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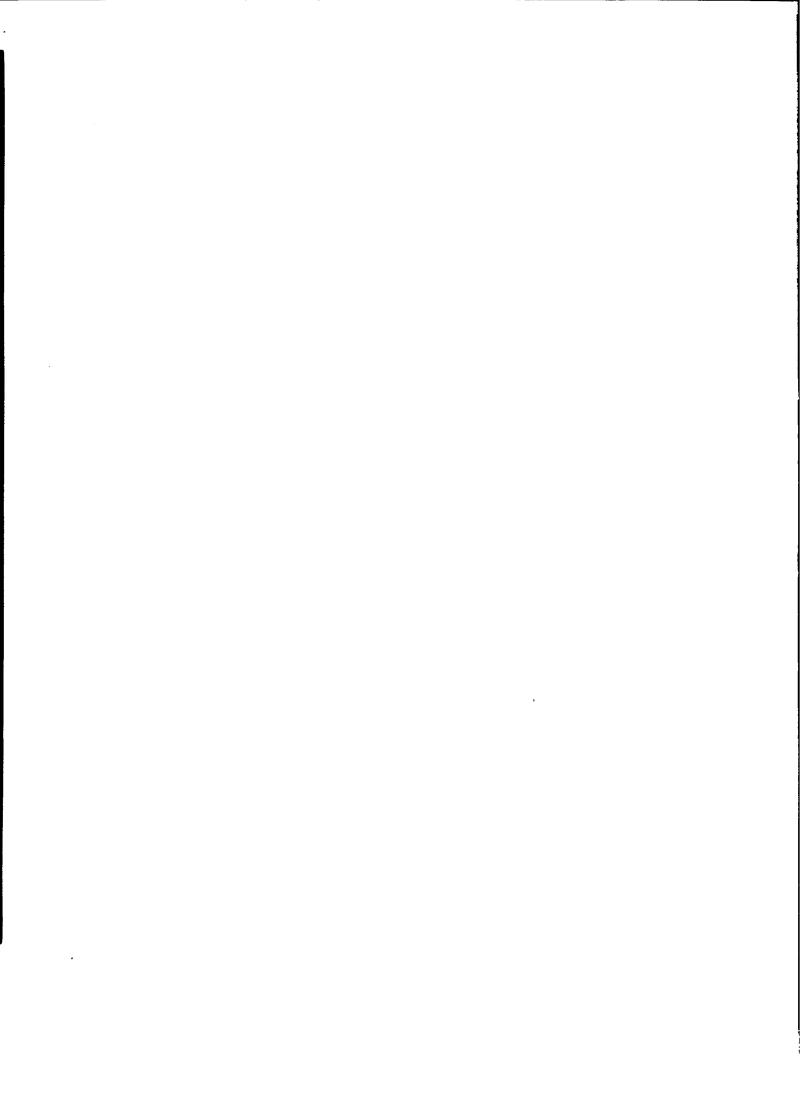
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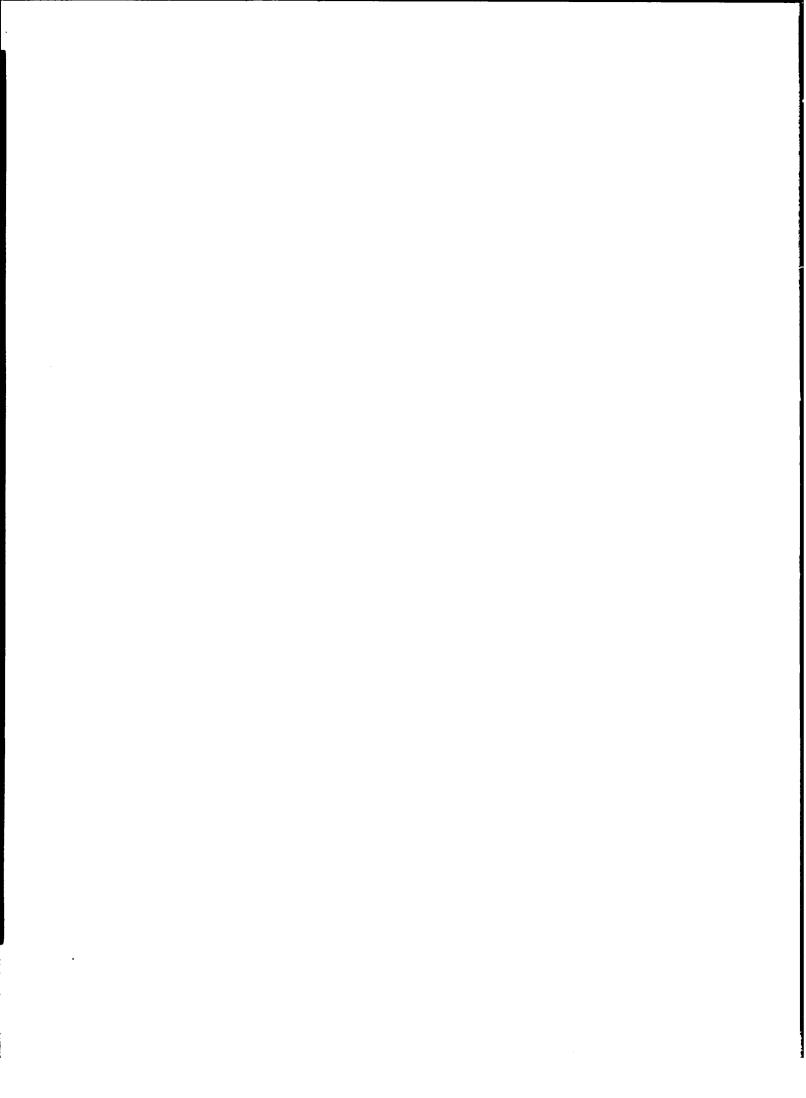
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PROGRESS IN MENTAL RETARDATION ACCORDING TO THE CONTENT OF TEXTBOOKS PUBLISHED BETWEEN 1960 AND 1980

The University of Oklahoma

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THE UNIVERSITY OF OKLAHOMA GRADUATE COLLEGE

PROGRESS IN MENTAL RETARDATION ACCORDING TO THE CONTENT OF TEXTBOOKS PUBLISHED BETWEEN 1960 AND 1980

A DISSERTATION

SUBMITTED TO THE GRADUATE FACULTY

in partial fulfillment of the requirements for the

degree of

DOCTOR OF PHILOSOPHY

BY

MENTORRY DEBOSE NICHOLS

Norman, Oklahoma

1982.

PROGRESS IN MENTAL RETARDATION ACCORDING TO THE CONTENT OF TEXTBOOKS PUBLISHED BETWEEN 1960 AND 1980

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Dissertation Committee

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UNIVERSITY OF OKLAHOMA NORMAN, OKLAHOMA

Menttory DeBose Nichols-Dewberry
1982

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PROGRESS IN MENTAL RETARDATION ACCORDING TO THE CONTENT OF TEXTBOOKS PUBLISHED BETWEEN 1960 AND 1980

Introduction

Mental retardation, a topic of much concern, has been a matter which has been long neglected for many reasons.

Families of retarded children, puzzled and feeling lost, often with no where to turn for help or guidance, felt guilty, but kept the retarded hidden, as though in closets.

And as a result, community prejudice and bias against them who could not after all help themselves or demand legislative acknowledgment, helped maintain or foster attitudes toward the retardate that worked against alleviating their condition. It has been only in the last few decades that we have seen a significant change in attitude and a somewhat concerted development of programs and agencies on the local as well as the national level, and the passage of laws dealing with the treatment of the mentally handicapped. The subject of mental retardation is now openly discussed

in the popular press and on television talk programs—
largely as the result of the disclosures by such prominent
figures as the late President Kennedy and the late Senator
Hubert Humphrey that members of their families are mentally
retarded.

It was to be expected then, that textbooks in college universities should reflect a growing willingness to deal with mental retardation and should also reflect a concern for the training of special educators for the mentally handicapped.

The many changes that have taken place in the field of special education over the past twenty years have been dramatic. The changes affecting mental retardation in those twenty years in particular, have increased tremendously compared to the previous decade. Nevertheless, these changes have not come about without many court decisions.

Two Public Laws, 85-926 and 87-2761 set the stage for the most spectacular legislation that had ever been passed by the federal government in behalf of the education of handicapped children, Public Law 88-164. In 1963 Public Law 85-926 was amended (PL 88-164) to provide stipends and dependency allowance for persons preparing for careers in special education, specifically teachers, supervisors, speech correctionists, scientists, and administrators in the areas of mental retardation, serious emotional disturbance, speech and hearing impairment, deafness, visual handicapped, crippling, and other impairments. (McCarthy and McCarthy, 1971, p. 116)

Probably the most widely known court case brought on behalf of a minority child who had been classified as mentally retarded in Diana vs the State of California (1970). In this case in which the court was found to be in favor of the child, six mandates were issued to the state four of the mandates related to the use of intelligence tests with minority children. The mandates issued by the court were:

- 1. The child must be tested in her native language.
- The child should be retested with a nonverbal test of intelligence.
- The state was directed to develop ethnic norms for intelligence tests.
- 4. The district must make plans for revising testing programs.
- Districts had to present an explanation for ethnic, disproportions in special classes.
- 6. The districts were directed to provide transitional programs which would aid decertified EMR children to move into regular educational programs.

Only the last provision was truly educational in nature. In most of the litigation pertaining to the issue of the disproportionate representation of minority children in special classes, the primary issue dealt with the use of verbal intelligence with which to identify such children or mentally retarded (MacMillan, 1973, p. 3).

However, the disproprionate representation of minorities in special classes remains one of the most controversial issues, if not the most controversial, in special
education in America. The general unrest of more and

more minority groups has been, and is still, the main force in the demand for a new and different, a more valid, approach to classification. Because of the continuous pressure of the more militant minority groups, state and local authorities are looking specifically at the intentions and the structure of existing education programs to see whether special education does discriminate against minorities.

