THE HISTORICAL SIGNIFICANCE OF PROFESSIONAL CONTRIBUTIONS OF
A LEADER IN THE FIELD OF EMOTIONAL AND BEHAVIORAL
DISORDERS IN SPECIAL EDUCATION: A QUALITATIVE
CASE STUDY OF RICHARD J. WHelan

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Historical documentation of the impact of PL 88-164 on the field of emotional and behavioral disorders (E/BD) and the development and implementation of teacher-training programs for children and youth identified as E/BD is limited. This study was designed to document the historical significance and professional contributions of Dr. Richard J. Whelan, Professor Emeritus, University of Kansas and his work in the development of teacher preparation training programs in the field of E/BD in institutions of higher education (IHE). The second purpose of this study was to document the legislative and program initiatives that have impacted the services, education, teaching, and research initiatives in the field of E/BD as interpreted by Dr. Whelan. The final purpose of this study was to examine the views of Dr. Whelan regarding the need for future developments in the field of E/BD.

Legislative and policy efforts continue to change the climate in which children are educated. The field of special education relies on the efficacy of the training programs in IHE to provide appropriate teaching and research efforts in a manner that is consistent with the current needs of students with E/BD, their families, and the schools in which they seek to be educated. As this study revealed, understanding the history of the field, the foundational framework from which research and evidence-based practices have emerged, is paramount to forward movement in the field and necessary to the measurement of effective interventions and strategies in support of the students, their families, and those who choose this field as their lifework. It is the foundation from which educational theory is developed, researched, revised, and reflected.
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CHAPTER 1
INTRODUCTION TO THE STUDY

History is the knowledge of that which has been and what has occurred prior to the present. It is often the basis from which future plans of action are built. Webster (1991) defines history as the chronological record of significant events (affecting a nation or institution) often including an explanation of their causes.

Research often focuses on current issues: what is happening now and the impact of the now on the future. Too often history is neglected. And, yet knowledge and theory must be grounded in a foundation that is able to sustain practice as well as to justify public policy. It must include empirical content coupled with legal and moral perspectives, anthropologies of practices, and a continuation of multiple interpretations and reinterpretations of history (Paul et al., 1997).

Although excellence at the university and college level is critical to the growth and leadership of any field, little systematic attention has been devoted to university and college professors and their respective impact on the fields in which they teach (Portal, 1997). William Cruickshank (1974) writes:

When a professor makes an input into the lives of his students and does so in a way which is longitudinal and in depth, the professor himself profits, but more significant is the growth which the student makes and is ultimately reflected in new horizons in the profession itself. (p. ix)

It is the foundation from which educational theory is developed, researched, revised, and reflected.

Rationale for the Study

The related impact of leaders on the field of education and special education echo throughout the literature and are continued daily in discussions between students and professors
in institutions of higher education (IHE). The importance of reflecting on the past in search of defining the present and improving the future for children and youth with emotional disorders is well documented (Bryan, 1999; Dunn, 1963; Forness, 2003; Kauffman, 1999; Keogh, 1999; Morse, 2001; Nelson, 2003; Pfeiffer, 1993; Palgrave, 2003; Whorton, Siders, Fowler, & Naylor, 2000).

Legislative and policy efforts continue to change the climate in which children are educated. Technological advances coupled with new research and the related understanding of educational needs for children with disabilities continues as does the need for increased funding and related academic endeavors to support these students in public schools. And, with changes in policy (e.g., zero-tolerance) the need to not only provide services for students with emotional and behavioral disorders (E/BD), but to engage them in the educational process leading to positive outcomes is critical to the success of our public education system and society as a whole.

Students identified as having E/BD are currently placed in specifically designed programs in preparation to be included and to prosper from general education, an ideology that should keep teaching, research, and service initiatives at a very high level of activity for special educators past, present, and future (Kauffman & Whelan, 1999). The preparation of special educators to meet the increased needs of students identified as E/BD into the 21st century is well documented in the literature (Bower, 1996; Pfeiffer, 1993; Whorton et al., 2000). The field of special education relies on the efficacy of the training programs in IHE to provide appropriate teaching and research efforts in a manner that is consistent with the current needs of students with E/BD, their families, and the schools in which they seek to be educated. James Gallagher (1968) proffered this ideology stating that

the job of educators, including special educators, is to find the mechanisms through which we can translate our knowledge into action at the instructional level. Only in this
way can we improve our services beyond a type of craft or guild operation in which knowledge was passed on from master to apprentice in each generation. (p. 485).

Overview of Services

Scholars often credit the work of Jean Marc Gaspar Izard (1802) in both the founding of special education and providing a clear and succinct rationale for disciplined research efforts in special education (Cook & Schemer, 2003; Gerber & Levine-Donne stein, 1989, Lane, 1979). The movement toward the implementation of a national education agenda framed in the form of a public school system in support of students with disabilities in the United States began in the late 1800s and early 1900s. Dr. Benjamin Rush, who believed that children with problems should be given a public education and support as opposed to punishment and discipline; an approach continued with the efforts of Samuel Howe and Dorothea Dix in the establishment of training schools within the context of asylums (Brooks & Sabatino, 1996).

The first school to implement an educational approach to working with troubled children as opposed to a treatment approach was opened in New Haven, Connecticut in 1871 with reformation efforts now extending from the superintendents of asylums to a more national effort with the development of the National Association for the Protection of the Insane and the Prevention of Insanity in 1880 (Balch, Spaulding, & Paulsen, 1981).

New York City established “corporate” and “truant” schools for residential treatment of children and youth who were found to be visibly disabled, abandoned, or mentally/emotionally disabled or determined to be delinquent by the court systems occurred in (Berkowitz & Rothman, 1967). The birth of the Mental Hygiene Movement, inclusive of both reform and prevention efforts, began in 1908 with Clifford Beers’ *A Mind That Found Itself* and the establishment of the National Committee for Mental Hygiene (Balch et al., 1981; Bower, 1996;
Brooks & Sabatino, 1996; Kauffman & Lewis, 1974). This disciplined research effort has translated into preservice training programs across the United States in Higher Education institutions in undergraduate and graduate programs in special education. And yet, research on the education of special education teachers is almost nonexistent (Brownell, Ross, Colon, & McCallum, 2005).

A review of the reflections of pioneers in the field of E/BD and their related contributions, research methodologies, teaching strategies, and publications provides a rich history, theoretically grounded, empirically based, and guided by a desire to contribute to the growth of the field (Bryan, 1999; Forness, 2003; Kauffman, 2003; Keogh, 1999; Morse, 2001; Nelson, 2003; Palgrave, 2003; Walker, 2000). These reflections have become a working commentary from the men and women who have shaped the field of education, specifically special education, and the related paradigmatic shifts from the 1960s forward (Beach, Chance, & Etherege, 1992; Brownell et al., 2005; Gable, 2004; Kauffman, 2003; Welch, 1998).

Children and youth identified as emotionally and behaviorally challenged have both educational and social goals upon entering the school environment. Bower (1996) outlined three critical components involved in effectively meeting the needs of students with E/BD: (a) a comprehensive delivery service for all students identified as having disabilities, (b) a comprehensive budgetary system to ensure the adequate funding of services, and (c) a method for coordinating services for these students through the development of a comprehensive model. Nicholas Hobbs (1965), in defining the Project Re-Ed as a programmatic response to treatment for children and youth identified as E/BD, focused on teaching, learning, understanding and working with the total social system of the child and is present/future focused as opposed to past oriented. His was a movement from a medical or psychiatric model to an educational model.
Berkowitz (1974) echoed this type of treatment outlining components of successful educational efforts. He reported that community-based programming is important; teacher education programs must be designed specifically to work with E/BD students; programs should use behavior modification and related documentation efforts; and should use vocational training to bolster success for the student upon graduation.

