

COLLEGE OF THE VIRGIN ISLANDS
AN EVALUATION OF THE NON-NATIVE
SCHOOL POPULATION ASSIGNED TO CLASSES FOR
THE EDUCABLE MENTALLY RETARDED

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CHAPTER I

INTRODUCTION

Background

Plato said a long time ago, "...the road to better government and public service is through an appropriately conceived system of education."¹ This belief that education is the foundation of all social developments is still a common belief held by many educators today. Throughout the field of education one is constantly reminded of the American ideology -- equality and justice for all. It is through the system of education that all wrongs of our society are to be amended and corrected. Because of such pressures placed upon it, the American education system has found itself constantly changing and hastefully trying to accommodate to external social pressures. Amidst such turmoil, one wonders about the long range effects of such frequent changes and hoped-for improvements. Have such new methods and programs employed truly been effective in meeting the American ideology of equality and justice for

¹William Eberstein, Great Political Thinkers: Plato to the Present (New York: Holt Rinehart and Winston Inc., 1969), p. 4, quoted in Charles W. Turnbull, "The Structural Development of Public Education System in the Virgin Islands, 1917-1970: A Functional Analysis in Historical Perspective" (Ph.D. dissertation, University of Minnesota, 1976), p. 26.

all regardless of class, color, or creed? Did such new methods and hoped-for improvements, in fact, stimulate the growth and expansion actually hoped for? Numerous studies, articles, and entire books have been written on the subject and have shown negative and often long-term disastrous effects of the many new and so-called educational improvements. It has been acknowledged that all growth and improvements are almost inevitably brought about by change. With this thought bearing in mind, it is important to note that criticisms are not directed at "change" per say, but rather, to the "type" of change being employed.

Special education is an example of such an educational change. Special education was conceived as one means of making the American educational system more equitable and democratic for all students. Through the adoption of the new special education programs, students who deviated from the established school norms were lumped together in "special" classes. Gradually, the special class became a way of transferring all the "misfits" out of the regular classes.¹ These special classes were often self-contained and segregated from the rest of the school's social environment. Numerous research studies have shown

¹Lloyd M. Dunn, "Special Education for the Mildly Retarded -- Is Much of It Justifiable?" Exceptional Children 35 (September 1968): 4.

that the students who comprise these "special classes for the misfits "...were usually socioculturally deprived students who were not able to cope with or adjust to the school norms." Statistical estimates compiled by the U. S. Office of Education, as early as 1968, indicated that there were "...approximately 32,000 teachers of the retarded employed by local school systems -- over one-third of all special educators in the nation." "...60 to 80 per cent of the pupils taught by these teachers are children from low status backgrounds -- including Afro-Americans, American Indians, Mexicans, and Puerto Ricans; those from non-standard English speaking, broken, disorganized, and inadequate homes; and children from other nonmiddle class environments."¹

Such groups of people mentioned have often been classified as culturally deprived or culturally disadvantaged. They have been defined as those who are at the bottom of American society in terms of income and who suffer from social and economic racial discrimination at the hands of the majority of society. The disadvantaged student is

...deficient in many skills and kinds of experience necessary for performance in the prevailing culture which he lives. Due to an array of

¹Ibid., p. 6.

factors, he is somewhat different from his classmates; he often has the same potential but his background of poverty and deprivation tend to handicap him under current existing school curricular practices.¹

Dr. Geoffrey Driver claims that the minority and culturally deprived individual is apathetic and unresponsive to issues he/she terms as 'being out of their control'.²

Extensive research investigations done by Jane Mercer, Edward Barnes, and Mildrew Bardsdale have pointed out that often culturally different students are misplaced and labeled as mentally retarded. These authors contend that one possible reason for this reoccurring and damaging error made by educators is due to the frequent use of intelligence test scores as the sole criterion for special class placement.

Because the culturally different have not been exposed to the American standardized norms or expected behaviors, they have too often been labeled mentally retarded. This label does not reflect their inability to cope with their environment, but rather, it shows the lack

¹Diane G. Ginn, "Poor School Performance: Contributing Factors and Consequences with Emphasis on the Nonwhite Child," paper presented at the Annual International Convention, The Council for Exceptional Children, Chicago, Illinois, 346, April 1976.

²Geoffrey Driver, Ph.D. "Ethnicity, Cultural Competence and School Achievement: A Case Study of West Indian Pupils Attending a British School", Urbana, Champaign, 4, 1977. (Mimeographed)

of opportunities they have had to learn the cognitive skills necessary to pass Angelo-oriented intelligence tests.

Recommendations made as a result of such numerous research studies on the matter have indicated that cultural differences or deprivations be taken into consideration of the child's placement into special education classes. Educators must come to better understand the implications of the implications of the social and psychological dynamics of the culturally deprived. Special class misplacement cannot be wiped off as just another social issue, for the present assessment procedures of the American school system have become a civil rights issue. According to Mercer, such recent assessment procedures violate at least five civil rights of children:

1. Their right to be evaluated within a culturally appropriate normative framework;
2. Their right to be assessed as multi-dimensional, many-faceted human beings;
3. Their right to be fully educated;
4. Their right to be free of stigmatizing labels; and
5. Their right to cultural identity and respect.¹

The U. S. Virgin Islands education system is not vastly different from that of the continental United States. Existing here too in the Islands are pertinent problems concerning the culturally different minority group in terms of economics and cultural backgrounds. The only unique

¹Jane Mercer, "A Policy Statement on Assessment Procedures and the Rights of Children," Harvard Educational Review, 44 (February 1974): 132.

component of the problem is that while the majority of the native U. S. Virgin Islanders are of a minority group in terms of economics and cultural background, there are a small group of people presently residing in the Virgin Islands who are classified and referred to as "a more culturally different and economically deprived minority group." Such a group is made up of persons from other non-American West Indian islands with a large per cent coming specifically from the British islands, south of the U. S. Virgin Islands.¹

Due to a large inflow of aliens into the U. S. Virgin Islands, several problems have been created. At the head of the list of problems is providing education and schooling for the increasing alien population. Alien students bring with them many problems of poor educational background and experience, causing much difficulties in assimilating into the Americanized school system. The final results are often low scores on intelligence and achievement tests. "This has forced older alien students to be placed in classes with much younger students, creating a very difficult teaching/learning situation. The alternative, placing students in classes with their chronological peers, regardless of academic achievement is equally undesirable."²

¹U. S. Virgin Islands Administrative Personnel Training Program on Handicapped, Program Assistance Grant, Appendix B, p. 7, October, 1979.

²Virgin Islands Program Assistance Grant, Oct. 1979, p.8

It is the writer's thesis that special education class placement (specifically in educable mentally retarded classes) are used as the only remaining alternatives for many of these unfortunate students. It is also the writer's contention as so rightly stated by author Lloyd Dunn, that "...a better education than special class placement is needed for the socioculturally deprived children with mild learning problems..."¹

Although a number of studies have been done abroad on the educable mentally retarded (EMR) population with reference to the culturally different child, no existing study has been done specifically on the EMR population in the U. S. Virgin Islands. Also, no existing study has been done to determine if the EMR classes in the U. S. Virgin Islands (specifically St. Thomas and St. John) are mostly comprised of students who are of similar nationalities.

¹Dunn, "Poor School Performance," p. 5.

Statement of the Problem

The purpose of this study was to determine what per cent of the total non-native West Indian school population is being placed in EMR classes. Statistical comparisons between the number of non-native students in reference to their total school population, and the number of native-born Virgin Islanders in reference to their total school population were made.

Significance of the Problem

Results of the proposed research study have contributed to educational knowledge in that it yielded valuable information concerning the placement process of children in EMR classes according to currently established special education procedures. Specific information on the composition of EMR classes with regard to nationality was given at the end of the study. Such information could be used as one of several bases for determining any changes and/or adaptations that might prove to be necessary. Finally, it was hoped the results of the proposed study will stimulate researchers to further investigate the hypothesized problem of helping culturally different children toward more meaningful and productive experiences within the educational system.

Hypothesis

There is a significantly larger proportion on non-native students as compared to the proportion of native Virgin Islands students placed in Educable Mentally Retarded classes.

Research Questions

1. How many students currently enrolled in the Educable Mentally retarded classes have not had parental consent for all testing and EMR placement?
2. How many students currently enrolled in EMR classes have not had a complete sensory assessment (hearing and vision examinations).
3. How many students currently enrolled in EMR classes have not had an achievement assessment?
4. How many students currently enrolled in EMR classes have not had an intelligence assessment?
5. How many students currently enrolled in EMR classes have not had some sort of adaptive behavior assessment?
6. How many students currently enrolled in EMR classes have not had a reevaluation assessment?

Assumptions

1. Local conditions such as size, resources, social structure and political statuses, make the non-American West

Indian islands significantly different from the American West Indian islands.

2. There exists some set standard criterion that must be followed before a child can be placed in a self-contained special education class (specifically any EMR class).

Definition of Terms

1. Non-native: The term refers to all persons who were not born on any of the U. S. Virgin Islands.

Note: The terms "non-native", "alien", and "down-islander" will be used interchangeably with the term non-native West Indian. The phrase "down-islander" will be used only in reference to geographical location of the island born on.

2. Special Education Classes: The term refers to those self-contained classes that provides for learning instruction at the level and rate of the student's learning abilities of a group of students of a given classification or label. Specific classes are provided for students classified or grouped as Educable Mentally Retarded, Trainable Mentally Retarded, Multiply Handicapped, Emotionally Disturbed, Deaf, and Blind.
3. Regular Education Classes: The term refers to those classes that provide learning instruction at the average rate for those students classified as having normal intelligence.

4. Educable Mentally Retarded Student: The term refers to one who is presently enrolled in classes for the Educable Mentally Retarded or the Educable Handicapped for the 1980-81 school year.
5. Standard Placement Procedures: The term refers to the established criteria or steps that must be completed when making assessment for placement of a child in any EMR class as provided by the local Department of Special Education.
6. Adaptive Behavior: The term as defined by the American Association of Mental Deficiency is the degree to which an individual is able to act and maintain himself independently within his society.¹
7. Adaptive Assessment: The term refers to any test that is specifically designed to measure a person's ability to independently function within his sociocultural environment.
8. Re-evaluation Assessment: According to the criterion set by the Virgin Islands Department of Special Education every child currently enrolled in an EMR class must be re-evaluated every three years by an intelligence and/or achievement test.

¹Allen T. Fisher, "Adaptive Behavior in Non-Biased Assessment: Effects on Special Education," paper presented at Annual Convention of the American Psychological Association, San Francisco, California, 3, August, 1977.

9. Intelligence Tests: Intelligence tests are standardized tests that provide an estimate of a person's general intellectual level by sampling a person's performance on a variety of tasks. Most intelligence tests yield a single global score of performance on these tasks. Measures of intelligence may take the form of group or individually administered tests.¹
10. Achievement Tests: Achievement tests are standardized tests which measure a student's knowledge, understanding and mastery of basic principles.²
11. Parent Consent: The term refers to a written signature signed by the parent or guardian of the child to be given a diagnostic assessment (intelligence and achievement tests) and, if necessary, to be placed in an EMR class.