The changes in programs in the past twenty years has been varied, and many educators, and school districts have advocated the mainstreaming of students requiring special education. One of the most significant effects of the controversial mainstreaming movement, as well as the movement for racial integration, is the realization that the language to describe or label children significantly affects the way in which an attempt to meet their educational needs is processed.

Statement of Problem

Because mental retardation afflicts not only a few numbers of our society, it is/or should be, an integral part of teaching and a part of the preparation of teachers. Therefore the aim of this study was to determine whether observed changes over the past twenty years in the field of special education were reflected in the content of

textbooks used in college and university teacher training programs. This study, which was based on a content analysis of textbooks, has therefore, been limited to textbooks treating specifically mental retardation, but not other areas of special education. Moreover, mental retardation will be defined according to the American Association on Mental Deficiency:

Mental retardation refers to significantly subaverage general intellectual functioning existing, concurrently with deficits in adaptive behavior, and manifest during the developmental period (Grossman, 1977, p. 5).

Review of Related Literature

An extensive and thorough search of literature and materials in the areas of mental retardation, including textbooks, dissertations, periodicals, and journals revealed a growing concern for the education of the mentally retarded between 1960 and 1980, especially in the contents of textbooks published in that time. Sources used included, The American Book Publishing Record, Cumulative, 1950-1977, and the Subject Guide To Books in Print, 1958-78-80 and Books in Print. As a result of this search, it was discovered that a systematic analysis of books published in the field of Mental Retardation for use in colleges and universities, had not been undertaken, although there

was ample evidence of interest in the subject. Of the several books that included a large selection of materials on mental retardation only twelve were found that were written and published for use specifically in colleges and universities.

Excerpts from some of the books selected have been listed from the time period 1960-1980. To facilitate matters, these books were divided into four time periods: 1960-1964; 1965-1969; 1970-1974; 1975-1980. A brief review of randomly selected books used in this study follows.

Ingall stated that part of the problem in dealing with mental retardation was the prejudice surrounding it.

As a result of the value that is usually placed on intellectual competence, perhaps the most serious accusation that can be leveled against someone is that they are deficient in intelligence (those people who have been labeled as mentally retarded)..., these people have traditionally suffered some of the worst degradations that our society can heap on people and even today, in these supposedly enlightened times, prejudice against the mentally retarded is still widespread (Ingall, 1978, p. 1).

Jordan was concerned with wider effects of mental retardation, when he said that the problem of mental retardation affected human lives, especially the family of the mental retardate, and limited the careers of the mental retardate and the family who lived with him.

While mental retardation poses challenges to teachers and physicians, it poses problems of infinite complexity

to parents. Mental retardation is a problem in human terms, primarily. . .only by seeing how lives are affected can one move to the more segmented turn-cated aspects of the disorders with any sense of urgency (Jordan, 1961, p. 67).

Since mental retardation presented many challenging technical problems to solve, this author stressed the importance of considering first the behavior of the individual rather than relying on arbitrary I.Q. standards and levels of attainment. He quoted the American Association on Mental Deficiency, 1959 Monograph Supplement:

Mental retardation refers to subaverage general intellectual functioning which originates during the developmental period and is associated with impairment in one or more of the following, (1) maturation, (2) learning (3) social adjustment (Jordan, 1961, p. 24).

Within the framework of the present definition, Jordan also said that mental retardation is a term descriptive of the status of the individual with respect to intellectual functioning and adaptive behavior.

Weber, in Mentally Retarded Children and Their

Education, commented upon trends in the treatment of mental retardates and claimed that trends showed rapidity of changes. Part of the explanation was that more attention was now given to the problem and more parents were demanding that their children be given equal opportunities in the community and in the schools. Furthermore, more

stress was being placed on trying to identify, classify, test and properly place the mentally retarded child in a program in which he would be able to succeed and work according to his own capabilities.

There is an increasing interest in the needs of mentally retarded children on the part of the various states legislators. This is evidenced by appropriations made by them for training and health care programs. Another important trend is to place children in groups according to their chronological age and I.Q. This is done so as to establish a program with integrated and sequential steps through the childs life (Weber, 1963, pp. 56-59).

In addition, more schools are stressing the mental retardates' mental age, rather than his I.Q. The tendency prevails for schools to be more careful or "selective" about their testing. There is increased concern over the tests administered and accurate interpretation.

Weber claimed that:

based on present knowledge, the <u>casual</u> factors in mental retardation may be divided into two broad categories:

- Mental retardation is caused by incompletely understood psychological, environmental, or genetic factors without any evident damage of the brain.
- 2. Mental retardation is caused by a number of specifically identified conditions or diseases (Weber, 1963, pp. 37-39).

Generally, educators and authorities in the field of mental retardation seemingly divide these (M.R.)

children into three groups:

- Totally dependent mentally handicapped I.Q. below 30 on individual group testing.
- Trainable mentally handicapped range from 25-50;
 30-55 moderately mentally retarded.
- 3. Educable mentally handicapped. . .I.Q. 50-70; 55-79.

In the next ten years, as new programs demonstrated potential and abilities in various groups of the retarded, extended or additional services and guidelines would be needed. For example, the increase in the numbers of trainable children being offered school programs for the first time will necessitate making plans for them after this school experience. Thus, new demands will arise for information about services to the mildly retarded who, after limited amounts of schooling, pass into adult society where they no longer are identified as retarded.

In reviewing trends in the education of the mentally retarded, Willey and Waite claimed that:

the all "New Look", a term including contemporary trends and issues in Mental Retardation, was beginning to appear in education. It blended both new and old and, hopefully, forecast a brighter future for all mentally retarded people (1964, pp. 5-6).

Recent changes, moreover, were reflected in new modes of expression which indicated alterations in thinking and values. As the term "feebleminded" gave place to

"Mental Deficiency," this in turn changed to "Mental Retardation." These changes in terminology indicated a tendency away from precise clinical diagnosis toward a more general appraisal descriptive evaluation of total aptitudes. They believed that, in consideration of what was meant by "M. R.," many factors beside the intelligence quotient, such as nature of the intellectual development of the child and the many conditions that surround him, must be considered.

Since many efforts had been made by people to define and explain mental retardation, none could be certain that their proposed definition was better than others. With the many different kinds of mental retardation, it was doubtful that any one definition could describe all cases, hence the need for more general appraisals of the mental retardate as a person. The authors warned that since there was no universal agreement as to the classification of children who were mentally retarded, precise scientific approach had not been developed, and in some respects, classification could be no more than an arbitrary matter.

In addition to the changes in the profession, Willey and Waite (1964) claimed that:

the public's view of the mentally retarded child has begun to change. There is a tendency to drift away from the precise clinical diagnosis toward a more general appraisal of one child as a person and with more evaluation to his total individual aptitudes (1964, pp. 19-20).

In the past few decades, it has become increasingly clear that society cannot afford to neglect or despoil its natural resources without serious consequences to all of life. People who are mentally retarded are now being recognized as possessing the potential for leading useful, satisfying lives and contributing to the welfare of society. All that is needed to realize that potential is an intelligent program of services and training of the right kind in the right place at the right time. The universal establishment of these services is a considerable challenge, but, as has been the case in other fields of conservation, the returns on such investments are not only very high, but also have a permanent effect of lifting life to a higher plane of enjoyment.

It is hypothesized that, in most recent textbooks:

- 1. More content will be devoted to Administration

 Matters, and Legal Issues, than in textbooks published at the beginning of the period in question.
- 2. More space will be devoted to Advocacy and Therapeutic Condition, than in textbooks published at the

beginning period in question.

- 3. Less space will be devoted to the <u>Clinical Picture</u> and <u>History</u>, than in textbooks published at the beginning period in question.
- 4. More space will be devoted to <u>Characteristics and</u>

 <u>Etiology of Mental Retardation</u>, than in textbooks published at the beginning period in question.
- 5. More space will be devoted to <u>Cerebral Palsy</u>, than in textbooks published at the beginning period in question.
- 6. More space will be devoted to Education, Guidance,

 Training, Language and Curriculum, than in textbooks

 published at the beginning of the period in question.
- 7. More space will be devoted to Environment, Home,

 School, Church, Community and Independent Living, than
 in textbooks published at the beginning of period in question.
- 8. Less space will be devoted to <u>Patterns of Development</u>
 and <u>Theories of Development</u>, than in textbooks published
 at the beginning of period in question.
- 9. More space will be devoted to <u>Pre-School</u>, than at the beginning of period in question.
- 10. Less space will be devoted to <u>Psychodiagnostic</u>, than in textbooks published at the beginning of period in question.

- 11. More space will be devoted to <u>Recreation</u>, than at the beginning of period in question.
- 12. More space will be devoted to <u>Research</u>, than in textbooks published at the beginning period in question.
- 13. More space will be devoted to <u>Trends and Current</u>

 <u>Views</u>, than in textbooks published at the beginning of the period in question.
- 14. More space will be devoted to <u>Rehabilitation</u>,

 <u>Vocational Institutions</u>, and <u>Residential Living</u>, than in

 textbooks published at the beginning of period in question.
- 15. More space will be devoted to the <u>Trainables</u>,

 the Severely Retarded and the Profoundly Retarded, than in
 textbooks published at the beginning period in question.

Definition of Terms

Mental retardation refers to significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior, and manifested during the developmental period.

General Intellectual Functioning is defined as the results obtained by assessment with one or more of the individually administered general intelligence tests developed for the purpose. Significantly Subaverage is defined as IQ more than two standard deviations below

the mean for the test.

Adaptive Behavior is defined as the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected for age and cultural groups.

Developmental Period is defined as the period of time between birth and the 18th birthday.

Levels of Mental Retardation

It is recommended that the terms Mild, Moderate,

Severe, and Profound be used to describe levels of

retardation. Mild retardation is roughly equivalent

to the educational term "educable"; moderate retardation

includes those individuals who are likely to fall into

the educational category of "trainable"; the severe

group includes individuals sometimes known as "dependent

retardes": individuals in the profound retardation level

are among those sometimes called "life support" level.

(Grossman, 1977, pp. 11, 18, 19).