In assessing programmatic development since the early 1960s, William Morse, (1958) concisely states: “Teachers do not fail. Systems fail. No one has researched how much of the aggressive behavior put out by children with E/BD is a reasonable reaction to provocation of bureaucratic systems and arbitrary adults” (p. 254). A sentiment echoed by Frank Wood (1996) there is still a vast amount of information that is unknown with regards to the development of E/BD and there are just as many individuals both suffering and inflicting suffering on others because of this disorder. And, so the continued need for a definition from which to baseline data and determine programmatic and educational initiatives continues.

One of the first definitions for children with emotional disturbances was developed by Pate (1963) and was defined as one who reacts to life situations in a manner that is so personally unrewarding, inappropriate, and unacceptable to both peers and adults. Kelly (1992) defines the emotionally disturbed child as one with a pervasive affective sense of self-disturbedness, characterized by self-devaluing perceptions to a hypothesized normal self and significant others, and by concomitant self-destructive actions. Robert Gable (1996) provides the components involved in developing a definition of E/BD: (a) a requirement that multiple data sources regarding an individual’s functioning are gathered and time spaced, (b) the criteria involved in the differentiation of students should be socially valid, and (c) should facilitate the establishment of a set of student-centered treatment options.
The Mental Retardation Facilities and Community of Mental Health Centers Construction Act (P.L. 88-164) is heralded as the original funding mechanism that allowed the field of E/BD to develop teacher-training programs in higher education. This funding has evolved throughout the last forty years and continues to support the expansion and development of teacher-training programs leading to an increase in the use of research-based practices, education initiatives, and policies to support the education of students identified as E/BD.

Qualitative studies provide a venue with which to document history. Specifically, the diachronic methodology combines the case-study analysis with the related interview process coupled with a document review. Additional qualitative studies are needed as a means of understanding the subtle inner workings of not only the academy as a whole but the academic profession as a profession, capturing the critical features associated with the field of special education, the preparation of personnel, and the issues that continue to confront the field of E/BD (Brownell et al., 2005; Feldman & Paulsen, 1994; Gable, 2004).

Statement of the Problem

Historical documentation of the impact of P.L. 88-164 on the field of E/BD and the development and implementation of teacher-training programs for children and youth identified as emotionally and behaviorally challenged is limited. An oral history of the original implementation of the program and related documentation efforts provides first-hand knowledge and insight from one of the first program recipients. A chronological review of legislation in conjunction with an oral history brings to life the programmatic efforts, personnel, funding, and research necessary in the development of teacher-training programs in the field of E/BD through the work of Dr. Richard J. Whelan, Professor Emeritus, University of Kansas.
Purpose of the Study

Educational researchers have documented the value in studying exemplary university teachers (Hativa, Barak, & Simhi, 1999). The purpose of this study was to document the historical significance and professional contributions of Dr. Richard J. Whelan, Professor Emeritus, University of Kansas and his contribution to the development of teacher preparation training programs in the field of E/BD in higher education. The second purpose of this study was to document the legislative and program initiatives that have impacted the services, education, teaching, and research initiatives in the field of E/BD as interpreted by Dr. Whelan. The final purpose of this study was to examine the views of Dr. Whelan regarding the need for future developments in the field of E/BD.

Significance of the Study

E/BD as a field is moved forward through the preparation of personnel, an ongoing analysis of students and their related handicapping conditions, the research and scholarship efforts of leaders in the field, and the dissemination of educational supports in the form of resources, technology, funding, and programming efforts in an environment that leads to successful teaching and learning outcomes (Keogh, 1999; Polsgrove, 2003; Walker, 2000). Understanding the history of the field, the foundational framework from which research and evidence-based practices have emerged, is paramount to forward movement in the field and necessary to the measurement of effective interventions and strategies in support of the students, their families, and those who choose this field as their lifework (Bryan, 1999; Pfeiffer, 1993; Seligmann, 2001; Stallings, 2002). A history, when transcribed, becomes a dialogical discussion that guides future generations in their understanding of the field of E/BD through the life
experiences of those who have contributed to the service, research, and legislative efforts that are the field.

A chronological narration of these events beginning with the initial passage of the Training and Professional Personnel Act of 1959 (P.L. 86-158) and ending with future directions for moving the field of E/BD successfully forward through the 21st century are chronicled. The impact of the Individuals with Disabilities of Education Act 1975, programmatic and paradigmatic differences in the field, changes in legislative and funding initiatives, and continued challenges that shape the field of E/BD through the accomplishments, programs, writings, and research of this leader are delineated. This study endeavored to both quantify and qualify the need for case-study research in the documentation of the history of the field of E/BD grounded in descriptive, interpretive, and theoretical validity.

Limitations

There are at least four limitations associated with this research investigation. The first limitation was inherent in the selected design of the study as a “case-study” analysis. This type of research is not considered to be generalizable to populations as are those research efforts that are survey based.

The second limitation involved the scope of the inquiry as being limited to a specific time in history as opposed to a complete historical overview of the field of E/BD. The legislative historical review was limited to the years of 1958 through 2004.

The third limitation involved sample size. The case-study approach is designed to engage a limited number of participants in the research process; in this case 1 participant was used.
investigation focused on one professor’s review of the history of the field of E/BD and related-leadership efforts in the field of E/BD.

A fourth limitation was related to the potential lack of historical documentation to substantiate as well as expound on information gained through the oral interview.

Delimitations

Although there are limitations to this study, it is important to note that case-study analysis is critical to the field of educational research. The case-study approach lends itself to comprehensive understanding of the events under study and at the same time develops general theoretical statements in the observed phenomenon (Fidel, 1992; Yin 1989).

Definition of Terms

*Case-study*: The study of the particularity and complexity of a single case, coming to understand its activity within important circumstances (Stake, 1995).

*Narrative analysis*: Collection of descriptions of events and happenings and synthesize or configure them by means of a plot into a story, a history, case-study, or biographic episode (Polkinghorne, 1995).

*Life history*: The account of one person’s life as told to another, the researcher (Angrosino, 1989).

*Oral history interview*: The starting point in the process of creating the narrative (Jones, 2004).

*Descriptive validity*: The factual accuracy of the account as reported by the researcher (Johnson, 1997).
Theory development: Moves beyond the facts and provides an explanation of the phenomena (Johnson, 1997).

Qualitative research: The goal understanding specific circumstances, how and why things actually happen in a complex world; the knowledge gained is situational and conditional (Rubin & Rubin, 1995).

In-depth interview: People are experts on their own experience and so are best able to report how they experienced a particular event or phenomenon (Darlington & Scott, 2002).

Diachronic: Narrative case-study design methodology that employs the use of temporal information, involving a sequential relationship of events that contain historical and developmental dimensions (Polkinghorne, 1995).

