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A STUDY OF PROBLEMS PREVENTING THE IMPLEMENTATION
OF PROGRAMS FOR THE EDUCABLE
MENTALLY RETARDED IN UTAH

by

John L. Beitia

A dissertation submitted in partial fulfillment
of the requirements for the degree

of

DOCTOR OF EDUCATION

in

Educational Administration

Approved:

UTAH STATE UNIVERSITY
Logan, Utah

1967

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John L. Beitia

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ABSTRACT

A Study of Problems Preventing the Implementation
of Programs for the Educable
Mentally Retarded in Utah

by

John L. Beitia, Doctor of Education

Utah State University, 1967

Major Professor: Homer M. Johnson
Department: Educational Administration

The purposes of the study were to determine the level of priority of importance of administrative problem areas and specific problem items preventing the implementation of special programs for the educable mentally retarded in Utah. The study was conducted using a survey of twenty-seven school districts in the state of Utah lacking a sequential program for the educable mentally retarded in grades one through six.

A questionnaire was sent to 184 selected respondents, including school board chairmen, superintendents, and elementary principals. Responses were received from 92 percent of the original selection. The respondent was asked to rank each of the problem items according to one of five choices, major, moderate, average, minor, or no problem to implementation.

Results were evaluated on the basis of agreement among the rankings of the respondents, the relationship of the rankings, priority of the administrative areas, priority of the problem items, and individual group rankings. Statistical treatment revealed significance at the

.01 level for the level of agreement and relationship among the rankings of the administrative problem areas. Further treatment revealed the priority of administrative problem categories in order of major importance to be: (1) professional personnel, (2) pupil personnel; (3) supervision, (4) communications, (5) research, (6) finance, and (7) policy.

Individual problem items used in the questionnaire were ranked by priority of importance as perceived by the respondents as a combined group as well as by individual groups. There were sixty-two problem items ranked in order of priority.

The conclusions arrived at as a result of the analysis of the data included: (1) there was a high level of agreement among the perceptions of the administrators in ranking the importance of the problem areas and specific items, (2) the respondents as individual and combined groups perceived the category of obtaining and retaining qualified professional personnel as the major problem to implementation of the special program, (3) the individual problem of greatest concern was the obtaining of a qualified classroom teacher for the educable mentally retarded, (4) communications are needed to inform the parents, public, and school faculty to gain support for the educational needs of the educable mentally retarded, (5) administrators recognize the need for early identification of the potential retardate, accurate diagnosis and educational placement as important to program implementation, and (6) it appeared that present school policies are adequate in meeting the needs of program implementation of the educable mentally retarded.

CHAPTER I
INTRODUCTION

"Although children may be the victims of Fate,
they will not be the victims of our negelect."
John F. Kennedy

The American public is committed to the belief that through the educational institution we shall remain a strong and progressive nation. It is through the educational program that each person may develop the means for active participation as a contributing member of society (Jordan, 1962). It is this ideal that has led to the passage of legislation requiring the attendance of the children of our nation in the public school system. Consequently, there has been a demand for financial support at local, state, and federal levels to operate the public school system. Education for all is within the grasp of our society.

Never before in history has man placed such emphasis for educational attainment as has the present generation in the United States. Generally the public schools have made programs available for the greater segment of our school population and such programs have met the educational requirements of the normal students in our state educational systems (Graham, 1964). With the resources that our nation has available for the development of educational programs for everyone, there is no reason why such an objective cannot be attained (McCloskey, 1961).

Education for all, however, is more a myth than an actuality if we are concerned with meeting the needs of all of the children

and not only a segment of the population. Educators, as a group, have known for many years that each child is an individual with differing abilities and as such must be educated as an individual and not in a mass of conformity. Because of these variations in students it has been found that the problems of supplying needed educational programs multiply with the increase of enrollment and deviations in intelligence (Graham, 1964).

It has been known for years that intellectual differences exist among students, however, little has been done until recently to provide special assistance for the educable mentally retarded student (Barbe, 1963). Although a great deal has been done in diagnostic and remedial areas of mental retardation the need for educational programming is still great. Because of his intellectual limitations the educable mentally retarded student is unable to comprehend or reason as well as the normal student in his age group (Weber, 1963). If the student with such a handicap remains with the normal students and continues to fail in his effort to achieve, he soon becomes frustrated in the normal program of education (Miller, 1956). It has thus been established that there are many benefits in the early identification and special class placement of the educable mentally retarded student (Kirk, 1962; Snyder, 1962; Johnson, 1950).

As early as 1931 the need for special education programs for the retarded students was recognized by the Whitehouse Conference.

... further purpose seems to give the special class child as much academic instruction as he can possibly absorb under the best conditions of instruction in spite of the obvious inability of such children to profit adequately from such instruction. The result is that other types of instruction which might be offered successfully, receive a minimum amount of attention to the child's consequent

disadvantage. The child when so recognized and trained from an early age can often maintain themselves in harmless if not positively useful members of society. (Whitehouse Conference, 1931, p. 445)

The special class in the neighborhood public school is today the most popular and highly recommended arrangement for the majority of mentally retarded students (Robinson and Robinson, 1965). Kirk (1962) and others have found the special class offers advantages to the student that are not available to him in the normal classroom situation. Peer acceptance is enhanced (Johnson, 1948) better personal adjustment is noted (Blatt, 1962), and improved confidence and self-image occur in the atmosphere of the special classroom. Provision for the special class in the public schools offers the opportunity by which the educable mentally retarded student may develop the tools for facing the world ahead of him (Gorton, 1964).

A sense of confidence in ones ability to succeed develops a better adjusted student who feels capable of meeting the demands of his environment. The retarded child will develop such a feeling of adequacy more readily if given the benefits of the special class program (Vaughn, 1955). Failure is a difficult thing to live with and continual failure will lead to an unhealthy outlook on life. There is a need for good mental health in the student if we are to expect him to take advantage of the educational opportunities that are afforded him (Brueck and Bodwin, 1962). Therefore, in an attempt to provide the child with the healthy image of himself, the educational opportunities must be offered at his level of attainment and as early as possible (Warren, 1962). To accomplish this requires that special education classes be available in the early elementary grades before

the child has failed several classes in the normal program (Tisdall, 1950). If placement is delayed, problems begin to stack up so quickly that the retarded child is unable to find solutions for them (Goodenough, 1956).

The Need and the Problem

The people of Utah have furnished an educational system that provides for the development of their children (Utah Code, 53, 19, 1). Compulsory attendance for children ages six to eighteen (Utah Code, 53, 24, 1) and financial support for schools (Utah Code, 53, 7, 1) reflect the desire of education for all. One may assume from this legislation that the people of Utah actually support the need for public education. Not only is the normal child to attend but provision has also been made in the statutes for special education of the mentally retarded child (Utah Code, 53, 18, 1).

In 1964 the Utah Governor's Study Committee was given the task of evaluating education and recommending changes in public school programs. In the area of special education this committee found the need for:

Attentional counseling and testing especially in the elementary schools, to find children in need of special help so that proper training may be instituted at an early age in order to avoid problems that develop in later years. (Utah Governor's Study Committee, 1964, p. 19)

A recent study of the special education programs in Utah by the Special Education Study Committee of 1966 indicated the lack of early programming and it recommended a further study and possible legislative action for pre-school training (Special Education Study Committee, 1966).

The Utah elementary schools have been lagging in their efforts to develop special educational programs for the educable mentally retarded students, particularly in their early school years (Special Education Study Committee, 1966). Of the forty school districts in Utah, twenty-seven lack a complete sequence of programming in grades one through six for the educable mentally retarded student. Furthermore, of the 5904 estimated educable mentally retarded in the Utah public schools only 2232 received special programs to meet their needs during the 1965-66 school year (Biennial Report, 1966).

The lack of these special educational programs for the mentally retarded poses a problem in Utah elementary schools. The personnel concerned with the administrative implementation of such programs need to realize what problems exist in order that they may determine the solutions which may be applicable for correcting the problems.

The Purpose

It was, therefore, the purpose of the study to determine the importance of problems that prevent the implementation of special education programs for the educable mentally retarded in Utah elementary schools.

The objectives of the study were to determine:

1. The priority of importance of various administrative categories of problems that prevent the implementation of the special education programs.
2. The priority of importance of the problems as perceived by all respondents to the survey.

3. The priority of importance of the problems as perceived by the respondents according to their school position.
4. The priority of importance of the problems as perceived by the elementary principals according to school size.
5. The level of agreement among the respondents as to their rankings of the administrative category of problem areas.

The Limitations

The study was limited to those public school districts in Utah that were not offering special education programs for those students identified as educable mentally retarded in grades one through six. These school districts were identified from the State Board of Education report on special education (Special Education Report, 1966). There were twenty-seven school districts with a total of 130 elementary schools identified as belonging in this category.

The Definitions

Educable Mentally REtarded: These children will be in an I. Q. range of 55 to 75 and are lacking in intellectual ability for normal development in the regular classroom program. However, they appear capable of acquiring some academic skill, social adequacy, and vocational competency through special educational programs.

Special Education: An education program designed to aid the student unable to benefit from the normal school program due to his specific handicap.

Chairman of the School Board: An elected official of the school district board whose duty it is to preside over meetings of the

school board. He also assumes responsibility with other members of the school board for district policy determination.

Superintendent of the School District: The administrative officer hired by the school board as its executive officer. He is considered to hold the highest position in the organizational structure of full time employees. It is the responsibility of the superintendent to oversee the operation of the schools in the district, to implement and enforce school board policies, and to report to and advise the school board concerning school district matters.

Elementary Principal: The administrative person in charge of overseeing the educational program in one elementary school. He is generally under the direct supervision of the superintendent or an assistant.

Background Information

Cain, Baker, Haetima and others have indicated the shortage of research in the field of the mentally retarded child (Review of Educational Research, 1962-63). There is a dearth of research concerned with the administrative problems associated with special education and the educable mentally retarded student and the few studies available are generally isolated in their scope and relate to scattered programs or consist of the opinions of the writer (Howe, 1960).

Statistically we may expect from two to three percent of all children born will be mentally retarded but having a potential for educational development which can keep them from a life of dependency (Dunn, 1963). The opportunity for this group to develop their

potential should be made available.

If the mental status of the retarded child is to be improved then treatment must begin early, before the growth process has reached a state that hampers desired learning. It is estimated that 90 percent of the growth of the brain has occurred by the time a child is six and there is evidence that half of his development occurs by the time he reaches three (Goodenough, 1956). In his work with the young educable mentally retarded children Kirk (1962), reports that early identification and special program placement for these students develops positive attitudes and a sense of belonging that is desirable in all citizens. Through the establishment of special programs for the mentally retarded child it is possible to avert some of the normal classroom failure while meeting the child's specific needs (Hutt and Gibby, 1958).

While the retarded child is struggling in the normal classroom to compensate for his failure to keep up with the normal students, the normal student continues to push on to new achievements (Goodenough, 1956). The mental health of the retarded child suffers in this type of classroom situation and there is evidence that the mental health of other members in the class deteriorates (Cassidy and Stanton, 1959). Although the academic achievement of the special class mentally retarded showed no important gain his personal adjustment and mental health showed significant improvement (Warren, 1962). Similar results were found in an Iowa study of the personal adjustment ability of mentally retarded students in the classroom (Brown, 1961). The importance of identifying the mentally retarded as early in school as possible and proper educational placement seems

evident in providing the results that may not be available in the regular classroom (Kirk, 1962). Because there was a lack of achievement in the normal classroom, Thorsell (1963) recommends that the educable mentally retarded be placed in a special program. Lloyd (1964) found that the earlier the child is identified, the better the chances were for a successful prognosis. Miller (1956) emphasizes the fact that the mentally retarded child's shortcomings are amplified if he remains in the normal classroom program.

Until recent years the handicapped of our nation have received very little in the way of educational programs that prepared them to assume positions of responsible citizenship (Mayo, 1963). One reason that has caused a shortage of programming in special education has been the financial demands of such programs. The fact that this type of programming is more expensive per student has been used against the program. However, it has been estimated that to care for a retarded person with public funds would amount to over \$150,000.00 during his lifetime. The sum necessary to educate a person capable of educational achievement for ten to fifteen years would be considerably less. Properly educated and able to assume a worthwhile position in society the student could expect to be a contributing member of his community. As President Johnson stated, "We need these people to be tax payers not tax users." It is possible for these people to assume a near normal position in life if given the needed opportunity (Weber, 1963).

The climate for special educational programs to provide for the educable mentally retarded in our schools has never been more favorable than at the present time (Barbe, 1963). However, we have

begun to replace our feelings of pity for the exceptional child with one of understanding and of acceptance. If the special programs are not available to assist the educable mentally retarded in gaining an education, his problems become more severe and cause more difficult problems in later life (Blodgett and Warfield, 1959). As the problems of the mentally retarded increase so do society's in its efforts to assist him.

The problems of administering the Educable Mentally Retarded Programs are many as determined by Porter (1960) in his study of special education in Connecticut and Wisland (1962) in his study of special education administrative problems in the thirteen western states. They found that the major considerations to programming for special education were staff personnel, program supervision, pupil personnel, communications with the parents and the public as well as faculty orientation, physical facilities to house the program, research procedures, financial support, and policies of the school concerning the mentally retarded.

The implementation of special educational programs and their classroom functioning are the responsibility of the educator (Meyer, 1961). The public looks to the school for the educational leadership in giving all children the needed programs that they require to develop into acceptable citizens.

CHAPTER II

METHOD

Objectives

The objectives of the study were to determine the priority of importance of problem items and administrative areas concerned with the implementing of special education programs for the educable mentally retarded, as well as to ascertain the level of agreement in the perceptions of the respondent groups. Specifically these objectives were:

1. To determine the importance of the administrative problem areas as perceived by the respondents.
2. To determine the importance of the problem items as perceived by the respondents.
3. To determine the importance of the problem items as perceived by the respondent according to school position.
4. To determine the importance of the problem items as perceived by the principals as a group.
5. To determine the level of agreement among the rankings of the administrative problem areas as perceived by the respondents.