CHAPTER II

Method

This research involved five sections. Section one included the search for and selection of textbooks on mental retardation written and published for colleges and universities. Section two described how the content areas were selected for analysis and the isolation of categories. Section three described procedure or methodology. Section four included the method of analysis, data, findings, interpretation of results (including a shift of emphasis within the last twenty years), and legal issues. Section five presents a summary of the findings and implications and/or discussions, and recommendations for further study.

Limitations

The textbooks regarding mental retardation were limited in this study to those written for use in colleges and universities. The textbooks were published in the

United States and are listed in <u>Books in Print</u>; <u>Books</u>

<u>Printed in the United States of America</u>; <u>American Book</u>

<u>Publishers Records</u>; Cumulative 1950-1980. This study was further limited to those textbooks published from 1960 through 1980. Also, this study excluded: (1) Annual Reviews, (2) Books on Reading, (3) Anthologies, (4) Manuals (5) Handbooks. A library search was also conducted and a number of 12 books were found which met the criteria and time periods, respectively, according to date of publication. Period One: 1960-1964; Period Two: 1965-1969; Period Three: 1970-1974; Period Four: 1975-1980. Perhaps other books had been published since this study and some others may have been inadvertently overlooked. However, to the best of this writer's knowledge, the books collected represented the total population.

To investigate more effectively the existence of changes and trends, the books were divided into four time periods of five-year intervals, thus allowing for the comparison of emphasis and trends between the various time periods and within individual five year periods. Of the twelve books found for analysis, period one contained three books; period two, one book; period three, five books; and period four, three books. The books used for analysis are listed in Table 1 under the respective time periods.

Table 1

Textbooks for Analysis Listed by Title and Author within Respective Time Periods

Author	Title	Date
Time Period One (1960	-1964)	
Jordan Weber	The Mentally Retarded Mentally Retarded Children and Their Education	1961 1963
Willey and Waite	The Mentally Retarded Child	1964
Time Period Two (1965	-1969) The Mentally Retarded	
RODINSON AND RODINSON	Child	1965
Time Period Three (19	70-1974)	
Smith	An Introduction to Mental Retardation	1971
Jordon	The Mentally Retarded	1972
Kolstoe	Mental Retardation	1972
Schlanger Love	Mental Retardation The Mentally Retarded Child	1973
	And His Family	1973
Time Period Four (197	5-1980)	
Ingall Sellins	The Changing Outlook Mental Retardation Nature,	1978
Cleland	Needs, and Advocacy The Profoundly Mentally	1979
	Retarded	1979

Procedure

Establishing the content categories for use in the content analysis required that each book be repeatedly analyzed and evaluated to determine what subjects, and the degree to which they were presented. After all twelve books were obtained, successive analysis of the contents of each was made to establish lists and categories of the types and subjects of content presented within the textbooks. This information was broken down into subject areas by noting every separate subject listed on individual author pages, according to those previously listed. Some of the titles or categories were selected in view of suggestions given in the review of the literature. Some were selected on the basis of their content observed during the preliminary analysis. Others were selected on the frequency of repetition of individual (subjects or topics). For all categories established, the writer attempted to make them as comprehensive and still as discrete as possible in order to place all of the selected written materials into a category. Initially, this resulted in over forty-five different categories of material to be established and labeled.

In establishing these categories it was possible to evaluate the contents of the books by a count of those

pages emphasizing a specific topic and placing them under the authors and defined category. According to these results, the content areas were either made more specific or were combined to establish broader categories.

However, some categories with very limited amounts of material were retained on the basis of the validity of analysis.

Area Content Specification

The final content categories or areas were selected defined, and labeled, according to the preliminary content evaluation and analysis. The content areas or topics were established, with each category listed according to its tables.

- I. Administration. This section is comprised of various types of information: kinds of administrative structures (which the primary function in the area of school policies), personnel practices, discipline of school and/or classroom environment, and attitudinal changes.
- II. Advocacy. This section involves various supportive agencies, groups.
- III. <u>Clinical Picture</u>. This section deals with diagnosis of mental retardation, prescriptive drugs, and various

medical conditions (example - brain damage).

- IV. Characteristics. This section deals with some of the motor and mental characteristics, behaviors, social and emotional problems of mental retardates.
- V. <u>Cerebral Palsy</u>. This section deals with some of the major causes or etiology, growth and characteristics, and defines the general condition and heredity.
- VI. <u>Education</u>. This section includes basic provisions for special education, curriculum, language placement, testing, guidance therapeutic consideration, labeling, and mainstreaming methods.
- VII. Rehabilitation. This section includes vocational rehabilitation and institutions and residential living.
- VIII. <u>Etiology</u>. Sources and causes, etiology factors, heredity and cultural familiar factors are included in this section.
- IX. <u>Family of the Mentally Retarded</u>. This includes parents and siblings of the mentally retarded, acceptance of the mentally retarded, patterns in counseling.
- X. <u>Home School Community and Environment</u>. This section includes the scope of educational and vocational preparation services, scope of supportive services and objectives, out reach to minority groups, and Independent Living.

- XI. <u>History</u>. (Chronology) Historical and current events in the field of mental retardation are included in this section.
- XII. <u>Legal Issues</u>. This section discusses the Federal and state involvement in rights of children, and Public Laws (P.L.)
- XIII. Mental Retardation. This section defines mental retardation and differentiates between mental retardation and mental illness.
- XIV. Patterns of Development and Theories of Development.

 This section deals with the fact that one can build theories of development on several scales and that there are individual differences in the pattern of developmental growth.
- XV. <u>Psychodiagnostic</u>. This section points out that diagnostic judgments about children are difficult to make, also includes Case Studies.
- XVI. <u>Pre-School</u>. This section deals briefly on the advantages of Pre-school and the importance of early direction of mental retardation.
- XVII. Research. This section deals with some of the ways by which people inquire into problems, with emphasis being placed on ideas involved not on the techniques.

XVIII. Trainables, Severely Retarded and Profoundly Retarded.

This section includes the important distinctions between severely retarded, the mil.ly retarded, and profoundly retarded. Specific topics considered under each respective category are listed in Appendix A.

Only subject content was used in the analysis.

Prefaces, introductions, tables of content, appendices, indexs and footnotes were not considered. Pages revelant to each category were counted. If pages were over one-half length devoted to the appropriate material, it was considered as one page, whereas pages with less than one-half were not counted. Each of the twelve texts was analyzed separately. The number of pages devoted to each category was converted to percentages in view of the total number of content pages within the text. Within each time period the page counts were combined and converted to percentage for the sake of comparison over time.

CHAPTER III

Results

Table A through L in Appendix B will show raw data tabulation of content analysis for each author. Also shown in these tables is the total number of content pages for each area of investigation.

In Appendix C, Tables A through O indicate the raw data results for the content category, across book and time period. Also shown in these data are the date of publication for each book and the total content pages for each book, divided into four time periods (1960-1980), as well as the total number of each area according to the specific content category and subheading. The latter information converted into percentages.

Two pages were set up for easy analysis and interpretation. Table 1 shows the name of the author, the title of the book, and the publishing date in each time period.

Table 2 shows the number of books, the total pages of content, and the percentages for every book in all four

Table 2

Total Number of Content Pages for Texts and Time Periods

Authors	Date of	Total Pages	% of Total
	Publication	of Books	Pages of Content
Time Period One (1960-196	54)		
Jordan	1961	340	90%
Weber	1963	306	80%
Willey and Waite	1964	232	90%
Total		878	85%
Time Period Two (1965-196	59)		
Robinson	1965	546	90%
Total		546	90%
Time Period Three (1970-	1974)		
Smith	1971	257	90%
Jordan	1972	599	90%
Kalstoe	1972	208	90%
Schlanger	1973	47	80%
Love	1973	<u>195</u>	<u>90%</u>
Total		1,304	88%
Time Period Four (1977-19	980)		
Ingalls	1978	451	90%
Sellin	1979	463	80%
Cleland	1979	188	90%
Total		1,102	88%

time periods. In the first time period (1960-1964), there is a total of 878 content pages, or 85 percent. In the second time period, (1965-1969), there is a total of 546 pages, or 90 percent. (Only one book, however, was found in this time period). In the third time period (1970-1974), there is a total of 1,304 content pages, or 88 percent. Finally in the fourth time period, the total is 1,102 content pages, or 88 percent.

Two Summary Tables were set up. Summary Table 3 shows the content category converted into percentages and listed under the designated content category, while Summary Table 4 shows the results of tabulation of the analysis of pages, using content categories across books and time periods indicating percentages for all periods. It includes a fifth column to show tabulated results across all time periods (1960-1980).

The content categories showing the least amount of emphasis in the various time periods are the following: for Trends and Current Events time period one (1960-1964) shows 1%, the other three time periods show less than 1%: .5%, .6%, .5%, respectively. The second category, Administration and Legal Issues, shows in the first time period (1960-1964) 1.6%; the second time period (1965-1969),

Table 3

Results For Each Author Across All Time Periods

	Author	Administration & Legal Rights	Advocacy & Therapeutic	Clinical Picture and History	Characteristics, Mental Retardation & Etiology	Cerebral Palsy
ı.	Jordan	~-	7%	7%	13%	8%
	Weber	.3%	10%	6%	3%	
	Willey and Waite	.1%		6%	13%	
	Totals	.4%	17%	19%		
II.	Robinson and					
	Robinson	~-	4%	4%	21%	.5%
	Totals		4%	4%		
III.	Smith	~-	1%	7%	22%	
	Jorđan	. 3%	7%	4%	11%	1%
	Kolstoe		10%	2%	18%	
	Schlanger		25%	23%	4%	
	Love	.5%		16%	8%	
	Totals	.8%	43%			
IV.	Ingalls	. 1%	2%	6%	14%	.6%
	Sellin	.5%	8%	2%	12%	
	Cleland	. 1%	2%	1%	1%	
	Totals	.7%	12%			