Qualitative Design Procedures

A review of federal legislation and related-funding initiatives in the Mental Retardation Facilities and Community of Mental Health Centers Construction Act (P.L. 88-164) for students with disabilities was initiated to determine which IHE received specific grant funding to support the preparation of teachers in the education of students with disabilities, specifically E/BD. Participant selection for this case-study involved the identification of program coordinators assigned by their respective universities to manage the grant, documentation related to the original funding initiative, and programmatic initiatives and outcomes resulting from the grant.

Qualitative inquiry, as opposed to quantitative inquiry, attempts to provide an in-depth description of an experience of something specific or particular (Johnson, 2003). Inherent in the definition of case study is the underlying sample size; always equal to one (Jensen & Rogers, 2002). In-depth interviewing is the most often used data collection approach in qualitative
research and takes seriously the notion that individuals are experts in their experience and are best able to provide information or report their experience of a particular event or phenomenon (Darlington & Scott, 2002). There are no standard methods that allow the researcher to definitively arrive at essential meanings and deeper implications in the interview process (Kvale, 1996). In essence, what happens in the actual interview event transcends protocol or design (Dilley, 2002).

Seidman (1998) identified three critical components to the interview process. The interview provides access to the context in which people behave so as to extract meaning from the behavior. The meaning people make of their experiences affects the manner in which they carry out the experience, and finally it allows for behavior to be contextualized providing access and understanding to action. Polkinghorne (1995) defined narrative configuration in qualitative analysis as the process by which happenings are finally drawn together and then integrated into a temporally organized whole.

Additional sources of information in support of case study analysis may also include private archival records such as letters, diaries, and autobiographies; public archival records such as government documents; and direct response data such as interviews or questionnaires administered to obtain information, perceptions, and opinions relevant to the study (Borg & Gall, 1989). Document analysis involves a four part process: (a) meaningful documents are found and relevance is established; (b) documents are obtained and stored in a careful manner; (c) documents are sufficiently identified, described, and cited; and (d) measures are used to ensure the confidentiality of private documents (Brantlinger et al., 2005).

Qualitative research procedures seek to understand social action with a greater depth and richness, seeking to record such action through a more complex, nuanced, and subtle set of
interpretive categories. Interpretations become constructed by the observer to fit the empirical
data being reviewed as opposed to addressing a new and original set of questions as with the
quantitative research paradigm (Feagin et al, 1991). Case studies, although not generalizable to
the population in the same sense of a survey format, are generalizable to theory and may impact
the development of theory in areas of research (Herring, 1996).

Johnson (1997) outlined three types of data validation in qualitative analysis: (a)
descriptive validity refers to the accuracy in reporting descriptive information; (b) interpretive
validity is the accurate portrayal of the meaning attached by participants to what is being studied
by the researcher; and (c) theoretical validity is the degree to which a theoretical explanation
developed from a research study fits the data and is both credible and defensible. The utilization
of a narrative analysis, with bounded parameters involving the actual synthesis of data elements
into constituent parts, leads to a coherent developmental account (Polkinghorne, 1995). The
triangulation of such information becomes the associated method of validation. The use of
multiple data sources, the cross-checking of information through the use of multiple procedures
and related sources, when in agreement, equals corroboration (Johnson, 1997).

Qualitative Research Methodology

According to John Dewey (1938), many qualitative studies concentrate on the context of
events or the associated meaning of that which is being researched. This contextualization
process leads the researcher to identify research efforts that are considered of value, allow for a
direct experience, and are informative in nature. Inherent, in the qualitative method is the use of
questions to substantiate or communicate that which is being researched. Philosophical
foundations associated with interview methodologies examine in complementary ways the
relationships between philosophy and protocol, epistemology and research, words and meanings (Dilley, 2004).

Qualitative research methodology (a) sets the stage for conversations, dialogue, and systemic change; (b) assists in the academic pursuits (i.e., hypothesis, generation and theory development, and creating solutions; and (c) contributes to improving practice, evaluation, policy, and understanding (Glesne, 1999). The qualitative research interview is defined as “an interview, whose purpose is to gather descriptions of the life of the interviewee with respect to interpretation of the meaning of the described phenomena” (Kvale, 1983, p. 174). Reflective in nature, it lends itself to development of documentation critical to understanding the foundational framework, growth, and evolution of a particular field.

The design of the interview protocol is critical to the success of the research study in that communication of information and knowledge is the outcome of qualitative inquiry. The interview process allows the researcher to contextualize beyond the facts communicating the meaning people make of said experience, associated behavior during the experience, knowledge gained in light of the experience, and attitudes inherent in the experience itself (Johnson, 1997; Seidman, 1998). The oral history interview or in-depth interview when utilized as a qualitative research method seeks and records answers to questions in an effort to understand another person’s life. Defined as the narrative approach, it emphasizes the role of the interviewer and narrator in understanding meaning making as the goal of the interview process (Miller, 2000).

According to Kvale (1996), standard methods to arrive at essential meanings and deeper implications of what is discussed during the interview and consequently, what happens during the interview process transcend protocol or design. The development of interview
questions are often more contextual and specific than associated research questions and are used to elicit data needed to gain understanding of the phenomenon in question (Glesne, 1999).

The following interview questions to guide the inquiry were used as the theoretical framework in the development of this research inquiry:

1. Briefly describe your educational and career achievements prior to entering the field of academia.

2. Describe your philosophy of teaching as it relates to higher education as a field and to graduate students in general.

3. What are the necessary components of an effective graduate program in special education? Is collaboration with other departments in the University necessary in the formulation of degree requirements for students studying E/BD? And, if so, in which fields should these departments concentrate?

4. Specifically, in reviewing the field of E/BD, what are the major changes that have impacted the field over the past 25 years as it relates to higher education?

5. Describe the development of the field of E/BD beginning in 1960 through today.

6. Describe field development patterns specifically in E/BD and generally in special education. What were the driving forces behind these patterns?

7. How have graduate program requirements (or have they) changed in response to changes in the field of E/BD since 1960?

8. What has the impact of government funding, if any, had on programmatic success as it relates to the field of special education in general and E/BD specifically?

9. Describe your research interests, publications, and involvement in the field of E/BD over the past 25 years.
10. Discuss the significant publications, grant acquisitions, or programs that you have authored, initiated, or collaborated on.

11. Describe your work at the University: expectations, accomplishments, and requirements over the span of your teaching career.

12. What additional professional activities, organizations, committees, research initiatives were you involved in while teaching at the university level as they relate to the field of E/BD? Special education?

13. How would you describe your teaching style?

14. Who or what had the greatest impact/influence on your career in the field of E/BD?

15. What components are necessary in special education graduate programs in universities today that will effectively guide the development of teachers and leaders in the field of E/BD today?

16. What do you see as the future of teaching in university programs for the field of E/BD moving into the 21st century?
CHAPTER 2
REVIEW OF LITERATURE

Critical to the identification and development of any research endeavor is a review and examination of existing data and analysis as it relates to the intended area of interest. Several search engines were utilized in this review. They are identified as follows: University of North Texas (UNT) Library, Electric Library, Questia Library, ERIC, Congressional Testimony, UMI Dissertation Abstracts, Governmental Legislation and Publications, and Educational Abstracts. The search identifiers utilized for this process: “personnel preparation and special education,” “historical development of special education,” historical development of the field of emotional and behavioral disorders,” “leaders in the field of emotional and behavioral disorders,” “federal policy and special education reform/initiatives,” “policy issues and personnel preparation in special education,” and “future trends/implications for the field of emotional and behavior disorders.” The time period of review of information spanned 1900–2005.