In order to determine the outcome of these objectives the investigator tested the following hypothesis:

1. There is no significant difference among rankings of the administrative problem areas among the various

- respondent groups,
2. There is no significant relationship among the rankings of the administrative problem areas among the various respondent groups,
 3. There is no significant difference among the ranking of the administrative problem areas among the various principal groups, and
 4. There is no significant relationship among the rankings of the administrative problem areas among the various principal groups.

The Population

All school districts in Utah not having a complete sequence of special education classes for the educable mentally retarded in grades one through six were identified and asked to assist in the study. The elementary schools located within these districts were also identified. The list of schools was compiled from the Utah State Board of Education report on special education (Special Educational Report, 1966).

Several studies place the responsibility for the development and implementation of school programs in the province of the educational administrators (Meyers, 1961; McKenzie, 1964). Since these educators have the responsibility and authority to implement programs of special education, the school superintendent, school board chairman, and elementary principals of the identified districts were selected to respond to the survey. Identification was determined from the Utah Public School Directory, 1966-67.

Development of the Instrument

In reviewing the literature, the need for determination of the major administrative problem categories appeared the first important step for development of the instrument. These major categories are basic to all educational programs having various degrees of importance in relation to specific programs. The studies by Wisland (1962) and Porter (1960) show the similarity of the special education administrative categories to total school administration. The investigator utilized these studies in determination of the problem categories for the study. These included pupil personnel, professional personnel, finance, policy and procedures, communications, research, curriculum and supervision.

To develop the individual problem items related to the administrative categories in the study, the investigator gleaned additional information from readings, opinions of experts in special education and educational administration, and from discussions with other specialists in education. The problem items were accumulated and analyzed individually for importance to the administrative problem category in the study.

The resulting preliminary instrument developed by the investigator included seven basic administrative problem categories having a total of 75 problem items to be evaluated by the respondent. The number of items in each category was determined by the importance of the items as the result of a thorough examination by a pilot group of experts in special education and educational administration. The categories and the items initially utilized included: professional

personnel 8, policy and procedures 13, curriculum and supervision 10, communications 14, pupil personnel 14, research 8, and finance 8.

The initial instrument of 75 problem items and an instruction sheet was given to members of the Utah State University departments of special education and educational administration, with a request for a thorough evaluation of the problem items and categories, in relation to their significance to the study, and to make critical comments on the entire instrument. Major criticism by this group were in regard to item construction, clarity, duplication and ambiguity. Revision of the instrument as a result of these criticisms resulted in corrections for structure, duplication, and clarification. The revised instrument contained the seven basic categories with 64 problem statements for the respondent to evaluate. The instruction sheet was revised to provide a better design to aid the respondent in selecting the importance of the problem item.

The evaluative criteria included five levels of importance from which the respondent could indicate his perception of the problem item. The description of the five levels of importance as they appeared on the instruction sheet were:

Major Problem--One that is considered extremely important and should receive major consideration.

Moderate Problem--One considered to have less than major importance but more than average in aspect.

Average Problem--One that would receive normal consideration in program determination.

Minor Problem--One having a small amount of consideration and of little importance.

No Problem--One having no effect whatsoever upon the program determination.

This instrument was then administered to a panel that included area school administrators involved in the doctoral program in educational administration at Utah State University. The group included individuals with experiences in many areas of public school administration, teaching, and political activity. The instrument was given to each member of this group with a request for a critical evaluation of the instructions and the questionnaire. A thorough discussion of the critical comments resulted between the group and the writer to properly communicate the meaning of the criticism. Major criticism included the ambiguity of several items, duplication of two items and the mechanical appearance of the instruction sheet. Revisions to the instrument resulted in an instruction sheet that was more clearly understood and an instrument of 62 items for evaluation.

The revised instrument was mailed to the State Coordinator of Special Education of the Utah Department of Public Education. The writer requested a critical evaluation of the instrument and any additional comments that might be helpful to the study. The statement resulting from this request was: "a comprehensive and well worked instrument for the study and coverage of the problem." (Pace, 1967)

The final version of the instrument was completed after careful consideration and the evaluation of the constructive criticism offered by all individuals and groups involved. The final instrument contained the following problem categories and number of items included therein. Pupil personnel 12, professional personnel 6, finance 6, policies and

procedures 14, communications 10, research 6, curriculum and supervision 8. The instrument used in the survey of the identified population is shown in Appendix B.

Procedure

The investigator constructed a letter of introduction and information to send each respondent with the survey instrument. Included in the letter was information concerning the administration, completion and return of the instrument to the investigator. The original packet mailed to the selected respondents included:

1. The letter of introduction and information from the investigator.
2. A letter from Superintendent T. H. Bell, Utah Superintendent of Public Instruction requesting the cooperation of respondents.
3. A copy of the instructions to aid the respondents in completing the questionnaire.
4. An incomplete questionnaire for the respondent to complete and return to the investigator.
5. A self-addressed stamped envelope for the convenience of the respondent to return the completed questionnaire.

The items included in the packet mailed to the original respondents are shown in Appendix B.

To facilitate the followup effort required to gather completed questionnaires the investigator coded each instrument mailed to a respondent. The code enabled the investigator to determine which respondents had returned a completed questionnaire and those

respondents who would require an additional request in attempting to secure the completed information.

A schedule was determined to expedite the return of the questionnaires from the respondents. The schedule was arranged after a study of the mail schedule from Logan, Utah to all school districts within the state, time required to reach the respondent, time for the respondent to complete the questionnaire, and time required to return the questionnaire in the mail to the investigator. Ten days was determined to be sufficiently adequate to complete the cycle of sending, completing, and returning the questionnaire.

The initial packet was mailed to each respondent April 18, 1967. Returns were tabulated and the followup packet was mailed April 28, 1967, to respondents failing to return the completed questionnaire from the original mailing. Included in this second packet was the instrument with a followup letter requesting the assistance of the respondent in returning the completed instrument, and a self-addressed stamped envelope for the return of the questionnaire. The followup letter is shown in Appendix B.

Completed questionnaires that the investigator received were checked for the respondents code. The respondents failing to return questionnaires were then personally telephoned May 8, 1967, requesting their assistance in returning the completed questionnaire to the investigator. Respondents failing to return a completed questionnaire to any of the previous requests were personally contacted by telephone again on May 18, 1967. The investigator personally discussed the need for the information and the return of the respondents completed questionnaire, urging his cooperation on behalf of the investigator

and the study.

Information from the completed questionnaires was tallied on one or more of the six master sheets constructed for this purpose. The six master sheets were designed for each of the following respondent groups;

1. school district superintendents
2. school district board chairman
3. elementary principals (enrollment 0-99)
4. elementary principals (enrollment 100-249)
5. elementary principals (enrollment 250-plus)
6. composite for all respondents.

With the completion of the time schedule and the accumulation of returned completed questionnaires the investigator completed the tallying of initial information on the master sheets. The total tally for each level of importance for each of the 62 problem items on the questionnaire on each of the master sheets was determined and given a numerical value. As a result mean values were determined for each of the problem items as well as each of the administrative categories. The investigator was able to determine the priority ranking of the problem items by ordering the items according to their mean value. The highest mean value indicated the highest priority ranking while the lowest mean value reflected the least important item. Priority rankings were made for each of the respondent groups.

The probable success of a program is enhanced if the people responsible for its implementation are in agreement as to the ends and means of the program (Spain, 1956). If public support is to be gained for the special programs then the people in the decision making

position of the school program must agree in its development and implementation (Foster, 1964). To determine the level of agreement among the respondents Kendall's coefficient of concordance was utilized to determine the level of agreement among the rankings by the various groups responding to the survey. The use of this statistical technique gives an indication of the actual agreement shown in the rankings of the observed data in comparison to what could actually be possible if perfect agreement were to exist among the rankings of the groups. It should be emphasized that a highly significant value of W among the respondents does not indicate the correctness or validity of the respondents rankings, only that they have that amount of agreement in their perceptions of the items being evaluated. It is a ranking of choices rather than one of correctness (Seigal, 1956). The formula used for this statistical procedure was the Kendall W shown here (Seigal, 1956, p. 233):

$$W = \frac{s}{1/2 k^2 N (N^3 - N)}$$

In testing for the significance of the W which results from the previous statistical treatment, the s (sum of the deviations) is evaluated in relation to the k and N factors. The level of significance was determined using table R of Seigal (1956); .05 was chosen as the level of significance for the study.

Further statistical treatment was made for determination of the relationship of the rankings of the administrative problem categories as perceived by the various respondent groups. \bar{R} was used to determine the mean rank order coefficient among all possible rankings of

the responding groups. This is a measure indicating the mean correlation of one group of rankings with any other group of rankings in the study (Walker, 1953). The formula was:

$$\bar{R} = \frac{m W - 1}{m - 1}$$

CHAPTER III

ANALYSIS

Twenty-seven school districts in Utah lacking a complete sequence of special education programs for the educable mentally retarded in grades one through six were identified for use in the study. One hundred eighty four selectees in these school districts were asked to respond to the questionnaire designed for the study. These respondents included school board chairmen, school superintendents, and elementary school principals. The investigator received 162 completed returns, six incomplete or non-usable returns, and one return where the selectee had passed away prior to completion. The total return constituted 92 percent of the total mailing to the original respondents. Table 1 shows the respondent groups and the returns received.

Table 1. Questionnaire returns from respondent groups.

Respondent group	Original number	Total return	Per-cent	Completed return	Per-cent
Board Chairmen	27	24	89	22	82
Superintendent	27	25	93	24	89
Principals 0/99	39	36	92	34	89
Principals 100/249	40	36	90	35	88
Principals 250/plus	51	48	94	47	92
Total	184	169	92	162	88

The instrument, mailed to the respondents for completion, included 62 items identified by the investigator as problems preventing the implementation of special education programs. These items were sub-problems representing the seven administrative categories which had been determined relevant to the study. The items as numbered in the questionnaire and their categorical relationship are in Table 2.

Table 2. Categories and related item numbers in the questionnaire.

Administrative category	Total items	Item number on the questionnaire
Pupil personnel	12	3-11-12-16-19-27-31-33-49-54-58-62
Professional personnel	6	1-6-26-35-43-59
Policy	14	5-7-8-10-21-23-30-34-38-39-41-42-44-52
Finance	6	18-20-24-37-47-53
Communications	10	2-4-13-22-25-45-46-51-60-61
Supervision	8	9-14-15-17-28-32-40-57
Research	6	29-36-48-50-55-56

The information was analyzed for concordance among the respondents, importance of administrative categories, ranking by school positions, rankings by principals according to enrollment, and a composite compilation of the total population. It should be noted that the items are dispersed throughout the questionnaire rather than being grouped categorically.

Hypothesis one and two are treated in the section entitled "concordance among the respondents" while hypothesis three and four

are treated in the section entitled "concordance among principals."

Concordance Among the Respondents

In the development and implementation of educational programs, the greater the level of agreement among those responsible for the program the greater its opportunity for success (McCloskey, 1961). The investigator utilized Kendall's coefficient of concordance: W (Seigal, 1956) to determine the level of agreement of the order of rankings among the various groups of respondents. The results of this statistical treatment reflects the amount of agreement among the groups that rank the items in the study and their perceptions of those items. It indicates the level of agreement in relation to what could be possible if there existed perfect agreement among the groups. The rankings of the respondent groups used in this statistical analysis are shown in Table 3. Since no established criteris existed for responding to the problem items other than the respondents personal choice the W does not reflect any level of correctness of the responses only that there is a degree of agreement among the rankings.

Hypothesis number one

In testing the hypothesis that there was no significant difference among the rankings of the administrative problem areas as perceived by the respondent groups, the computation of W (.623) was determined to be significant at the .01 level, therefore rejecting the hypothesis. It was revealed that the various groups of respondents had a very high degree of concordance in their perceptions of the problem areas that resist implementation of special education programs.

Table 3. Priority of ranks of the administrative categories

	Board chairmen	School superintendent	Principals by school enrollment		
			0/99	100/249	250/plus
Professional personnel	1	1	1	1	1
Pupil personnel	2	3	3	2	5
Supervision	7	5	2	3	3
Communications	4	4	5	4	4
Research	5	2	4	7	2
Finance	3	6	7	5	7
Policy	6	7	6	6	6

Analysis of the data used in the study relating to the seven administrative categories indicates that the respondents have a high level of agreement in their order of rankings. With perfect agreement equal to 1.00 the W of .623 resulting from the data, reveals that there was high agreement among the various groups as to their perception of the problem areas concerned with the implementation of the special education programs for the EMR.

Based on the sum of the ranks in Table 3, Kendall's coefficient of concordance: W was computed to be .623, indicating a high level of agreement among the rankings. The critical value of s , in the test for significance was 343.8 at the .01 level, with the derived value of 436 being much larger and therefore significant at the .01 level (Seigal, 1956).

Hypothesis number two

In testing for the significance of the hypothesis, that there is no significant relationship among the rankings of the respondent groups, the investigator found that the computation of \bar{R} was .524 which was significant at the .01 level. Therefore, the hypothesis was rejected and the determination made that the relationship of the rankings of the administrative problem areas by the respondent groups was highly significant.

The statistical treatment of the data concerning the relationships among the various group rankings of the administrative problem areas provided a mean rank order coefficient of the rankings, \bar{R} equal to .524 indicating the high level of agreement of any one group of rankings with any other group of rankings in the study. Since the determination of \bar{R} was based on the computation of W , which was significant at the .01 level the significance of \bar{R} would be at the same level.

The information in Table 3 shows that the survey population regarded the problem of professional staff as the most important administrative category as every group ranked it first. The needs of staffing with qualified classroom teachers to handle the instruction of the educable mentally retarded was a major problem of the administrator in implementation of the program. Conversely, the survey group looked on the matter of policy in regard to the implementation of the special program as being of least importance. This indicates that the schools have policies at present that are able to contain special programs within present administrative procedures.

The categories of pupil personnel and supervision were ranked second and third respectively, indicating that the administrators as a group see the needs of the special student and his program in the classroom as requiring much attention for successful implementation. Communications ranked fourth, shows the need for dissemination of information to the public, parents and the staff in channels that prove successful for understanding and support of the special programs for the retarded students.

The categories of research and finance are low in order of their priority indicating that the groups feel that these are not extremely important to programming as some other categories of administrative practice and would not need the emphasis of other areas in implementation of the program.

