

**PRINCIPLES AND PRACTICE IN
EDUCATION INTEGRATION:**

a three-year analysis of the get together model

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Introduction

The Get Together Model of integration refers to a network of programs with a common philosophical, operational and pedagogical base. The underlying philosophy of the programs is derived from Wolfensberger's principle of Normalization (1972) which stresses physical and social integration in the daily activities of living for people with handicaps.

History

The Get Together Programs grew out of an informal network of education students, parents, and professionals who were dissatisfied with segregated services for children with handicaps. Young student teachers complained that they had no practice teaching in integrated settings. Parents of children with handicaps were seeking opportunities for their children to have contact with their typical peers. The professional educators involved were concerned with the drift toward specialized technical services which necessarily led to segregated settings for children labelled mentally retarded. Therefore, in 1980, the needs of these diverse groups came together in the first concrete proposal for a recreational and educational Saturday program for young children ages 5 to 11.

The Saturday program, run by volunteer student teachers and supervised by a university professor, had the single purpose of fostering physical and social integration between children with handicaps and their typical peers (i.e., non-handicapped children) for at least one day a week.

The Saturday program appeared to be successful on several levels. Parents of children with handicaps reported that their children, who were having problems with motivation at school all week, were visibly enthusiastic about attending the Saturday program. Dramatic improvements in language and speech were noticed. As a result of the enthusiastic reception of parents, teachers and children to the Saturday program, a proposal was presented to expand the Saturday Get-Together into a daily summer program.

At this point, support was also forthcoming from the National Institute on Mental Retardation which sponsored the grant and which provided a researcher to

study the program. The grants came from the Canadian Federal Government and the Scottish Rite Foundation.

The application was successful and the first Summer Get-Together ran for 8 weeks in July and August 1981 with a total of 36 children and six staff. One third of the children had been labelled in need of special education by the school system.

The Saturday program continued in 1981-82 and plans for expansion in the summer of 1982 were accepted by the government and various sponsors. The plans called for three Summer Get Together programs to be set up in separate locations around the city. Simultaneously, plans for a full time private alternative school were put into action. Encouraged by the success of their children's experiences with integration, parents sought out alternative placements for the their children within the public school system.

The summer programs of 1982 presented an exciting challenge and test of the integration principle. Up until this point, the children with special needs were labelled "trainable mentally retarded," physically, or sensorially disabled, or learning disabled. The new challenge accepted in the summer of 1982 was to integrate 15 children labelled with severe to profound mental and physical handicaps.

As of spring 1983, the following programs comprise the Get-Together network:

- (1) The Saturday Get-Together (26 Children)
- (2) The Summer Get-Together (75 Children in three-programs)
- (3) A private alternative full time school (20 Children)
- (4) Individual integrated placements (12 Children)

Features of the Model

Objectives/philosophy

The overall goal of the program is to create a picture of what is possible in terms of educational integration. The aim is to create a learning environment in which each individual student's potential would be developed. This is done by incorporating the most current educational theories for all children's learning, irrespective of special needs.

A major emphasis of programming is based on **experiential learning**, which stems from the belief that learning occurs when the student and teacher are actively engaged in relevant and meaningful experiences. Thus a **wholistic** approach to education where learning is seen as interdisciplinary, is used. For example: A music lesson is also a reading and writing lesson and can include problem solving. The **psycholinguistic model** forms the foundation for a reading and writing program which stresses reading for meaning and reading based on the personal world of each child.

Further features are reflective of the program's commitment to integration. An underlying belief of the model is that no child is too handicapped to learn and fully participate. The major goal is to create a vibrant and dynamic community where differences are not only tolerated but respected and valued. Part of successful integration requires changes in children's attitudes to people who are different. Children in the Get-Together Program are thus actively encouraged to show compassion and sensitivity toward others. Cooperation is highly valued and rewarded, while competition and selfishness is discouraged.

Activities

There are at least eight activities that form the core of the program. These are:

The group meeting

The group meeting or circle, as it is commonly called, is a daily forum to discuss problems, issues, current events and future plans. Children are encouraged to voice their own opinions and democratic decision making is practiced. It is at the group meeting where the values of the program are made explicit so that everyone knows exactly what they are, and what is expected of them. For example, the children in cooperation with their teachers make rules for the program.