Limitations

The following limitations were imposed by the researcher:

1. The study was limited to the islands of St. Thomas and St. John.
2. It was also limited to only the EMR classes, excluding

¹Walter R. Borg and Meredith D. Gall, Educational Research, 3rd ed., (New York: Longman Inc., 1979), p. 261.

²Ibid., p. 265.

all other special education classes. Major emphasis was placed on those EMR students who are non-native West Indians. The study did not include those students who were born in the U. S. Virgin Islands of non-American parents. Information was not available to identify these students.

3. All of the data surveyed in this study were limited to only the recorded information given in each EMR student record folder.
4. The present study was also limited in that when gathering specific information concerning the total number of parental consents given, the researcher did not compile separate figures for those parents who gave consent for testing from those who gave consent placement. Because of this, there was no definite way of knowing if any student was placed in an Educable Mentally Retarded class without the consent of a parent.

CHAPTER II

REVIEW OF RELATED LITERATURE

The following literature review is divided into two major sections -- Part I and Part II. General sub-headings are included under each section. The related literature in general has examined the findings of numerous studies conducted on the efficacy of special education programs. Court cases and legislative laws passed in reference to special education policies have been cited. Lastly, the literature review has discussed the unique circumstances surrounding special education here in the U. S. Virgin Islands.

Part I: Special Education and Its Assessment Procedures

Most educators would agree that the present special education movement has changed the entire structure of education and in some ways the attitudes and lives of all involved -- including teachers (regular and special), parents, normal and special education labeled students. It cannot be denied that the area of special education has greatly expanded over the past two or three decades. "It

is estimated that approximately 126,000 babies born each year in the United States will be classified as mentally retarded at some point in their lives."¹ H. B. Robinson, an educational researcher, has indicated "...that a rule of thumb approach to mental retardation would result in roughly 5,550,000 persons designated as mentally retarded in a population of 185,000,000."² Repeating these statements for a moment or two in one's mind should force educators to question the efficacy of the regular education classes. Are special education classes and services provided only as a means to amend what the regular classes have failed to do? Are we providing valid services for those students who are truly retarded? Such questions cannot be answered with simple yes or no responses. If one looks back over the history of special education, one should agree that it has come a long way. Yet, in spite of its many accomplishments, one must again agree that it still has quite a distance to go.

Those students classified as retarded have been defined as students who are "...mentally impaired to the

¹ Lee Katz, Analysis of Selected Social and Psychological Factors Related to Mental Retardation. (Dearborn, Michigan: University of Michigan, November, 1970) p. 3.

² Ibid.

point where they need help not required by 'normal people'.¹ The person classified as mentally retarded is compared to persons within the normal population. Those persons working with the labeled mentally retarded child respond to the individual according to how he was identified by pathological and statistical measures. In so doing, one assumes that the judgments made through use of the established criteria are a valid measure of subnormality or retardation. Total reliance on such established standards without references to individual differences often leads to misplacement of many students -- the very thing special education was designed not to do.

Special education classes were designed to serve each exceptional child according to his or her unique needs. Public Law 94-142, often referred to as one of the most important civil rights legislation passed in recent history, was enacted as a means of insuring that such a goal of special education be followed through. The law stipulates that all handicapped children be provided with a free and appropriate public education and related services to meet his learning needs. In short, "Public Law 94-142 was designed to minimize the stigmatizing and self-fulfilling effects of labels on children."²

¹Larry Molloy, "Law and the Handicapped," Science and Children 13, No. 6 (March 1970), p. 8.

²Steven Pechter, "Exceptional Law with Exceptions?" AMICUS 4 (March/April, 1979), p. 68.

Section 612-5c of the law stipulates that:

...testing and evaluation materials and procedures utilized for the purpose of evaluation and placement of handicapped children will be selected and administered so as not to be racially or culturally discriminatory.

The law also specifies that,

...all state and local educational agencies shall insure at a minimum that tests and evaluation materials:

1. are provided and administered in the child's native language or other mode of communication unless it is clearly not feasible to do so;
2. have been validated and recommended by their producer for the specific purpose for which they are used.¹

The law specifies that no single procedure will be used as the sole criterion for special class placement. All tests are to be administered by trained personnel in conformance with the instructions provided by their producer, and placement decisions are to be made by a group of persons knowledgeable about the child, who can interpret the data, and knows of several placement options.² Each student already placed in a special class must be reevaluated at least every three years or sooner if so desired by the parent or other qualified person.

Despite the positive intensions implicit in PL 94-142

¹Sally Klig, et al., Protection on Evaluation: A Resource Manual, Center for Advanced Study in Education (New York, New York: City University of New York, 1977), p. 80.

²Mercer, "In Defense of Racially and Culturally Non-discrimanatory Assessment," School Psychology Digest 8 (1979): 90.

school systems have employed evaluation and placement procedures that are in noncompliance with the law. It is depressing to see that in many of our public schools, classes for the Educable Mentally Retarded (EMR) have actually become burial grounds for the child that is "different". In recent years a rapid growth of litigation has arisen, attacking the criteria currently used to label and place children in special education classes. In 1976, the subcommittee on the Handicapped of the Committee on Labor and Public Welfare, reported that:

The committee is alarmed about the abuses which occur in the testing and evaluation of children, and is concerned that expertise in the proper use of testing and evaluation procedures fall short of the prolific¹ use and development of testing and evaluation tools.

The rapid and spontaneous increase in litigation indicates the need for immediate change of our current educational assessment criteria. Parents have become dissatisfied with the criteria used to determine special class placement and with the level and type of educational programming their children receive after placement. As more people become aware of what is taking place, educators will no longer be able to use the intelligence test scores as the only and primary basis for identifying, labeling and placing of children in special classes.²

¹Sally Klig, et al., Protection in Evaluation, p. 78.

²Sterling L. Ross, Henry DeYoung, and Julius S. Cohen, "Confrontation: Special Education Placement and the Law," Exception Children (September 1971): 11.

Arguments often levied against the current placement procedures are as follows:

1. testing does not accurately measure the child's learning abilities;
2. the test discriminates against children of racial and cultural backgrounds;
3. tests are often administered by untrained and incompetent personnel;
4. parents are not given fair and adequate opportunity to participate in the decision-making of their child's placement;
5. retesting is infrequent, once placement has been made, there is little chance that the child will ever leave the special class;
6. the personal harm created by improper placement is irreparable.¹

According to Barnes, ideally, in the educational setting, tests should be used to maximize the growth and development of the child, but for many minority and culturally different children, the exact opposite has been true. "Instead of being tools which facilitate growth, they are tools which thwart and destroy that process on these children."²

Research studies have shown that minority groups such as Blacks and Mexican Americans score significantly lower on IQ tests as compared to the White Anglo American group. As stated by Merser, such low scores received by

¹Ibid., p. 5

²Edward Barnes, "IQ Testing and Minority School Children: Imperatives for Change," paper presented at the National Leadership Institute, Teacher Education/Early Childhood, 1979, preface.

minority students "may simply reflect the degree to which cultural differences exist among the different groups."¹ Results of several studies done by Mercer also revealed that the child who was "labeled" retarded was only retarded during the school day -- the child became what is known as the "six-hour retardie".

Mildrew Barksdale in her study on the composition of EMR classes concluded that a great per cent of the students labeled as retarded fall within the broader category of culturally deprived. Barksdale's study further revealed that "...most deprived children are not mentally retarded; nevertheless, most nonretarded children from lower class families have lower IQ's on tests which are saturated with verbal factors when compared with more advanced children."² Disadvantaged children scored much better on nonverbal tests than they did on verbal tests. Since the school curriculum is based primarily on verbal skills and abilities it is not surprising to find that culturally deprived children are deficient in school performance when compared to advanced students. Barksdale

¹Mercer, "IQ = The Lethal Label," Psychology Today 6 (September 1972): 44.

²Mildrew Barksdale, "Mentally Retarded and Culturally Deprived Children: Some Parallels," Phylon 31 (Spring 1970): 49.

concluded at the end of his study that "Both the mentally retarded disadvantaged children perform poorly in school achievement as well as on intelligence tests."¹ When IQ scores are used as the single criterion for identification of the mentally retarded student, gross errors in placement are possible since retarded students may score the same on IQ tests as those who lack sufficient experience.

In a study conducted by Jane Mercer which tried to determine the relationship between sociocultural factors and test performance, Mercer found that approximately thirty-two per cent of the differences in IQ test scores among a sample of approximately 1500 Black, Chicano, and Anglo elementary school children in one California school district could be accounted for by differences in the sociocultural characteristics of their families.² When Black and Chicano elementary school children were classified under one of five groups according to the extent to which their family background conformed to the average configuration for the total community, results showed that the more the minority groups had in common with the dominant group (Anglo American) the higher was the IQ score. When social

¹Barksdale, "...Some Parallels," p. 49.

² Mercer, "Sociocultural Factors in the Educational Evaluation of Black and Chicano Children," paper presented at the Tenth Annual Conference on Civil and Human Rights of Educators and Students, Washington, D. C., February 1972, p.9.

background was held constant there was no difference between the measured intelligence of Mexican-American children and the Anglo children on whom the test was standardized. On the basis of such results, Mercer concluded that "socio-cultural factors should be taken into account when interpreting the meaning of any child's IQ test score."¹

Research studies conducted by Klig, et al., have shown that many individuals have been wrongly labeled and placed in classes for the educable mentally retarded not only because of cultural biases built into the test instrument, but also because of other external factors such as the examiner/child relationship, student motivation to take and do well on the test, the differential interpretation of the test questions by the minority child, and the linguistic differences between the test and the testee.²

In a study by Zigler and Butterfield in 1968, a group of students were divided in two groups. One group of students were administered the Stanford-Binet Intelligence Scale using standard procedures as instructed by the test manual, while the other group of students were administered the Stanford-Binet using alternative procedures designed to optimize the child's motivation. Results of

¹Mercer, "Sociocultural Factors in the Educational Evaluation," p.9.

²Sally Klig, et al., Protection in Evaluation, p. 59.

the study showed higher IQ scores and better when alternative predictions of students' abilities when alternative procedures to optimize motivation were used as opposed to when instructed procedures were used. Zigler and Butterfield concluded at the end of their study that "Differences in motivation within the test situation may account for some of the IQ test score differences between cultural and socioeconomic status groups."¹

Other studies done on determining the cultural biases of the IQ tests have shown quite different and opposing results. As stated by Arthur Gensen, all tests discriminate among persons. Tests would be useless if they did not. Through the use of testing measurements, one is allowed to classify persons according to different abilities and traits. "Ability tests are explicitly designed to discriminate among individuals." Ability tests were never

...designed for the purpose of discriminating between any social groups. Psychologists are generally agreed; with possible race exceptions, that group discrimination by ability and aptitude tests is entirely incidental. No reputable standardized ability tests were ever devised expressly for the purpose of discriminating among racial, ethnic, or social-class groups.²

Jensen's statements were supported by a study he

¹Ibid., p. 62.