Concordance Among the Principals

Statistical treatment of the data returned by the principals revealed a high degree of concordance among the rankings. Using Kendall's W for determination of concordance, .774 was the derived W. The critical value of s for this group at the .01 was 185.6 (Seigal, 1956) with the derived s of 195 from the data being larger than the critical value, the derived s of the study was significant at the .01 level.

Hypothesis number three

In the determination of the acceptance or rejection of hypothesis number three, that there is no significant difference among the rankings of the administrative problem areas among the various principal groups, the investigator used the results of the previous computation

of W which was .774. This being significant at the .01 level the hypothesis was rejected and the assumption made that there are definite relationships among the rankings of the various groups of principals responding to the survey.

It is extremely difficult, in fact impossible, to determine why the relationship exists among these rankings since they are perceptions of choice and not of a measurable criteria.

Hypothesis number four

The treatment of the data for the determination of relationship among the rankings resulted in a mean rank order coefficient, \bar{R} to be .661 indicating a high level of correlation among the rankings. The derived \bar{R} was found to be significant at the .01 level. Therefore the hypothesis that there is no significant relationship among the rankings among the various principal groups was rejected and the conclusion made that there was a high relationship as to the rankings made by the principals.

Examination of the rankings in Table 3 shows that the principals view the needs of staff personnel as the most important administrative category as every group of principals listed this category first in importance. They indicated that the qualified classroom teacher, counselor and supervisor are needed for the EMR program to be effective. Ranked second in importance to program implementation was the category of supervision reflecting the principals view for the proper curriculum in this area of the exceptional student. Next in order of the rankings was the category of pupil personnel indicating that the principals see the needs of the student in making a successful adjustment to the school environment as important to the EMR student.

Communications and research were grouped in the center of the rankings while finance and policy were considered to have the least amount of importance in the program consideration. The latter two rankings would indicate that the principals view the financial and policy categories as not needing a great deal of consideration in the programming needs of the EMR child and therefore the other categories should receive more of the time commitments of the administrative staff.

The rankings show the high level of agreement with only one category, research, having more than a two rank range among the group rankings. Research had five ranks in range, two to seven.

Categorical Rankings

The order of rankings within each administrative category were studied for their importance to the primary objectives of the study. First, the priority of each category was established and then rankings of the individual problem items concerned with the specific category were listed in order of importance. The rankings by individual groups as well as the total population in the study are displayed in the following section.

The category of professional personnel

The 6 items in the professional personnel category were concerned with obtaining and retaining qualified personnel for the classroom, supervising, and counseling for the special education program of the EMR. The 6 items and statement of the problems are shown in Table 4.

Table 4. The items categorized under professional personnel.

Item number	Statement of the problem
1	Qualified classroom teachers for instructing the EMR.
6	Ability to recruit and retain qualified personnel for the EMR program.
26	Qualified personnel for the out of school program needs of the EMR.
35	Counseling personnel trained for the EMR.
43	Supervisory personnel trained in the EMR area.
59	Professional personnel to adequately diagnose EMR.

The rankings for each of the problem items in the professional personnel category according to the individual survey groups as well as a combined rank are shown in Table 5.

Table 5. The ranking of items in the professional personnel category.

Item number	Total population	Board chairmen	School superintendent	Principals by school enrollment		
				0/99	100/249	250/plus
1	1	2	1	1	2	1
6	2	1	2	3	1	2
35	3	3	3	4	4	5
26	4	5	5	2	3	4
59	5	6	4	5	5	3
43	6	4	6	6	6	6

Examination of the data concerning the professional personnel category revealed the need for qualified personnel in the program as indicated by the consistently high ranking of item number 1 (qualified teachers for instructing the EMR) and item number 6 (ability to recruit and retain qualified personnel for the EMR program). The total population ranked item number 1 in first order of priority and item number 6 next in importance. Individual group rankings were first or second for both items with one exception, the small school principals, who placed item number 1 first in priority and item number 6 third in their ranking. Item number 35 (counseling personnel for the EMR) received an overall combined ranking of third with a range of third to fifth among the individual groups.

The last place ranking in the importance of the items in the professional personnel category was given to item number 43 (supervisory personnel trained in the EMR area). This item was ranked as least important by all groups except the chairmen, who placed it fourth in rank importance. Item number 59 (professional personnel to adequately diagnose the EMR) was next to last in importance of ranking by the combined groups while it had a range of third to sixth among the individual groups.

The category of pupil personnel

There were twelve problem items listed in the administrative category of pupil personnel that indicated the concern of the school in its efforts to assist the pupil to make adjustments to the school environment. The problem items and the statements concerning each are listed in Table 6.

Table 6. The items categorized under pupil personnel

Item number	Statement of problem
3	Determination of program needs for the EMR.
11	Special transportation required by the EMR.
12	Ability of the regular classroom teacher in identifying the potential EMR.
16	Ability to conduct followup diagnosis for pupils referred as potential EMR.
19	Separate facilities for the EMR program.
27	Promotional policy for the EMR.
31	Special testing required for the EMR program.
33	Physical facilities required for the EMR program.
49	Sufficient numbers of EMR for effective grouping.
54	Techniques for elementary teachers in identification of potential EMR pupils.
58	Acceptance of the EMR program within the normal school program.
62	Identification of the potential EMR at the pre-school or first grade level.

The responses of the individual survey groups as well as the total response of the combined population are shown in Table 7. The items are ranked in the level of importance as determined by the returns of the responding groups.

The examination of the data in Table 7 shows that the respondents view the program needs of the EMR as being the most important in this category since they have ranked item number 3 (determination of program needs for the EMR) as the most important item in this category. Individual group ranks show that all groups except the superintendents

Table 7. The ranking of items in the pupil personnel category.

Item number	Total population	Board chairmen	School superintendent	Principals by school enrollment		
				0/99	100/249	250/plus
3	1	1	5	1	1	1
33	2	4	2	7	3	2
62	3	2	4	4	5	3
19	4	5	3	3	2	9
49	5	11	1	5	4	7
16	6	9	9	2	6	4
54	7	3	6	10	7	6
58	8	8	8	6	9	5
31	9	6	7	8	8	8
27	10	10	10	7	10	10
12	11	7	11	11	11	11
11	12	12	12	12	12	12

ranked this item first, the superintendents placed it fifth. Second in importance was item number 33 (physical facilities required for the EMR program). The chairmen ranked it fourth while the small school principals ranked it seventh. Further examination disclosed the amount of consistency in rankings at the lower end of the category. Ranked as least important in this category by all respondents was item number 11 (special transportation required by the EMR). Item number 12 (ability of the regular classroom teacher in identifying the potential EMR) was ranked next to last by every group except the chairmen, who ranked it seventh. Item number 27 (promotional policy for

the EMR) was ranked tenth by all groups except the small school principals, who ranked it as seventh in importance.

There appears a general consistency of ranking with but a few exceptions. Item number 49 (sufficient numbers of EMR for effective grouping) varied from first in importance by the school superintendents to last by the board chairmen and fifth in rank by the total population. Item number 54 (techniques for elementary teachers in identification of potential EMR pupils) had a range in ranks from third to tenth with the combined groups placing it seventh in importance. Item number 16 (ability to conduct followup diagnosis for pupils referred as potential EMR) ranged in importance of ranks from second to ninth and was ranked sixth by the combined population.

The category of supervision

The category of supervision was concerned with the program development of the special education program and the setting of curriculum goals as well as the supervision of the educational program of the EMR. There were 8 problem items listed for use in the category and they are shown in Table 8.

Table 9 reveals the priority of importance of the problem items as determined by the individual responding groups as well as the ranking of the combined groups.

An examination of the data concerning the rankings of the supervision category reveals that the groups overall are concerned with the development of the special curriculum needed for these special students. The total population has placed item number 15 (specialized curriculum for the EMR program) as the most important problem item to overcome in considering the special education program. Individual

Table 8. The items categorized under supervision.

Item number	Statement of the problem
9	Evaluation of the local EMR program needs.
14	Community recognition of the educational needs of the EMR students.
15	Specialized curriculum for the EMR program.
17	Acceptable curriculum goals for the EMR program.
28	Special EMR program within the present educational program.
32	Cooperation of community agencies in diagnosing the potential EMR.
40	Acceptable evaluative measures for the achievement of the EMR pupil.
57	Development of the EMR program within the normal school program.

Table 9. The ranking of items in the supervision category.

Item number	Total population	Board chairman	School superintendent	Principals by school enrollment		
				0/99	100/249	250/plus
15	1	2	5	1	1	1
28	2	5	4	2	5	2
14	3	1	6	4	3	5
57	4	4	2	5	2	8
17	5	3	3	6	6	3
40	6	7	1	7	4	6
9	7	6	7	3	8	4
32	8	8	8	8	7	7

groups ranked it from first to fifth. The process of integrating the special education program into the total school program poses an administrative problem as reflected by the second place ranking of item number 28 (special EMR program within the present educational program). The groups as a total viewed the need of community recognition as having impact upon the implementation of the special program as item 14 (community recognition of the educational needs of the EMR students) was ranked third in importance of consideration to programming.

Looking at the least important of the items in relation to the implementation of special programs it appears that the evaluation of the pupil and the program are not serious problems as reflected by the rankings of the respondents. Items number 40 (acceptable evaluative measures for the achievement of the EMR pupil) and 9 (evaluation of the local EMR program needs) were ranked seventh and sixth respectively. Last place in the rankings was item number 32 (cooperation of community agencies in diagnosing the potential EMR) indicating that the respondents feel that the local agencies will assist them if called upon.

The category of communications

The category of communications included ten problem items dealing with the ability of the school to promote understanding of the EMR child and his special program needs with parents, faculty and public. These items are listed in Table 10.

Table 10. The items categorized under communications.

Item number	Statement of the problem
2	Understanding of the state laws concerning the education of the EMR.
4	Ability of the school to communicate the diagnosis of EMR to the parents.
13	Parental acceptance of a need for EMR program.
22	Coordination with state agencies in implementing the EMR program.
25	Ability of parents to accept their child as EMR.
45	Faculty acceptance of the EMR and his program.
46	Clarification of school policy concerning the place of the EMR in the total school program.
51	Personnel qualified to counsel parents of EMR.
60	Public acceptance of the EMR program.
61	Identification of the potential EMR at the pre-school or first grade level.

The priority level of the items in this category are shown in Table 11, where the rankings are listed for each of the respondent groups as well as the total population in the survey.

Examination of the table reveals that the population in the survey was concerned with parents in connection with the special program. The ranking of items number 51 (personnel qualified to counsel parents of the EMR) 25 (ability of the parents to accept their child as EMR) and 13 (parental acceptance of the need for EMR program) in the first, second, and third order of priority respectively.

The rankings of the respondents in regard to the least important problems in the communications category reveals that the combined

Table 11. The ranking of items in the communication category.

Item number	Total population	Board chairmen	School superintendent	Principals by school enrollment		
				0/99	100/249	250/plus
51	1	1	1	2	1	1
25	2	2	2	1	2	2
13	3	3	3	3	3	3
4	4	6	4	4	4	4
61	5	9	6	8	6	5
60	6	5	5	7	7	9
2	7	4	10	5	5	7
46	8	7	8	9	9	6
22	9	10	9	6	8	10
45	10	8	7	10	10	8

groups see the faculty of the school as posing the least obstruction to the program as they listed item number 45 (faculty acceptance of the EMR and his program) last in priority and generally viewed as not important by any of the individual groups in the study. The ability of the school to work with state agencies is reflected in the low priority of item number 22 (coordination with state agencies in implementing the EMR program) which was ranked next to last by the combined population and sixth to tenth by the individual respondent groups.

The rankings throughout this category reveal a high level of concordance as to the perceptions of the respondents. As noted in the listing of priority of the items the reader can readily notice the similarity among the rank orders.

The category of research

The category of research contained 6 problem items concerned with the understanding and gathering of information needed for the development of special educational programs as well as what is currently being accomplished in the field. The need for time so that personnel have the opportunity to develop understanding and utilization of present research data is part of the programming problem of the school. The items and statement of the problems of research are shown in Table 12.

Table 12. The items categorized under research.

Item number	Statement of the problem
29	Understanding of research in the area of EMR.
36	Recognition of the special educational needs required in the EMR program.
48	Development of techniques to evaluate effectiveness of the EMR program.
50	Time for administrative personnel to properly research the program needs of the EMR.
55	Released time for personnel to develop the desired program for the EMR.
56	Utilization of present research in the EMR area.

The individual group rankings determined by the returned responses of the administrators as well as the combined rankings for the total survey population are shown in Table 13. They are shown in the order of importance, most important to least important, as determined by the respondents.

Table 13. The ranking of items in the research category.

Item number	Total population	Board chairmen	School superintendent	Principals by school enrollment		
				0/99	100/249	250/plus
50	1	5	5	3	1	3
36	2	2	1	1	5	5
48	3	3	3	4	4	2
56	4	6	2	2	6	4
55	5	4	4	5	2	1
29	6	1	6	6	3	6

The total population appeared concerned with the time needed to properly research programs for the EMR, although individual groups had mixed priority of rank for this problem as seen in Table 13 for item number 50 (time for administrative personnel to properly research the programs needs of the EMR) which ranked first in the priority of importance by the combined groups.

The second ranking by the combined population reveals the importance of recognition that a problem exists in order to overcome it in programming. Item number 36 (recognition of the special educational needs required in the EMR program) was ranked second by the combined groups while it ranked from first in importance to fifth in individual rankings.

Most of the respondents indicated that the administrators and school personnel may possibly have no problem in understanding the research that is being accomplished in special education. The combined group ranked item number 29 (understanding the research in the area of

the EMR) as being least in importance to program implementation. There are some variation of rankings as the chairmen viewed this as most important and the medium school principals viewed it as third in importance while the other groups placed it last.

It would appear that the need for released time to develop programs in this area does not pose any serious problem for the administration as indicated by the ranking of item number 55 (released time for personnel to develop the desired program for the EMR) in the next to last priority of ranks, although the principals from medium and large schools ranked it higher.