The group meeting is thus a reflection of the values, philosophy and operation of the program.

The weekly newsletter

Written and produced by the children with the help of one teacher, the weekly newsletter describes activities and trips that have taken place during the week and some of the upcoming events. It also includes articles researched by the children themselves. Not only does it involve all the children in a community-oriented product, but it serves the added purpose of keeping communication lines open with the parents and the neighbourhood.

Lunches

Lunchtime has been one of the most successful activities in promoting social interaction. Every week a different group of children is responsible for planning, buying, preparing and cleaning up after lunch. They learn about nutrition, costs and meal preparation.

Music

Music is an integral part of the program in terms of singing, listening and playing instruments. It serves to bring the group together and helps focus the attention of some of the children with handicaps who tend to pay little attention to verbal cues in their environment. Listening to the great classics, folk music or jazz at lunch time is part of the music program. Learning the words to songs serves as a rich aid for reading.

Reading

The overall objective of the reading program is to encourage reading for pleasure and information. Stories are read to the children daily, children are encouraged to read stories to one another, and they are encouraged to write and read their own stories. Libraries are set up in each program location. The overall program emphasis is on reading, writing, speaking and listening. Creative drama and the performing of plays is also part of this program.

Field Trips

All children have the opportunity to go on frequent field trips. Children vote for places they want to visit and participate in planning the outing. The trips serve as an excellent source of reading, writing and discussion. Issues of accessibility and transportation for children in wheelchairs sometimes arise and must be resolved.

Swimming

The children are taken to neighbourhood pools for fun and exercise at least 2 or 3 times per week. This is one of their favourite activities.

Parent Involvement

Input from parents is not only welcome but encouraged. The program is open for a parent or legal guardian to visit any time. Families were urged to evaluate the program in a parent survey sent out at the end of the summer. Teachers maintain close contact with parents via home visits or by phone. For non-speaking children, a daily diary is sent home with the child to describe the day and to give suggestions to parents for further work at home. Parents are encouraged to reply when they return the book.

Structure of the summer program

The **Director** of the Get-Together network is responsible for overseeing the smooth operation of all parts of the system, setting policy, initiating public relations activities, providing staff training and development, assisting in curriculum planning and obtaining and coordinating funding.

The **Head Teacher** is involved in staff selection and contacting schools and parents who are interested in the program. She or he does the actual day-to-day planning and acts as a liaison person with the Director. Planning and implementing the optimal learning environment is the main responsibility of the head teacher.

In addition to the head teacher, each program has five full time staff members plus contributions made by one or two part-time staff. Staff members work on a one-to-one basis with designated individual children, organize and conduct small group activities, are in charge of special projects or programs, and supervise the lunch program. Each staff member is encouraged to use his or her unique talents and skills with the children. For example, a staff member with a music background would run the music program.

All staff members are involved with the maintenance and physical care of the children (i.e. looking after the personal care of children who require assistance, including toileting, dressing, feeding, and helping children in and out of wheelchairs). Staff members report that they spend on average about two hours a day on these types of maintenance activities. This is one of the reasons why a high staff to student ratio is necessary. The student to staff ratio ranges from 3.5 to 4 students to one staff member.

The **Researcher** is involved in designing and implementing research and evaluation of the program. She attends all staff meetings and assists in the planning of the program and the training of new staff.

Research

Research has primarily focused on social integration occurring in the programs. Evaluation has been conducted on the basis of the research plus questionnaires and interviews with staff, parents and students.

It is proposed that **acceptance** and **participation** are two important dimensions of social integration. Acceptance reflects attitudinal components and participation reflects behavioural components of social integration.

Method

Subjects:

The research data reported here was collected during the Summer Get-Together programs of 1981 and 1982.

A total of 36 children attended the July and/or August 1981 sessions. They ranged in age from 5 to 12 years with an average age of 7.5 years. Eight of the 36 children were considered to be handicapped. They included three children with Down's Syndrome (2 EMR, 1 TMR), two hearing impaired children, 2 children with cerebral palsy, and one child diagnosed as aphasic. The two children with cerebral palsy were the only physically handicapped children. Of the above 36 children, 19 children (7 handicapped and 12 non-handicapped) are represented in the observational data, i.e., those who regularly attended the August session.