²Arthur Jensen, Bias in Mental Testing (New York: The Free Press, 1980), p. 42.

later conducted. The study was one in which data on the Wechsler Intelligence Scale for Children (Revised) was analyzed by means of the statistical measure of the analysis of variance. WISC-R Full Scale scores were obtained for a total population of 1,244 children --622 Black children and 622 White children. Socioeconomic (SES) status of each child were determined by use of the Duncan's Socioeconomic Index. Results showed that

...race and SES together contribute only 22 per cent of the total IQ variance. More than three times as much of the variance as is due to race and SES combined is attributable to differences between families of the same race and SES level plus differences among children within the same family. In fact, the largest single source of the total variance is the within family differences, that is, differences among siblings.¹

The results of the study have indicated that IQ test measure individual differences and not differences between groups of people according to racial, socioeconomic, or cultural backgrounds.

On the matter of test bias, Jensen has stated that a test is bias when and if it correlates more with a particular group than the criterion it was intended to predict.² One's test score is biased to the extent that it is unreliable and invalid. As early as 1921, a study was done by Robert M. Yerkes at C. S. Yoakum to determine

¹Ibid., p. 43.

²Ibid., p. 48.

the reliability of particular mental tests. In their study they calculated the correlations of various mental tests and compared these correlations to the Alpha and Beta Army mental tests. Results indicated that the Alpha correlated with the Beta test at .80. "Alpha with a composite test of Alpha, Beta, and Stanford-Binet gives .94."¹ Conclusions gathered from the study are that people who do well or badly in one test are more than likely to do just as well or badly on other tests. Again, "...the evidence shows that the various tests in the mass are testing the same capacities. The tests are all a good deal alike and they are reliable."² The high correlations between the various testing measurements enables one to say that the scores are not results of mere chance, but they do measure one kind of ability. "When the same tests are repeated at intervals on the same groups of people, they give much the same results. The fact that the child makes the same score year after year is significant."³

Critics of the IQ test have often challenged its

¹R. M. Yerkes, "Psychological Examining in the United States Army," vol. 15, *Memorirs of the National Academy of Sciences* (Washington, D. C., 1921), quoted in N. J. Block, and Gerald Dworkin. The IQ Controversy (New York: Pantheon Books, 1976), p. 15.

²Ibid., p. 16.

³Ibid., p. 17.

validity. They claim that the test does not measure intelligence but that it merely measures achievement. Researchers Alexander Thomas and Samuel Sillen have stated that IQ scores simply reflect what an individual has learned.

This involves an interaction between the capacity to learn and having had the opportunity to learn what is being tested. However, these scores are wrongly presumed to indicate what he is inherently capable of learning. The IQ test measures an end product, not a potential.¹

According to Thomas and Sillen, because IQ tests measure what has been learned, it is crucial that all those children to be assessed have had equal opportunity to learn the information or skills that will be tested. Jane Mercer has concluded that our current assessment procedures are very lingo-centric and that one must be careful not to stigmatize a child for being culturally different.

Jensen and fellow researchers have strongly objected to the theory that IQ tests measure what an individual has learned. The question of whether there is a meaningful distinction between intelligence (aptitude) and achievement was discussed in great depth by seventeen prominent scholars who met for a three-day conference on the topic.²

¹Alexander Thomas, M.D. and Samuel Sillen, Ph.D. Racism and Psychiatry (New York: Brunner/Mazel Publishers, 1972), p. 37.

²L. G. Humphreys, "Theory of Intelligence," Intelligence: Genetic and Environmental Influences (New York: Grune and Stratton, 1971) quoted in Arthur Jensen, Bias in Mental Testing (New York: Free Press, 1980) p. 239.

It was concluded at the end of the conference that

1. Intelligence and aptitude tests predict future intellectual achievements, even though the contents of the achievements have nothing in common with the aptitude test.
2. Most intelligence measures are more stable across time and are less susceptible to the influence of instruction or training than is the case of most achievement measures.
3. The total score on an intelligence test represents a second order factor that is not itself describable in terms of test content or specific items of knowledge or skill, whereas achievement test scores (unless combined from a great variety of achievement tests) represent primary factors that are describable in terms of specific content and the specific behavioral aspects of successful performance.¹

In an attempt to determine the direction of causality between intelligence and achievement, William Crano, et al., administered a variety of intelligency and achievement test to a large sample of 5,495 children. Students in grades fourth and sixth were given both types of tests. The key question the study tried to answer was, so the Grade 4 achievement tests predict Grade 6 IQ more or less than Grade 4 IQ tests predict Grade 6 achievement? Results of the study indicated that the correlation from Grade 4 to 6 was higher in the direction IQ_4 achievement than in the direction Achievement $_4$ IQ_6 . It could be concluded from such results that "individual differences in IQ have a causal effect on individual differences in achievement."²

¹Ibid., p. 240.

²Ibid., p. 241.

Student with high IQ's also had high achievement scores and students with low IQ scores had low achievement scores. Students who were given achievement tests in the Fourth grade and who scored high did not necessarily score high on the IQ test in the Sixth grade.

Walter Lippmann in one of his debates with Terman summarized the true purpose of IQ tests when he said that,

" The intelligence test promises to be more successful in grading the children. This means that the tendency of the tests on the average is to give a fairly correct sample of the child's capacity to do school work. A fair reading of the evidence will convince anyone that as a system of grading the intelligence test may prove superior in the end to the system now prevailing in the public schools. The intelligence test is an instrument of classification. When it comes into competition with the method of classifying that prevails in school, it exhibits many signs of superiority.¹

Lippmann further stated that danger in the use of the IQ tests occurs when careless, unsophisticated and prejudiced educators within the educational system come to a complete stop when they have classified and labeled students and forget that their duty is to educate.²

IQ scores are often viewed in collective terms -- one score representing many different abilities. The tests

¹Walter Lippmann, "The Reliability of Intelligence Tests," The IQ Controversy ed. N. J. Block and Gerald Dworkin (New York: Pantheon Books, 1976), p. 17

²Ibid., p. 19.

do not indicate why a student did poorly on particular tasks and good on others. Knowing such answers would allow the educator to take positive steps in improving the student performance.

Studies dating back as far as the 1930's have repeatedly demonstrated that intelligence scores have been used as the primary and single score for placement of a child in the Educable Mentally Retarded classes. Yet, in spite of these studies, clinicians and psychologists have continued to ignore these findings and recommendations made. A single IQ score without any indication of what strengths and weaknesses are represented is virtually meaningless.

As a solution to the many problems brought about by the use of IQ tests, many school systems, including New York City, Minneapolis, and Philadelphia have dropped the IQ test from their testing programs. "The National Education Association has called for a moratorium on standardized testing of minorities until tests and other procedures are developed which will eliminate the imprecisions of these tests for minority, especially those children who have been mingled by deprivation and grinding poverty.." ¹ Other educators, unlike Barnes, have resorted to less drastic measures as a means of remedying the situation. Donald Bailey proposed that it would be a delusion

¹Barnes, "IQ Testing and Minority School Children," preface.

to think that the elimination of test biases alone will result in nondiscriminatory decisions. He concluded that the problem is one of inadequate training on the part of educators and psychologists in the decision making process.

Until teachers, administrators, school psychologists, parents, and others responsible for placement decisions gain skills in assessing and evaluating children from a pluralistic perspective within a team approach, school systems will continue to have difficulty in meeting legislative and social demands for nondiscriminatory evaluation.¹

Bailey further recommended that the evaluation team be more keen and perceptive in identifying the discrepancies between skills the child possesses and those skills required in the classroom. Once this has been determined, the placement decision can be made on the basis of which classroom setting will best satisfy the child's needs.²

Another researcher and educator, June Jordan, feels that the solution to our problems is to develop appropriate curricular programs for children with different types of profiles, especially those with obvious sociocultural differences.

In agreement with all aforementioned, Mercer concluded that establishing norms for each ethnic/racial group, or developing culture specific tests is not the

¹Donald W. Bailey, Jr. and Gloria Harbin, "Nondiscriminatory Evaluation," Exceptional Children 46 (1978): 595.

²Ibid.

solution. Instead, throughout our psychological assessment of the child, cultural identity must be recognized. It is left up to us, the educators to "...develop an assessment system that takes cultural differences into account that leads to equal educational opportunities for children of all ethnic groups."¹

¹Marylane Y. Soeffing, "The Now Way," Education and Training of The Mentally Retarded (April, 1975): 112.

²Mercer, "IQ = The Lethal Label," p. 97.

Efficacy of Educable Mentally Retarded Classes

From early in the school year, public schools all over regularly sort students into separate categories on the basis of estimated IQ scores. It has been noted by Kirp that many school systems' resources are scarce and cannot tailor to individual programs to satisfy individual needs. In spite of this, they continue to develop classifications which attempt to reconcile the many variations among exceptional children with the limitations of school resources.¹ Note, that no one is questioning here whether school "classification" is bad and damaging to students, for we are aware that some classifications are necessary in order to accommodate to the wide variety of students' talents. What is being questioned are 'particular' school classifications and their effects on the student. "Research findings have indicated that particular special education classifications have effectively separated students along racial and social class lines." "Such segregation undoubtedly" not only "cause educational injury" but also personal and psychological injuries to minority students. The research findings suggest that "...such adverse classifications stigmatize students, reducing both their self-image and their worth in the eyes of others."²

¹Kirp, "Student Classification, Public Policy", p. 7.

²Ibid., p. 13.

Results of studies done on the damaging effects of the IQ label causes one to wonder whether schools can adequately do the job of classifying students according to their abilities and needs. In a study conducted by the Washington, D. C., school district on appraising the students assigned to classes for the retarded, it was found that two-thirds of the students placed in special classes in fact belonged in the regular program. In another study, retests of 378 EMR students from thirty-six school districts in Philadelphia area revealed that the schools' "...diagnosis for twenty-five per cent of the youngsters found in classes for the mentally retarded may be considered erroneous, an additional forty-three per cent may be questioned."¹

In October of 1970, the Federal District Court of Massachusetts ruled that the WISC and the Stanford-Binet were limited classification devices. Because of such classification devices, seven black students were placed in EMR classes. When private retesting was conducted, the students were not found to be retarded.²

In another study done in July, 1975, it was indicated that many of the schools' staff members were unaware or confused about the current classification and placement

¹Martimer Garrison, Jr., and Donald Hammill, "Who Are The Retarded?" Exceptional Children 38 (September 1971): 15.