The category of finance

The financial category consisted of 6 problem items concerned with the sources of funds, the distribution of funds and the higher cost of special education programs on a per pupil basis. The problem items and the statement of the problem are shown in Table 14.

Table 14. The items categorized under finance.

Item number	Statement of the problem
18	State distribution formula for funding the EMR program at the local level.
20	Justification of the high cost per pupil of the special EMR program.
24	Priority of the EMR program in the total education budget of the school.
37	State funds available for the EMR.
47	Local funds for financing the EMR program.
53	Federal funds for the local program.

The priority of the item rankings for the finance category are listed in Table 15. The rankings are shown for the individual groups as well as the combined population responding to the survey questionnaire.

Table 15. The ranking of the items in the finance category.

Item number	Total population	Board chairmen	School superintendent	Principals by school enrollment		
				0/99	100/249	250/plus
47	1	3	2	3	1	2
37	2	2	1	2	2	1
24	3	5	6	1	3	3
20	4	1	5	4	6	4
18	5	4	3	5	5	6
53	6	6	4	6	4	4

An examination of the tables concerned with finances for the special programs for the EMR reveals that most of the groups as well as the combined population view the need for local funds as a major consideration to programming. The consistently high rank by all groups of item number 47 (local funds for financing the EMR program) indicates this financial consideration. Ranked second was the item concerned with state funds for the special education program, number 37. It appeared that the groups perceive the local and state funding programs are not adequate to support the desirable programs in special education.

In direct contrast to the local and state funds needed for programming the groups generally indicated that federal funding of programs for special education was the least important problem to consider in this category of administrative problems. Item number 53 (federal funds for local program) was given the least important rank by the combined population, as well as having a general low priority among the various responding groups.

In general agreement as to the state distribution of funds for special education, the groups viewed this problem as having little serious consideration to implementing the programs. The state formula for funding the programs appears to be adequate at the present time as viewed by the various groups in their ranking of item 18 (state distribution formula for funding the EMR program at the local level) next to last in order of priority.

The other items of finance were viewed with mixed priority as shown in Table 15.

The category of policy and procedure

There were 14 problem items listed in this category concerned with administrative directive in the operation of the special education program. Of major consideration to the problems in this category were the administrative decision making and determination of educational goals. The problem items in this group are shown in Table 16.

The rankings of the problem items and the determination of priorities for the respondent groups is shown in Table 17. These include the combined ranking of the total population as well as the individual group rankings.

Table 16. The items categorized under policy.

Item number	Statement of problem
5	Administrative policy for EMR students.
7	Method of reporting progress of EMR student.
8	Determination of criteria for the educational placement of the EMR.
10	Cooperation with state agencies in development of local EMR program.
21	Staff orientation concerning the total EMR program.
23	Necessity for the EMR program in the school
30	Establishment of standards for administration of the EMR program.
34	Special recording and dissemination of pupil information in the EMR program.
38	Development of the practices and procedures for the EMR program.
39	Early placement policy for the EMR.
41	Administrative recognition for the EMR program.
42	Development of long range goals for EMR.
44	Proper diagnostic effort to educationally place the EMR after identification.
52	Public recognition that the EMR can be educated to assume a position of self sufficiency.

Examination of the tables and the information therein indicates that the respondents view the need for the school to have a policy toward the public in an effort to educate them to the EMR and his educational needs. Item number 52 (public recognition that the EMR can be educated to assume a position of self sufficiency) was ranked

Table 17. The ranking of items in the policy category.

Item number	Total population	Board chairmen	School superintendents	Principals by school enrollment		
				0/99	100/249	250/plus
52	1	2	1	3	1	4
23	2	6	6	2	3	1
39	3	1	2	4	2	3
44	4	7	3	5	6	2
8	5	5	9	1	4	8
42	6	8	7	7	5	5
38	7	3	5	14	8	6
21	8	4	4	9	9	7
30	9	9	11	10	7	11
34	10	13	10	12	10	10
5	11	14	13	6	13	9
10	12	10	12	13	12	12
7	13	11	8	11	14	14
41	14	12	14	8	11	13

the highest in order of importance by the combined groups. The item ranked number second by the total groups number 23 (necessity for the EMR in the school) appeared to be a problem more of the principals than of higher administration as the superintendents and chairmen viewed this item as lower in importance when considered with the other items.

The early placement policy advocated by many experts in the field was viewed as a major problem in implementing programs among Utah

elementary schools in the study. This was reflected by the combined group ranking of item number 39 (early placement policy for the EMR) as third in importance of the third ranking and the importance of both as viewed by the respondents.

Ranked fourth by the total group was item number 44 (proper diagnostic effort to educationally place the EMR after identification) and had a high level of agreement among the group rankings.

Looking at the items considered to be of least importance in the consideration of implementing the special program it appeared that there was no serious problem of program priority and need from the administrative point of view. Item number 41 (administrative recognition for the EMR program) was ranked least important by the combined groups and was generally viewed as being low in priority among the individual group rankings. The thirteenth order of rank for item number 7 (method of reporting progress of EMR student) indicates the respondents find this as no major obstacle to the special program. Evidently the respondents feel that there is good relations with state agencies in regard to assistance in the educational field as shown by the twelveth rank order for item number 10 (cooperation with state agencies in development of local EMR program) which was ranked very low by all groups.

There was a general level of agreement among the rankings by the various groups indicating the perception of problems in programming for special education in this category are similar. The widest variation of rankings were items number 8 and 38, having variances of eight and eleven rank orders respectively.

Rank Order by Total Population

The information gathered from the total survey population was statistically treated to determine the level of priority for each of the 62 problem items used in the questionnaire. This level of priority determined the rank order of the items for the respondents from most important to least important. The order of ranking for the items in the questionnaire are shown in Table 18. The 62 problem items and their arrangement in the original survey questionnaire are shown in Appendix B.

Examination of the rankings given the items by the total of the responding administrators reveals that there was high priority given to the items concerned with providing professional personnel for the special programs for the mentally retarded students. The importance of qualified personnel in providing needed special programs was indicated by the listing of six items in the professional personnel category in the top thirteen ranks of the total 62 rankings. These are item number 1 (qualified classroom teachers for instructing EMR) ranked one, number 6 (ability to recruit and retain qualified personnel for the EMR program) ranked second. Ranked fourth was item number 35 (counseling personnel trained for the EMR) and in sixth place is item number 26 (qualified personnel for the out of school needs of the EMR). Item number 59 (professional personnel to adequately diagnose EMR) was ranked eighth and in thirteenth ranking was item number 43 (supervisory personnel trained in the EMR area).

Table 18. The importance of the items as determined by the total survey population.

Rank order	Item number	Statement of the problem
1	1	Qualified classroom teachers for instructing EMR.
2	6	Ability to recruit and retain qualified personnel for the EMR program.
3	51	Personnel qualified to counsel parents of EMR.
4	35	Counseling personnel trained for the EMR.
5	3	Determination of program needs for the EMR.
6	26	Qualified personnel for the out of school program needs of the EMR.
7	25	Ability of parents to accept their child as EMR.
8	59	Professional personnel to adequately diagnose EMR.
9	33	Physical facilities required for the EMR program.
10	13	Parental acceptance of a need for the EMR program.
11	15	Specialized curriculum for the EMR program.
12	52	Public recognition that the EMR can be educated to assume a position of self sufficiency.
13	43	Supervisory personnel trained in the EMR area.
14	23	Necessity for the EMR program in the school.
15	62	Identification of the potential EMR at the pre-school or first grade level.
16	19	Separate facilities for the EMR program.
17	24	Priority of the EMR program in the total education budget of the school.
18	50	Time for administrative personnel to properly research the program needs of the EMR.
19	39	Early placement policy for educating the EMR.
20	36	Recognition of the special educational needs required in the EMR program.

Table 18. Continued

Rank order	Item number	Statement of the problem
21	47	Local funds for financing the EMR program.
22	28	Special EMR program within the present educational program.
23	37	State funds available for the EMR program.
24	49	Sufficient numbers of EMR for effective grouping.
25	48	Development of techniques to evaluate effectiveness of the EMR program.
26	16	Ability to conduct followup diagnosis for pupils referred as potential EMR.
27	56	Utilization of present research in the EMR area.
28	14	Community recognition of the educational needs of the EMR students.
29	55	Released time for personnel to develop the desired program for the EMR.
30	57	Development of the EMR program within the normal school program.
31	44	Proper diagnostic effort to educationally place the EMR after identification.
32	8	Determination of criteria for the educational placement of the EMR.
33	54	Techniques for elementary teachers in identification of potential EMR pupils.
34	17	Acceptable curriculum goals for EMR program.
35	40	Acceptable evaluative measures for the achievement of EMR pupil.
36	58	Acceptance of the EMR within the total educational program in the school.
37	42	Development of long range goals for EMR.
38	9	Evaluation of the local EMR program needs.
39	31	Special testing required for the EMR program.

Table 18. Continued

Rank order	Item number	Statement of the problem
40	29	Understanding of research in the area of EMR.
41	24	Administrative recognition for the EMR program.
42	38	Development of the practices and procedures for the EMR program.
43	61	Public acceptance of the EMR program.
44	21	Staff orientation concerning the total EMR program.
45	60	Public communications concerning the educational placement of the EMR.
46	20	Justification of the higher cost per pupil of the special EMR program.
47	18	State distribution formula for funding the EMR program at the local level.
48	2	Understanding the state laws concerning the education of the EMR.
49	30	Establishment of standards for administration of the EMR program.
50	27	Promotional policy for the EMR.
51	34	Special recording and dissemination of pupil information in the EMR program.
52	53	Federal funds for the local program.
53	46	Clarification of school policy concerning the place of the EMR in the total school program.
54	5	Administrative policy for EMR students.
55	32	Cooperation of community agencies in diagnosing the potential EMR.
56	10	Cooperation with state agencies in development of local EMR program.
47	12	Ability of the regular classroom teacher in identifying the potential EMR.

Table 18. Continued

Rank order	Item number	Statement of the problem
58	7	Method of reporting progress of EMR student.
59	22	Coordination with state agencies in implementing the EMR program.
60	45	Faculty acceptance of the EMR and his program.
61	41	Administrative recognition for the EMR program.
62	11	Special transportation required by the EMR.

Other areas of major concern were the items of pupil personnel indicating the desire of the respondents to determine the program needs that is required for the successful adjustment of the EMR to school life. The high ranking of the problem items within the survey instrument indicate the importance placed upon a program that serves the pupils adequately. Item number 3 (determination of program needs for the EMR) was ranked fifth while item number 33 (physical facilities required for the EMR program) was ranked ninth. Again facilities was placed in a high ranking with item number 19 (separate facilities for the EMR program) in sixteenth place. Fifteenth in order of ranks was item number 62 (identification of the potential EMR at the pre-school or first grade level) revealing the desire to find this student as early as possible in his educational life. Another item of pupil personnel in the top twenty-five rankings was item number 49 (sufficient numbers of EMR for effective grouping) which was ranked twenty-fourth.

The area of communications had several items that were given high priority in importance of program consideration. Item number 51 (personnel to counsel parents of the EMR) was ranked third while item number 25 (ability of the parents to accept their child as EMR) was ranked seventh and item number 13 (parental acceptance of a need for the EMR program) ranked tenth. All of these indicate that administrators view the need for communications in a highly important light as it affects the total program.

Further examination of the top twenty-five rankings reveal that item number 15 (specialized curriculum for the EMR program) ranked eleventh and item number 28 (special EMR program within the present educational program) ranked twenty-second pose the need for the administrator to concern himself with the supervision and curriculum aspects of the program prior to implementation. Administrators must also assume the responsibility for the operation of the school policy in regard to the needs of the special child and his program as seen by the rankings of the respondents in the survey. Items number 52 (public recognition that the EMR can be educated to assume a position of self sufficiency) ranked twelvth, item number 23 (necessity for the EMR program in the school) ranked fourteenth and item number 39 (early placement policy for educating the EMR) ranked nineteenth all show the concern of administrators with school policy.

Research areas of the administrative function are not considered of major importance to the programming needs as indicated by the rankings of the items in this category of administration. Ranked eighteenth was item number 50 (time for administrative personnel to properly research the program needs of the EMR), ranked twentieth was

item number 36 (recognition of the special educational needs required in the EMR program) and twenty-fifth rank was item number 48 (development of techniques to evaluate effectiveness of the EMR program). Other items concerned with research were much lower in the priority of the rankings. Rankings of the financial items related to this category were low, indicating that the total population looks on the present financial support as not extremely important as a problem hindering the implementation of the program. Item number 24 (priority of the EMR program in the total education budget of the school) ranked seventeenth, item number 47 (local funds for financing the EMR program) ranked twenty-first and item number 37 (state funds available for financing the EMR program) ranked twenty-third showing that funding methods may be adequate at the present for the implementation of the program as indicated by the rankings. Other financial items were far down in the rankings, the next being forty-sixth in the order of importance.

Further study of the data shows those items that are considered of least importance to meeting the needs of the special education program for the EMR child. In last place is item number 11 (special transportation required by the EMR) indicating that the people responding felt this was of least importance. Next was item number 41 (administrative recognition for the EMR program) which must not pose a serious obstruction to program needs. In the sixtieth rank is item number 45 (faculty acceptance of the EMR and his program) evidently indicating that the group felt the school faculty understands the EMR and his needs. Item number 22 (coordination with state agencies in implementing the EMR program) was ranked fifty-ninth by the total

population of respondents. The ranking indicates that state agencies do not pose problems from lack of coordination as perceived by the respondents. Item number 7 (method of reporting progress of the EMR students) was placed in the fifty-eighth order which would seem to indicate that progress reports are no hindrance to the program for the EMR. (Ability of the regular classroom teacher in identifying the potential EMR), item number 12, is ranked fifty-seventh. Item number 10 (cooperation with state agencies in development of local EMR program) ranked fifty-sixth, again indicates that the respondents must feel there is no problem with state agencies in implementing the EMR programs. Ranked fifty-fifth is item number 32 (cooperation of community agencies in diagnosing the potential EMR) showing the lack of serious consideration by the respondents for this item as a program barrier. The fifty-third and fifty-fourth ranks indicate the feeling that (administrative policy for EMR students) item number 5 (clarification of school policy concerning the EMR students) and item number 46 are considered to have little importance in program determination.