The children represented in the 1982 data consisted of 25 children in Program 1 and 23 children in Program 2 who attended most of the 7-week summer session. Their ages ranged from five to eleven years with an average of 7.7 in Program 1 and 7.2 in Program 2. Program 1 data includes 7 handicapped children and Program 2 includes 8 handicapped children (X -age = 7.3 years. Only 14 handicapped children are included in the observational data due to insufficient data for one child). Of the children with handicaps, all were considered to have severe mental disabilities. Thirteen children also had physical disabilities, and of these, 10 children required wheelchairs for mobility. All 15 handicapped children required some degree of physical care (e.g., assistance with feeding and/or toileting). Two children had some limited verbal abilities but the remaining handicapped children had not yet acquired language or symbolic communication skills.

Procedure:

Three different measurement techniques were used to obtain data on degree of social integration: systematic observation, teacher ratings, and sociometric interviews.

(1) Systematic Observation of Free Play

Observation of the children's social grouping and play activities was conducted using the Parten Scale of Social Play (Parten, 1932; Wintre and Webster, 1977; 1980). The children's activities were coded according to Parten's six categories: Unoccupied, Solitary Play, Onlooker, Parallel Play, Associative Play and Cooperative Play. The observers also recorded whether the child was involved with handicapped children, non-handicapped children or staff members, thus yielding data on social grouping. A scan sampling technique (Sears, 1963) was found to be a highly effective method of collecting data on a large group of children. The observer looks at the child just long enough to decide how to categorize the child's behaviour, then

records the information, and moves onto the next child in a predetermined order. The observer recycles through the list of children several times in one session, thus obtaining a number of observations on each child throughout the play session. Reliability checks on the coding of social play ranged between 69% and 87% agreement.

(2) Teacher ratings

All full-time staff members rated the levels of acceptance and participation of each child according to a 5-point scale. In addition, each child's social skill level was assessed by two staff members using the Kohn Social Competence Scale (Kohn, 1977). The Kohn Scale measures two factors related to social skills: Interest-Participation versus Apathy-Withdrawal, and Cooperation-Compliance versus Anger-Defiance. The first factor (Participation-Withdrawal) was considered to be most relevant to the research objectives.

(3) Sociometric interviews

Two techniques were used in assessing the sociometric status of the children: a peer rating exercise based on Singleton & Asher's (1977) technique, and a peer nomination exercise. For the peer rating exercise, the children were presented with a list of all children in their program and asked to indicate, on a three point scale, how much they liked to play with each child. The peer nomination exercise consisted of eleven questions and the child was asked to nominate another child with whom they would like to do the various activities listed.

Sociometric interviews were conducted individually and with non-handicapped children only; the handicapped children did not have sufficient abilities to respond to this task.

Results

Systematic observations of free play yielded some interesting data on the degree of integration occurring in the programs. In the summer of 1981, the population of handicapped children was predominantly from the groups labelled by the school system as educable mentally retarded and trainable mentally retarded. The younger non-handicapped children tended to spend about 55% of the time observed in integrated play groups (i.e. mixed groups of children with and without disabilities), while younger handicapped children spent about 45% of their time in an integrated play group. Older children spent less time in integrated play groups (28%) mainly because there was only one older child (age 11) who was handicapped. Averaging over all the age groups, the children spent about 41% of the time observed in integrated groups.

In the summer of 1982, the population of handicapped children changed dramatically to include more multiply handicapped children, the majority of

whom had no verbal communication skills. Social integration levels were encouraging but not as high as in the previous summer. Integrated play activities occurred approximately 29% of the time observed for both the handicapped and the non-handicapped children.

In 1982, the social integration patterns related to age and presence of handicap were slightly different than those observed in 1981. Unlike the 1981 data, the 1982 results show that age was not a factor in the levels of integrated play of non-handicapped children.