Table 3, continued

Results For Each Author Across All Time Periods

	Author	Education, Guidance Training, Language and Curriculum	Environment, Home Church, School, Community Living	Theories of	Pre-School	Psychodiagnostic
I.	Jordan	6%	20%	4%	. 2%	8%
	Weber	6%	30%		2%	.9%
	Willey and Waite	10%	31%	5%		1%
	Totals					
II.	Robinson and					
	Robinson	3%	27%	13%	1%	12%
	Totals					
III.	Smith	11%	15%		15%	3%
	Jordan	13%	11%	12%		7%
	Kolstoe	27%	3%			8%
	Schlanger	29%	2%			
	Love	7%	37%	1%		
	Totals					
IV.	Ingalls	14%	25%	3%	1%	3%
	Sellin	6%	31%	1%	1%	
	Cleland	5%	5%			
	Totals					

Table 3, continued

Results For Each Author Across All Time Periods

	Author	Recreation	Research	Rehabilitation, Vocational Instit. & Residential Living	Trends and Current Views	Trainables, Severely Retarded, Profoundly Retarded
ı.	Jordan		. 2%	9%		2%
	Weber	2%		.6%	3%	6%
	Willey and Waite	,		2%	.4%	9%
	Totals					
II.	Robinson and					
	Robinson		4%	1%	.5%	. 1%
	Totals					
II.	Smith		3%	6%		.7%
	Jordan		5%	11%	***	.3%
	Kolstoe					
	Schlanger					
	Love	12%	4%	2%	.5%	1%
IV.	Ingal ls		5%	6%	2%	4%
	Sellin		3%	9%	3%	.8%
	Cleland	12%	4%	4%	.5%	50%
	Totals					

Table 4

Results of the Analysis of Pages Using Content Categories Across Books and Time

		Time Periods			
Content Category (1	One 1960-1964) Percent	Two (1965-1969) Percent	Three (1970-1974) Percent	Four (1975-1980) Percent	Time Periods (1960-1980) Percent
Administration and					
Legal Issues	1.6%		. 2%	3%	1.3%
Advocacy and Therapeutic Consideration	6%	4 %	6.3%	4.6%	1.2%
Clinical Picture and History	6.9%	4 %	10%	3.9%	6.5%
Characteristic Etiology Mental Retardation	10%	21%	13%	. 1%	5%
Cerebral Palsy	3%	.5%	.4%	. 2%	1%
Education, Guidance, Training, Language, Curriculum	8%	3%	15%	9%	10%
Environment, Home, School, Church, Community and Independent Living	28%	2 7 %	1.3%	2 2%	22.4%
Patterns and Theories of Development	3%	13%	6%	2%	5%

Table 4

Results of the Analysis of Pages Using
Content Categories Across Books and Time

	Content Category	One (1960-1964) Percent	Time Pe Two (1965-1969) Percent	riods Three (1970-1974) Percent	Four (1975-1980) Percent	Across All Time Periods (1960-1980) Percent
9.	Pre-School	1%	1%	3%	1%	1.5%
10.	Psychodiagnostic	4%	1%	5%	1%	5%
11.	Recreation	1%		2%	2%	1%
12.	Research	1%	4%	3%	4%	3%
13.	Rehabilitation, Vocational Institutions, Res. Living	4%	1%	6%	7%	6%
14.	Trends and Current Views	1%	.5%	.6%	.5%	1%
15.	Trainables, Severely Retarded and Profoundly Mentally Retarded	5%	.1%	.5%	11%	5%

zero %; the third time period (1970-1980) shows .2% and the fourth time period 1975-1980, 3%. The third category Cerebral Palsy shows 3% in the first time period, and periods two, three, and four show .5%, .4%, .2%. The category that shows the greatest amount of emphasis across all time periods is Environment, Home, School, Church, Community, Independent Living, recording 28%, 27%, 13%, and 22%, respectively. The category Characteristics, Etiology of Mental Retardation was the second highest in increased emphasis. The first time period (1960-1964) records 10%; the second time period (1965-1969), 21%; the third time period (1970-1974), 13%, but the fourth time period (1975-1980) shows a drop to only .1%. The third category, which showed the greatest emphasis, Education, Guidance, Training, Language, Curriculum, records in the first time period (1960-1964) 8%; the second time period (1965-1969), 3%; the third time period (1970-1974) records an increase to 15%, while the fourth time period (1975-1980) shows 9%.

The numbers of pages in the various texts analyzed in this study for respective categorization were used to evaluate the proposed hypotheses. Some of the

hypotheses were not supported by the data as expected.

Hypothesis 1: More content will be devoted in works published in the latter years of the study period to Administration Matters and Legal Issues than in textbooks published at the beginning time period in question.

This hypothesis does not hold true for the second and third time period, which show 3% and .8% of coverage respectively. The first time period (1960-1964) shows 1.6%, the fourth time period (1975-1980) shows 3%.

Hypothesis 2: More space in the latter period will be devoted to Advocacy and Therapeutic Conditions.

This hypothesis does not hold true in time periods two (1965-1969) and time period four (1975-1980) shows 4% and .6% respectively. Time period one (1960-1964) shows 6%, time period three (1970-1974) shows 6.3%.

Hypothesis 3: Less space will be devoted to works published in latter years of this study period to Clinical Picture and History.

This hypothesis is supported by the data with the exception of time period three (1970-1974), which shows a 10%.

Time period one (1960-1964), two (1965-1969), and four shows 6.9%, 4%, and 3.9% respectively.

Hypothesis 4: More space will be devoted in works published in the latter years of this study period to Characteristics and Etiology of Mental Retardation.

This hypothesis is also supported by the data with the

exception of time period four. Time period one shows 10%, time period two, 21%, time period three, 13%, while time period four shows only .1%.

Hypothesis 5: More space will be devoted in works published in the latter years of this study period to Cerebral Palsy than in textbooks published at the beginning of time period in question.

This hypothesis did not hold true; while time period one shows 3%, there is a continued drop in time periods two, three, and four, showing .5%, .4%, and .2%, respectively.

Hypothesis 6: More space will be devoted in works published in latter years of this study period to Education, Guidance, Training, Language, Curriculum, than in textbooks published at the beginning of time period in question.

This hypothesis is supported by the data with the exception of time period two (1965-1969) showing 3%. In time period one (1960-1964), the percentage shown is 8%, in time period three (1970-1974), the percentage shown is 15%, and in time period four (1975-1980), the percentage is 9%.

Hypothesis 7: More space will be devoted in works published in the latter years of this study period to Environment, Home, School, Church, Community, and Independent Living, than in textbooks published at the beginning time period.

This hypothesis is not supported by the data. Time period one (1960-1964) shows 28%; time period two (1965-1969) shows a drop of one percent to time period three (1970-1974) which shows 13%; time period four (1975-1980) shows an

increase to 22%, but still less than the percentage for period one.

Hypothesis 8: Less space will be devoted in works published in the latter years of this study period to Patterns of Development and Theories of Development, than in textbooks published at the beginning time period in question.

This hypothesis was not supported by the data. Time period one (1960-1964) shows 3%. Time period two (1965-1969) shows 13%, indicating a large increase in emphasis placed on Pattern and Theories of Development. Time period three (1970-1974) shows 6%, whereas time period four (1975-1980) shows 2%, the least space devoted this hypothesis.

Hypothesis 9: More space will be devoted to works published in latter years of this study period to Pre-School.

This hypothesis is not supported by the data. Time period one (1960-1964), time period two (1965-1969), and time period four (1975-1980) show the same percentage, 1%, while time period three (1970-1974) shows 3%.

Hypothesis 10: Less space will be devoted to works published in latter years of this study period to Psychodiagnostic, than in textbooks published at the beginning time period in question.

This hypothesis holds true with the exception, however, of time period three (1970-1974), which shows a percentage of 5%. Time period one (1960-1964) shows 4%, whereas both time period two (1965-1969) and time period four (1975-1980)

show 1%.

Hypothesis 11: More space will be devoted to works published in latter years of this study period to <u>Recreation</u> than in textbooks published at the beginning time period in question.

This hypothesis holds true. Time period one (1960-1964) shows 1%, and time period two (1964-1969) does not show enough emphasis to register. But both time period three (1970-1974) and time period four show 2% (1975-1980).

Hypothesis 12: More space will be devoted to works published in latter years of this study period to Research than in textbooks published at the beginning time period in question.

This is a hypothesis fully supported by the data. Whereas time period one (1960-1964) shows 1%, time period two (1965-1969) and time period four (1975-1980) show 4% each, and time period three (1970-1974) shows 3%.

Hypothesis 13: More space will be devoted to works published in latter years of this study period to Trends and Current Views than in textbooks published at the beginning time period in question.

This hypothesis is not supported by the data. Time period one (1960-1964) shows 1%, time period three (1970-1974) shows a drop to .6%, and both time periods two (1965-1969) and four (1975-1980) show only .5%.

Hypothesis 14: More space will be devoted to works published in latter years of this study period to Rehabilitation, Vocational Institution, and Residential Living than in textbooks published at the beginning time period in question.

This data supported the hypothesis, with the exception of time period two (1965-1969) which shows only 1%.

Time period one (1960-1964) shows 4%; time period three (1970-1974) shows 6%, and time period four (1975-1980), 7%.

Hypothesis 15: More space will be devoted to works published in latter years of this study period to the <u>Trainables</u>, the <u>Severely Retarded</u> and the <u>Profoundly Mentally Retarded</u>, than in textbooks published at the beginning time period in question.

This hypothesis is not noticeably supported, as expected. During the first time period (1960-1964) the percentage is 5%; in the second time period, (1965-1969) 1%; in the third time period (1970-1974) .5%, but the fourth time period (1975-1980) more than doubles the first time period, revealing the highest emphasis with 11%.

The percentages in all time periods are shown in summary Table 4. In order to make handling of the data not only more meaningful but also more practical, it was necessary to combine several categories under more significant major divisions. Therefore, because of the necessity at the time of combining many topics within single major content areas, a comprehensive indication of all subject areas or categories is not found in the results. The results do, however, indicate general overall

patterns of development in the coverage of the problems related to mental retardation.