The organization of the literature is as follows: (a) define the field of emotional and behavioral disorders (E/BD) through legislative initiatives, (b) historical overview of the field of E/BD, (c) discussion of the socioeconomic and multicultural issues that impact the field of E/BD and the recruitment and training of personnel, (d) review of programming initiatives and models developed to support emotionally and behaviorally challenged students in public education settings, and (e) examination of leadership efforts and related collegiate programming initiatives in the continued development and training of personnel in the field of E/BD.

Introduction

Socialization involves the adaptation of individuals to the overall societal expectations,
needs, and environment. For many students, the beginning of the education process is a goal that is attainable. And, for the most part they are able to continue navigating their way through the developmental process, academic curriculum, behavior expectations, and social relationships that accompany this process. However, there are a significant number of students who fail to manage these expectations and the results for these students, their families, educational institutions, and the community at large, are both costly and devastating.

Students who are experiencing socialization problems are more prone to develop aggressive and disruptive behaviors (Farmer, Farmer, & Gut, 1999). The role of the educational system is paramount as it seeks to influence the behavior of the student population therein while providing an appropriate education with the necessary accountability measures. School experiences, positive or negative, influence the behavior of children and adolescents in attendance.

Schools should seek in the early elementary years to enhance the students’ knowledge of societal norms as well as their compliance to those norms. For students who are experiencing social, behavior, or emotional problems their ability to assimilate this ideology can be a difficult process. A disconnect occurs when the assumed expectation of societal norms and the related action of students against the expected norm occurs; creating the need for direct intervention and support strategies to assist the student in obtaining the necessary skills. Curriculum that provides access to conflict resolution skills, behavior management techniques, and social skills ensure the greatest academic, social, and emotional outcomes and are critical to the success of students with serious emotional disturbance (SED) or E/BD (Elliott & Gresham, 1991; Goldstein, 1988).

IDEA (2004) outlines the current criteria for determining emotional disturbance in children as (a) a condition exhibiting one or more of the following characteristics over a long
period of time and to a marked degree that adversely affects a child’s educational performance; (b) an inability to learn that cannot be explained by intellectual, sensory, or health factors; (c) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (d) inappropriate types of behavior or feelings under normal circumstances; (e) general pervasive mood of unhappiness or depression; (f) a tendency to develop physical symptoms or fears associated with personal or school problems. The emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance under paragraph (c) of this section (IDEA, 2004, Section 300.8, c, 4).

The definition of E/BD and related exceptionalities has been defined and will continue to be refined throughout the years based on scientific research, best practices, funding, and the continued growth of knowledge in the field of education in general and more specifically in the area of special education through associated legislative policies, funding initiatives, and research-based practices.

E/BD: The Emergence of an Education Agenda

In the early 1900s, the recognition of the need to provide assistance for children with disabilities became a known entity, birthing a need for the development of research efforts, the development of intervention strategies, cognitive/behavioral therapy, and the associated need for effective prevention programming efforts. The 1920s ushered in the development of guidance centers, the establishment of visiting teacher programs, and the formation of the Council for Exceptional Children (1922). The U.S. Children’s Bureau, began to study preventive methods for children at risk of mental illness, maladjustment, emotional disturbance, and the like through the
use of child guidance clinics (Balch et al., 1981). During this era, Thorndike presented his concepts of mechanical and social intelligence as additions to and differed from the traditional academic or verbal intelligence associated with I.Q. (Rivas, 1959).

The roots of the social work movement also began in the early 1920s with the implementation and development of “visiting teacher programs.” Michael Sedlak (1981) described the visiting teacher program as implemented by the Commonwealth Fund of New York City as (a) closely aligned with the mental hygiene movement, (b) prevention efforts for behavioral deficits and emotional disturbance through the use of scientific and diagnostic testing, (c) treatment management through a close association of school social workers and individual therapy-oriented clinics, and (d) a general movement to provide students with maladjustment problems that required treatment but that often went unnoticed by families or teachers.

The importance of psychiatric interventions, psychoanalysis, and the implementation of educational and psychological testing were widely used in the treatment of children and youth with E/BD and the related emergence of school psychology, guidance, and counseling efforts (Whelan, 1997). The early contributions of August Aichhorn, Sigmund Freud, John Dollard, and Karl Menninger enabled educators to recognize that treatment efforts were critical in working to resolve emotional and adjustment issues in children and youth identified as disturbed (Dunn, 1963; Hewett, 1968; Redl & Wineman, 1951).

Era of Discovery

Kauffman and Lewis (1974) aptly describe the 1940s and 1950s as “The Era of Discovery.” It was during this period that the movement from a directive and psychoanalytic approach in working with children and youth identified as E/BD changed to a psychodynamic or
therapeutic milieu. A theoretical framework was developed that related to the concept of antecedent psychological problems associated with a child’s behavior as well as the importance of and reliance on building a positive, trusting relationship between teachers and children (Brooks & Sabatino, 1996; Hewett, 1968; Kauffman & Lewis, 1974; Redl & Wineman, 1951).

Therapeutic schools began with the formation of the Pioneer House (Redl & Wineman, 1952) and the 600 schools in New York (Berkowitz & Rothman, 1960; Kauffman & Lewis, 1974). The need to determine appropriate educational services for these students continued with the work of William Morse and Eli Bower, with both men bringing to the forefront the importance of a teacher-centered approach in working with children accessed as emotionally disturbed (Bower, 1996; Morse, 1958). According to Bradley, Henderson, and Monfore (2004), the Bureau of Education for the Handicapped was specifically developed to improve services for students identified as having emotional disorders. Research-based efforts led to the development of educational models that highlighted the needs of these students. Prior to the passage of P.L. 86-158, The Education of Mentally Retarded Children Act, students with disabilities were educated in therapeutic communities and residential treatment centers. Kirk (1962), in a review of public education efforts for students with disabilities, noted that almost all types and degrees of exceptionality can be found in public school programs. Dunn (1963) identified the degrees of exceptionality as the educable mentally retarded, the trainable mentally retarded, the gifted, the emotionally disturbed, the socially maladjusted, the speech impaired, the hard of hearing, the deaf, the partially seeing and blind, the crippled, and those with chronic health problems.

Carl Fenichel, Director of the League School for Seriously Disturbed Children, was one of the earliest supporters of research-based practice initiatives to move children from separate therapeutic communities to public school settings. He hypothesized that with proper planning a
highly individualized educational program with the benefit of interdisciplinary clinical participation could result in both social and emotional growth for these children and could also result in their educational achievement (Fenichel, 1966). The need to educate “handicapped children” in public schools as opposed to private institutions and the importance of implementing special education programming efforts to service these students at both the elementary and secondary level had finally taken flight (Balch et al. 1981; Bower, 1996; Cruickshank & Johnson, 1958).

Teacher Preparation: Development of Programming Initiatives

IHEs, striving to be successful, must increase their overall enrollment numbers, attract and retain a diverse student and faculty population, compete for federal grant funding, and improve teacher education programs in the realm of special education as well as regular education. The Higher Education Act (1965) provided funding to IHEs that were seeking to improve their teacher-preparation programs. Additional funding dollars are available to those schools that implement partnership plans (Gagnon & McLaughlin, 2004; Lewis, 1998; Nougaret, Scruggs, & Mastropieri, 2005). Increased funding for educational initiatives has been legislatively tied to higher accountability standards for all students, regardless of disability. This new level of accountability has prompted educational training programs and state education agencies to reevaluate their preparation of personnel and the accompanying certification requirements to meet these demands while facing a continuing teacher shortage (Johnson, 2000).