Rank Order by School Positions

One of the objectives of the study was to determine the priority of importance of the problem items related to the implementation of special education programs as perceived by the respondents according to their administrative position. The following section describes the rankings as listed by each individual group of respondents.

The school board chairmen

A close examination of the data concerning the rankings of the chairmen reveals the importance of qualified professional personnel in the determination of the program and its implementation. The list of the rankings of the chairmen as to the most and least important are shown in Table 19.

Of the top twelve items listed as important in order of priority the chairmen had listed six problems concerned with the staffing of the professional personnel in the program. First in importance is item number 6 (ability to recruit and retain qualified personnel for the EMR program). Second in order of ranks is item number 1 (qualified classroom teachers for instructing the EMR) while item number 35 (counseling personnel trained for the EMR) was ranked third. Item number 43 (supervisory personnel trained in the area of EMR) was ranked fourth and in sixth place is item number 51 (personnel qualified to counsel parents of the EMR). Ranked eighth was item number 26 (qualified personnel for the out of school program needs of the EMR). It appears that the chairmen recognize the value of qualified personnel necessary for a program to be effective if it is implemented.

The need for identification methods and procedures was given importance by the chairmen as seen in their ranking of item number 62 (identification of the potential EMR at the pre-school or first grade level) ranked seventh, item number 54 (techniques for elementary teachers in identification of potential EMR pupils) ranked eighth and item number 39 (early placement policy for educating the EMR) ranked twelveth in order of importance. The other rankings in the

Table 19. The upper and lower 20 percent of rankings by the school board chairmen.

Rank	Item	Statement of the problem
<u>Upper 20 percent</u>		
1	6	Ability to recruit and retain qualified personnel for the EMR program.
2	1	Qualified classroom teachers for instructing the EMR.
3	35	Counseling personnel trained for the EMR.
4	43	Supervisory personnel trained in the EMR area.
5	3	Determination of program needs for the EMR.
6	51	Personnel qualified to counsel parents of EMR.
7	62	Identification of the potential EMR at the pre-school or first grade level.
8	26	Qualified personnel for the out of school program needs of the EMR.
9	54	Techniques for elementary teachers in identification of potential EMR pupils.
10.5	20	Justification of the higher cost per pupil of the special EMR program.
10.5	25	Ability of the parents to accept their child as EMR.
12	39	Early placement policy for educating the EMR.
<u>Lower 20 percent</u>		
51	40	Acceptable evaluative measures for the achievement of EMR pupils.
52	7	Method of reporting progress of EMR students.
53	45	Faculty acceptance of the EMR and his program.
54	41	Administrative recognition for the EMR program.
55	61	Public acceptance of the EMR program.
56	34	Special recording and dissemination of pupil information in the EMR program.

Table 19. Continued

Rank	Item	Statement of the problem
Lower 20 percent (continued)		
57	5	Administrative policy for EMR students.
58	53	Federal funds for the local program.
59	22	Coordaintion with state agencies in implementing the EMR program.
60	11	Special transportation required by the EMR.
61	55	Released time for personnel to develop the desired program for the EMR.
62	32	Cooperation of community agencies in diagnosing the potential EMR.

top twelve were item number 3 (determination of the program needs for the EMR) ranked fifth, item number 20 (justification of the higher cost per pupil of the special EMR program) ranked in a tie for tenth and eleventh with item number 25 (ability of the parents to accept their child as EMR).

In their rankings of the least important of the problems in program implementation the chairmen viewed several administrative problems in the area of policy as being minor items. These items were number 5 (administrative policy for EMR students) ranked fifty-seventh, number 34 (special recording and dissemination of pupil information in the EMR program) ranked fifty-sixth, number 41 (administrative recognition for the EMR program) ranked fifty-fourth and number 7 (method of reporting progress of EMR students) ranked fifty-second in order of priority. This would indicate the chairmen observe the policy area as not opposing program needs of the special

educational type.

The rankings for items number 22 (coordination with state agencies in implementing the EMR program) ranked fifty-ninth, number 61 (public acceptance of the EMR program) ranked fifty-fifth and item number 45 (faculty acceptance of the EMR and his program ranked fifty-third reveal that the chairmen view the communications of the program implementation as not being important enough to be highly regarded in some areas.

Other items ranked low in order of priority and viewed as having the least amount of importance in the rankings were item number 32 (cooperation of community agencies in diagnosing the potential EMR) ranked sixty-second, item number 55 (released time for personnel to develop the desired program for the EMR) ranked sixty-first, item number 11 (special transportation required by the EMR) ranked sixtieth, item number 53 (federal funds for the local program) ranked fifty-eight and item number 40 (acceptable evaluative measures for the achievement of EMR pupils) ranked fifty-first in order of importance.

The superintendents of schools

The rankings of the problem items in order of their importance for the twelve most important and the twelve least important are shown in Table 20.

Examination of the information in Table 20 reveals the high level of importance placed on qualified professional personnel. The need for these people to staff the special programs was recognized as important to implementing the program. This importance was indicated in the ranking of items number 1 (qualified classroom teachers for instructing the EMR), number 6 (ability to recruit and retain

Table 20. The upper and lower 20 percent of rankings by the school superintendents.

Rank	Item	Statement of the problem
<u>Upper 20 percent</u>		
1	1	Qualified classroom teachers for instructing the EMR.
2	6	Ability to recruit and retain qualified personnel for the EMR program.
3	51	Personnel qualified to counsel parents of EMR.
4	35	Counseling personnel trained for the EMR.
5	49	Sufficient numbers of EMR for effective grouping.
6	33	Physical facilities required for the EMR program.
7	59	Professional personnel to adequately diagnose EMR.
8	25	Ability of parents to accept their child as EMR.
9	26	Qualified personnel for the out of school program needs of the EMR.
10	19	Separate facilities for the EMR program.
11	52	Public recognition that the EMR can be educated to assume a position of self sufficiency.
12	62	Identification of the potential EMR at the pre-school or first grade level
<u>Lower 20 percent</u>		
51	20	Justification of the higher cost per pupil of the special EMR program.
52	46	Clarification of school policy concerning the place of the EMR in the total school program.
53	24	Priority of the EMR program in the total education budget of the school.
55	27	Promotional policy for the EMR.
56	22	Coordination with state agencies in development of local EMR program.

Table 20. Continued.

Rank	Item	Statement of the problem
<u>Lower 20 percent (continued)</u>		
58	12	Ability of regular classroom teacher in identifying the potential emr.
59	11	Special transportation required by the EMR.
60	5	Administrative policy for EMR students.
61	2	Understanding the state laws concerning the education of the EMR.
62	41	Administrative recognition for the EMR program.

qualified personnel for the EMR program), number 51 (personnel qualified to counsel parents of EMR), number 35 (counseling personnel trained for the EMR), number 59 (professional personnel to adequately diagnose EMR) and number 26 (qualified personnel for the out of school program needs of the EMR). These items were ranked first, second, third, fourth, seventh, ninth in that order.

The superintendents realize the need for facilities in order to implement the programs desired by their sixth and tenth place rankings. These were items number 33 (physical facilities required for the EMR program) and item number 19 (separate facilities for the EMR program). They also indicated that there must be enough children in the special category in order to have successful programs as they ranked item number 49 (sufficient numbers of EMR for effective grouping) in fifth order of importance. Other items given high order of priority by the superintendents were items number 25 (ability of parents to accept their child as EMR) is ranked eighth. Acceptance of the EMR by the

public is a problem of importance as seen by the superintendents in their ranking of item number 52 (public recognition that the EMR can be educated to assume a position of self sufficiency) in eleventh order. And twelveth in order of rank was item number 62 (identification of the potential EMR at the pre-school or first grade level) indicating the superintendents feel early identification is desirable.

Further examination of the information in Table 20 reveals the twelve items considered to be the least important problems to implementation of the programs for the educable mentally retarded. The problem items that fall in the category of policy and procedures seem to be considered the least important in the opinion of the superintendents. Ranked sixty-second, sixtieth, fifty-seventh and fifty-fourth were the following items in that order. Number 41 (administrative recognition for the EMR program), number 5 (administrative policy for EMR students), number 10 (cooperation with state agencies in development of local EMR program), and number 30 (establishment of standards for administration of the EMR program).

The problem of finance and transportation appear to have minor importance as the rankings by the superintendents indicate. Item number 11 (special transportation required by the EMR) was ranked fifty-ninth while item number 20 (justification of higher cost per pupil of the special EMR program) and item number 24 (priority of the EMR program in the total education budget of the school) were ranked fifty-first and fifty-third respectively. Other items having a low priority as determined by the superintendents are item number 2 (understanding state laws concerning the education of the EMR) ranked sixty-first, item number 22 (coordination with state agencies in

implementing the EMR program) ranked fifty-sixth, and item number 46 (clarification of school policy concerning the place of the EMR in the total school program) ranked fifty-second in its importance. Item number 46 (the need for clarification of school policy concerning the place of the EMR in the total school program) was ranked sixty first while item number 32 (cooperation of community agencies in diagnosing the potential EMR) was ranked sixtieth. The fifty-ninth ranking was item number 38 (the need for developing practices and procedures for the EMR program) and item number 53 (federal funds for the local program) was given the fifty-eighth ranking.

Four items were tied at the fifty-fifth and one half ranking. These were item number 7 (method of reporting progress of EMR students), item number 34 (special recording and dissemination of pupil information in the EMR program), item number 10 (cooperation with state agencies in development of local EMR program) and item number 12 (ability of regular classroom teacher in identifying potential EMR). Item number 30 (establishment of standards for administration of the EMR program) was ranked fifty-third while item number 21 (staff orientation concerning the total EMR program) was ranked fifty-second in importance. Fifty-first in order of ranking was item number 18 (state distribution formula for funding the EMR program at the local level) indicating no need for present formula change.

The small school principals

The principals in schools enrolling from one to ninety-nine students viewed the area of staff personnel qualified in the area of the educable mentally retarded as very important to implementing the

program specially designed for these students. Table 21 reflects the priority of greatest and least importance of the problem items as determined from the responses of this group of principals.

The first four rankings were concerned with personnel. First in importance was item number 1 (qualified classroom teachers for instructing the EMR) second in priority was item number 26 (qualified personnel for the out of school program needs of the EMR) third in the rankings was item number 51 (personnel qualified to counsel the parents of EMR) and fourth ranked was item number 6 (ability to recruit and retain qualified personnel for the EMR program). Further need for qualified personnel was indicated by the eleventh ranking of item number 35 (counseling personnel trained for the EMR). The fifth and sixth place rankings indicate the importance of the special curriculum with item number 15 (specialized curriculum for the EMR program) and item number 3 (determination of program needs for the EMR) as well as item number 28 (special EMR program within the present educational program) which was ranked ninth. Other items given high priority were item number 16 (ability to conduct followup diagnosis for pupils referred as potential EMR) ranked seventh, item number 8 (determination of criteria for the educational placement of the EMR) ranked eighth, item number 13 (parental acceptance of a need for the EMR program) ranked tenth, and item number 23 (necessity for the EMR program in the school) ranked twelfth.

Examination of the rankings considered to be of least importance in program implementation revealed that the small school principals viewed item number 45 (faculty acceptance of the EMR and his program) as least important and ranked it sixty-second or last.

Table 21. The upper and lower 20 percent of ranking by the school principals, enrollment 0/99.

Rank	Item	Statement of the problem
<u>Upper 20 percent</u>		
1	1	Qualified classroom teachers for instructing the EMR.
2	26	Qualified personnel for the out of school program needs of the EMR.
3	51	Personnel qualified to counsel parents of EMR.
4	6	Ability to recruit and retain qualified personnel for the EMR program.
5	15	Specialized curriculum for the EMR program.
6	3	Determination of program needs for the EMR.
7	16	Ability conduct followup diagnosis for pupils referred as potential EMR.
8	8	Determination of criteria for the educational placement of the EMR.
9	28	Special EMR program within the present educational program.
10	13	Parental acceptance of a need for EMR program.
11	35	Counseling personnel trained for the EMR.
12	23	Necessity for the EMR program in the school.
<u>Lower 20 percent</u>		
51	18	State distribution formula for funding the EMR program at the local level.
52	21	Staff orientation concerning the total EMR program.
53	30	Establishment of standards for administration of the EMR program.
55.5	7	Method of reporting progress of EMR student.
55.5	34	Special recording and dissemination of pupil information in the EMR program.

Table 21. Continued

Rank	Item	Statement of the problem
<u>Lower 20 percent (continued)</u>		
55.5	10	Cooperation with state agencies in development of local EMR program.
55.5	12	Ability of regular classroom teacher in identifying potential EMR.
58	53	Federal funds for the local program.
59	38	Development of the practices and procedures for the EMR program.
60	32	Cooperation of community agencies in diagnosing the potential EMR.
61	46	Clarification of school policy concerning the placement of the EMR in the total school program.
62	45	Faculty acceptance of the EMR and his program.

The medium school principals

The twelve items ranked the most important and the twelve items ranked as least important by the principals enrolling 100 to 249 students in their school are shown in Table 22. The reader will note a general consistency in the rankings of this group with the other groups of principals.

The need for professional personnel for staffing the program needs of the special program was indicated by the high priority of ranking given items related to professional personnel. The principals in this group revealed the same tendency as other groups in finding and keeping the personnel qualified to work in such a specialized field of education.

The items considered of upper most importance were item number 6

Table 22. The upper and lower 20 percent of rankings by school principals, enrollment 100/249.

Rank	Item	Statement of the problem
<u>Upper 20 percent</u>		
1	6	Ability to recruit and retain qualified personnel for the EMR program.
2	1	Qualified classroom teachers for instructing the EMR.
3	51	Personnel qualified to counsel parents of EMR.
4	50	Time for administrative personnel to properly research the program needs for the EMR.
5	3	Determination of program needs for the EMR.
6	19	Separate facilities for the EMR program.
7	25	Ability of parents to accept their child as EMR.
8	52	Public recognition that the EMR can be educated to assume a position of self sufficiency.
9	55	Released time for personnel to develop the desired program for the EMR.
10	26	Qualified personnel for the out of school program needs of the EMR.
11	35	Counseling personnel trained for the EMR.
12	47	Local funds for financing the EMR program.
<u>Lower 20 percent</u>		
51	21	Staff orientation concerning the total EMR program.
52	34	Special recording and dissemination of pupil information in the EMR program.
53	41	Administrative recognition for the EMR program.
54	10	Cooperation with state agencies in development of local EMR program.
55	18	State distribution formula for funding the EMR program at the local level.