An encouraging trend, as revealed by the content of recent studies of the mentally retarded has been the tendency to accent the positive. Mental retardate as a designation is no longer synonymous with subhuman, and so contemporary authors stress what can be done: what the mentally retarded can be taught and, once trained, what they can do themselves. The point most often stressed is that there is a place for them in society, not shut away from it, and that there are functions which they can fulfill. In other words, the problem now is seen in human terms, and so what various authors emphasize, among many concerns, is how mental retardation affects people. They are concerned with adaptive behavior -- the term itself suggesting hope and possibilities for fuller lives than once were believed possible. Emphasis now is placed upon preparation of the mentally retarded so that eventually they may pass into adult society where they no longer will be identified as retarded, thanks to their preparation and training.

Since such an optimistic view is finally possible, recent studies have been more concerned with matters that formerly seemed beyond the capabilities of the mentally

retarded: development, recreation, rehabilitation,
vocations and vocational training, and residential living.

In other words, the idea of "keeping" the mentally retarded,
whether at home or in an institution, has been replaced
by the possibility that, with accurate diagnosis, with
consideration of the individual aspects and need within
each case, and with careful training, many retardates
can assume, as others do, the responsibility of managing
their own affairs. This new attitude can be seen, then,
as "ecological," for it is based upon the assumptions
that human lives and potential are at stake and that the
mentally retarded, like everyone else, possess resources,
of which the benefits must not be lost to society.

CHAPTER IV

Summary, Discussion, Conclusion, and Recommendation

This study was set up not only to discover the number of books published for use in colleges and universities from 1960-1980 on mental retardation, but also, more importantly, to discover the general and specific trends in the discussion of mental retardation in textbooks designed for use in colleges and universities in the decades 1960-1980, as shown by both the content presented and the amount of emphasis given to specific topics within the textbook. An analysis of content, therefore, was the method used to discover trends and shifts in emphasis.

Although there have been a great many books written concerning mental retardation and those disciplines closely related to its treatment, there have been relatively few textbooks on the mentally retarded written specifically for college and university use compared to the number of books published in related fields. Thus, it seemed fitting to analyze the textbooks on mental

retardation that were published for use in colleges and universities to discover trends and shifts in emphasis.

It was understood, moreover, that, having various backgrounds and experiences, authors would place varying and greater or lesser emphasis on different topics. Therefore, the purpose of this study was to evaluate the importance of emphasis upon specific topic areas as reflected by the percentage of the total content. The twelve textbooks from 1960-1980 that were used in this study were divided into four time periods of five years each. These time periods are shown in Table 4, in which a total of all content-categories across books and time is given. The fifth column shows a total percentage for all four time periods.

As recorded in this study, changes have taken place and new trends have emerged in the past two decades: first, the numbers of special classroom teachers being trained have grown tremendously; there have been major changes in curriculum and methodology; there is growth in resource rooms, teacher aides, Head Start programs (although the Head Start program has been phased out as such). Also a new emphasis became evident in residential care in the 1970's.

The changes for the better for the mentally retarded

in the last twenty years have been slow but constant, although the rate of change did accelerate in the 1970's. The Education for All Handicapped Children Act of 1975. Public Law (P.L.) 94-142, moreover gave a great stimulus to the treatment of all children with handicaps, and also encouragement to their parents and those advocates who work with them. A systematic review of these changes and the numerous textbook studies of mental retardation used in colleges and universities should prove beneficial to professional as well as students in the field of special education. Some, however, require further attention and study; recreation and sex education for the mentally retarded; provision of pre-school training, the use of drugs, labeling, the practice of mainstreaming, the role of advocacy, and the function of institutions. For instance, the subject of sex education for the mentally retarded is still thought of as taboo in many circles. Sellin, in his book Mental Retardation, quotes the opinion of Perske, Vockell and Mattick:

Historically there have been attempts to de-sex the retarded (in some instances, literally), deny their sexuality, or treat them as if they were sexual monsters. Sex education is gradual and lifelong, not a short course and ideally should be a parent responsibility. They further stated that the retarded person's need for guidance in sexual matters is greater than that of other people. Here, then, is another area of concern that could profit from increased attention and careful study (1979, p. 392).

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APPENDIX A

Specific Topics by Category

CATEGORIES

- I. l. Development of National Concern I. Administration
 - 2. Administration and Coordination
 - 3. White House Conferences and Recommendations
- II. 1. Objects and the Nature of II. Advocacy Advocacy
 - Normalization and the Advocate Relationship
 - 3. Dimensions of instrumental and expressive Advocacy
 - Helping relationships, objectives, foundation concepts,
 Systems and Contemporary Systems
 - 5. Special Task of the Relationship and imparting Diagnostic data.
- III. l. Genetic factors

III. Clinical Picture of Mental Retardation

- 2. Metabolic Disorders
- 3. Disorders of endocrimes (glands)
- 4. Infections (Physchological)
- 5. Injury (Prenatal & birth, Growth, Natal and Postnatal)
- New growth benign and cancerous
- 7. Drugs
- 8. Pre-maturity (defects)
- 9. Brain, Discussions in differential diagnosis

- 10. Down Syndrone (brain injury diagnosis)
- Clinical Picture of Mental Retardation
- 11. Clinical types and Teaching
- 12. Symptoms, Classification
- 13. Before child is born
- IV. 1. Characteristic Problem
- IV. Characteristics
- 2. Development of Intellect
- Mental and Motor Health (Sensoryperception, Sensory motor and maturation)
- 4. Characteristic of Syndromemental retarded adolescence
- 5. Characteristics of the Institutionalized
- 6. Classification of needs
- 7. School learning problems-Learning characteristics
- 8. Behavior: Characteristics,
 Theories of Behavior, Social
 Behavior and Needs, Behaviorism
 (Dimension Bases of Adoptive
 behavior, Adjusted behavior,
 Ambiguities in Behavior)
- Elementary and Levels I-IV
 Characteristics, Elementary school age
- 10. Social Competence and Emotions
- General suggestions and discussion of the mental retarded as a threat to others.
- 12. General discussion of the Characteristics of retarded individuals living alone

CATEGORIES

- 13. Functional Achievements.
- IV. Characteristics
- 14. Degrees and severity of mental retardation.
- V. 1. An Overview of Cerebal Palsy V. Cerebal Palsy

- (a) basic data
- (b) substantive nature of the problem
- 2. Technical Problems
 - (a) intelligence
 - (b) associated disorders
 - (c) problems of research methodology
 - (d) etiology
 - (e) care and guidance
 - (f) personality
- 3. Infection of the Brain
- 4. Social Vocational Efficiency (Skills)
- 5. General Discussion
- 6. Epilepsy
- VI. 1. Basis for Provision of Special Education (Curriculum (CA-MA) Primary, secondary instructional problem)
- VI. Education

2. Theoretical Problems

CATEGORIES

Education

VI.

- I. and II. Theory of Learning Methods - Teachers and Classes
- Tests, measurements, Educational intelligence
- Education of Mildly mental retarded (SMR) Elementary Level - In Public Schools
- 5. Language (The nature of)
 - (a) Categories aspect
 - (b) Syndrome and speech
- 6. Case Study
- Method Teacher Curriculum-Primary and Intermediate II, Early Childhood-Middle Adolescence
- 8. Detecting Mental Retardation Including Mildly. Defining Intelligence.
- 9. Conceptual Issues-Individualized educational plans.
- 10. Process-Variables-Interaction
- 11. Mental Retardation
- 12. General discussion-Education and the mentally retarded-Special classes
- VII. 1. Parents of the mentally retarded. VII. The Mentally Discovery-Mental Retardation at Retarded and birth. Family

CATEGORIES

- Acceptance of the facts that child is mental retarded. Mental Retardate and Family stress
- VII. The Mentally Retarded and Family
- Adjustments to having a Mentally retarded. (Emotions and stress) Placement and Social adjustment
- Special problems faced by the Mentally retarded's family. Financial problems.
- 5. Patterns in counseling-professional advice.
- 6. Strategies-Family types
- 7. The entire mentally retarded family-brothers and sisters (siblings) Family and child-rearing.
- Cultural-familiar factors-family problems, Retarded adults and employment.
- Parents needs-rights and sources available to parents.
- VIII. 1. Home and Public Schools

VIII. Environment, Home, School, Community and Independent Living

- Scope of educational and vocational preparation services.
- The community and the mentally retarded.
- 4. Schools and the mentally retarded. Clinic and social skills.
- 5. Community and state responsibility.
- 6. The community as the childs society.
 Bias in the community. Culture

6. (Specific influence) Citizens and Professional VIII. organizations. Responsibility of the community. The Community Clinics, Special Schools, the church as a part of the child's community.

CATEGORIES

VIII. Environment, Home, lity School, Community and mu- Independent Living

- 7. Vocational opportunity and employment.
- 8. Scope of supportive services and objectives and guardianship.
- Culture dilemma, Outreach to minority groups.
- 10. The emotions and the parents.
- 11. The mentally retarded child in the family-heredity and environment.
- 12. Counseling parents of the mentally retarded.
- 13. Vocational environment.
- 14. Environment deprivation and environmental factors.
- 15. Responsive environment and accountability and staff.