In terms of the handicapped children, however, age in combination with sex may be a contributing factor to social integration. Levels of integrated play, sociometric status, and acceptance ratings were significantly higher for younger (7 years and under) handicapped children than older children. Five out of the six older children were males, thus sex differences in the way that the children relate to each other must also be considered in interpreting this data. The predominant style that the non-handicapped children use in relating to the handicapped children tends to be nurturing (e.g., providing assistance, showing affection). This style is frequently used by girls in relating to the handicapped children and occasionally by older boys towards the younger handicapped children, but seldom by males towards other boys their own age. Therefore, the older handicapped males are less likely to receive the same type and degree of attention that the handicapped girls and younger children who are handicapped receive.

Through the use of the same observational methodology over two summers (1981, 1982) several patterns in children's social play have become apparent (see Table 1). In 1981, the non-handicapped children spent on the average 71% of the time observed in interactive social play (i.e. associative or cooperative play) and in 1982, 59%. For handicapped children the average levels of involvement in interactive social play were 38% in 1981 and 35% in 1982.

There was a wide range of individual differences in terms of handicapped children's involvement with others. In 1982, four severely handicapped children spent over 50% of their time in interactive social play while three other children spent less than 15% of the time involved with other children.

Another consistent pattern that emerged over both summers has to do with the problem of handicapped children spending more time alone or with staff only in comparison to the non-handicapped children. In 1981, the handicapped children spent 40% of the time observed alone, unoccupied or with staff only while the non-handicapped children spent 15% of their time in similar activities. In 1982, the comparable figures are 51% and 21%.

The data on social play reported here were collected during periods of unstructured free time when children were allowed to initiate their own play activities. The data indicates that there is a potential for the handicapped child to spend a lot of time unoccupied, especially if his or her activities are not directed. It also shows the need for structure to support the integration process, particularly if some of the children with very severe disabilities can't or won't initiate activities or social contact on their own.

As can be expected there are significant differences between the handicapped and non-handicapped children in terms of variables measuring degree of participation (See Table 2). This is evident both in terms of social play variables and teacher ratings of participation, with the data consistently showing lower rates of participation of handicapped children.

On the other hand, measures of acceptance (acceptance rating and sociometric variables) show either no significant differences between the two groups of children (i.e., sociometric nominations received and teacher ratings of acceptance) or higher scores for the handicapped children (sociometric ratings of "like to play with"). Therefore, attitudinal variables show few or no problems in integrating severely handicapped children, but what we do need to be concerned with are participation levels of these children.

Peer nomination questions in the 1982 sociometric interviews were specifically designed to reflect both "passive" and "active" activities. A handicapped child would be just as likely to be chosen for passive activities as a non-handicapped child since these activities do not require special skills. (Examples: "Who do you like to sit beside in the circle?", "Who do you like to walk with on a field trip?"). In contrast, "active" activities do require more in the way of skills or responsiveness on the part of the person chosen. Thus there is a higher probability that a non-handicapped child would be chosen for these activities. (Examples: "Who do you like to read you a story?", "With whom do you like to play games?").

The children did make a distinction between their choices for passive versus active activities. In one program, 78% of nominations for "passive" activities were handicapped children and 78% of nominations for "active" activities were non-handicapped children. The second program showed the same pattern: 56% of "passive" activity nominations were for handicapped children and 84% of nominees for "active" activities were non-handicapped children.

Also of note is the result that four out of fourteen children in the first program and five out of ten children in the second program named a handicapped child as their "best friend" in the program.

An initial hypothesis predicting a relationship between non-handicapped children's social status and their acceptance of handicapped children was not confirmed. The attention that children were seen to give to others appeared to be related more to individual differences in personality and expressions of nurturance, rather than in the child's status in the group. Some of the most popular and respected children developed special friendships with the handicapped children and some of the quieter more introverted children were also seen to devote time and attention to a handicapped child. It was also observed that children who were known to be "class bullies" often changed their behaviour when relating to a child with a handicap. They were quieter and more gentle in tone and touch.

Evaluation results

Parents and students have been given opportunities to evaluate the program in surveys and structured interviews. The overall ratings given by parents and students to the Summer Get Together Programs are displayed in Table 3. Return rates for the parent surveys ranged from 42% to 83% for various programs.