²Sally Klig, et al., Protection in Evaluation, p. 107.

procedures. Interviews with the staff revealed that the staff was less tolerant of minority students than they were of other students. As a result of this and the lack of appropriate programming within the schools, more minority students, as compared to other students, were placed in special education classes. The staff held the opinion that "...the problem with minority students would be lessened if more resources were made available to provide alternative educational environments other than special education classes."¹ Special class placement was seen as the only way in approaching and alleviating difficult academic problems. In brief, the staff lacked the knowledge to differentiate between the needs of a child who was handicapped verses a child who was behind scholastically, or a child who was culturally different and/or economically disadvantaged. If those directly involved with special education cannot agree on the definition or classification of the mentally retarded, then "How can it make comparisons, compile incidence figures, and evaluate the effectiveness of educational/remedial programs? More importantly, how can teachers be confident that they are providing the

¹Johnson, John L., et al. A Study of the Special Education Placement Procedures in Montgomery County (Rockville, Md.: Montgomery County Public Schools, ERIC Document REproduction Service, ED 113888, July 1975), 7.

best appropriate education for a child needing special help?"¹

It is apparent that student assessments have been conducted as a means of qualifying students for special education rather than developing a complete understanding of the child's learning needs.

Since the passing of Pl 94-192, school officials have been scurrying so madly to get federal fundings that they have grossly misclassified and placed many students in special classes. Specific steps in the evaluation and placement procedures mandated by law have been ignored or overlooked. More and more, parents' contribution to placement decisions have been minimized and denied. School officials have been more concerned with paper compliance, such as a signature on a form to document parent consent. They have been less concerned about encouraging true parent participation in the decision making. "Parents who now expect to have an equal say in the child's individualized education plan (IEP) are treated as threats to the smooth functioning of the process."²

Numerous interviews have indicated that parents have often felt pressured into accepting the school's

¹Thomas Huberty, James Koller, and Terry Jen Brink, "Adaptive Behavior in the Definition of Mental Retardation," Exceptional Children 46 (January 1980): 260.

²Pechter, "Exceptional Law with Exceptions?", p. 69.

recommendation of special class placement because they were told no other services were available to meet their children's needs. "Surrounded by a sea of smiling, strange faces, parents feel swept into a whirlpool of confusion. They find themselves nodding "yes" to the beat of all the other heads in the room, signing "yes" under the other heads in the room, while screams of "No, no, no!" stick firmly in their throats."¹

While billed as a means of providing special opportunities and specialized help to "special" students, the term special education has become a mere euphemism for the dumping ground of children who do not fit the standards applied to the majority of children. Special education, as stated by Steven Pechter in his article, "Exceptional Law with Exceptions?", has provided a means through which teachers could funnel their worst behavior problems with the excuse that such placement is good for the child. Studies show that teachers often referred students for special education placement: "who use aggressive behavior to express frustrations they cannot overcome by verbal means; whose motivational skills need strengthening; who do not respond and conform to a competitive classroom atmosphere; and who need small group experiences with individual instruction."²

¹Ibid., p. 70.

²Johnson, John L. et al. A Study of the Special Education Placement Procedures in Montgomery County, p. 28.

Careful review of those referrals for special class placement does not necessarily indicate retardation or the need for special services. What they do indicate is the need for new and better approaches to varying student learning patterns and needs. Also needed are pre-service and in-service training programs to effectively educate the staff about differences of emerging minority populations.

Educators often make the false assumption that a child's placement in a special class will automatically guarantee individualized instruction based on the child's specific learning needs. Research, however, has shown that special class placement often indicated instruction in self-contained classrooms with little or no individualized instruction based on the child's needs.¹ The results of such studies suggest that in most school districts surveyed, procedures involved in the delivery of special services were inadequate to meet the criteria stipulated by the law. The law clearly states that "...an individualized education program (IEP) be written for each exceptional child and that each child is to receive the instruction based on that IEP within the least restrictive environment."²

¹Lyndal M. Bullock and William Clifton Rigg, "Relationship of Individualized Instruction to Placement of Exceptional Children," Exceptional Children 47 (November 1980): 225.

²Ibid.

Once actual placement of the child in a special class has been made, there is little hope for that child to ever return to the regular classroom or be mainstreamed.

The fact that large numbers of minority group children are placed in special classes alone would not provide enough evidence that EMR classes are failing to provide these children with an adequate and meaningful educational experience. However, when we take note of the small number of Blacks and minority students that are mainstreamed back into the regular classroom, we can make a more definite and factual statement that special classes are, in fact, failing.¹

A study done by Chenault in 1970, showed that Blacks were less likely than Whites to return to the regular classroom.²

The entire special education program is indeed ironical when one considers that special classes which have teachers who are supposed to be specially trained, which have more money spent on each child's education, and which have fewer students enrolled in each class along with specified programs geared to meeting each individual's needs, are in fact, not accomplishing their objectives and goals. However, the entire contradictory situation seems more understandable when one looks at the commonly held philosophy of special class services and methods used in providing such services.³

¹Ibid.

²Mercer, "IQ=The Lethal Label," p. 98.

³Kirp, "Student Classification, Public Policy," p.19.

These programs typically adopt a passive-acceptant approach, reflecting

the assumption that: the retarded individual essentially is unmodifiable and, therefore, that his performance level as manifested at a given stage of development is considered as a powerful prediction of his future adaptation...Strategies aiming at the helping him to adapt...will consist of molding the requirements and activities of his environment to suit his level of functioning in a significant way. This, of course, is doomed to perpetuate his low level of performance.

Because the student's learning environment is made to be less difficult and demanding, he/she continually falls behind and is unable to fulfill the requirements of the school curriculum. Thus the entire situation becomes a self-fulfilling prophecy.

Educators to begin with "know" that Black and minority students are dumb; the IQ "proves" that they are dumb; and then the special class provides the type of education programming that ensures the kinds of behaviors through which such children can demonstrate that they are dumb!²

In short, it is all a vicious cycle rotating around the lives of our children. Clearly, all evidence "...do not support the existence nor the continuation of special education classes."³

¹Ibid.

²Ross, "Confrontation: Special Education Placement and the Law," p. 11.

³Floyd D. Prillaman, "A Critical Analysis of Placement Factors in Primary and Intermediate Classes for the EMR" (Ph.D. dissertation, College of William and Mary, 1960), p. 38.

Adaptive Assessment

Based on the results of numerous research studies, it would be foolish for one to deny that the existing special education programs are not achieving their goal. Many children who do not qualify for the special services are grossly and unregrettingly placed in such classes. On the other hand, many exceptional children who do qualify for specialized services and who are badly in need of these services are not receiving the special services which should be provided for them. There is much improvement that is needed. However, abandoning all special classes is not the solution. Removal of all existing special education classes will only mean starting right back where we came from. Hundreds of students will be denied an equal opportunity to be educated. Such a course of action will not solve the problem of providing special help for the many minority students who are not quite prepared to function on the same academic level with the middle class Anglo student and who also does not fit the retarded description. They are still going to need help in order to succeed in the mainstream of public education; they will need help whether or not we call them retarded. If we abandon special education; we will be freed with the problem of recategorizing and regrouping all presently labeled special education students. Again, this is not the answer.

Elimination of special classes and relabeling are not a panacea. What is needed is a conscientious effort on the part of all educators to test a variety of ways to improve existing services and, at the same time, continue to develop different approaches and programs to increase the level and appropriateness of services which are necessary for the exceptional child.

Jane Mercer has proposed one way in which we can improve our existing services. Viewing our assessment procedures as one of the biggest downfalls of special education, Mercer has urged that more school systems use a humane and pluralistic assessment in diagnosing students. Such a humane diagnostic assessment would mean students are to be tested in all of the following four areas:

1. sociocultural index of child's social and ethnic milieu;
2. a measure of adaptive behavior that would give information about how the child functions at home, in the neighborhood, and in the community to go along with data collected about how he functions in school;
3. an IQ score to measure academic readiness, one that is interpreted against standard norms to determine whether the child can succeed in a regular public school without additional help;
4. the same IQ test, but interpreted within the child's ethnic norms to determine the child's potential for learning.¹

¹Mercer, "IQ = The Lethal Label" Psychology Today.
P. 46.

The pluralistic model defines subnormal in terms of how the child functions in both his academic and socio-cultural environments. The model assumes that a child may have the potential to do well in school, however, they exist unrecognized by everyone because his potential is hidden behind the cultural distance between the child and the school.

The suggestion to employ more humane diagnostic assessment procedures is by all means an excellent idea for it has been too long now that use of the IQ scores as the sole criterion for special class placement has been practiced. The mere reporting of IQ scores and behavior observed in the classroom (in cases where observations were made) and teacher opinion does not constitute an adequate diagnosis and is a most serious violation of PL 94-142. Jerome Kagan has nicely summed up the importance of using such humane diagnostic procedures by stating,

There are only a few incompetent children in the world if you classify them from the perspective of the community of adaptation, but millions of incompetent children if you classify them from the perspective of another society.¹

The American Association on Mental Deficiency (AAMD) has defined mental retardation as "subaverage general intellectual functioning...associated with impairment in

¹Jerome Kagan, "The IQ Puzzle: What Are We Measuring?" Inequality in Education, 1973, p. 23.

adaptive behavior."¹ Mental retardation as defined by AAMD has two major components: impairment in general functionings and adaptive behavior--how well one adapts to new situations. Adaptive behavior is the degree to which an individual is able to act and maintain himself adequately within his society. It is the degree to which he satisfactorily completes all personal and social demands imposed upon him by his cultural environment.

AAMD first considered the use of adaptive behavior in determination of mental retardation back in the 1960's. Prior to this date, the Vineland Scale (a type of social classroom observation form) was used. The Vineland Scale was used in most school systems right up to the time of publication of the AAMD Adaptive Behavior Scale in 1969. In some school systems the Vineland Scale is still being used.

Despite the many obvious improvements and positive results that could come about through more frequent use of humane diagnostic assessment procedures, other research studies show that many school systems still have not employed such an approach. In a study conducted by Mercer in determining the epidemiology of mental retardation, she found that

¹Mercer, "IQ = The Lethal Label," p. 46.

"the clinicians, psychologists, and medical doctors in the community were not measuring adaptive behavior as called for by the AAMD definition. They claimed they were not measuring adaptive behavior because there were no adaptive behavior scales available for them to use. Thus, most definitions of mental retardation were still being based entirely on the IQ score."¹

Two years prior to Dr. Mercer's study in 1971, the California Legislature had already ammended the education Code to provide a legal framework for pluralistic assessment. The ammendment specified that:

1. No minor shall be placed in a special education class for the mentally retarded if he scores above two standard deviations below the mean, unless a complete psychological examination by a certified school psychologist investigating such factors, developmental history, cultural background, and school achievement substantiates the retarded intellectual development indicated by individual test scores.
2. Such examinations must include estimates of adaptive behavior. Such adaptability testing is not limited to home visits.²

The AAMD's definition of mental retardation tends to classify students into four categories. They are:

1. The comprehensively or clinically retarded--persons who scored in the subnormal range on both the IQ test (two standard deviations below the mean) and the adaptive behavior scale.
2. The quasi-retarded--those persons who scored in the subnormal range only on the IQ test but normal on the adaptive behavior scale.
3. The behaviorally mal-adjusted--those who scored in subnormal range only on the adaptive behavior scale.