Table 22. Continued

Rank	Item	Statement of the problem
<u>Lower 20 percent (continued)</u>		
56	20	Justification of the higher cost per pupil of the special EMR program.
57	5	Administrative policy for EMR students.
58	12	Ability of the regular classroom teacher in identifying the potential EMR.
59	7	Method of reporting progress of EMR students.
60	22	Coordination with state agencies in implementing the EMR program.
61	46	Clarification of school policy concerning the place of the EMR in the total school program.
62	45	Faculty acceptance of the EMR and his program.

(ability to recruit and retain qualified personnel for the EMR program) ranked first, item number 1 (qualified classroom teachers for instructing the EMR) was ranked in second place while item number 51 (personnel qualified to counsel parents of EMR) was placed in third order of ranking. Tenth and eleventh rankings were item number 26 (qualified personnel for the out of school needs of the EMR), item number 35 (counseling personnel trained for the EMR).

Research was considered important by this group in their ranking of items number 50 (time for administrative personnel to properly research the program needs for the EMR) and number 3 (determination of program needs for the EMR) which were ranked in fourth and fifth place, as well as item number 55 (released time for personnel to develop the desired program for the EMR) ranked ninth.

Financially the highest ranking given to any item concerned with this problem was item number 47 (local funds for financing the EMR program) which was placed twelveth in importance.

Facilities for the program were viewed as sixth in importance of ranking as indicated by item number 19 (separate facilities for the EMR program). Item number 25 (ability of parents to accept their child as EMR) was considered important enough to be ranked seventh. Public recognition was noted to be important as item number 52 (public recognition that the EMR can be educated to assume a position of self sufficiency) was ranked eighth.

Examination of the problems deemed to be least important by the medium school principals indicated they felt that the policy and procedure area of this type of program does not pose any serious barrier to implementation. Further study revealed that the faculty does not seem to be of great importance in the prevention of such a special program. Item number 45 (faculty acceptance of the EMR and his program) was ranked sixty-second or last in importance. Fifty-first in rankings was item number 21 (staff orientation concerning the total EMR program). Placed in sixty-first order by this group was item number 46 (clarification of school policy concerning the place of the EMR in the total school program) while item number 22 (co-ordination with state agencies in implementing the EMR program) was ranked sixtieth.

Administrative problems were listed in this least important category as revealed by the fifty-ninth ranking, item number 7 (method of reporting progress of EMR student) fifty-seventh ranking, item number 5 (administrative policy for EMR student) fifty-third ranking,

item number 41 (administrative recognition for the EMR program) and fifty-second ranking, item number 34 (special recording and dissemination of pupil information in the EMR program).

This group of principals viewed item number 18 (state distribution formula for funding the EMR program at the local level) in fifty-fifth place tied with item number 20 (justification of the higher cost per pupil of the special EMR program). Item number 10 (cooperation with state agencies in development of local EMR program) was also tied at the fifty-fifth ranking.

The other item in this group of least importance was item number 12 (ability of the regular classroom teacher in identifying the potential EMR) ranked in fifty-eighth order.

The large school principals

The order of ranks by the principals in schools enrolling 250 or more students revealing items of greater importance as well as those indicated as the least important are shown in Table 23. Analysis of the data indicated the group placed a high priority on the need for qualified personnel, facilities and curriculum.

The need for personnel was reflected by the rankings of item number 1 (qualified classroom teachers for instructing the EMR) ranked first while item number 6 (ability to recruit and retain qualified personnel for the EMR program) was ranked second. Ranked fifth, seventh, ninth and tenth in that order were item number 51 (personnel qualified to counsel parents of the EMR), item number 59 (professional personnel to adequately diagnose the EMR), item number 26 (qualified personnel for the out of school program needs of the EMR), and item number 35 (counseling personnel trained for the EMR).

Table 23. The upper and lower 20 percent of rankings by the school principals, enrollment 250/plus

Rank	Item	Statement of the problem
<u>Upper 20 percent</u>		
1	1	Qualified classroom teachers for instructing the EMR.
2	6	Ability to recruit and retain qualified personnel for the EMR program.
3	3	Determination of program needs for the EMR.
4	23	Necessity for the EMR program in the school.
5	51	Personnel qualified to counsel parents of EMR.
6	33	Physical facilities required for the EMR program.
7	59	Professional personnel to adequately diagnose EMR.
8	25	Ability of parents to accept their child as EMR.
9	26	Qualified personnel for the out of school program needs of the EMR.
10	35	Counseling personnel trained for the EMR.
11	13	Parental acceptance of a need for EMR program.
12	15	Specialized curriculum for the EMR program.
<u>Lower 20 percent</u>		
51	2	Understanding the state laws concerning the education of the EMR.
53.5	18	State distribution formula for funding the local program.
53.5	20	Justification of the higher cost per pupil of the special EMR program.
53.5	45	Faculty acceptance of the EMR and his program.
53.5	60	Public communications concerning the educational placement of the EMR.
56	32	Cooperation of community agencies in diagnosing the potential EMR.

Table 23. Continued

Rank	Item	Statement of the problem
<u>Lower 20 percent (continued)</u>		
57	12	Ability of the regular classroom teacher in identifying the potential EMR.
58	53	Federal funds for the local program.
59	41	Administrative recognition for the EMR program.
60	22	Coordination with state agencies in implementing the EMR program.
61	7	Method of reporting progress of EMR students.
62	11	Special transportation required by the EMR.

Ranked third was item number 3 (determination of program needs for the EMR), fourth was item number 23 (necessity for the EMR program in the school) and twelfth was item number 15 (specialized curriculum for the EMR program) indicating the desire of the respondents for the special program for the EMR. Sixth in order of importance to the program implementation was item number 33 (physical facilities required for the EMR program). The two remaining items were ranked eighth and eleventh, they were item number 25 (ability of parents to accept their child as EMR) and item number 13 (parental acceptance of a need for the EMR program.)

The responses indicated that the large school principals listed item number 11 (special transportation required by the EMR) as least important and ranked sixty-second. In the sixty-first ranking was item number 7 (method of reporting progress of EMR students). Four items concerned with communications were not considered too

important as they were ranked in the least important category. Item number 2 (understanding the state laws concerning the education of the EMR) was ranked fifty-first, item number 45 (faculty acceptance of the EMR and his program) ranked fifty-third and one half as was item number 60 (public communications concerning the educational placement of the EMR) and item number 22 (coordination with state agencies in implementing the EMR program) which was ranked sixtieth.

This group rated several financial items as minor problems in order of priority indicating the programs are not seriously hindered by finances. Ranked fifty-eighth was item number 53 (federal funds for the local program) while items number 18 and 20 (state distribution formula for funding the EMR program and justification of the higher cost per pupil of the special EMR program) were tied at the fifty-third and one half order of ranks. Other least important items were number 41 (administrative recognition for the EMR program) ranked fifty-ninth, item number 12 (ability of the regular classroom teacher in identifying the potential EMR) ranked fifty-seventh, and item number 32 (cooperation of community agencies in diagnosing the potential EMR) was fifty-sixth.

Composite of principals

The composite of the responses of the combined groups of principals is shown in Table 24. This reveals the upper and lower twelve items in level of priority as determined by the entire group as well as comparisons to the individual groups of principals.

The combined group had indicated that the area of staffing the program with professional personnel qualified in their field was of

Table 24. Comparison of the upper and lower 20 percent of ranks of the school principals.

Item number	Combined	<u>Principal groups according to school enrollment</u>		
		0/99	100/249	250/plus
<u>Upper 20 percent</u>				
1	1	1	2	1
6	2	4	1	2
51	3	3	3	5
3	4	6	5	3
26	5	2	10	9
15	6	5	15	12
35	7	11	11	10
25	8	19	7	8
13	9	10	13	11
59	10	13	18	7
23	11	12	28	4
52	12	16	8	20
<u>Lower 20 percent</u>				
20	51	44	55	53.5
10	52	55.5	55	49
18	53	51	55	53.5
53	54	58	48	58
32	55	60	44	56
22	56	36	60	60
41	57	50	53	59
12	58	55.5	58	57

Table 24. Continued

Item number	Combined	<u>Principal groups according to school enrollment</u>		
		0/99	100/249	250/plus
<u>Lower 20 percent (continued)</u>				
46	59	61	61	40
7	60	55.5	59	61
11	61	49	50	62
45	62	62	62	53.5

highest importance to any special education program. The rankings of items number 1 (qualified classroom teachers for instructing the EMR) ranked first, item number 6 (ability to recruit and retain qualified personnel for the EMR program) ranked second, item number 26 (qualified personnel for the out of school program needs of the EMR) ranked fifth, item number 35 (counseling personnel trained for the EMR) ranked seventh and item number 59 (professional personnel to adequately diagnose the EMR) ranked tenth, all indicate the importance of professional staff to program implementation.

The need to recognize the problems that confront the EMR and the development of programs that will aid him in his effort to become a worthy member of society were found to be important as the rankings of the combined groups of principals indicate. The items and the rankings were number 13 (parental acceptance of a need for EMR program) ranked ninth, number 25 (ability of parents to accept their child as EMR) ranked eighth, and number 52 (public recognition that the EMR can be educated to assume a position of self sufficiency) which was ranked twelveth.

The program designed for the educable mentally retarded in his effort to become educated was given high priority in the level of importance as regarded by the rankings of the principals. Ranked fourth was item number 3 (determination of program needs for the EMR), ranked sixth was item number 15 (specialized curriculum for the EMR program) and ranked eleventh was number 23 (necessity for the EMR program in the school).

Examination of the lower order of the rankings indicates that the principals consider areas in transportation, communications and policy as having the least amount of importance to implementing the special education program for the educable mentally retarded students. Ranked last in importance was item number 45 (faculty acceptance of the EMR and his program) while in sixty-first ranking was item number 11 (special transportation required by the EMR). The problems in administrative policy do not pose serious barriers to the programming for these children as indicated by the rankings of the combined principals. Ranked sixtieth was item number 7 (method of reporting progress of EMR students), ranked fifty-ninth was item number 46 (clarification of school policy concerning the place of the EMR in the total school program), ranked fifty-seventh was item number 41 (administrative recognition for the EMR program) and ranked fifty-second was item number 10 (cooperation with state agencies in development of local EMR program).

The principals as a group do not perceive the financial aspects of programming as being very serious as they have ranked several items in this category low in priority of importance. Item number 20 (justification of higher cost per pupil of the special EMR program)

was ranked fifty-first, item number 18 (state distribution formula for funding the EMR program at the local level) was ranked fifty-third, and item number 53 (federal funds for the local program) was ranked fifty-fourth.

Other items ranked in the group of the least important were items number 22 (coordination with state agencies in implementing the EMR program) ranked fifty-sixth, number 32 (cooperation with community agencies in diagnosing the potential EMR) ranked fifty-fifth and number 12 (ability of the regular classroom teacher in identifying the potential EMR) which was ranked fifty-eighth.

Earlier in the study it was found that a high level of concordance existed among the rankings of the principal groups. This was indicated by the computation of W which was .774 with perfect agreement being 1.00 showing the high amount of agreement in the perceptions of this group.

Further examination of the most and least important rankings as shown in Table 24 reveals that there was a greater amount of agreement among the most important items and greater divergence of ranking in the items considered least important in the study. Examples of this agreement in the most important area are item number 23 which ranked eleventh by the total group and ranged from fourth to twenty-eighth among the individual principals rankings. Item number 52 which ranked twelfth by the combined principals had rankings of eight, sixteen, and twenty among the individual groups. These two ranks had the widest range in the top twelve items of importance.

In the ranks of least importance the greatest range was indicated by items number 32 ranked fifty-fifth by the group but had individual

rankings from forty-fourth to sixtieth and number 22 which ranked fifty-sixth by the total group but had rankings of thirty-six and sixty among the individual groups. This reveals the widest divergence in the rankings of the principals which is not very severe, to say the least.

CHAPTER IV

CONCLUSIONS, DISCUSSION AND RECOMMENDATION

The purpose of the study was to determine the importance of problems that prevent the implementation of special education programs for the educable mentally retarded in Utah public elementary schools. The specific objectives that the investigator wished to determine in the pursuit of the problem were:

1. The priority of importance of the problem items associated with specific administrative categories.
2. The priority of importance of the problem items as perceived by the total population surveyed.
3. The priority of importance of the problem items as determined by the respondents according to their position in the school administration.
4. The priority of importance of the problem items as perceived by the elementary principals according to their school enrollments. These were grouped 0 to 99, 100 to 249, and 250 or over.
5. The level of agreement among the rankings of the various groups responding to the questionnaire.

The population surveyed for the study included the chairman of the school board, superintendent of schools, and the principals of elementary schools in the districts identified as not having a complete sequence of special education programs for the educable mentally retarded students in grades one through six. There were a total of twenty-seven school

districts identified with 184 administrators selected for the survey population.

A questionnaire developed by the investigator was sent to each of the 184 selected respondents with the request for their opinion concerning the problem items contained in the instrument. The instrument was arranged with seven administrative categories having a total of 62 problem items for the respondent to evaluate as to their priority of importance. These items had been selected as problems that prevent the implementation of special education programs for the elementary educable mentally retarded child. The responses received from the selectees were given numerical value and the means, determined for each item and category. The order of ranking was determined from the data derived from the statistical treatment with the priority of importance ascertained for the problem items and categories. Further statistical treatment resulted in a determination of the concordance of agreement among the categorized rankings of the various respondent groups as well as mean rank order coefficient among the rankings. The utilization of Kendall's W and \bar{R} was made for these final treatments.

To accomplish the specific objectives of the study the investigator needed to determine the significance of the data that was supplied by the respondents to the study. To accomplish this several hypothesis were tested. These were:

1. There is no significant difference among the rankings of administrative problem areas among the various respondents. This hypothesis was rejected and the conclusion made that the rankings among the respondents were highly significant at the .01 level.