In 1981, the most frequently mentioned comments made by parents regarding gains made by their children were: improved communication skills (e.g. larger vocabulary, better ability to participate in discussions) [6 children]; greater confidence or independence (4); improved swimming ability (4); and greater acceptance of or ability to relate to handicapped people (4). The 1982 comments were fairly similar. They included: increased willingness to take on responsibility (7); better understanding of and relationships with handicapped people (5); greater independence (4); and improved swimming ability (3).

Houseparents of children with severe disabilities noted improvements in their children's social skills (11 out of 15 children) and in the children's alertness or attention to their environment (8 out of 15). Houseparents also noted an improvement in the non-verbal communication skills of at least five children and two children had made some progress in verbal skills. Houseparents were concerned mainly with issues related to extra attention the children needed, especially around their health and physical requirements (e.g., changes in physical positioning, assurance that medication was given, proper diet and adequate liquid intake).

Although the staff report a high degree of satisfaction with the program, there are some definite issues that arose around the intensive care needed by the children. The ratio of children with handicaps was too high and this will be ameliorated in future programs. Eight out of twelve felt their summer job was moderately stressful and three felt it was highly stressful. Most staff members saw their workload as heavy in comparison to other summer jobs that

they have had, but their major satisfaction came from the time they spent working closely with the children.

Discussion

Ratio

As a result of experiences in building a network of integrated programs, a number of salient issues have emerged over the past three years. One of the most persistent problems has to do with the ratio of handicapped to non-handicapped children in an integrated program. There is a constant demand to include more children with handicaps than is ideologically desirable, (i.e., according to the principle of normalization).

According to statistics from the Canadian Association for the Mentally Retarded, approximately 1% to 3% of the general population may be considered mentally handicapped to some degree. Ideally the population of a program should reflect this natural proportion. However, the practical demands of the situation including pressure from parents and a severe shortage of integrated placements means that it is not possible to be so restrictive in the number of handicapped children accepted in the Get Together Programs. Attempts to deal with the problem include expanding the number of programs, as well as setting an upper limit that no more than one third of the children in a program should have the label "handicapped."

Experience has taught those involved in the programs that this guideline cannot be violated. The potential danger exists of establishing yet another good, but segregated setting if the ratio guideline is violated.

Staff

Additional concerns have arisen related to staff selection and training. It is necessary that strong and compatible teams be developed to run each program. A practical suggestion regarding staff selection is that the director should hire the team leaders and these leaders in turn choose their own staff.

The next step in the process is for staff to attend a week long training and orientation program. This program includes normalization theory, the philosophy and practice of integration, current research and thinking about the education of children with and without handicaps and discussion of the principles and history of the Get-Together model.

Other more specific topics related to the actual day to day running of the program include formulation of goals and objectives, practical training in the

physical care of the children with handicaps (including discussion of their medical needs), and discussion of potential problems and practical solutions from past experience. The training program also includes at least one session on creative curriculum planning and teaching ideas especially in reading, writing and problem solving.

The intense preparation of the staff helps to ensure the smooth operation of the program. The more groundwork that is done, the stronger the program. Further examples of this preparatory work include: home and school visits, setting individualized programs for specific children, and small group meetings to solidify each group.

It may also be necessary to schedule a two day break for professional development in the middle of the program. This is partly in response to reported feelings of stress or burnout among the staff. A short break for problem solving and discussion is one of the antidotes to this problem. It has been noted that social events among staff (e.g., "pubbing" and pizza evenings) help to release tension.

Another way of alleviating staff tension is for the program director to give constant support and positive feedback to staff. This is done by the director's frequent visits to the program and evening phone calls so that staff feel they can discuss day to day problems and share their excitement or frustration.

Leadership

A program of this nature needs a democratic model of leadership and guidance. The teams have a high degree of autonomy to design and run their programs in their own unique style, as long as they adhere to the guiding principles and values of the program. For example, in the summer of 1982 one program had a greater emphasis on physical and recreational activities while another stressed a more cultural and educational curriculum. Both however had the same emphasis on integrated activities and respect for individual dignity and rights.

Networking

Personal networking has proved to be successful in attracting staff, expanding programs and generating interest in the model. The program itself serves as a catalyst for the development of other new integrated programs. Groups in Ottawa, Ontario, and Louisville, Kentucky have been encouraged to start their own programs based on this model.