¹Soeffing, "The Now Way," p. 111.

²Mercer, "IQ = The Lethal Label," p. 47.

4. The normal--those who scored within the normal range on both the adaptive scale and the IQ test.¹

Too often when an individual is diagnosed only with an IQ instrument, the clinically and quasi-retarded individuals are confused. When a study was done on comparing the social role performance of the quasi-retarded with the clinically or comprehensively retarded, the findings showed that the quasi-retards were leading normal and successful lives. "Many had not fallen behind, eighty per cent had graduated from high school, all held jobs, sixty-five per cent had white collar jobs."² They did not stand out from the rest of the adult community as being awkward or incompetent. Based on the results of this study and similar studies, it was concluded that persons who score in the boaderline category should be referred to as low normals rather than comprehensively retards. Such persons should not be placed in EMR classes, however they should be provided with some type of additional help that will enable them to catch up and learn those skills they need in order to assure their success in the regular class. An example of such additional help could be provided in the same manner

¹Idem, Social Factors in the Educational Evaluation of Black and Chicano Children, paper presented at the 10th Annual Conference on Civil and Human Rights of Educators and Students, Washington, D.C., February 1972, p. 8.

²Ibid.

as it was provided for the large immigrant population from Eastern and Southern Europe into the United States back in the late 19th century. At that time special education was not in existence and school officials provided what was called "opportunity classes"--special programs designed for students to overcome their initial differences and to prepare them for regular schoolwork.¹

In Jane Mercer's attempt to provide a complete diagnostic measurement that would make assessment of a child in all areas mentioned in the humane pluralistic model, herself and colleagues devised a measurement called the System of Multicultural Pluralistic Assessment (SOMPA) in 1975. The SOMPA instrument is a practical testing device that can be used by schools and clinics. The instrument was standardized on 2100 students--700 Black children, 700 Chicano/Latino surnamed children, and 700 Anglo children. All children's ages ranged between five and eleven years--the ages when children are most diagnosed. The instrument includes: interviews with the child's parents, sociocultural modality indexes, an Adaptive Behavior Inventory for Children Scale (ABIC), a Health History and Impairment Inventory, a Physical Dexterity Battery, the Bender Gestalt test and the Wechsler Intelligence Scale for Children (WISC). In all, the

¹Kirp, "Student Classification, Public Policy"
Harvard Educational Review, p. 20.

SOMPA instrument is a battery of six measures. The results from the IQ tests are compared to the child's other scores received on the adaptive measurements. "The SOMPA was designed for use in a culturally diverse society. It assumes a pluralistic mode of society and seeks to implement the goals of cultural democracy."¹

Part II: Brief Discussion of the West Indies'
Social and Educational Systems

The West Indies is comprised of those islands which are scattered in the tropic basin between continental North America and South America, east of Central America and Mexico. The entire stretch of West Indian islands are bounded on the south by Colombia and Venezuela and on the West by Central America. The entire Caribbean archipelago is divided into two large groups--the Greater and Lesser Antilles. The United States Virgin Islands and Puerto Rico are American territories. The other islands form a mixture of other nationalities. Many of the islands are now independent countries. Some are dependents of Britian, some of France, and some of the Netherland Antilles.

The some 20,000,000 people living in the warm tropical West Indies form a colorful mosaic painting of a people of many mixed races and nationalities. The history

¹Asa G. Hilliard, "Cultural Diversity and Special Education", Exceptional Children 46 (May 1980): 587.

of the islands show deep influential traces of many mixed nationalities stemming from Africa, Spain, and Latin America, Britain, France, Dutch Netherland Antilles, and a sprinkling from China, Portugal and the East Indies. Throughout the years most of these groups have intermixed, creating in effect, a very small minority of true African or European descendants. The result is a unique blend of heterogenous and pluralistic societies.

Each West Indian island is significantly different from each other. Such differences are evidenced in the island's population, language, physical characteristics and economic developments. David Lowenthal, a prominent West Indian researcher, has summed it up quite well when he said,

...one can see resemblances throughout the entire archipelago. These resemblances and recognitions, originally the product of similar economic and social forces based on North European settlement plantation agriculture, and African slavery, have subsequently been reinforced by a widespread community of interest, along with interregional migration for commerce, employment, marriage, and education. Within the Caribbean itself, however, one is more conscious of differences than of resemblances.¹

As stated before, the West Indies are a group of pluralistic and multi-racial societies. Here in the islands one does not see sealed off, segregated communities of Blacks and Whites, as so commonly seen in other mainland

¹David Lowenthal and Lambros Comita, ed., Consequences of Class and Color (New York: Anchor Press/Doubleday, 1973), p. X.

and foreign countries. However, although different racial groups live side-by-side in publically celebrated harmony, there exists a strong color and class social system. West Indians are aware of how one's color and family name often determines his power and social status. "They have trained themselves to believe that in the slightest shade the coloured man is above the Black man and so it runs right up to White."¹ The impact and effects of such tacit acceptance by the majority of West Indians of the pattern of racial inequality have been extended and carried over to more broader and general feelings of West Indian inferiority and inequality. The West Indian has learned to idealize the European and mainland way of life.

Although every institution -- law, the family, religion, education, and the like -- exhibits a wide range of local forms and norms, closet approximation to whatever is believed European has traditionally been the ideal. The West Indians look to the Western models and experience to express their own cultural developments. Because the West Indian has been deprived of a tradition of indigenous cultural experience and expression, and of their direct links to African and Asian homelands, West Indians have learned to identify themselves with the Europeans. Believing that the European and Western ways of life are better has impeded their West Indian social growth and development, with very little planning and designing of social projects that are applicable to local conditions and need-demands.²

Such views of European and Western superiority has perpetuated itself in our present day education systems

¹Ibid., p. 6.

²Ibid., p. 16.

throughout the entire Caribbean.

The educational system of the West Indies has been criticized by many prominent Caribbean educators and researchers as one that is nonfunctional and inadequate in meeting the social, political, and cultural needs of the people. Eric Williams, premier and educator of Trinidad, concluded at the end of his study on "The Dysfunctional Aspects of British West Indian Education to the Needs of the Respective Societies," that the curriculum is based very largely on materials that have no relationship to the daily lives of the people, their environment, and culture.

Shirley Gordon has also stated that,

The educational system of the British West Indies have tried to adopt the English methods and entire curriculum to West Indian public schools. The results has been apathy on the part of those who, not without justification, could see no point in schooling...¹

Simon Jones-Hendrickson has described the educational system specifically of the islands of St. Kitts, Nevis, and Anguilla as one that has:

...a shortage of qualified teachers; inadequate school facilities; inadequate technical training facilities for the entire labor force; an imbalance in the² levels of education...; and anachronistic curriculum.

¹Shirley C. Gordon, A Century of West Indian Education (London: Longmans, Green and Company, 1963), p. 3.

²S. B. Jones-Hendrickson, "Education in the Economic Transformation of the State of St. Kitts-Nevis-Anguilla" (Masters of Science Thesis, University of Illinois State, p. 19.

It was also found that general school attendance was low. This partly stemmed from the limited opportunity by the majority of the population to receive adequate primary and secondary education.

In most of the non-American West Indian Islands, the higher levels of education has been, and it still is to a large extent, restricted to the upper middle and lower upper social classes. Entrance exams to enter into the higher levels -- grammar school -- are extremely difficult to pass, and once accepted a tuition fee is charged. Many of the lower class students who do pass the standardized entrance exams sent from London still are not able to further their education because their family cannot support their way through school for an additional four or five years. Such students are then forced to enter the labor market untrained and unskilled. Those students who are able to further their education are usually in the end, over qualified for the job positions available in the islands; or, as is more often the case, they are not adequately trained to deal with the social conditions of their own islands. Instead they have been taught to memorize every important historical event that occurred in England. To conclude, the educational system was summarized at a workshop held in 1970 as one that:

...all the territories have the apparently contradictory problems of producing more persons with moderate education than the economy of the country

can absorb but not enough with greater education to keep pace with the manpower needs of developing technological societies.¹

The educational system of the U. S. Virgin Islands share many of the same pitfalls as those of the other non-American West Indian Islands. Research studies have indicated that the educational curriculum is not of practical use to its people. The curriculum does not adequately train students how to find solutions to their own social and economic problems.

Since the transfer of the Virgin Islands from Denmark to the United States, the United States began a comprehensive program of Americanizing its new territory. The public school system was singled out in particular to play the key role in this process. The school system since then has been Americanized to a remarkable degree. There has been criticisms that this system, as it evolved in the Virgin Islands, has been unresponsive to the needs of the Virgin Islands.²

Only until quite recently have education officials begun to seriously take some of the many recommendations made by qualified researchers and interested persons about changing the curriculum to reflect more of the local culture and social conditions. As a result, during the 1968-69 school year, a new federally funded program named, Project Introspection was implemented. This program has been, and still is, a plus to the Island's school curriculum

¹Ibid.

²Charles Wesley Turnbull, The Structural Development of Public Education System in the Virgin Islands (Doctor of Philosophy dissertation, University of Minnesota, 1976), p. 24.

and instructional program. The program was implemented as a means of developing curriculum and instructional activities that are pertinent and relevant to the learning needs of Virgin Islands' students. The program was also implemented to act as a catalyst for curriculum change.¹ Many courses in vocational education that provided training in the basic skills students need when employed in a full-time job were finally being offered in the public high schools. A few courses in Caribbean History were also plugged into the curriculum.

Although a few improvements were made, much was left to be desired in the total educational program to accommodate for the large diversity of culturally different students within the school population.

Over the past years, there has been an increasing number of non-American West Indians migrating from their homelands to more economically prosperous islands. Their migration path often lead to the U. S. Virgin Islands. There has been an increasing outpour of people to other American islands because the job market in the other non-American West Indian Islands is very limited, jobs are hard to find and salaries are minimal. "The per capita income in the U. S. Virgin Islands is the highest in the

¹Ibid, p. 79.

Caribbean."¹ Dr. Simon Jones-Hendrickson, in his study of educational and economic status of St. Kitts, Nevis, and Anguilla, indicated that forty-seven to fifty-six per cent of the labor force was employed in the sugarcane industry and other related fields. The average income was \$4 per day. When these same people moved to the U. S. Virgin Islands and found employment, the manual worker was making a minimum of \$3 per hour. They were now making "500 per cent more money" for the same eight-hour day that was often less strenuous in the Virgin Islands.² Such conditions are very similar, if not identical or even worst, in the other non-American West Indian islands, Generally in all of the islands, even those persons from the middle class employed in such jobs as teaching, business, civil services and small land proprietors, earn a very small salary in comparison to what they would be making in the Virgin Islands doing the same job. Although living in the Virgin Islands is seemingly unbearable at times, the alien worker puts up with his headaches of high apartment rents, denial of many government services, and constant bombardment of accusations of inferiority throughout every area of society. He accepts these abuses because

¹U. S. Virgin Islands Training Program, October 1979, p. 7.