Initially, special education was relegated to a smaller role in the overall assessment process, providing insight on strategies or position statements on how to include students with disabilities into the overall testing process (Johnson, Kimball, Brown, & Anderson, 2001). The
Reauthorization of IDEA (1997) clarified the participation of students with disabilities in the assessment process. The passage of P.L. 107-110, No Child Left Behind (2001) increased the accountability standards and participation of special education students in state assessments as both mandatory and results based. The Reauthorization of IDEA (2004) expanded the requirements for students with disabilities in the participation of alternative assessments, the use of accommodations, and measurable academic growth (adequate yearly progress [AYP]), access to general education classes, and emphasizes the need for highly qualified teachers (Mooney, Denny, & Gunter, 2004).

Elliot, Ysseldyke, Thurlow, and Erickson (1998) identified practical implications for educators in terms of meeting the needs of high-stakes testing with students identified as having disabilities: (a) preservice training programs should include best-practice curriculum; (b) course development should focus on instructional practices, assessment, and accountability measures; and (c) tools and resources should enable effective management of related pressures associated with high stakes testing (Browder, Karvonen, Davis, Fallen, & Courtade-Little, 2005; Wehmeyer, Field, Doren, Jones, & Mason, 2004). Singh and Billingsly (1996) reported that one of the greatest needs that teachers have in special education is the need for administrative support and supervision as it relates to their given field. And, so the need for university programs to infuse their programs with classes and professional development seminars that encourage students becomes paramount to success (Billingsley, Carlson, & Klein, 2004; Kerns 1996).

Multiculturalism: Impact on Personnel Preparation

There is currently a shortage of minority teachers in the field of education (Duarte, 2000; Eubanks & Weaver, 1999; Obiakor, 2004). This is a critical issue in that the overall
demographics in the United States are changing. Examples of this population shift can be viewed with the demographic information from the states of California and New York. Perkins (2000), in reviewing the demographic issues, indicated that in the state of California, one of five residents is of immigrant status. In New York, one out of three residents was identified as maintaining immigrant status. Hosp and Reschly (2004), in reviewing their data on the disproportionate representation of minority students in special education, indicated that although teachers in the school setting will not be able to influence the demographics or socioeconomics of the student population, they are able to influence the academic achievement of students.

One of the earlier problems associated with recruiting minority students to universities as well as to the teaching profession was based in the overall experience of these students arriving at college campuses. For them to achieve success in the teaching program, it was necessary for them to have special attention (“Attracting Minorities into Teacher Training,” 1997). The researchers in this study further noted that the majority of minority students attending college were the first of their generation to ever attend college and were unfamiliar with the overall expectations, guidelines, and resources necessary for them to manage the university environment successfully.

The issue is further complicated for teacher-preparation programs in that many of the individuals preparing to teach are Anglo and there continues to be a shortage of minority applicants for teacher-preparation programs (Duarte, 2000). A more recent solution to attracting minority students to colleges is embedded in alternative certification route for special education teachers. An increase in immigration to the United States further impacts training programs and the recruitment of students that are able to communicate in dual languages. Understanding the language barrier is only one aspect for educators; there must also be an understanding of culture.
in order to build relationships effectively with the families of these students and to facilitate a positive experience in the school environment for these students (Theilheimer, 2001). The alternative certification programs, as opposed to the more traditional teacher education programs at the university level, tend to recruit a higher percentage of teachers from underrepresented student groups (Rosenberg, Sindelar, & Hardman, 2004).

The Reauthorization of IDEA (2004) and the NCLB Act (2001) continue to raise the standards for teacher education requirements in defining the “highly qualified teacher” and increasing standards and assessment levels for student achievement, while remaining underfunded and leaving culturally and linguistically diverse learners behind (Obiakor, 2004). As the overrepresentation and disproportionate representation of minority students in special education increases (Hosp & Reschly, 2004) so does the impetus to improve teacher-training programs to meet the needs of these students effectively. Cartledge (2004) focused on the importance of schools adopting a prevention or habilitation model for working with students. Inherent in this ideology is the necessity of teacher-preparation programs to provide training in the following areas: (a) early intervention efforts to prevent or minimize behavior and learning disorders, (b) academic instruction that is reading focused, and (c) the development of social skills.

Training Programs: Professional Standards

The International Standards for the Preparation and Certification of Special Education Teachers (1999), as developed by the Council for Exceptional Children, outlined the following criteria as necessary for teachers to work effectively with students who are behaviorally and emotionally challenged: (a) collaboration, (b) knowledge of behavioral interventions, (c)
training, (d) standards, (e) policies, and (f) core program elements. Inherent in partnership programming efforts is the involvement of one or more schools with IHEs. Such associated partnering requires equality among partners with joint responsibility, open communication, and long-term commitment. Additionally, partners need to meet, share, and support each other (Kochan & Kunkel, 1998; Rosenberg et al., 2004).

Knowledge of behavioral interventions, proactive behavior management strategies, and research-based and scientifically supported practices are critical in the process of training personnel (Lewis, Hudson, Richter, & Johnson, 2004). The expansion of preservice and in-service programs in evaluation efforts for early screening and assessment, functional behavioral analysis, manifestation determinations, and related testing are critical to the collection of data for student placement, programming, and appropriate educational supports (Smith & Katsiyannis, 2004). Programming efforts should focus on (a) instructional techniques to develop desired behaviors, (b) promotion of a positive climate to motivate students, (c) appropriate and dynamic response to students’ changing behavioral levels, and (d) the use of collegial interactions to support teachers’ use of effective procedures (Carpenter & Higgins, 1996). Related examples of these procedures would be the training in positive behavioral supports (PBS) and functional behavioral assessments (FBA) to identify any associated behaviors or environmental influences that may impact student behavior and achievement in the classroom and the data and support necessary to design effective intervention strategies and supports for student with E/BD (Gresham, 2003; Leedy, Bates, & Safran, 2004; Mallory & New, 1996; Sugai et al., 2000; Van Acker, 2000).

The Colorado Department of Education developed a model for the education of students with E/BD based on the earlier works of Neel and Cessna (1993) and Sugai and Horner (1997).
that advocated the need for an expanded curriculum model and a comprehensive approach to both individual and collective support for student behaviors. Their indicators were as follows: (a) environmental management, (b) behavior management, (c) affective education, (d) individuation and personalization, (e) academic, and (f) career or life skills and transition. These components must be incorporated based upon individual student needs with an ordered implementation plan, school-wide application, and a common language that allows for all educators, parents, and other personnel to work from the same paradigm (Neel, Cessna, Borock, & Bechard, 2003).

