. Fox, Director of Educational Administration, discussed plans for a proposed School of Education building. These plans were on a tentative basis and as yet the

college has made no commitment regarding the desirability and feasibility of constructing a new campus building of this nature. At present the speech and music clinics are located in separate buildings and one of them is a considerable distance from Owen Hall, which houses the reading and play therapy clinics. A new education building would include quarters designed for each clinic's particular purpose and would have the added advantage of having all the clinics in adjacent areas. The proposed project would provide a physical atmosphere that would contribute significantly to a more satisfactory learning situation.

It would be desirable if more undergraduates in elementary education could receive clinical services training. Up to now, the practicum course has been utilized mostly by in-service teachers. This idea is not original on the part of the investigator, but is known to have been discussed previously by Dr. Russell and Mrs. Sisk. A possible research problem for investigation would be to determine, with controlled groups, the part that such a program could play in assisting in the regular training program for elementary teachers. It is known that the practicum courses have met with substantial success in giving both training for teachers and service for clients. It is the investigator's belief that this clinic approach would make

significant contributions in developing skill in the teaching of reading in the classroom.

The College of the Pacific should also be encouraged to continue and expand efforts to secure more teachers who will enter the field of remedial reading.

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