²S. J. Hendrickson, "Education in Economic Transformation," p. 19.

of the rewards of a wage structure, handsome in comparison, to anything he has known in his homeland.

A large bulk of the alien population residing in the Virgin Islands have been classed as either illegal or bonded aliens. The U. S. Virgin Islands population breakdown as of 1970 statistical estimates showed:

Native-born Virgin Islands	26%
Born in Puerto Rico	12%
Born in Continental U. S.	8%
Born in Europe	5%
Permanent Resident Alien	12%
Bonded*	15%
Illegal Aliens*	4% ¹

Because many of the aliens living in the islands were here without any permanent residency (often referred to as the "green card"), they could not send their children to the public schools. Many of the bonded parents managed to get enough money to send their children to private schools. Of those parents who were not so fortunate to afford to send their children to a formal full-time private school, they paid private tutors to instruct their children. Not

¹U. S. Virgin Islands Training Program, October 1979, p. 3.

*Bonded aliens are non-American citizens given temporary permission to work from the government.

*Illegal aliens are persons living in the islands unknown to government officials or the U. S. Immigration Service.

being able to afford to pay a trained tutor, very often these private tutors were not professionally trained. Many simply had a few more years of formal school education than the child being tutored. Of those remaining alien parents who could not pay for some type of education for their children, they were forced to have their children remain at home or have them seek parttime employment as a means of easing the family's financial burden.

Since the signing of a court law in June 1970, which stated that "...beginning on the autumn of 1970, all alien children of school age legally residing in the Virgin Islands were to be admitted to the public schools," the public schools were forced to provide an education for these students.¹ Students were often placed wherever there was an opening. As a result, many students were wrongly placed according to age and ability. The 1971 school enrollment increased by 21.16 per cent. In the years following, the enrollment population increased to almost 100 per cent. The statistical reports for the 1977-78 school year indicated there were "25,587 students enrolled in the Virgin Islands public schools, and an expected 26,350 students in the following school year (1978-79). Of the total school population, one-fourth of the students were non-citizens from the

¹Hosier v. Evans, District Court of the Virgin Islands, January 1970, quoted in C. W. Turnbull's thesis, The Structural Development of a Public Education, 1976, p.174.

neighboring Caribbean islands."¹

The wide variety of cultural differences suddenly lumped together presented several problems. "Eighteen per cent of the students in the system have Spanish surnames and special problems are encountered in teaching students who either do not speak English or who speak it only as a second language."² Often teachers were also faced with the problems of obtaining past academic records or files on non-native students and with trying to cope with students who were previously out of school for extended periods of time. Because of the differences in background and educational experience of the non-native alien students, hardships in assimilation into the Virgin Islands' school environment, were often created.

Turnbull, acknowledging the many problems that existed within the educational system of the Virgin Islands made several recommendations for the improvement of the Virgin Islands' Education Department.

1. The school curriculum should include more learning activities -- history, culture, language, customs -- related to the countries from which non-Virgin Islands students come in and endeavor to inculcate an attitude of mutual respect and promote mutual understanding.

¹U. S. Virgin Islands Training Program, October 1979, p. 8.

²Turnbull, Structural Development of Virgin Islands Education, p. 9.

2. More attention should be given to the learning needs of the non-English speaking and non-citizen child.
3. A comprehensive plan should be developed by the public education system to promote more social cohesion among the various races, ethnic groups, and social classes in the schools in particular, and the society in general.¹

As stated in Part I of the Literature Review, too often a child who is culturally or linguistically different, is improperly diagnosed, labeled, and placed in a class for the retarded. Our adoption of the American educational format, is now deeply embeded into our educational system. The effects of this has produced positive as well as negative results for Virgin Islands children. Research has shown that the wide-spread use of such instruments abroad in cultural backgrounds much more similar to the normed population than our West Indian students, have been ineffective when taken as the only assessment measure of a child's abilities. Speaking on this topic, Dr. C. Corbin stated,

Our educational system in the Virgin Islands is a direct copy of American standards...and further consider the similarity of Afro-American children in the American educational arena, we can draw numerous parallels concerning the irrelevance of intelligence measuring devices, i. e., standardized tests, as a true indication of the ability of both sets of children. When we consider the cultural differences of the two sets, we conclude that, first, we find the Afro-American child's life climate is geographically located on the mainland United States but still unable to deal with the standard values of the so-called norm. Second, we find the Caribbean-American child whose culture, as the Afro-American child is of a totally different nature than the norm. Add to this cultural difference the handicap of geographical location, and it is clear why such American standards as intelligence tests do not apply

¹Ibid.

to Caribbean students. Consequently, we are dealing with this phenomena in the cultural as well as the geographic front.¹

To extend this point further, the non-native alien student is at an even greater disadvantage to the Caribbean-American (U. S. Virgin Islanders, and Puerto Ricans), for his entry into the Virgin Islands Americanized school system is more than likely his first exposure to American norms and set procedures. Because of the many problems the non-native students are forced to confront with, it is the writer's thesis that, more than likely, many of them will be improperly diagnosed and misclassified as intellectually slow and be denied an education that is appropriate for their individual needs.

Dr. Harry S. Dyer, former Vice President of the Educational Testing Service, also pointed out that,

...intelligence tests are supposedly based on a representative sampling of students nationality, but ...the creators do not use data from non-white schools. So the fallacy of standardized tests lies first, in the lack of non-white accountability. This non-white grouping definitely refers to the Caribbean student.²

In the 1979 Virgin Islands Annual Program Plan specific guidelines and modifications of procedures for children with linguistic or cultural differences were

¹Dr. Carlyle G. Corbin, Institutional Consequences of Imported Education to the U. S. Virgin Islands (St. Croix, International Institute Caribbean Regional Office, 1975, p. 6

²Ibid., p. 8.

established. The guidelines specified that:

...appropriate diagnostic prescriptive techniques or processes specifying deficiencies, nonadaptive behavior or extreme cultural differences, are used when a child cannot be evaluated by the generally used instrumentation and/or procedures. Cultural differences are to be taken into account in interpreting the meaning of multiple sets of data from both the home and school. Assessment of a handicapped child is tailored to assess specific areas of educational needs, it is multi-factored and multi-sourced, and provides more than a single general intelligence quotient.¹

Total adaptation of these established guidelines could certainly bring about a significant reduction of the large number of students who have been improperly diagnosed and misplaced in the school system. A small indication of whether these guidelines are being followed and the resulting effects will be provided at the end of the proposed study.

¹U. S. Virgin Islands Training Program, October 1979, p. 127.

CHAPTER III

DESIGN

The Source

In order to test the research hypothesis as it applies to Virgin Islands and non-native West Indian students, the entire Educable Mentally Retarded (EMR) public school population on the islands of St. Thomas and St. John were used. According to the number of student records on file in the Office of the Educational Diagnostic Center, an extension of the State Office of Special Education, there are 259 students identified as EMR. A total of all public schools with EMR classes on both islands of St. Thomas and St. John is fourteen, with a total of thirty-two EMR classes. The proposed study included all levels of EMR students -- elementary, junior high, and senior high.

Procedure For Collecting The Data

A roster of all students identified as EMR and assumingly who are presently enrolled in EMR classes on the two islands was obtained from the Educational Diagnostic Center on St. Thomas in order that these students' records may be pulled from among the other files. The names of all the students were rearranged in alphabetical

order. Students folders were then numbered from 1 to 259. When information was taken from each file folder, it was classified according to the given number, rather than the particular student's name. This was done in order that the students' identity could be kept confidential.

Specific information referring to the student's place of birth (nationality) was gathered from the files. Also obtained from the files was information referring to the assessment and placement procedures of all EMR students. Statistical information regarding the total number of students presently in both regular and EMR classes in the public schools on the islands of St. Thomas and St. John was obtained from the Planning and Research Office in St. Thomas.

Taken from the same source, statistical breakdowns of the total school population according to nationality was obtained. Interviews conducted with the Coordinator of Diagnostic and Educational Services, and with the Supervisor of Special Education for St. Thomas, St. John School Districts, to determine the current placement criteria of EMR students used in the Virgin Islands school system were held.

Analysis of Data

A .05 level of significance was used to determine if the total number of non-native students presently enrolled in the EMR classes on the islands of St. Thomas and St. John is a significant disproportionate amount as compared to their

total school population and the total number of native Virgin Islands EMR students. A goodness of Fit Test, the Chi-Square Formula, was used to determine such a level of significance.

According to the U. S. Virgin Islands Office of Special Education, in order to place a child in any EMR class, five criteria must be met. They are:

1. Parent consent for testing and placement.
2. Sensory Testing (which includes vision and hearing examinations).
3. Intelligence assessment with scores ranging between 50 to 74.
4. Achievement assessment.
5. Adaptive behavior assessment.*

Numerical values were graphed to indicate the number of students whose files showed a completion of each of the above placement criteria.

Although not stated as part of the placement criteria, federal law mandates that once a child has been placed in an EMR class, he/she must be reevaluated every three years. All American states and territories must comply with this ruling. The decision of what constitutes a reevaluation is left up to each individual state and

*Such information was gathered from interviews conducted with the Coordinator of Diagnostic Services, Mrs. Helen Reed, and the Supervisor of Special Education for the St. Thomas, St. John school districts, Mrs. C. Culliver, in February of 1981.

territory. According to the Coordinator of Education Diagnostic Services, a reevaluation may consist of an IQ and/or an achievement assessment and another adaptive behavior assessment.*

*Ibid.

CHAPTER IV

FINDINGS

This chapter presents the findings of the study, which sought to answer the hypothesis and six research questions.

Hypothesis: There is a significantly larger proportion of non-native students as compared to the proportion of native Virgin Islands students placed in Educable Mentally Retarded Classes.

Research Question No. 1: How many students currently enrolled in the EMR classes have not had parental consent for either testing and/or placement?

Research Question No. 2: How many students currently enrolled in EMR classes have not had a complete sensory assessment?

Research Question No. 3: How many students currently enrolled in EMR classes have not had an IQ assessment as specified by the U. S. Virgin Islands Department of Special Education?

Research Question No. 4: How many students currently enrolled in EMR classes have not had an achievement assessment?

Research Question No. 5: How many students currently enrolled in EMR classes have not had some sort of adaptive behavior assessment?

Research Question No. 6: How many students currently enrolled in EMR classes have not had a reevaluation assessment?

The hypothesis was tested at the .05 level of significance. Findings relative to the tested hypothesis, conducted as described in Chapter III, are presented in Table I. The data in Table I supported the hypothesis that there is a significant disproportionate number of non-native students who were placed in EMR classes. The results showed that:

- a. That there is a significantly larger number of non-native students placed in EMR classes than should be normally expected when considering the total non-native school population.
- b. There is a significantly smaller number of non-native students in the regular classes as normally expected when compared to their total school population.
- c. Of the total native school population, there is a significantly smaller number of students in EMR classes.
- d. There is a significantly larger number of native students in the regular classes as compared to their total school population.