Research indicates that children experiencing emotional and behavioral problems have difficulty receiving an appropriate education (Kern & Mann, 2004; Suggs, 1998; Sutherland & Singh, 2004). Hence, the following programmatic components for both graduate and undergraduate teacher-training programs with a focus on E/BD should be implemented: (a) factors relating to behavior problems; (b) classification and characteristics of behavioral disorders; (c) developmental profiles and associated issues: (d) identification and placement issues; (e) intervention strategies; (f) educational adaptations; and (g) life span issues (Kirk, Gallagher, & Anastasiow, 1997; Landrum, Katsiyannis, & Archwamety, 2004). In addition, there needs to be an internship program that reflects the diversity of culture, behavior, and socioeconomic issues that teachers will face in the school environment. Student teachers should be trained to work and interact with a variety of students so that their ability to educate a diverse student body effectively will improve (Harvey, Lewis-Palmer, Horner, & Sugai, 2003; Weist, 1998).

The Historical Chronology of Legislative Initiatives for Students with Disabilities: Years 1958–2004

Theory and research initiatives in the area of E/BD, as part of the national education
agenda, began to crystallize in the 1960s as the development of effective behavioral interventions for treating children with these disorders moved away from a medical and psychotherapeutic approach to one that involved behavioral application (Dunn, 1963; Kauffman & Lewis, 1974). The Education of Mentally Retarded Children’s Act, P.L. 85-926 (1958) was first authorized through federal assistance programs for training teachers to work with students who were identified as mentally retarded and handicapped. This initiative was further expanded the following year with Training of Professional Personnel Act, P.L. 86-159, (1959), which assisted in training leaders in the education of children identified as mentally retarded. The expansion of specific training programs to include all disability areas culminated with the passage of the Mental Retardation Facilities Construction Act (P.L. 88-164), specifically, Title III, Section 302 of The Research and Demonstration Projects in Education of Handicapped Children. It was designed to provide grants and contracts to promote research, construct research facilities, and to improve the education of the handicapped. Funding for this initiative followed with the passage of P.L. 89-329, the passage of the Higher Education Act of 1965 with provisions for grants to universities in terms of community service programs, teacher training programs, graduate teacher fellowships, and library related assistance.

**Legislative Review: 1964–1970**

The Civil Rights Act of 1964, specifically Title IV, was the beginning of federal legislative efforts prohibiting discrimination in education on the basis of race, color, sex, religion or national origin by elementary, secondary, and postsecondary public institutions. This was followed by the quick passage of The Elementary and Secondary Education Act of 1965 (ESEA; P.L. 89-10) which launched the first comprehensive plan to address the inequalities of
educational opportunities for economically disadvantaged children and youth (P.L. 89-10). The ESEA Act was amended the same year through P.L. 89-313 with the authorization of federally supported grants to state institutions and state-operated schools to educate children with disabilities.

Amendments to the Elementary and Secondary Education Act of 1966 (P.L. 89-750) continued with the establishment of the Bureau of Education for the Handicapped and the National Advisory Council for children with disabilities consolidating all existing programs related to handicapped children in the U.S. Office of Education (e.g., personnel preparation, research) under one branch (Gallagher 2000; Kirk, 1968). Additional funding for local schools in the education of handicapped children was initiated with the passage of Title VI ESEA: Education for Handicapped Children (P.L. 89-750, Title VI, P.L. 89-313; Martin, 1968). These two programs provided complementary assistance to children with handicaps with aid to states being provided through P.L. 89-313 and aid to local schools being administered through Title VI funds (Jones & Davis, 1968; Withrow, 1968).

The Elementary and Secondary Education Act Amendments of 1968 (P.L. 90-247), expanded to all states additional funding for state schools through the use of formula (discretionary) grants to expand and improve services, research efforts, and the training of personnel to serve handicapped students (Martin, 1968). The Elementary and Secondary Acts Amendments of 1970 (P.L. 91-230), including Title VI, authorized comprehensive planning and evaluation grants to state and local education agencies and the establishment of a National Commission on School Finance (NCES, 2001).
The Rehabilitation Act of 1973 (P.L. 93-112) was the first legislation enacted by Congress that was “rights” related for individuals with disabilities. Sections 501 and 503 were designed to prohibit discrimination against people with disabilities. Section 504 of the Rehabilitation Act provided that an individual, with a disability, had the right to participation in and receive the benefits from any program or activity that receives federal funds; it also prevented discrimination based solely on a person’s disability. The Equal Educational Opportunities Act of 1974 (P.L. 93-280) marked the beginning of desegregation. The EEOA specifically prohibited the segregation of students on the basis of color, national origin, and race with regards to both students and faculty. It further required school districts to overcome any student language barriers impeding equal access and participation in educational programs for students.

The next generation of legislation in support of students with special needs and the baseline from which program initiatives, research interests, and grant funding would emanate was the passage of the Education for All Handicapped Children Act of 1975 (P.L. 94-142). This act guaranteed a free and appropriate education (FAPE) for students regardless of their disabilities (Gallagher, 2000; NCES, 2001). McCollum (2000) identified P.L. 94-142 as the initial mechanism for the development of policy and the related establishment of a mandate to force the issue of special education as a public responsibility. Education agencies in each state were now tasked with the implementation of this legislation and the responsibility to provide services and programming efforts for these students through the public school system (McCollum, 2000).
Legislative Review 1980s

A paradigmatic shift in the education of students with disabilities occurred in the early 1980s. The Education of the Handicapped Amendments of 1983 (P.L. 98-199) continued the reauthorization process of discretionary programs, established parent training and support centers, established transition services, and provided funding for research and project initiatives for early childhood and early intervention special education. Education of the Handicapped Act Amendments of 1986 (P.L. 99-457) mandated services for preschool children, ages 3 through 5 (Part B, IDEA) and provided assistance to states in the development of programming initiatives related to early intervention services for infant children, birth through 2 years old (Part C, IDEA). This legislation ushered in a new era in both identifying and working with children who are considered at risk or already identified as having developmental disabilities within a family service model approach (Malone, McKinsey, Thyer & Straka, 2000).

E/BD: Expanding Legislation

Key pieces of legislation in support of both children and adults with disabilities continued with the passage of the Americans with Disabilities Act of 1990 (P.L. 101-336), which prohibited discrimination against persons with disabilities. The Amendments to the Education for All Handicapped Act (P.L. 94-142) changed the title of the law to the Individual Disabilities Education Act (IDEA), and the Higher Education Amendments of 1992 (P.L. 102-325) amended the Higher Education Act of 1965, revising and reauthorizing funding for a variety of programming initiatives in postsecondary education.

Goals 2000: Educate America Act, P.L. 103-227 allowed for the establishment of a new federal partnership to reform the nation’s education system by utilizing a system of grants to
states and local communities, the formulation of national education goals, and the establishment of both a National Education Goals Panel and a National Education Standards and Improvement Council (NCES, 2001). The Improving America’s Schools Act of 1994 (P.L. 103-382) continued the reauthorization process for the ESEA Act of 1965. This act revamped and reauthorized ESEA with the major addition of Title I funding for educational assistance to disadvantaged children, professional development, drug-free schools, community involvement, and provisions to promote school equity (NCES, 2001).


E/BD: The Design and Development of Teacher Preparation Programs

Cruikshank and Johnson (1958) defined the exceptional child as “one who deviates intellectually, physically, socially, or emotionally so markedly from what is considered to be normal growth and development that he cannot receive maximum benefit from a regular school program and requires a special class or supplementary instruction and services” (p. 3). They further defined the exceptional child, with an emotional disturbance, as one with a related developmental disturbance, a breakdown in the family constellation, (religious, ethnic, economic), or social conflict which causes a failure to mature socially or emotionally within the
limits which their society imposes. The educational needs of this population necessitates a multitiered approach to education and associated interventions.