2. There is no relationship among the various respondent rankings of administrative areas.

This hypothesis was rejected as the investigator found the relationship to be significant at the .01 level.

3. There is no significant difference among the rankings of administrative problem areas among the various principal groups.

This hypothesis was rejected since the treatment of the data indicated significance at the .01 level.

4. There is no significant relationship among the rankings of the administrative problem areas among the various principal groups.

This hypothesis was rejected and the conclusion that there was a significant correlation among the rankings of the various principal groups, accepted. Results were significant at the .01 level.

Results from the study revealed the following priority of rankings among the respondents as to the importance of the administrative problem areas: (1) professional personnel, (2) pupil personnel, (3) supervision, (4) communications, (5) research, (6) finance, and (7) policy.

Conclusions and Discussion

An examination of the data supplied by the respondents in the survey revealed the level of importance of items considered as problems preventing the implementation of special education programs for the educable mentally retarded in the elementary schools in Utah. The study revealed that some areas had greater importance of

administrative priority. Conclusions drawn from the results were:

1. The study revealed that the respondents had a high level of agreement in their ranking of the problem areas as to importance in implementing special education programs. The conclusion was made that school administrators have strong comparisons in their perception of administrative problems in programming. The high level of agreement strengthens the significance of the priority of the rankings of the problem areas that resulted from the responses of the administrators.

2. School administrators indicated the category of obtaining and retaining qualified professional personnel was the most important administrative problem area in development of the special education program. This result was similar to the findings of Wisland (1962) in his study of the administrators of special education programs in the 13 western states. He found that the recruiting and retention of qualified professional personnel was a major problem of these administrators. Administrators planning the implementation of the special education program should concentrate much effort on the recruiting of the specialists in special education that he requires for his program.

3. The respondents to the study indicated the specific problem of placing a well qualified classroom teacher in charge of instructing the EMR held highest priority and was the individual problem of greatest concern. McKenzie (1964) found this to be true in his study in Nebraska, where administrators indicated that many special education programs were not implemented due to the lack of teachers qualified in special education. The Utah administrators indicated this need by the high priority given the item, qualified classroom teachers for instructing the EMR.

4. The findings from the study indicate that certain program determinations must be made by the school in its effort to provide programs at an early age for the educable mentally retarded. The importance of procedures in finding and diagnosing the EMR, his educational placement, curriculum specially designed for his needs, and the facilities to provide the proper environment for educational achievement are commitments that the school must make in order to properly assist the special student. The results from the information supplied by the respondents indicate that these areas are major considerations to program implementation. Porter (1960) found this to be a major problem in his study in Connecticut concerned with the administering of programs for the handicapped.

5. There was a strong indication that the need for communications between the school and its various publics was important enough to warrant consideration. The need for an informed public is essential to the understanding and support of the school program and school officials in charge of public communications must be committed to adequately meeting the informational needs of the public whether it be parents, teachers, or the community in general.

6. The low priority given to the category of administrative policy by all groups, leads the investigator to conclude that present administrative policies are generally seen as being adequate for the implementation of programs, or at least pose no problem to such programs. Since the administrators responding to the request for data revealed a low priority for administrative policy, it appears that most school policies presently do not isolate the special student from an opportunity for education although a special program may

not be available to him.

Recommendations

Certain recommendations are made in an attempt to assist in the solution of major problems which confront administrators attempting to implement the programs for the educable mentally retarded in their schools.

1. School leaders recognizing the need for qualified personnel to successfully implement programs in special education should strongly encourage personnel they consider as having the potential for success to join the ranks of the special educators. This may be done through personal and other encouragement of present teachers indicating a desire to enter the field or high school and college students indicating the same interest.

2. Although finances were not given a high priority the schools should investigate the need for money to encourage personnel to enter the special education field. Higher salaries, additional pay for special classes, sabbaticals with pay to study, summer school attendance with remuneration, and other financial inducements could be a great aid in the retaining of personnel for the special education classroom.

3. Institutions of higher learning should be appraised of the need for professional personnel for the special education programs of the public school. Further investigation of this need will assist in determination of improving present program and the implementation of new programs to meet the demand. Programs to develop qualified teachers, supervisors, and counselors are important in the education

of the desired personnel for schools.

4. In order to meet the personnel needs of the special programs in the public schools, higher education should work closely with administrators and teachers in the public schools to better determine specific needs. There are differences in the staff needs of a small rural school and a large urban one.

5. School districts unable to implement programs of their own for the educable mentally retarded should investigate the feasibility of a cooperative venture with adjacent school districts. Many problems that appear too large for the individual school district may well be solved through a cooperative venture. Recruiting personnel may be more enticing with a larger program as well as the financial assistance being cooperatively supported. More children for effective grouping, physical facilities, and curriculum development may more easily be overcome through this approach.

6. There is a definite need for good communications with parents, public and the school faculty. In order to gain the support and assistance of these groups they must be kept well informed as to the needs of the exceptional child and what the school can offer him in the way of an education. School administrators should explore all avenues of communications available to them and make every effort to disseminate appropriate information.

Cooperation with local, state and federal agencies as well as some private groups, provide the schools with a wealth of material and resources which can be used in this effort.

7. School administrators concerned with the possibility of implementing the special programs in their school should realize the

priority of importance of the various administrative problem areas. In understanding these problems they are better able to budget their time and effort in the development of programs and their implementation.

8. Several items pointed to the need for early diagnosis of the special student and early placement in a proper educational curriculum. School leaders should cooperate effectively with parents, medical personnel, community agencies, as well as their own teachers and counselors. Such an approach may prove more effective in the early identification, diagnosis and educational placement of the educable mentally retarded child. This probably is a more serious consideration of the small remote school than of the larger urban school with greater personnel resources.

Every child has a place in the world.

The public education system was designed
to assist those who enter its doors to
find that place with greater ease.

Speculation

Finding out which problems stop the implementation of special education programs is a difficult task. The best that can be expected from respondents is an expression based on their perceptions. It is well known that perceptions are affected by a variety of variables. Therefore, the perceptions reported in this study may not be the real problems that stop programs for the educable mentally retarded, but they have a certain probability of being defenses or excuses for not implementing. From the viewpoint of the respondent, however, the problem is very real, whether it is factually or psychologically

derived. From the researchers point of view, he must report what he finds and recommend that the problem, whatever its source, be solved if educable mentally retarded programs are to be established.

It has long been assumed that teachers are open to change and means that meet the needs of all students. Although this study found that administrators ranked low in priority the faculty rejection problem, it has been experienced in many instances that programs have been obstructed or failed because there was a lack of faculty acceptance. One can only assume then, that administrators, in this study see other problems as being more important and more fundamental obstructions to the installation of programs for the educable mentally retarded.

One of the crucial school problems, as expressed by administrators, is the need for more money, yet the respondents in this study placed the financial category low in order of priority. Here again, they may have ranked other problems as more fundamental, assuming that financial aid would help in their solution. Certainly in looking at the high priority problems many of them could be solved with more money. Higher salaries would induce more qualified people to remain in Utah rather than seeking more lucrative positions outside the state. Equipment and materials for the program would aid in better assistance to the learning process. Training programs could be more broadly supported.

Is there a failure among the people to recognize that mentally retarded children exist in their population? One wonders about the statement, "we have no retarded children in our school and have no need for a special program." Are present evaluative measures being

used or are they ignored? If they are used, are they properly administered and are the results understood and used? Perhaps this calls for uniform evaluation procedures, easily understood and coordinated by a central agency.

In the development of the questionnaire for the study every attempt was made to include all pertinent problems which related to the purposes of the study. However, there is the possibility that some crucial problems which may have added to the results of the study were inadvertently omitted.

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APPENDIXES

Appendix AItem Statistics

Item number	Total Population			Chairmen			Superintendents		
	Mean	SEm	SD	Mean	SEm	SD	Mean	SEm	SD
1	4.278	.098	1.252	4.238	.0275	1.189	4.708	.175	.859
2	3.284	.916	1.166	3.571	.275	1.121	2.875	.193	.947
3	3.952	.917	1.167	3.952	.201	.921	3.667	.177	.868
4	3.648	.100	1.278	3.381	.223	1.024	3.625	.275	1.345
5	3.179	.095	1.215	3.048	.263	1.203	2.885	.174	.850
6	4.216	.104	1.327	4.286	.260	1.189	4.458	.282	1.382
7	3.142	.088	1.119	3.238	.206	.944	3.375	.189	.924
8	3.525	.094	1.201	3.619	.189	.865	3.333	.206	1.007
9	3.444	.091	1.158	3.322	.187	.865	3.458	.255	1.250
10	3.167	.095	1.207	3.258	.248	.944	3.042	.195	.955
11	3.000	.101	1.272	2.982	.276	1.265	2.917	.275	1.349
12	3.148	.088	1.119	3.476	.290	1.327	2.961	.255	1.248
13	3.763	.103	1.315	3.714	.310	1.419	3.833	.246	1.204
14	3.556	.093	1.185	3.611	.201	.921	3.468	.241	1.179
15	3.753	.101	1.290	3.590	.235	1.076	3.583	.324	1.586
16	3.580	.093	1.189	3.351	.222	1.017	3.395	.247	1.209
17	3.500	.089	1.127	3.524	.245	1.123	3.657	.187	.917
18	3.290	.101	1.284	3.609	.212	.973	3.552	.233	1.141
19	3.679	.108	1.377	3.619	.263	1.303	3.917	.255	1.248
20	3.302	.098	1.242	3.809	.164	.750	3.318	.260	1.274
21	3.364	.094	1.194	3.648	.234	1.071	3.620	.189	.924
22	3.123	.095	1.204	3.000	.239	1.095	3.083	.208	1.018

Item number	Total Population			Chairmen			Superintendents		
	Mean	SEm	SD	Mean	SEm	SD	Mean	SEm	SD
23	3.704	.101	1.285	3.600	.201	.921	3.500	.217	1.063
24	3.414	.092	1.167	3.340	.242	1.111	3.292	.195	.955
25	3.815	.098	1.242	3.809	.190	.873	3.958	.195	.955
26	3.889	.102	1.295	3.857	.287	1.315	3.938	.259	1.268
27	3.253	.089	1.127	3.333	.126	.577	3.125	.184	.900
28	3.605	.103	1.311	3.429	.273	1.248	3.645	.207	1.013
29	3.432	.092	1.168	3.704	.156	.717	3.542	.180	.884
30	3.272	.098	1.251	3.456	.356	1.632	3.208	.199	.977
31	3.438	.096	1.216	3.480	.273	1.250	3.605	.198	.970
32	3.173	.100	1.274	2.952	.297	1.359	3.385	.168	.824
33	3.772	.095	1.207	3.667	.199	.913	4.167	.187	.917
34	3.216	.090	1.151	3.143	.270	1.236	3.328	.223	1.090
35	3.932	.099	1.262	4.143	.221	1.014	4.417	.158	.776
36	3.616	.089	1.138	3.541	.245	1.121	3.792	.159	.779
37	3.600	.099	1.258	3.634	.244	1.117	3.728	.229	1.122
38	3.407	.087	1.106	3.658	.223	1.024	3.578	.133	.654
39	3.630	.091	1.163	3.741	.241	1.102	3.701	.185	.908
40	3.463	.086	1.093	3.744	.181	.831	3.676	.167	.816
41	3.088	.100	1.272	3.174	.221	1.014	2.833	.231	1.129
42	3.451	.096	1.226	3.486	.273	1.249	3.460	.248	1.215
43	3.728	.098	1.246	4.000	.195	.894	3.797	.282	.282
44	3.537	.100	1.276	3.496	.254	1.167	3.687	.206	1.008
45	3.099	.094	1.196	3.224	.217	.995	3.417	.158	.776
46	3.189	.090	1.142	3.278	.266	1.221	3.303	.155	.761
47	3.611	.104	1.214	3.629	.244	1.117	3.634	.293	1.173

Item number	Total Population			Chairmen			Superintendents		
	Mean	SEm	SD	Mean	SEm	SD	Mean	SEm	SD
48	3.593	.095	1.214	3.531	.254	1.165	3.709	.213	1.042
49	3.599	.107	1.367	3.250	.266	1.221	4.208	.225	1.103
50	3.642	.096	1.224	3.311	.252	1.155	3.681	.253	1.239
51	4.049	.090	1.152	3.929	.228	1.044	4.423	.134	.658
52	3.747	.092	1.176	3.667	.199	.913	3.875	.174	.850
53	3.198	.109	1.382	3.017	.305	1.396	3.427	.275	1.349
54	3.505	.088	1.116	3.833	.186	.854	3.618	.132	.647
55	3.550	.100	1.271	2.967	.207	.949	3.695	.206	1.007
56	3.562	.084	1.750	3.510	.225	1.030	3.750	.162	.794
57	3.544	.098	1.251	3.499	.225	1.030	3.661	.177	.868
58	3.457	.094	1.191	3.408	.213	.978	3.492	.199	.978
59	3.784	.095	1.204	3.676	.211	.966	4.000	.209	1.022
60	3.358	.098	1.244	3.440	.235	1.076	3.563	.180	.881
61	3.401	.100	1.268	3.155	.251	1.153	3.510	.159	.780
62	3.698	.106	1.352	3.905	.206	.944	3.865	.211	1.035