Table I

A Comparison of the Total Non-Native EMR Population
to the Total Native EMR Population

	Native		Non-Native	
	<u>Observed Frequencies</u>	<u>Expected Frequencies</u>	<u>Observed Frequencies</u>	<u>Expected Frequencies</u>
EMR	138	164.5	97	70.5
Regular Education	<u>8193</u>	<u>8166.5</u>	<u>3476</u>	<u>3502.5</u>
Totals	<u><u>8331</u></u>	<u><u>8331</u></u>	<u><u>3573</u></u>	<u><u>3573</u></u>

Note: Chi-square with Yate's correction for association, 13.97 with 1 df was significant beyond the .05 level.

The differences in class composition were found to be significant beyond the .05 level. Such a level of significance was obtained through use of a Goodness of Fit Test, the Chi-Square Formula. The statistical data of χ^2 test was 13.97 with one degree of freedom.

Tables 2 to 5 presents the findings of the five research questions related to the criteria for EMR placement as established by the Virgin Islands Office of Special Education. The five criteria are as follows:

1. Parental consent must be granted for placement and testing of the child.
2. The child must be given a sensory assessment (which includes vision and hearing examinations), so as to exclude any possibilities of physical problems which could be misinterpreted as an indication

of mental retardation.

3. The child must be given an intelligence assessment. The results gathered from the Stanford-Binet, any of the Wechsler Scales, and the Hisky Nebraska Test of Learning Aptitude instruments are acceptable for placement in an EMR class, as opposed to the results gathered from the Slosson, or Peabody Picture Vocabulary Test.
4. The child must be given an achievement assessment. No particular achievement instruments were specified.
5. The child must be given an adaptive behavior assessment. Such an assessment includes:
 - a. Parent Interview
 - b. Classroom observation of the child
 - c. Assessment made by the use of the Vineland Scale for Adaptive Behavior*

The findings in Table II show that only a very small percentage of students in the total EMR population (4.25%) were tested and placed in EMR classes without parental consent. More than 90% of the parents granted their permission for their children to be tested and/or placed in EMR classes.

*It was learned through an interview with one of special education diagnosticians that Vineland Scale is only used with suspected Trainable Mentally Retarded students.

Table II

The Number of Students Who Received
Assessment in the Given Placement Criteria

<u>Placement Criteria</u>	<u>Number of Students Given</u>	<u>Per Cent</u>	<u>Number of Students Not Given</u>	<u>Per Cent</u>
Parent Consent	248	95.75	11	4.25
<u>Sensory Testing</u>				
Vision Only	152	58.68	106	40.92
Hearing Only	117	45.17	142	54.82
Vision & Hearing	100	38.61	90	34.74

In meeting the second criteria for EMR placement, sensory testing, the findings showed that more than 40% in each area, hearing and vision, did not receive such assessments. A greater amount of students did not receive assessment in hearing (54,82%) as compared to vision (40.92%). Only 100 (38.61%) students received an examination in both hearing and vision. Ninety (34.74%) students did not receive any of the two examinations.

The findings presented in Table III show that almost all the students in the total EMR population received a proper intelligence assessment; meaning, their intellectual abilities were assessed by those instruments considered as acceptable by the Virgin Islands Office of Special Education.

Table III

Number of Students Who Received Proper
Intelligence Assessment as a Criteria
for EMR Placement

	<u>Number Given</u>	<u>Per Cent</u>
Number of Students Given Proper IQ Assessment	235	90.73
Number of Students not Given Proper IQ Assessment	22	8.49
Number of Students not Given Any IQ Assessment	2	.77
Number of Students Given Proper IQ Assessment with IQ Scores above 74	24	10.21

Of the total EMR population, twenty-two (8.49%) did not receive a proper IQ assessment. Those twenty-two students who did not receive a proper IQ assessment as specified by the Virgin Islands' Office of Special Education, they were given IQ assessments through use of other instruments. Table III also shows that twenty-four (10.21%) of the total number of students who were properly tested had IQ scores that were above the locally established cut-off point of 74.

Table IV shows the findings for the number of students that were given an achievement assessment. Of the total EMR population, 240 (92.66%) were given an achievement

assessment, nineteen (7.33%) were not given an achievement assessment. When reviewing the students' individual records, it was noted that the majority of the students were given the Peabody Individual Achievement Test and/or the Wide Range Achievement Test. Also, approximately one-fourth of the students were given the California Achievement Test.

Table IV

Number Of Students Who Received An
Achievement Assessment As A Criteria
For EMR Placement

	<u>Number</u>	<u>Per Cent</u>
Students Who Received Achievement Assessment	240	92.66
Students Who Had No Achievement Assessment	19	7.33

Table V presents the findings for the number of students who were given some form of adaptive assessment. The findings in Table V show that none of the students in the total EMR population were given a complete adaptive behavior assessment. According to the information recorded in each child's folder, 125 (48.26%) parent interview forms were completed, almost half of the total population. For staff observation of the student in his classroom environment, only fifty (19.30%) were made. There was no recorded data in the students' folders which indicated that any of the students were observed in their home environment. There

was also no recorded data which indicated that any of the students were given the Vineland Scale of Adoptive Behavior. Whether the Vineland Scale should have been administered to all suspected EMR students remains questionable, since the criteria specified at the State Office of Special Education stipulates that the test should be given to all suspected EMR students, while the staff at the Educational Diagnostic Center says that the test should only be administered to suspected trainable Mentall Retarded students.

Table V

Number of Students Who Received Assessment In
Adaptive Behavior as a Criteria for
EMR Placement

	<u>Number Given</u>	<u>Per Cent</u>	<u>Number Not Given</u>	<u>Per Cent</u>
Classroom Observation	50	19.30	209	80.69
Parents Interview	125	48.26	134	51.73
Home Visits	0	0	259	100
Vineland Scale Assessment	0	0	259	100

The findings which sought to answer the sixth research question of how many students currently enrolled in EMR classes that have not had a reevaluation assessment are presented in Table VI. According to the information gathered from the students' files, 143 students in the total

EMR population were eligible for reevaluation as of December of 1977. Of those 143 students eligible for reevaluation, eleven (7.69%) were considered reevaluated with an IQ assessment alone. There were thirty-eight (26.57%) students who were considered to be reevaluated with both an IQ and achievement assessment. Recorded information in each student's folder with reference to a reevaluation in the area of adaptive behavior was unclear and incomplete. Very often there was no clear indication whether the student was given (if and when given) an adaptive behavior assessment before placement and then given a second adaptive assessment, indicating that the student was reevaluated in this area, or that the student was only given an adaptive behavior assessment after placement, and therefore indicating that the student was not reevaluated in this area. Of the total EMR population, thirty-five (24.47%) were not given any form of reevaluation. According to the criteria specified at the State Office of Special Education, every child in an EMR class must be given a comprehensive reevaluation every three years. Such a comprehensive reevaluation must include all three of the following areas:

1. IQ and Achievement Assessment
2. Adaptive Behavior Assessment
3. Sensory Assessment

However, it was learned through an interview with the Coordinator of Educational Diagnostic Services that a reevaluation may not necessarily include a sensory assessment. It is evident here that there is no clear and definable understanding if a child must be reassessed in the area of sensory examinations to be considered truly reevaluated.*

Table VI

Reevaluation of Students

	<u>Number</u>	<u>Test</u>
Total Reevaluated by IQ Test	11	7.69
Reevaluated by Achievement Test	59	41.25
Reevaluated by IQ and Achievement	38	26.57
Not Reevaluated	<u>35</u>	24.47
Total Eligible for Reevaluation	143 (52.21%)	

*Such information was gathered from interviews conducted with the coordinator of Educational Diagnostic Services, and the Supervisor of Special Education for the St. Thomas, St. John school districts in February of 1981.

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

Public Law 94-142, the Education for all Handicapped Children Act of 1975, was mandated as one means of ensuring that all persons, regardless of their handicapping conditions, be provided with an education that is most suitable to meet their individual needs. The law mandates that all students be placed in the least restrictive environment. Contrary to the law and its stipulations, numerous studies have shown where particular students were not provided with the best and most suitable education possible. Very often students who were culturally or linguistically different were all lumped together with the mentally retarded students as a means of approaching and alleviating their academic problems. Educators have recommended that these nonmentally retarded, culturally, and linguistically different children be provided with an alternative educational program other than special class placement.

It was the purpose of this study to investigate if there is a significantly disproportionate number of culturally different, non-native West Indian students, as compared

to the native Virgin Islands students, placed in Educable Mentally Retarded (EMR) classes. The study also investigated the number of students currently enrolled in EMR classes who were given an assessment in each of the locally established placement criteria.

The survey of the related literature discussed the results of studies conducted on the culturally different and socioeconomically deprived students and their placement in EMR classes. Such findings indicated that too often the student who was not mentally retarded but merely culturally different was placed in a class with the mentally retarded. The survey of the literature also gave a brief description of the West Indian islands' social and educational systems. Mention of the culturally different non-native West Indian students and their placement in the U. S. Virgin Islands school system was also given.

Data for the present study were collected by means of reviewing analyzing individual record files of each student currently enrolled in the EMR classes on St. Thomas and St. John. Interviews were also conducted with the Coordinator of Educational Diagnostic Services and the Supervisor of Special Education for the school district of St. Thomas and St. John as a means of gathering pertinent information about the locally established EMR criteria.

Conclusion

The findings which sought to answer the hypothesis and six research questions indicated as follows:

Hypothesis: There was a significantly larger proportion of non-native students as compared to the proportion of native Virgin Islands' students placed in Educable Mentally Retarded classes.

The results of the study showed that the hypothesis was supported beyond the .001 level of significance. Findings indicated that there was a significantly larger number of non-native West Indian students placed in EMR classes than should be normally expected according to their total school population; hence, there was a significantly smaller number placed in the regular classes. Results showed the exact opposite for the native student placed in EMR classes than should be normally expected according to their total school population; and hence, a significantly larger number placed in the regular classes.

Research Question No. 1: How many students currently enrolled in the EMR classes have not had parental consent for either testing and/or placement?

The findings showed that only eleven (4.25%) parents did not give their consent for their child to be tested and/or placed in EMR classes. More than ninety-five per cent of the parents had given their consent. However,

because separate figures were not compiled for those parents who gave consent for testing from those who gave consent for placement, such a large number could be quite misleading. Due to the researchers error for not indicating for what a parental consent was given when collecting the data, there is no definite way of knowing if the figure given for parental consent represents consent for only testing, for only placement, or for both. Secondly, there is no definite way of knowing if any student was placed in an EMR class without the consent of a parent, which would mean possible lawsuits brought against the Virgin Islands Department of Education.

Research Question No. 2: How many students currently enrolled in EMR classes have not had a complete sensory assessment?

The findings showed that ninety (34.74%) of the students did not have either a vision or hearing examination. One hundred (38.61%) students of the total EMR population had both a vision and hearing examination. The findings indicated that over forty per cent of the students had either vision or hearing examinations. Based upon the placement criteria set by the U. S. Office of Special Education, at least ninety of the students currently enrolled in the EMR classes were incorrectly placed.