Richard Whelan (1966) outlined three educational treatment approaches that could be used with the emotionally disturbed child: (a) psychoeducational therapy with behavior contextualized in the psychoanalytic theoretical framework, (b) life space interview with an associated focus on environmental factors and a psychotherapeutic approach, and (c) structured approach with a focus on behavior and related consequences, known as behavior modification. Associated implementation efforts in the school environment would necessitate the training of teachers, administrators, and school personnel beyond mere educational efforts to include therapeutic and behavioral modifications to ensure academic success.

**Teaching and Training Initiatives**

Haring and Lovitt (1969), through research efforts, identified six training initiatives for teachers in managing behavioral issues within a school setting: (a) initiate behavior modification; (b) adapt curriculum to a continuous academic measure; (c) teach continuous measurement techniques and self-recording to students; (d) focus on the importance of natural consequences; (e) enable future teachers to interpret data and to communicate a child’s progress to administrators, parents, and support personnel; and (f) make available laboratory settings for training as well as public school settings. Inherent in teaching children identified as emotionally disturbed, behaviorally challenged, or socially maladjusted is the reality that the acquisition of an education may or may not be a priority and is often dependent on the current emotion as opposed to an associated educational need.
John Pate (1963) described the special demands associated with teaching socially maladjusted children:

Maladjusted children destroy school property, abuse privileges, mock responsibility, and ridicule their teachers. They thrive on conflict with authority and gain status by defying adults. They are educationally retrained and appear as though they could not care less whether school is kept open. Teachers must be prepared to work with the values these youngsters bring with them to school. Their world is so different that their school must be different. (pp. 269-270)

The need for teacher-training programs to deal specifically with this population was clear. The implementation of training programs in IHEs to address this need began with assignment of funds under P.L. 88-164.

This funding initiative (P.L.88-164) provided colleges of education, specifically special education, with the necessary funding with which to develop model teacher-preparation programs for the education of children and youth identified as E/BD (Kelly, 1996; Long, 1996; Wood, 1996). These programs expanded in scope as federal legislation mandated a free and appropriate education for all students, appropriate assessment measures to determine eligibility for special education services, and the development and refinement of associated academic, behavioral, and crisis interventions for students determined to be emotionally and behaviorally challenged.

Teacher Preparation: Expansion of a Model

Demographic, socioeconomic, ethnicity, and related cultural norms further impacted the training of special educators and the continued search for interventions and associated supports to ensure academic success for all students. Training programs were needed to address ethnicity and its relevance to the overall functioning of the student in the school environment with the initial recognition that there is a related impact in the thinking, feeling, and behavior both
internally and externally for minority students (Artiles & Trent, 1994; Chavaria, 1997; McGoldrick, Pearce, & Giordano, 1982). Additional research with children from economically and socially disadvantaged environments necessitated educational programming that would improve outcomes for this population (Catron & Thomas-Weiss, 1994; Payne, 1998; Serna & Lau, 1995).

Research-based efforts in university programs continued with the development of social-skills programming efforts (Elksnin & Elksnin, 1998), the impact of environmental arrangement in the classroom (Guevremont & Dumas, 1994), the involvement of both the community and the family in the education of the child (Sileo, Sileo, & Prater, 1996), and the recognition that public schools in the United States have both a moral as well as legal obligation to provide a quality education for students with educational disabilities who bring diverse racial, religious, economic, political, cultural, and linguistic backgrounds to the teaching-learning environment (Foster & Iannaccone, 1994).

Paradigmatic Shifts in Personnel Preparation:
Standards, Outcomes, and Accountability

The charge to the National Commission on Excellence in Education was to determine the state of education in the United States, a request that was made by then Secretary of Education T. H. Bell. A Nation at Risk was prepared and presented at the National Commission on Excellence in Education in 1983. The report outlined several problems inherent in American education at that particular time. This report emphasized the need to provide educational reform as it relates to equity and high quality schooling for all students. It further delineated the need for accountability in the classroom for student performance, the need for new standards for
educational competence among all students, and set forth needed outcomes for students in public education (National Commission on Education, 1983).

Following the report, Nation at Risk, the next piece of legislation aimed at educational reform was enacted with the passage of the Goals 2000: Educate America Act. Goals 2000: Educate America Act mandated that any state seeking federal funding must have in place student performance standards for all students and a process for both developing and implementing state assessments that are nondiscriminatory, which allows for appropriate accommodations. Goals 2000 was designed to hold teachers and school districts accountable for the education of all students, regardless of disability, English proficiency, and socioeconomic status with the implementation of higher academic standards to be measured by states on performance-based assessments for all students (Johnson, 2000).

Legislative Mandates: Implications for Teacher-Preparation Programs

Bacon and Bloom (1995) outlined four components for teacher-training programs based upon the new standards and reform efforts as they relate to emotionally disturbed and behaviorally challenged students: (a) student work must be individualized and must actively involve students in projects they develop to be meaningful to their professional work and development, based on their experiences and background knowledge; (b) student work should address problems encountered in the student’s classroom, school, community, and should have an audience beyond the teacher and the university; (c) student work should develop through collaboration and problem solving with faculty and peers; and (d) evaluation procedures should be based upon authentic assessment of student work, involve self-reflection, and provide opportunities to learn from mistakes.
The Reauthorization of IDEA (1997; 2004) clarified the participation of students with disabilities in state assessments. Preservice training programs were again adjusted to include best practice curriculum, instructional practices, assessment and accountability law classes, and supports/tools with which to effectively manage the pressure associated with high stakes testing and accountability (Elliott, Ysseldyke, Thurlow, & Erickson, 1998; Gronna, Jenkins, & Chin-Chance, 1998). The National Education Agenda continued its movement towards the establishment of standards-based education initiatives with the passage of the No Child Left Behind Act (2001).

The NCLB (2001) was designed to establish legislation that would ensure that all children would have an equal opportunity to attain a high-quality education, with at least a minimum proficiency on academic assessments. As the NCLB Act relates to students with disabilities, it is clear that the proficiency requirements create challenges for state and local education agencies. Simpson, LaCava, and Graner (2004) reported that legislation related to students with disabilities should provide adequate funding to implement the NCLB mandate, should use individualized evaluation modifications and accommodations to both support and address students’ learning differences, disabilities, abilities, and other related needs, and should support professional development and personnel preparation to implement the mandate successfully.

**IDEA Reauthorized: Future Developments**

IDEA–Reauthorized Statute was signed into law December 3, 2004 and was titled Individuals with Disabilities Education Improvement Act of 2004 (P.L. 108-446). One aspect of IDEA 2004 was the alignment of IDEA and NCLB. There were several other changes as well:
(a) new definitions were given to the assignment of core academic subjects and to “limited English proficient,” and “highly qualified” as it relates to teachers/paraprofessionals; (b) funds were reserved to carry out state-level activities and stipulations were made about how those funds could be used; (c) there was a change in the way disabilities were determined; and (d) there was an alignment of personnel development plans.