IX. l. Evidence

IX. History

- 2. Brief history of mental retardation
- 3. Social planning.
- 4. History of Intelligence testing (nature and measurements)

CATEGORIES

- 5. History of Standardization
- IX. History
- 6. Historical survey of mental retardation-men and ideas.
- 7. Philosophical background.
- 8. Piaget approach (to mental condition).
- 9. The retarded person in Historical content-and Historical survey of mental retardation.
- 10. Brief history of profound mental retardation.
- X. l. Objectives-Overview and dimension of quality
- X. Legal Issues or Aspects
- 2. An Interagency and social action
- 3. Scope of service goals and special concern.
- 4. Concepts of responsibility.
- 5. The individualized education plan (P.L.) Public Laws
- 6. Legal and/or Legislative perspective
- 7. Federal involvement in mental retardation, The President's Panel, The Court steps in.
- 8. Medicaid for the young
- 9. Legal reform
- XI. 1. Defining mental retardation- XI. Mental Retardation Classification

(Mental Health and Illness)

- 2. Differentiating between mental XI. Mental Retardation retardation and mental illness. Special approach to brain injured.
- (Mental Health and Illness)
- Prevalence of mental retardation-Curriculum for mental retarded (Handicapped-supervision)
- 4. Piaget's Theories of intelligence
- 5. Epidemiology
- 6. Labels-Labeling and the mentally retarded.
- Special education and training methods of the mentally retarded.
- Education-schools. 8.
- Issues related to special education
- 10. Mental health
- 11. Degrees of mental retardation
- 12. Adjustments of mildly retarded Adolescence and adults.
- 13. Frequency of mental retardation.
- XII. Patterns of Development Mind, mentally retarded and XII. developments; (As a Task)
 - 2. Disorders of Morphology, Disorders of body structure, Disorders of Chemistry.
 - 3. The Mechanism of Mental retardation
 - Cognitive development and Piaget's 4. Theory

CATEGORIES

- 5. Current status of the development theory.
- XII. Patterns of Development
- 6. Social relationships-Social and physical.
- 7. The Team approach.
- XIII. 1. Levels of Analysis

XIII. Psychodiagnostic

- 2. Evaluation (purpose) I & II
 & III. Mental age (MA) Intelligence I.Q.
- 3. Diagnostic (instruments)
 Limitation (of the Approach)
- 4. Educational tests (Reading and measurements & others). Perceptual
- 5. Intelligence Tests, Standardized tests.
- 6. Measure of Social development Differential diagnosis-Personality.
- 7. Theory and practice, Heterogeneous and Specialized Tests.
- 8. Special problems.
- 9. Case Study.
- Psychoanalytic-Theories of Learning.
- 11. Scales.
- 12. General discussions-Psychodiagnostic.
- XIV. 1. Pre-School training programs XIV. Pre-School

CATEGORIES

- Kuhlmon's Test for Infants XIV. Pre-School (18 mos.-2 years) General characteristics.
- 3. Standard Tests for children;
 - (a) 3 years
 - (b) 4 years
 - (c) 5 years
 - (d) 6 years
- 4. Use and misuse of Intelligence Tests.
- 5. Diagnostic procedures.
- Principle difference between:
 Born mentally retarded and acquired mental retardation after birth.
- 7. Parents.
- 8. Pre-school antics.
- 9. Retarded pre-school behavior.
- 10. Pre-school programs.
- 12. Working with parents of pre-schoolers.
- 13. General discussion and programs.
- 14. (Differential...Tables...)
- XV. 1. Modes of inquiry.

XV. Research

- 2. Objective of inquiry.
- XV. Research

- 3. Tools or research.
- 4. Language research.
- Scopes and trends of learning research.
- Research on Intelligence Tests, Research designs and strategies, Research on learning and memory.
- 7. Current research in mental retardation.
- 8. Issues pertaining to research in mental retardation.
- XVI. 1. Residential living and schools XVI. Residential living
 - Schools...private and residential care.
 - 3. Types of Institutions.
 - 4. Choice of residential living.
 - 5. Admission to residential living and leaving residential living.
 - 6. Social system.
 - 7. Child care and training.
 - Extend learning and residential services, Service management, Special services.
 - 9. Residential environment for adults
 - 10. Residential Institutions for adults.

- XVII. l. Intelligence and work XVII. Independent Living (Psychology of occupation)
 - 2. Training
 - 3. Living independently.
- XVIII. 1. Trainable mentally retarded- XVIII. Trainables, Severely Who are they? Retarded
 - 2. Why program for TMR
 - Objectives of training programs and (should they be organized?)
 - 4. Criteria for Selection
 - 5. Program for training...Curriculum
 - 6. Social adjustment (or) behavior
 - 7. Language development-training
 - 8. Salable skills attainable at various mental ages.
 - 9. Severely retarded...
 - 10. Behavior of trainable mental retarded (and behavior mode)
 - 11. Development...motor control.
 - 12. Adjustment of moderately and severely retarded.
 - Education of the severely and moderately retarded.
 - 14. History of the severely and moderately retarded.
 - 15. Description of children's tactile experiences.

- XIX. 1. Distinction between Profoundly XIX.

 mentally retarded and Severely
 retarded.
 - The Profoundly Mentally Retarded

- 2. Introduction
- 3. Objective in helping.
- 4. Etiology
- Diagnosis (charts) and speechthe unexpected.
- 6. Study cases.
- 7. Aggression and Institutional Problems and remedial efforts.
- 8. Differentiation (sub-groups)
- 9. Recreation
- 10. Training employees.
- 11. Outer limits of normalization.

APPENDIX B

Number of Pages and Percentages by Content Category for Each Textbook

A

Raw Data Tabulations of Content Analysis

For Thomas E. Jordan (1961)

Con		Content Pages for Each Area	Percent	
1.	Administration, Legal Issues Federal Involvement			
2.	Advocacy and Therapeutic Consideration	25	7%	
3.	Clinical Picture and History	26	7%	
4.	Characteristics, Etiology Mental Retardation	45	.1%	
5.	Cerebal Palsy	30	8%	
6.	Education, Curriculum, Langua Training, and Guidance	age 21	6%	
7.	Environment, Home, School, Church, Community, Family Independent Living	6 9	. 2%	
8.	Patterns of Development and Theories of Development	16	4 %	
9.	Psychodiagnostic	28	8%	
.0.	Pre-School	1	. 2%	
1.	Recreation			
.2.	Research	1	. 2%	
.3.	Rehabilitation, Vocational Intuitions and Residential Livin		9%	
4.	Trends and Current Views			
.5 .	Trainables, Severely Retarded Profoundly Retarded	fi 7	2%	
	Total No. of Pages	301		

Raw Data Tabulations of Content Analysis

For Elmer W. Weber (1963)

Content Categories		Content Pages for Each Area	Percent	
1.	Administration, Legal Issues Federal Involvement	10	3%	
2.	Advocacy and Therapeutic Consideration	31	1%	
3.	Clinical Picture and History	19	6%	
4.	Characteristics, Etiology and Mental Retardation	a 10	3%	
5.	Cerebal Palsy			
6.	Education, Curriculum, Langue Training, Guidance	age 21	6%	
7.	Family of Mental Retarded, Home, Church, Community Environment	102	.3%	
8.	Patterns of Development and Theories of Development			
9.	Psychodiagnostic	3	. 9%	
.0.	Pre-School	8	. 2%	
Ll.	Recreation	7	2%	
.2.	Research			
.3.	Rehabilitation, Vocational Institutions and Residential Living	2	. 6%	
L4.	Trends and Current Views	10	3%	
L5.	Trainables and Severely Reta and Profoundly Retarded	rded 21	6%	
	Total No. of Pages	245		

Raw Data Tabulations of Content Analysis
For Roy DeVerl Willey and Kathleen Waite (1964)

Con		Content Pages for Each Area	Percent
1.	Administration, Legal Issues Federal Involvement	4	1%
2.	Advocacy, and Therapeutic Consideration		
3.	Clinical Picture and History	15	6%
4.	Characteristics, Etiology and Mental Retardation	d 34	.1%
5.	Cerebal Palsy		
6.	Education, Curriculum, Langue Training, Guidance	age 34	. 1%
7.	Home, School, Church, Community and Environment	72	.3%
8.	Patterns of Development Theories of Development	13	5%
9.	Psychodiagnostic	3	1%
LO.	Pre-School		
L 1.	Recreation		
L2.	Research		- - -
L3.	Rehabilitation, Vocational, Institutional and Residentia Living	1	1%
l4.	Trends and Current Views	1	.4%
L5.	Trainables and Severly Retar and Profoundly Retarded	ded 22	9%
	Total No. of Pages	202	

Raw Data Tabulations of Content Analysis
For Helbert B. and Nancy M. Robinson (1965)

Con	tent Categories	Content Pages for Each Area	Percent
1.	Administration, Lagel Issues Federal Involvement		
2.	Advocacy and Therapeutic Consideration	22	4%
3.	Clinical Picture and History	7 21	4%
4.	Characteristics, Etiology of Mental Retardation	E 115	. 2%
5.	Cerebal Palsy	3	.5%
6.	Education, Curriculum, Langu Training and Guidance	1age, 19	3%
7.	Environment, Home, School, Church, Community	152	.3%
8.	Patterns of Development and Theories of Development	70	.1%
9.	Psychodiagnostic	68	.1%
Ο.	Pre-School	1	1%
1.	Recreation		
2.	Research	26	4%
3.	Rehabilitation, Vocational, tutions and Residential Livi		1%
4.	Trends and Current Views	3	.5%
5.	Trainables and Severely Reta	arded l	. 1%
	Total No. of Pages	507	

Raw Data Tabulation of Content Analysis

For Robert M. Smith (1971)

Content Categories		Content Pages for Each Area	Percent
1.	Administration, Legal Issues Federal Involvement		
2.	Advocacy and Therapeutic	4	1%
з.	Clinical Picture and History	7 19	7%
4.	Characteristics, Etiology of Mental Retardation	56	. 2%
5.	Cerebral Palsy		
6.	Education, Training, Language Curriculum and Guidance	ge 29	.1%
7.	Environment, Home, School, Church, Community	41	.1%
8.	Patterns and Theories of Development		
9.	Pre-School	42	. 1%
.0.	Psychodiagnostic	9	.3%
1.	Recreation		
.2.	Research	9	.3%
.3.	Rehabilitation, Vocational tutions and Residential Livi		6%
.4.	Trends and Current Views		
.5 .	Trainables, Severely Retards		.7%
	Total No. of Pages	228	

Raw Data Tabulation of Content Analysis

For Thomas E. Jordan (1972)

Con	tent Categories	Content Pages for Each Area	Percent
1.	Administration, Legal Issues Federal Involvement	2	.3%
2.	Advocacy and Therapeutic Consideration	42	7%
3.	Clinical Picture and History	y 29	4%
4.	Characteristics, Etiology of Mental Retardation	E 69	. 1%
5.	Cerebral Palsy	7	1%
6.	Education, Training, Language Curriculum and Guidance	ge 80	.1%
7.	Environment, Home, School, Church, Community	68	.1%
8.	Patterns and Theories of Development	77	.1%
9.	Pre-School		
ο.	Psychodiagnostic	43	7 %
1.	Recreation		
2.	Research	32	5%
.3.	Rehabilitation, Vocational tutions and Residential Liv		.1%
4.	Trends and Current Views		
5.	Trainables, Severely Retardand Profoundly Mental Retard		.3%
	Total No. of Page	s 520	