Research Question No. 3: How many students currently enrolled in EMR classes have not had an IQ assessment as specified by the U. S. Virgin Islands Department of Special Education?

The findings indicated that only twenty-two (8.49%) of the total EMR population were not given a proper IQ assessment -- meaning, they were tested with IQ instruments not acceptable according to local EMR placement criteria, and thus, were misplaced according to the established placement criteria. These students who were considered improperly tested were given IQ assessments through the use of intelligence instruments other than those specified by local criteria. It is important to note here that it was only until approximately four years ago that specific intelligence instruments were specified to be used for EMR placement.¹

Of the total EMR population, 235 (90.73%) students were given a proper IQ assessment. According to the recorded findings, twenty-four (10.21%) students currently enrolled in EMR classes, who were given proper IQ assessments, had scores above the established seventy-four (74) cutoff point. In other words, twenty-four of these students were misplaced in EMR classes.

¹Mrs. Helen Reed, Coordinator of Educational Services, interview held at the Educational Diagnostic Center, St. Thomas, February, 1981.

Research Question No. 4: How many students currently enrolled in EMR classes have not had an achievement assessment?

The findings showed that only nineteen (7.33%) students were not given any type of achievement test. However, such a finding indicates that nineteen students currently enrolled in EMR classes were misplaced according to the locally established placement criteria.

Research Question No. 5: How many students currently enrolled in EMR classes have not had some sort of adaptive behavior assessment?

According to the data recorded in each student's file, there was no indication that any of the students had received a complete adaptive behavior assessment as specified by local placement criteria. Only a small handful of students (19.30) were observed in the classroom, and less than half of the parents (48.26%) had completed an interview form.* Again, according to the local placement criteria, practically all of the students currently enrolled in EMR classes were misplaced because of incomplete adaptive behavior assessment.

Research Question No. 6: How many students currently enrolled in EMR classes have not has a reevaluation

*An example of a parent interview and classroom observation forms are provided in Appendix B.

assessment?

The findings indicated that seventy (48.95%) students were given a reevaluation by either an IQ or achievement assessment. Thirty-five (24.47%) students were not reevaluated by either an IQ or an achievement assessment. According to the local and federal law, those students eligible for reevaluation should have been reevaluated already. The recorded information in each student's folder indicated that some students were supposed to have had a reevaluation as much as three and four years ago.

In conclusion, on the basis of all the data collected from the students' folders, only a small percentage of students were assessed in all five areas of the locally established placement criteria. Due to a large percentage of incompleting student assessments, many students were placed in EMR classes on the basis of only one criterion -- in most cases, the IQ score. In short, only a small percent of students currently enrolled in EMR classes were correctly placed according to the placement criteria set by the U. S. Virgin Islands Office of Special Education.

Recommendations

The findings gathered from conducting the present study were very similar to those gathered from other research studies cited in Chapter II.

The related literature has indicated that one's cultural background and values causes him/her to act or react in a variety of ways under differing circumstances. "The cultural deprivation theorists suggest that the environment plays a major role in developing cognitive processes and learning in general. Some types of environments are seen as more nurturing and stimulating than others."¹ Children bring with them to school their values, experiences, strengths, and weaknesses. Those children coming from culturally deprived backgrounds, more than likely, are not prepared to compete or succeed in the school environment.

Too many of the students placed in EMR classes were there because of faulty and incomplete assessment procedures adopted by the school systems. Too often student diagnoses are conducted in a very cold and impersonal manner. The diagnostician or psychologist was only concerned about aggregate scores received from the various testing instruments used. No effort was made to try to understand each child's unique learning needs and sociocultural background, which determines to a large extent how that child functions.

The findings gathered from the present study indicated that a large per cent of the students were placed in

¹Ginn, "Poor School Performance," p.5.

EMR classes on the basis of one or two aggregate scores received from standardized tests given. The collected data suggested that there were no considerations made in regards to the child's sociocultural background. The few parent interview forms that were completed and/or classroom observations made were not considered to be adequate or complete adaptive behavior assessment of the child.

Since the Virgin Islands are comprised of persons from many different cultural backgrounds with wide varying experiences, it is important that the educational system make adjustments in order to accommodate for its broad cultural diversity. In order to ensure that these islands become more culturally pluralistic, the educational system must employ more culturally pluralistic, the educational system must employ more culturally pluralistic methods in instructing and providing for the needs of our children. Special education, as one branch of the total education system, must make the necessary changes in the way procedures and assessment criteria are conducted in determining special class placement in order to attain such a goal.

As a result of the findings gathered from this study, the following recommendations were made:

1. It is recommended that in the near future that all diagnosticians and psychologists currently working in the educational system here in the U. S. Virgin

Islands be informed of the five steps involved in the locally established EMR placement criteria, and be instructed to make accurate and complete assessment of the five criteria before placing any child in an EMR class.

2. To avoid misplacement of students who are merely culturally different and who simply lack the skills necessary to compete and successfully function within our Americanized school system, it is recommended that serious and careful consideration for the student's sociocultural and academic background be made. It is recommended that the child be given a pluralistic diagnostic assessment whereby he will be evaluated according to his sociocultural index, his adaptive behavior at home and in the community as a whole, his IQ score to measure academic readiness to succeed in a regular public school, and the same IQ score, but interpreted within his social and ethnic milieu to determine his potential for learning.
3. It is strongly recommended that those students currently enrolled in the EMR class who are eligible for reevaluation and who have not had one, be reevaluated immediately. Then, depending on the results of the reevaluation received, decisions to place the child in a classroom environment that is most

appropriate and the least restrictive to meet the child's individual needs should be made. In order to encourage a more active parent involvement, parents should be informed of each step in the diagnostic and placement process, and be allowed to object and make suggestions about their child's class placement.

4. All borderline or quasi-retarded students (students whose adaptive behaviors were normal and who scored between one and two standard deviations below the mean on an intelligence measure) who are presently enrolled in EMR classes should be reassessed and placed in more appropriate and least restricting learning environments. Once these students have been reassessed, it is possible that many of them will qualify for services other than EMR placement.
5. It is also recommended that alternative classes or programs be established whereby students who are not mentally retarded, or who do not have any learning disabilities be able to receive the necessary help that would enable them to learn the necessary skills they would need in order to function independently and successfully in the regular classroom. Providing such intermediary services would help the child to adjust to the school environment and at the same time eliminate all stigmatizing effects of

a label. In such a program, students would be allowed to easily enter the regular classroom as soon as he is adequately able to function within the regular classroom environment.

6. Finally, it is recommended that further research study be made to determine why there is a disproportionate number of non-native students as compared to native Virgin Islanders in EMR classes.

APPENDIX A

NATIVE/NON-NATIVE RATIO
TOTAL PUBLIC SCHOOL POPULATION
AS OF OCTOBER 1980

School	Non- native	Native	Total
Commandant Gade	12	27	39
Dober	58	273	331
Gomez	217	829	1,046
Gramboko	53	71	124
Jarvis	92	323	415
Jefferson	27	65	92
Jefferson	20	100	120
Kirwan	150	452	602
Lockhart	191	662	853
Madison	36	166	202
Marcelli	116	338	454
Muller	110	448	558
Oliver	123	660	783
Peace Corps	84	242	326
Sibilly	88	167	255
Sprauve/Benjamin	145	357	502
Tuitt*	146	299	445
Total Primary	1,668	5,479	7,147
Aspinall	474	757	1,231
Boschulte	315	658	973
Total J. H.	789	1,415	2,204
C.A.H.S.*	768	936	1,704
Kean	348	501	849
Total H. S.	1,116	1,437	2,553
Grand Total	3,573	8,331	11,904

SOURCE: Rosters for each school were obtained at the Office of Planning, Research, and Evaluation, Department of Education.

* Figures for these schools are those from 1978-79 school year, the most recent available.

APPENDIX B

GOVERNMENT OF
THE VIRGIN ISLANDS OF THE UNITED STATES
- 0 -
DEPARTMENT OF EDUCATION
St. Thomas, St. John, St. Croix, V. I.

PARENT INTERVIEW AND DEVELOPMENTAL RECORD

We have found the following information is important in helping this center understand and work with your child.

Please answer the following questions in as much detail as possible.

Child's Name _____ D.O.B. _____ Present Date _____

Form Filled Out By _____ Relationship _____

1. Please describe any condition you experienced during pregnancy that might have a bearing on your child's present condition. _____

2. Describe any condition or conditions at the time of birth that you feel might have a bearing on your child's present condition. _____

3. Describe any serious illnesses that your child has experienced. _____

a. Accidents _____

4. Age at which your child: Sat Alone _____ Crawled _____
Walked _____ Talked _____ Was Toilet Trained _____.

5. Does your child enjoy playing with others? _____ Does he play by himself? _____

6. How large a group of playmates does your child have? _____

7. Are his playmates his own age _____ older _____ younger _____

8. What activities, games, toys, etc., does he enjoy most?

9. Does he give up easily when things get difficult? _____

10. Does he depend on others to tell him what to do? _____

11. Does your child frequently question or challenge adult discipline?

12. Does he have temper tantrums? _____
13. Does he cry easily? _____
14. Does he have the habit of twitching his face _____ his neck
_____ shoulders _____? Does he bite his nails? _____
15. Is he inclined to daydream? _____
16. Does your child frequently wet his pants? _____ Or bed? _____
17. Does he have frequently night dreams or nightmares? Please explain briefly.

18. At what time does your child go to bed?

19. Are there any home or other environmental conditions that make for tensions, worry, or uncertainty? Please explain briefly:

20. Does he have an eating problem? _____
21. What disciplinary measures are used in the home? Who administers them?

22. Wants attention all the time _____
23. Prefers to be alone _____

Parent Interview and Developmental Record

- 24. Usually unhappy _____
- 25. Gets into trouble frequently _____
- 26. Lacks self-confidence _____
- 27. Additional comments or information _____

GOVERNMENT OF
THE VIRGIN ISLANDS OF THE UNITED STATES
- 0 -
DEPARTMENT OF EDUCATION
St. Croix, St. Thomas, St. John, V. I.
Division of Special Education

Classroom Observation

Student _____ D.O.B. _____

School _____

Date of the Observation _____

Type of Class _____

Student Enrollment Number _____

Performance in relationship to peers:

Strengths _____

Weaknesses _____

Social and behavioral skills _____

Academic Skills _____

Gross and fine motor skills _____

Classroom Organization:

- | | |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Grouping | <input type="checkbox"/> Traditional |
| <input type="checkbox"/> Non-Grouping | <input type="checkbox"/> Heterogenous |
| <input type="checkbox"/> Permissive | <input type="checkbox"/> Open |
| <input type="checkbox"/> Democrative | <input type="checkbox"/> Authorative |
| <input type="checkbox"/> Homogeneous | |

Activity Centers: How Many? _____

Other: Explain _____

Comments:

Use an additional sheet if necessary

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