Two of the main ways in which the model has gained popularity has been through invitations to speak to parents and professional groups throughout Canada and the U.S. and articles published in journals and newspapers about the program.

Children

Both handicapped and non-handicapped children benefitted from their attendance at the Summer Get Together. This observation is based on interviews with children, parents and houseparents and comments made by parents when picking up or delivering their children. Most important, new friendships were formed among all the children. In particular this carried over to after school visits by non-handicapped children to the homes of the children with handicaps This has continued throughout the school year.

Another benefit to the children with handicaps was the daily and constant exposure to appropriate age role models, especially in the area of language and behaviour. A reduction in inappropriate behaviour on the part of the children with handicaps (e.g., tantrums, biting, self-stimulation, pinching,) has been observed by program staff and houseparents.

An unexpected gain was the improved physical health and well being of the children with handicaps as reported by nursing staff and houseparents. Children slept through the night and a marked reduction in the number of seizures was noted. The reason for this is unknown; perhaps reduced seizure activity may be due to the children's better general health or the increased and varied stimulation they received. This is a rich area for further investigation.

The children with handicaps participated in a wider range of activities than they would normally have experienced in a segregated program. For example, swimming in a community pool, sailing, field trips, movies, theatre, concerts, public transit, and amusement park rides were just a few of these activities. The children were also exposed to the full range and intensity of activities that non-handicapped children experience in a day-long recreational program, without special allowance made for prolonged lunch hours or nap periods.

The exposure to the natural and often noisy activity of typical children made the children with handicaps more tolerant of their environment. The natural parents reported that they could now bring their child home more often for visits as the child could cope more easily with a "normal" family situation.

At least two children previously unable to cope with crowds in a busy shopping centre can now be taken to normally crowded public places such as supermarkets.

Special gains made by the children without handicaps include increased acceptance of people who have handicaps and greater sensitivity and tolerance of individual differences. A further benefit was the opportunity to mix with a wide variety of children in terms of ages and abilities. On a more academic level, these children showed a greater interest in reading. They picked up books voluntarily and produced creative writing for the newsletter. Several children felt that they had improved in their ability to read. Many children learned how to swim and almost all reported that swimming was a favourite activity. Staff reported that children improved in their ability to listen and to participate actively in group discussions.

Future priorities

The following areas have been given priority to receive more attention in upcoming programs.

- o Staff positions should become more specific. Responsibility for certain areas in the curriculum and specific children should be assigned to individual staff members. Therefore, the future policy will be to hire staff on the basis of specific areas of expertise (i.e. music, language arts, recreation).
- o Individual program planning for the children with the most severe handicaps needs to be developed and implemented. If specific plans are not put in place for these children, they tend to be lost amid the activity of the other children.
- o Increase the level of parent involvement through evening meetings and personal interviews.
- o Adaptive equipment for the support of the children with physical handicaps is needed. For example, specialized pool equipment and seating devices other than wheelchairs are desirable.
- o Greater emphasis on training the staff in the use of adaptive devices and positioning of the children with physical handicaps is needed.

- o There is a negative tendency for the non-handicapped children to approach and treat the children with handicaps in a patronizing "babyish" manner. This needs to be dealt with quickly and creatively. Children must be reminded to speak to each other in a normal tone of voice and that children in wheelchairs have the right to determine where they want to go.
- o More video tape and photographic records of the program are necessary for future use in research and public education.

Conclusion

The original purpose of the Get Together program was to show that integration is possible. It is gratifying to find that integration indeed does work and that it is not difficult to implement.

There will be a strong demand for this type of program from both parents of children with and without handicaps, if the quality of the educational program is ensured.

The Get Together program is effective because it has both a conscious plan of action and yet retains and reinforces spontaneity. Very careful use is made of the talent and energies of each person (child or adult) who becomes part of this growing community.

This energy and commitment is channelled and directed by what has been demonstrated to enhance human growth and development. This means drawing on the most current theoretical perspectives, research and practical experience.

The hope of everyone involved in the Get Together program is that more and more children will have the opportunity to share in integrated educational experiences where they will learn that each human being has value and dignity.

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