Raw Data Tabulation of Content Analysis

For Oliver P. Kolstoe (1972)

Con		Content Pages for Each Area	Percent
1.	Administration, Legal Issues Federal Involvement		
2.	Advocacy and Therapeutic Consideration	25	1%
3.	Clinical Picture and History	42	. 2%
4.	Characteristics, Etiology of Mental Retardation	39	. 1%
5.	Cerebral Palsy		
6.	Education, Training, Language Curriculum and Guidance	e 58	. 3%
7.	Environment, Home, School, Church, Community	7	3%
8.	Patterns and Theories of Development		
9.	Pre-School		
10.	Psychodiagnostic	17	8%
11.	Recreation		
12.	Research		
13.	Rehabilitation, Vocational I tutions and Residential Livi		
14.	Trends and Current Views		
15.	Trainables, Severely Retarded and Profoundly Mentally Retard		
	Total No. of Pages	188	

Raw Data Tabulation of Content Analysis
For Bernard B. Schlanger (1973)

Con	_	ontent Pages for ach Area	Percent
1.	Administration, Legal Issues Federal Involvement		
2.	Advocacy and Therapeutic Consideration	12	. 2%
3.	Clinical Picture and History	11	. 2%
4.	Characteristics, Etiology of Mental Retardation	2	4%
5.	Cerebral Palsy	~-	
6.	Education, Training, Language Curriculum and Guidance	14	.3%
7.	Environment, Home, School, Church, Community	1	2%
8.	Patterns and Theories of Development		
9.	Pre-School		
.0.	Psychodiagnostic		
1.	Recreation		
.2.	Research		
.3.	Rehabilitation, Vocational Ir tutions and Residential Livir		
.4.	Trends and Current Views		
.5.	Trainables, Severely Retarded and Profoundly Mentally Retar		
	Total No. of Pages	40	

Raw Data Tabulation of Content Analysis

For Harold D. Love (1973)

<u> </u>		ontent Pages for ach Area	Percent
1.	Administration, Legal Issues Federal Involvement	1	.5%
2.	Advocacy and Therapeutic Consideration		
3.	Clinical Picture and History	32	.1%
4.	Characteristics, Etiology of Mental Retardation	16	8%
5.	Cerebral Palsy		
6.	Education, Training, Language Curriculum and Guidance	14	7 %
7.	Environment, Home, School, Church, Community	73	.3%
8.	Patterns and Theories of Development	3	1%
9.	Pre-School		
Ο.	Psychodiagnostic		
1.	Recreation	25	1%
2.	Research	9	4%
.3.	Rehabilitation, Vocational Intutions and Residential Livin		2%
4.	Trends and Current Views	1	.5%
5.	Trainables, Severely Retarded and Profoundly Mentally Retai		1%
	Total No. of Pages	182	

Raw Data Tabulation of Content Analysis

For Robert P. Ingalls (1978)

Con	-	Content Pages for Each Area	Percent
1.	Administration, Legal Issues Federal Involvement	8	2%
2.	Advocacy and Therapeutic Consideration	9	2%
3.	Clinical Picture and History	30	6%
4.	Characteristics, Etiology of Mental Retardation	56	.1%
5.	Cerebral Palsy	3	.6%
6.	Education, Training, Language Curriculum and Guidance	e 56	.1%
7.	Environment, Home, School, Church, Community	116	2%
8.	Patterns and Theories of Development	17	3%
9.	Pre-School	8	1%
Ο.	Psychodiagnostic	17	3%
1.	Recreation		
2.	Research	24	5%
3.	Rehabilitation, Vocational I tutions and Residential Livi		6%
4.	Trends and Current Views	10	2%
5.	Trainables, Severely Retarded and Profoundly Mentally Reta		4%
	Total No. of Pages	404	

Raw Data Tabulation of Content Analysis

For Donald F. Sellins (1979)

Con		Content Pages for Each Area	Percent
1.	Administration, Legal Issues Federal Involvement	25	5%
2.	Advocacy and Therapeutic Consideration	38	8%
3.	Clinical Picture and History	12	2%
4.	Characteristics, Etiology of Mental Retardation	58	. 1%
5.	Cerebral Palsy		
6.	Education, Training, Language Curriculum and Guidance	28	6%
7.	Environment, Home, School, Church, Community	144	.3%
8.	Patterns and Theories of Development	5	1%
9.	Pre-School	3	.6%
.0.	Psychodiagnostic		
1.	Recreation		
2.	Research	16	3%
.3.	Rehabilitation, Vocational Intutions and Residential Livin		9%
.4.	Trends and Current Views	17	3%
.5 .	Trainables, Severely Retarded and Profoundly Mentally Retai		.8%
	Total No. of Pages	394	

Raw Data Tabulation of Content Analysis

For Charles C. Cleland (1979)

Con		Content Pages for Each Area	Percent
1.	Administration, Legal Issues Federal Involvement	2	1%
2.	Advocacy and Therapeutic Consideration	4	2%
3.	Clinical Picture and History	2	1%
4.	Characteristics, Etiology of Mental Retardation	3	1%
5.	Cerebral Palsy		
6.	Education, Training, Language Curriculum and Guidance	e 10	5%
7.	Environment, Home, School, Church, Community	10	5%
8.	Patterns and Theories of Development		
9.	Pre-School		
LO.	Psychodiagnostic		
Ll.	Recreation	24	.1%
L2.	Research	9	4%
L3.	Rehabilitation, Vocational Intutions and Residential Livin		4%
14.	Trends and Current Views	1	.5%
15.	Trainables, Severely Retarded and Profoundly Mentally Retar		.5%
	Total No. of Pages	178	

Table A

Raw Data Results For the Content Category
 Across Books and Time Periods

	Administration and Legal Issues			
Authors	Date of Publication	Total Content Pages	Total Pages For Areas	Percent
Time Period One (1960-19	64)			
Jordan Weber Willey and Waite	1961 1963 1964	340 306 232	10 <u>4</u>	 3% <u>1%</u>
Total		878	14	1.6%
Time Period Two (1965-19	69)			
Robinson and Robinson	1965	546		
Total		546		
Time Period Three (1970-	1974)			
Smith Jordan Kalstoe Schlanger Love	1971 1972 1972 1973 1973	257 599 208 47 195	2 1	 .3% .5%
Total		1,304	3	. 2%
Time Period Four (1975-1	980)			
Ingalls Sellin Cleland	1978 1979 1979	451 463 <u>188</u>	8 25 <u>2</u>	2% 5% 1%
Total		1,102	35	3%
		3,830	52	1.3%

Table B

Raw Data Results For the Content Category
Across Books and Time Periods

	Advocacy and	Therapeut	tic Cor	nsiderations
Authors	Date of Publication	Total Content Pages	Total Pages Areas	Percent For
Time Period One (1960-1	964)			
Jordan Weber Willey and Waite	1961 1963 1964	340 306 232	25 31 	7% 10%
Total		878	56	6%
Time Period Two (1965-1	969)			
Robinson and Robinson	1965	546	22	4%
Total		546	22	4%
Time Period Three (1970	-1974)			
Smith Jordan Kalstoe Schlanger Love	1971 1972 1972 1973 1973	257 599 208 47 <u>195</u>	4 42 25 12	1% 7% 10% 25%
Total		1,304	83	6.3%
Time Period Four (1975-	1980)			
Ingalls Sellin Cleland	1978 1979 1979	451 463 <u>188</u>	9 38 <u>4</u>	2% 8% _2%
Total		1,102	51	4.6%
		3,830	212	5.4%

Clinical Picture and History Authors Date of Total Total Percent Publication Content Pages For Pages Areas Time Period One (1960-1964) Jordan 1961 340 26 7% 19 Weber 1963 306 6% Willey and Waite 1964 <u>232</u> <u>15</u> 6% Total 878 60 6.9% Time Period Two (1965-1969) Robinson and Robinson 1965 546 21 4% Total 546 21 4% Time Period Three (1970-1974) Smith 1971 257 19 7% Jordan 599 29 4% 1972 208 42 2% Kalstoe 1972 11 Schlanger 1973 47 23% Love 1973 195 32 16% Total 1,304 133 10% Time Period Four (1975-1980) Ingalls 1978 451 30 6% Sellin 1979 463 12 2% Cleland 1979 188 1% _2 1,102 Total 44 3.9% 6.5% 3,830 253

Characteristics, Etiology-Mental Retardation Date of Total Total Authors Percent Publication Content Pages For Pages Areas Time Period One (1960-1964) Jordan 1961 340 45 13% Weber 1963 306 10 3% Willey and Waite 1964 232 34 13% 60 6.9% Total 878 Time Period Two (1965-1969) Robinson and Robinson 1965 546 115 21% Total 115 21% 546 Time Period Three (1970-1974) Smith 257 56 22% 1971 Jordan 1972 599 69 11% 208 18% Kalstoe 1972 39 2 4% Schlanger 1973 47 Love 1973 <u> 195</u> 8% 16 1,304 182 Total 13% Time Period Four (1975-1980) Ingalls 1978 451 56 14% Sellin 12% 1979 463 58 Cleland 1979 188 _3 1% 1,102 117 . 1% Total

3,830

494

13%

Table E

Raw Data Results For the Content Category

Across Books and Time Periods

		Cerebral	Palsy	
Authors	Date of Publication	Total Content Pages	Total Pages Areas	Percent For
Time Period One (1960-19	964)			
Jordan	1961	340	30	8%
Weber	1963	306		
Willey and Waite	1964	232		
Total		878	30	3%
Time Period Two (1965-19	969)			
Robinson and Robinson	1965	546	3	.5%
Total		546	3	.5%
Time Period Three (1970	-1974)			
Smith	1971	257		
Jordan	1972	599	7	1%
Kalstoe	1972	208		
Schlanger	1973	47		
Love	1973	195		
Total		1,304	7	.4%
Time Period Four (1975-	1980)			
Ingalls	1978	451	3	.6%
Sellin	1979	463		
Cleland	1979	188		
Total		1,102	3	. 2%
		3,830	43	1%