Item number	Principals 0/99			Principals 100/249			Principals 250/+		
	Mean	SEm	SD	Mean	SEm	SD	Mean	SEm	SD
1	4.029	.217	1.267	4.229	.188	1.114	4.319	.215	1.476
2	3.235	.219	1.281	3.741	.153	.910	3.361	.191	1.311
3	3.750	.245	1.431	4.057	.142	.838	4.128	.184	1.262
4	3.559	.236	1.375	3.771	.174	1.031	3.820	.198	1.356
5	3.206	.226	1.321	3.186	.168	.994	3.426	.199	1.363
6	3.824	.239	1.395	4.486	.126	.742	4.213	.217	1.488
7	2.971	.200	1.167	3.143	.170	1.004	3.170	.183	1.257
8	3.676	.210	1.224	3.528	.166	.980	3.532	.213	1.457
9	3.471	.212	1.237	3.329	.147	.873	3.617	.186	1.278
10	2.971	.225	1.314	3.200	.187	1.106	3.383	.186	1.278
11	3.044	.231	1.347	3.257	.198	1.172	2.872	.184	1.262
12	2.971	.229	1.337	3.171	.186	1.098	3.298	.197	1.350
13	3.618	.231	1.349	3.857	.184	.889	3.882	.202	1.387
14	3.441	.212	1.236	3.686	.167	.987	3.606	.191	1.311
15	3.794	.218	1.274	3.828	.154	.912	3.861	.202	1.387
16	3.706	.213	1.244	3.500	.144	.853	3.840	.191	1.307
17	3.353	.202	1.178	3.400	.144	.847	3.660	.186	1.273
18	3.015	.233	1.359	3.200	.182	1.079	3.340	.214	1.464
19	3.529	.236	1.376	4.042	.164	.968	3.478	.239	1.640
20	3.118	.201	1.175	3.200	.191	1.132	3.340	.207	1.418
21	3.000	.189	1.101	3.243	.210	1.245	3.542	.185	1.266
22	3.221	.206	1.200	3.114	.196	1.157	3.213	.195	1.334
23	3.588	.239	1.395	3.629	.201	1.190	4.064	.203	1.389
24	3.295	.204	1.189	3.543	.176	1.039	3.585	.187	1.280
25	3.456	.236	1.376	4.000	.183	1.085	3.925	.203	1.389
26	3.882	.222	1.297	3.929	.158	.938	3.915	.213	1.457

Item number	Principals 0/99			Principals 100/249			Principals 250/+		
	Mean	SEm	SD	Mean	SEm	SD	Mean	SEm	SD
27	3.059	.211	1.229	3.286	.186	1.100	3.468	.185	1.266
28	3.632	.226	1.319	3.543	.214	1.268	3.734	.210	1.437
29	3.088	.229	1.334	3.771	.170	1.008	3.447	.192	1.316
30	2.985	.219	1.279	3.356	.154	.910	3.494	.192	1.314
31	3.281	.217	1.263	3.457	.176	1.040	3.489	.194	1.333
32	2.853	.264	1.540	3.371	.184	1.087	3.319	.183	1.253
33	3.309	.234	1.364	3.814	.150	.944	3.957	.192	1.318
34	2.971	.205	1.193	3.443	.166	.980	3.404	.168	1.155
35	3.603	.260	1.418	3.915	.169	.998	3.894	.200	1.371
36	3.485	.212	1.237	3.714	.127	.750	3.638	.198	1.358
37	3.190	.263	1.533	3.700	.133	.789	3.831	.193	1.324
38	2.941	.219	1.278	3.343	.129	.765	3.660	.178	1.221
39	3.368	.215	1.256	3.657	.153	.906	3.787	.190	1.301
40	3.265	.221	1.286	3.600	.131	.775	3.553	.182	1.248
41	3.029	.209	1.218	3.215	.169	1.003	3.234	.230	1.577
42	3.074	.207	1.205	3.471	.161	.951	3.745	.189	1.293
43	3.426	.257	1.501	3.843	.149	.879	3.766	.180	1.237
44	3.250	.247	1.442	3.229	.185	1.095	3.798	.196	1.345
45	2.735	2.17	1.263	2.914	.194	1.147	3.360	.191	1.307
46	2.764	.203	1.182	3.057	.188	1.110	3.500	.182	1.249
47	3.131	.272	1.585	3.886	.158	.932	3.777	.206	1.413
48	3.176	.209	1.218	3.728	.144	.852	3.808	.203	1.393
49	3.397	.277	1.617	3.800	.182	1.079	3.511	.204	1.397
50	3.338	.235	1.368	4.086	.138	.818	3.723	.179	1.228
51	3.853	.236	1.374	4.171	.126	.747	4.043	.190	1.301
52	3.514	.236	1.376	3.971	.151	.891	3.787	.192	1.318

Item number	<u>Principals 0/99</u>			<u>Principals 100/249</u>			<u>Principals 250/+</u>		
	Mean	SEm	SD	Mean	SEm	SD	Mean	SEm	SD
53	2.956	.303	1.766	3.315	.164	.968	3.277	.189	1.297
54	3.059	.211	1.229	3.486	.144	.853	3.660	.191	1.307
55	3.146	.269	1.566	3.943	.136	.802	3.814	.196	1.345
56	3.382	.194	1.129	3.615	.154	.910	3.681	.173	1.185
57	3.412	.243	1.417	3.757	.136	.808	3.521	.225	1.544
58	3.324	.222	1.296	3.400	.184	1.090	3.660	.188	1.290
59	3.575	.247	1.438	3.785	.168	.994	3.936	.184	1.258
60	3.190	.245	1.431	3.429	.185	1.092	3.360	.200	1.372
61	3.161	.262	1.527	3.514	.190	1.121	3.596	.194	1.328
62	3.441	.257	1.501	3.585	.240	1.418	3.851	.204	1.398

Appendix BLetters and Questionnaire



UTAH STATE UNIVERSITY

DARYL CHASE, PRESIDENT
LOGAN, UTAH, 84321

COLLEGE OF EDUCATION
JOHN C. CARLISLE, DEAN
DEPARTMENT OF EDUCATIONAL ADMINISTRATION

I am in the process of gathering information concerning the problems of implementing special education programs for the educable mentally retarded in Utah elementary schools. In your position as an elementary school principal, you are responsible with other educational personnel for the curriculum in the elementary school. Therefore, I am asking for a few minutes of your time to complete the enclosed questionnaire. Knowing that there are many demands upon your time, I have attempted to keep this as short as possible and find that it can be completed in less than 30 minutes.

The statements in the questionnaire are all problems identified as preventing programs of special education in the school curriculum. You are asked to check these problems in relation to their importance as you see them in regard to your school position. Since I will be asking other school personnel for their opinions, I would appreciate your completing the questionnaire before you discuss it with others. In order to solve problems we must first understand them and then arrive at solutions. I assume that we will have better understanding of this problem of education as a result of your aid in this study.

I appreciate your assistance in behalf of this study and have enclosed a stamped self-addressed envelope for your convenience and a rapid return. If you desire the results of this study, please check the form on the instruction sheet.

Sincerely,

John L. Beitia
Graduate Assistant

UTAH STATE BOARD OF EDUCATION

1400 UNIVERSITY CLUB BUILDING • 136 EAST SOUTH TEMPLE
SALT LAKE CITY, UTAH 84111



Office of the
STATE SUPERINTENDENT
OF PUBLIC INSTRUCTION

T. H. BELL
Superintendent

This letter will indicate the interest of the Utah State Board of Education in the study being conducted by John L. Beitia of Utah State University. We feel with the gathering of information concerned with our educational programs in Utah, we will have a better source of evaluation and understanding. With such data at hand, our position to offer constructive advice is greatly enhanced.

In order to complete the study, Mr. Beitia is conducting a survey of selected school district board chairmen, superintendents, and elementary principals. His survey is concerned with the problems that school administrators find resist the changes required to implement special education programs for the educable mentally retarded students. To gather this information and to expedite the completion of the study, we ask you to cooperate with Mr. Beitia in this survey.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "T. H. Bell", written over a horizontal line.

T. H. BELL
State Superintendent
of Public Instruction

THB/lis

Help! I need Help! Recently I sent you a letter that included a questionnaire concerned with problems that prevent implementation of special education programs for the educable mentally retarded students in our elementary school. Since I have not received your completed questionnaire I was wondering if something had gone wrong.

Possibly the original letter never reached you or it might have been overlooked in the press of other matters. Therefore, I am enclosing another copy of the questionnaire, still needing your assistance to complete. This information is vitally necessary to the study I am conducting concerning these problems preventing program implementation. Please complete and return this questionnaire. It does not require much time as I have made every effort to keep it as short as possible to avoid taking up your time. I know there are many demands placed on you daily.

Included with the questionnaire is a stamped self-addressed envelope for you in returning the completed instrument at your earliest possible convenience.

Sincerely,

John L. Beitia
Graduate Assistant

INSTRUCTIONS

This survey is concerned with identifying the problems that prevent special education programs for the educable mentally retarded children in Utah elementary schools. As you know, the educable mentally retarded student falls in the I. Q. range of 55 to 75 who is not able to benefit from the normal school program but can develop the skills and abilities to become socially acceptable. Your assistance in the completion of the following questionnaire will be valuable in assessment of the problems.

The following brief descriptions are given for your consideration in evaluating the statements. These statements have been identified as problems in the educational programming for the educable mentally retarded.

- MAJOR PROBLEM: one that is considered extremely important and should receive major consideration.
- MODERATE PROBLEM: one considered to have less than major importance but more than average in aspect.
- AVERAGE PROBLEM: one that would receive normal consideration in program determination.
- MINOR PROBLEM: one having a small amount of consideration and of little importance.
- NO PROBLEM: one having no effect whatsoever upon the program determination.

EXAMPLE:

Please indicate your choice with a check mark in the appropriate box.

Question No. 77 Financial aid for EMR* needs.

Major	Moderate	Average	Minor	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*EMR the abbreviation for educable mentally retarded which will be used throughout the questionnaire for the sake of brevity.

I desire a copy of the results of the study. _____

Name _____ School Enrollment _____

Position _____ Correction, if needed _____

Address _____

Please indicate your choice in the appropriate box with a check mark.

Major Moderate Average Minor No

- Qualified classroom teachers for instructing the EMR.
- Understanding the state laws concerning the education of the EMR.
- Determination of program needs for the EMR.
- Ability of the school to communicate the diagnosis of EMR to the parents.
- Administrative policy for EMR students.
- Ability to recruit and retain qualified personnel for the EMR program.
- Method of reporting progress of EMR student.
- Determination of criteria for the educational placement of the EMR.
- Evaluation of the local EMR program needs.
- Cooperation with state agencies in development of local EMR program.
- Special transportation required by the EMR.
- Ability of the regular classroom teacher in identifying the potential EMR.
- Parental acceptance of a need for EMR program.
- Community recognition of the educational needs of the EMR students.
- Specialized curriculum for the EMR program.
- Ability to conduct followup diagnosis for pupils referred as potential EMR.
- Acceptable curriculum goals for EMR program.
- State distribution formula for funding the EMR program at the local level.
- Separate facilities for the EMR program.
- Justification of the higher cost per pupil of the special EMR program.
- Staff orientation concerning the total EMR program.
- Coordination with state agencies in implementing the EMR program.
- Necessity for the EMR program in the school.
- Priority of the EMR program in the total education budget of the school.

	Major	Moderate	Average	Minor	No
Qualified classroom teachers for instructing the EMR.					
Understanding the state laws concerning the education of the EMR.					
Determination of program needs for the EMR.					
Ability of the school to communicate the diagnosis of EMR to the parents.					
Administrative policy for EMR students.					
Ability to recruit and retain qualified personnel for the EMR program.					
Method of reporting progress of EMR student.					
Determination of criteria for the educational placement of the EMR.					
Evaluation of the local EMR program needs.					
Cooperation with state agencies in development of local EMR program.					
Special transportation required by the EMR.					
Ability of the regular classroom teacher in identifying the potential EMR.					
Parental acceptance of a need for EMR program.					
Community recognition of the educational needs of the EMR students.					
Specialized curriculum for the EMR program.					
Ability to conduct followup diagnosis for pupils referred as potential EMR.					
Acceptable curriculum goals for EMR program.					
State distribution formula for funding the EMR program at the local level.					
Separate facilities for the EMR program.					
Justification of the higher cost per pupil of the special EMR program.					
Staff orientation concerning the total EMR program.					
Coordination with state agencies in implementing the EMR program.					
Necessity for the EMR program in the school.					
Priority of the EMR program in the total education budget of the school.					

Major Moderate Average Minor No

- Personnel qualified to counsel parents of EMR.
- Public recognition that the EMR can be educated to assume a position of self sufficiency.
- Federal funds for the local program.
- Techniques for elementary teachers in identification of potential EMR pupils.
- Released time for personnel to develop the desired program for the EMR.
- Utilization of present research in the EMR area.
- Development of the EMR program within the normal school program.
- Acceptance of the EMR within the total educational program in the school.
- Professional personnel to adequately diagnose EMR.
- Public communications concerning the educational placement of the EMR.
- Public acceptance of the EMR program.
- Identification of the potential EMR at the pre-school or first grade level.

Major	Moderate	Average	Minor	No

- Use rank the following problem categories as you perceive their importance. Rank by number (1-2-3-4-5-6-7-8) with number one being most important and eight least.
- ___ The qualified personnel needed for the EMR program.
 - ___ Development of the total educational program including the EMR needs.
 - ___ The financial needs of the EMR program.
 - ___ Communications with parents and public.
 - ___ Complete diagnostic effort to properly identify and place the EMR.
 - ___ The physical facilities required by the EMR program.
 - ___ Determination of school policy concerning the EMR.
 - ___ Development of cooperative inter-district EMR program.

Use the following space for any comments concerning this survey or problems of educating EMR. Thank you for your kind assistance.

VITA

John Luis Beitia

Candidate for the Degree of

Doctor of Education

Dissertation: A Study of Problems Preventing the Implementation of Programs for the Educable Mentally Retarded in Utah

Major Field: Educational Administration

Biographical Information:

Personal Data: Born at Shoshone, Idaho, December 27, 1922, son of Manuel and Fernanda (Jayo) Beitia; married Jess Selaya; three children--Lawrence John, Terry Luis, and Anthony Lee.

Education: Received the Bachelor of Science degree from North Dakota State College, Valley City, North Dakota in 1950; received the Master of Education degree from Idaho State University, Pocatello, Idaho in 1959; completed requirements for the Doctor of Education at Utah State University in 1967.

Professional Experience: 1965-67, graduate assistant, Department of Educational Administration, Utah State University, Logan, Utah; Summer, 1966, Instructor, Department of Educational Administration, Utah State University, Logan, Utah; 1960-65, Superintendent of Schools, School District No. 421, Idaho; 1959-60, Secondary principal, McCall-Donnelly High School, Idaho; 1955-59, Secondary teacher and coach, Kimberly School District, Idaho; 1953-55, Secondary teacher and coach, Camas County Schools, Idaho.