Table F

Raw Data Results For the Content Category

Across Books and Time Periods

Education,	Training, La	nguage,	Guidano	e, Curriculu
Authors	Date of Publication	Total Content Pages	Total Pages Areas	Percent For
Time Period One (1960-19	64)			
Jordan	1961	340	21	6%
Weber	1963	306	21	6%
Willey and Waite	1964	232	<u>34</u>	10%
Total		878	76	8%
Time Period Two (1965-19	69)			
Robinson and Robinson	1965	546	19	3%
Total		546	19	3%
Time Period Three (1970-	1974)			
Smith	1971	257	29	11%
Jordan	1972	599	80	13%
Kalstoe	1972	208	58	27%
Schlanger	1973	47	14	29%
Love	1973	195	<u>14</u>	<u> 7%</u>
Total		1,304	195	15%
Time Period Four (1975-1	980)			
Ingalls	1978	451	56	14%
Sellin	1979	463	28	6%
Cleland	1979	188	<u>10</u>	<u>_5%</u>
Total		1,102	94	9%
		3,830	384	10%

Table G

Raw Data Results For the Content Category

Across Books and Time Periods

Environment, Home, School, Church, Community, Independent Living

Authors	Date of Publication	Total Content Pages	Total Pages Areas	Percent For
Time Period One (1960-19	964)			
Jordan	1961	340	69	20%
Weber	1963	306	102	30%
Willey and Waite	1964	232	72	31%
Total		878	243	28%
Time Period Two (1965-19	969)			
Robinson and Robinson	1965	546	152	27%
Total		546	152	27%
Time Period Three (1970	-1974)			
Smith	1971	257	41	15%
Jordan	1972	599	68	11%
Kalstoe	1972	208	7	3%
Schlanger	1973	47	1	2%
Love	1973	<u>195</u>	<u>73</u>	<u>37%</u>
Total		1,304	190	13%
Time Period Four (1975-	1980)			
Ingalls	1978	451	116	25%
Sellin	1979	463	144	3 1%
Cleland	1979	188	10	5%
Total		1,102	270	22%
		3,830	855	22.4%

Table H

Raw Data Results For the Content Category
 Across Books and Time Periods

Pattern of Development and Theories of Development				
Authors	Date of Publication	Total Content Pages	Total Pages Areas	Percent For
Time Period One (1960-196	4)			
Jordan Weber Willey and Waite	1961 1963 1964	340 306 232	16 13	4% 5%
Total		878	29	3%
Time Period Two (1965-196	9)			
Robinson and Robinson	1965	546	70	13%
Total		546	70	13%
Time Period Three (1970-1	974)			
Smith Jordan Kalstoe Schlanger Love	1971 1972 1972 1973 1973	257 599 208 47 195	77 3	12% 1%
Total		1,304	80	6%
Time Period Four (1975-19	80)			
Ingalls Sellin Cleland	1978 1979 1979	451 463 <u>188</u>	17 5 	3% 1%
Total		1,102	22	2%
		3,830	22	2%

Table I

Raw Data Results For the Content Category

Across Books and Time Periods

	Pre-School			
Authors	Date of Publication	Total Content Pages	Total Pages Fo Areas	Percent
Time Period One (1960-19	964)			
Jordan	1961	340	1	. 2%
Weber	1963	306	8	2%
Willey and Waite	1964	232	_==_	
Total		878	9	1%
Time Period Two (1965-19	969)			
Robinson and Robinson	1965	546	70	13%
Total		546	70	13%
Time Period Three (1970-	-1974)			
Smith	1971	257	42	15%
Jordan	1972	599		
Kalstoe	1972	208		
Schlanger	1973	47		
Love	1973	<u>195</u>		
Total		1,304	42	3%
Time Period Four (1975-	1980)			
Ingalls	1978	451	8	1%
Sellin	1979	463	3	1%
Cleland	1979	188		
Total		1,102	11	1%
		3,830	63	1.5%

Table J

Raw Data Results For the Content Category

Across Books and Time Periods

	P	Psychodiagnostic			
Authors	Date of Publication	Total Content Pages	Total Pages For Areas	Percent	
Time Period One (1960-19	964)				
Jordan	1961	340	28	8%	
Weber	1963	306	3	. 9%	
Willey and Waite	1964	232	_3_	1%	
Total		878	34	4%	
Time Period Two (1965-19	969)				
Robinson and Robinson	1965	546	68	12%	
Total		546	68	12%	
Time Period Three (1970-	-1974)				
Smith	1971	257	9	3%	
Jordan	1972	599	43	7%	
Kalstoe	1972	208	17	8%	
Schlanger	1973	47			
Love	1973	<u>195</u>			
Total		1,304	69	5%	
Time Period Four (1975-	1980)				
Ingalls	1978	451	17	3%	
Sellin	1979	463			
Cleland	1979	188			
Total		1,102	17	1%	
		3,830	188	5%	

Table K

Raw Data Results For the Content Category

Across Books and Time Periods

		Recrea	ation	
Authors	Date of Publication	Total Content Pages	Total Pages Areas	Percent For
Time Period One (1960-1964	1)			
Jordan	1961	340		
Weber	1963	306	7	2%
Willey and Waite	1964	<u>232</u>		
Total		878	7	1%
Time Period Two (1965-1969	9)			
Robinson and Robinson	1965	546		
Total		546		
Time Period Three (1970-19	974)			
Smith	1971	257		
Jordan	1972	599		
Kalstoe	1972	208		
Schlanger Love	1973 1973	4 7 195	25	12%
2000	23/3	1 33		
Total		1,304	25	2%
Time Period Four (1975-198	30)			
Ingalls	1978	451		
Sellin	1979	463		
Cleland	1979	<u>188</u>	_24_	12%
Total		1,102	24	2%
	:	3,830	56	1%

Table L

Raw Data Results For the Content Category

Across Books and Time Periods

		Research			
Authors	Date of Publication	Total Content Pages	Total Pages : Areas	Percent For	
Time Period One (1960-19	964)				
Jordan Weber Willey and Waite	1961 1963 1964	340 306 232	1 	. 2% 	
Total		878	1	.1%	
Time Period Two (1965-19	969)				
Robinson and Robinson	1965	546	26	4%	
Total		546	26	4%	
Time Period Three (1970-	-1974)				
Smith Jordan Kalstoe Schlanger Love	1971 1972 1972 1973 1973	257 599 208 47 195	9 32 9	3% 5% 4%	
Total		1,304	50	3%	
Time Period Four (1975-	1980)				
Ingalls Sellin Cleland	1978 1979 1979	451 463 <u>188</u>	24 16 <u>9</u>	5% 3% <u>4%</u>	
Total		1,102	49	4%	
		3,830	126	3%	

Table M

Raw Data Results For the Content Category

Across Books and Time Periods

Rehabilitation, Voc	ational Inst	itution,	Residentia	al Living
Authors	Date of Publication	Total Content Pages	Total Pages For Areas	Percent
Time Period One (1960-196	4)			
Jordan Weber	1961	340 306	32 2	9%
Willey and Waite	1963 1964	232	4	• 6% 2%
Total		878	38	4%
Time Period Two (1965-196	9)			
Robinson and Robinson	1965	546	6	1%
Total		546	6	1%
Time Period Three (1970-1	974)			
Smith Jordan	1971	257	17	6%
Kalstoe	1972 1972	599 208	69 	11%
Schlanger	1973	47		
Love	1973	195	5	2%
Total		1,304	91	6%
Time Period Four (1975-19	80)			
Ingalls	1978	451	30	6%
Sellin	1979	463	44	9% 42/
Cleland	1979	188	8	<u>4%</u>
Total		1,102	82	7%
		3,830	217	6%

 $\begin{tabular}{ll} Table N \\ Raw Data Results For the Content Category \\ Across Books and Time Periods \\ \end{tabular}$

	Trends	and Curr	ent Views	
Authors	Date of Publication	Total Content Pages	Total Pages For Areas	Percent
Time Period One (1960-19	964)			
Jordan	1961	340		
Weber	1963	306	10	3%
Willey and Waite	1964	232	_1_	4%_
Total		878	11	1%
Time Period Two (1965-19	969)			
Robinson and Robinson	1965	546	3	.5%
Total		546	3	.5%
Time Period Three (1970)	-1974)			
Smith	1971	257		
Jordan	1972	599		
Kalstoe	1972	208		
Schlanger	1973	47		
Love	1973	<u>195</u>	1_	5%_
Total		1,304	1	.5%
Time Period Four (1975-	1980)			
Ingalls	1978	451	10	2%
Sellin	1979	463	17	3%
Cleland	1979	188	1	<u>.5%</u>
Total		1,102	28	2%
		3,830	43	1%

Table O

Raw Data Results For the Content Category
 Across Books and Time Periods

Trainables, Severely Retarded, Profoundly Mentally Retarded				
Authors	Date of Publication	Total Content Pages	Total Pages For Areas	Percent
Time Period One (1960-196	4)			
Jordan Weber Willey and Waite	1961 1963 1964	340 306 <u>232</u>	7 21 22	2% 6% <u>9%</u>
Total		878	50	5%
Time Period Two (1965-196	9)			
Robinson and Robinson	1965	546	1	.1%
Total		546	1	.1%
Time Period Three (1970-1	.974)			
Smith Jordan Kalstoe Schlanger Love	1971 1972 1972 1973 1973	257 599 208 47 195	2 2 3	.7% .3% 1%
Total		1,304	7	.5%
Time Period Four (1975-19	980)			
Ingalls Sellin Cleland	1978 1979 1979	451 463 <u>188</u>	20 4 <u>105</u>	4% .8% 50%
Total		1,102	129	11%
		3,830	187	5%