Educational programs must evaluate their current teacher-preparation programs and make appropriate adjustments to ensure that teachers have both the tools and training necessary to meet the new mandates effectively in a timely manner. For students identified as E/BD, the challenge to receive an education with appropriate services in a setting that adequately works to resolve emotional and behavioral issues remains.
CHAPTER 3
METHODOLOGY AND PROCEDURES

Research design is the foundation that determines, validates, orders, and becomes the final dissemination of information gathered and the results therein. Qualitative research as a methodology adds depth to this information and is multifaceted in nature, providing results, as well as human insight into that which is being studied (Anzul, Evans, King, & Tellier-Robinson, 2001; Johnson, 2003; Yow, 2003). This study was conducted utilizing a diachronic narrative case study, grounded in the legislative history of emotional and behavioral disorders (E/BD), and defined through the teaching, leadership, and research efforts of a pioneer in the field of teaching and training higher education students to work in the field of emotional and behavioral disorders (E/BD).

Purpose of Study

Educational researchers have documented the value of studying exemplary university teachers (Hativa, Barak, & Simhi, 1999). The threefold purpose of this study was to document the historical significance and professional contributions of Dr. Richard J. Whelan, Professor Emeritus, University of Kansas, in the implementation of P.L. 88-164 and the development of teacher-training programs in the field of E/BD in higher education; to document the legislative and program initiatives that have impacted the services, education, teaching, and research initiatives in the field of E/BD on the development of teacher-training programs under the leadership of Dr. Whelan; and to examine the legislative changes and funding efforts in the field of E/BD, their related impact to teacher training programs, and to identify best practices to ensure the appropriate placement and education of children and youth identified as emotionally
and behaviorally challenged through the observations, publications, and research and programming initiatives of Dr. Whelan.

Focus of Inquiry

Feagin, Orum, and Sjoberg (1991) delineated the concept of the narrative analysis as encompassed in the case-study methodology. This methodology underscores the development of the research as an in-depth, multifaceted investigation, utilizing qualitative research methods of a single social phenomenon as it relates to the examination of life histories. Four contributions or lessons are associated with case-study methodology: (a) observations and concepts regarding social action and social structures in natural settings studied close at hand become grounded; (b) information from a number of sources over a period of time is provided and permits a more holistic study of complex social action, meanings, and social networks; (c) the dimensions of time and history to aid the study of social life which in turn enables the investigator to examine both continuity and change in life-world patterns; and (d) as a methodology it facilitates and encourages, in practice, theoretical innovation and generalization (Feagin et al., 1991).

The historical significance and continued impact of the passage of the Mental Retardation Facilities Construction Act, Title III, Section 302 of The Research and Demonstration Projects in Education of Handicapped Children, which provided grants and contracts to promote research, construct research facilities, and improve the education of the handicapped, continues today. The funding mechanism for these efforts is managed through The Higher Education Act (P.L. 89-329) with a continued focus on the utilization of community-service programs, teacher-preparation programs, graduate-teacher fellowships, and library-related assistance.
Participant Selection

The University of Kansas was one of the first recipients in higher education to receive the federal grant monies for the development of a teacher-preparation program in the field of E/BD following the passage of P.L. 88-164. The individual selected for this study was assigned by the university as the program coordinator responsible for the development, implementation, and management of a research-based teacher-preparation program with a specific emphasis on children and youth identified as E/BD. Dr. Richard J. Whelan, Professor Emeritus, University of Kansas, was selected as the individual for this case-study review. Dr. Whelan maintained the original documentation requirements for the program, related research efforts and outcomes emanating from the program, graduate student lists of program participants, and program support documentation and data related to the original funding requirements of P.L. 88-164.

Dr. Whelan’s historical contributions and knowledge of the field of E/BD are well documented in the literature with over 100 publications, including *Teaching Children with Behavior Disorders* (Kauffman & Lewis, 1974), *Characteristics of Behavior Disorders of Children and Youth* (Kauffman, 1997), *Emotional and Behavioral Disorders: A 25 Year Focus* (Whelan, 1998), and *Educating Students with Mild Disabilities: Strategies and Methods* (Meyen, Vergason, & Whelan, 1998). Dr. Whelan has held many board memberships and currently serves as a consultant to psychiatric hospitals, universities, government agencies, schools and other education-related organizations. He has served on several publication boards and has held offices in state and national professional organizations. He was the founder and an officer of the Kansas Federation of the Exceptional Children. Dr. Whelan has received several service awards including the award for leadership in behavior disorders from the Midwest Symposium Organization. In 2001, he was a keynote speaker at the Council for Children with Behavioral
Disorders (CCBD) and addressed the “Changing Scene of Service Delivery for Children/Youth with Challenging Behavior: Where We Have Been, Where We Are, and What We Need to Do Next” (Whelan, 2001).

Informed Consent

In the interest of informed consent, the participant was informed in writing as to the purpose of the study, the rationale for selection, the interview format, the documentation needed, the data collection process and related dissemination, as well as an opportunity to review the transcript prior to submission to ensure accuracy of the information gathered. Dr. Whelan granted permission to tape-record, transcribe the interview, and use the transcription in this dissertation effort.

Data Collection Procedures

A review of federal legislation and related funding initiatives (P.L. 88-164) for students with disabilities was initiated to determine the IHEs that received specific grant funding to support the preparation of teachers in the education of students with disabilities, specifically those with E/BD. Dr. Richard J. Whelan, Professor Emeritus, University of Kansas, was contacted, and he agreed to participate on the study.

Dr. Whelan’s contributions to the field of E/BD as outlined by scholars in the field of E/BD were documented; his contributions to the field of E/BD were chronicled, and his publications, lectures, and professional endeavors in the field of E/BD were reviewed. This information served as the baseline from which the interview protocol was developed.
An initial phone contact outlining expectations for the interview, additional resources for review, and any supplemental information identified by Dr. Whelan as relevant to the interview process have been presented. A formal interview was scheduled including a document review as available. The interview was tape-recorded and transcribed. Handwritten notes in support of information were taken. Once the interview was transcribed, a draft copy was provided to Dr. Whelan for review, revision, and clarification. Any original documentation related to the study or in support of the interview information was photocopied and incorporated into the study (see Appendix). A final draft was provided to Dr. Whelan prior to the actual submission of the study results and final changes were documented at that time.

A chronology of legislative initiatives, programming, and funding for the public education of students identified as having disabilities developed from a review of federal legislation, grant initiatives, and legal requirements as documented in the Federal Register. A comprehensive review of literature focusing on the history of the field of E/BD, the impact of funding and related program initiatives, a review of research-based practices, and reflections of identified leaders in the field of E/BD have been reviewed in developing a case-study analysis utilizing the diachronic methodology.

Instrumentation

Inherent in the use of the in-depth interview is the use of the face-to-face interview. According to Darlington and Scott (2002), the use of the in-depth interview as a data collection methodology is presented as follows: (a) the best data collection approach is one that yields data that best meets the research purpose as well as answering the research question; (b) the interview process will be most appropriate; (c) observation or the analysis of existing records is most
appropriate; and (d) a combination approach will be indicated to answer different parts of the research question as well as to provide an alternative data source that may strengthen the findings. The use of the open-ended, unstructured interview process was utilized in this study.

Interview Protocol

The following list of questions were developed and formatted to ensure a chronological, cohesive, and systematic format in the gathering of information.

1. Briefly describe your educational and career achievements prior to entering the field of academia.

2. Describe your philosophy of teaching as it relates to higher education as a field and to graduate students in general.

3. What are the necessary components of an effective graduate program in special education? Is collaboration with other departments in the University necessary in the formulation of degree requirements for students studying E/BD? And, if so, in which fields should these departments concentrate?

4. Specifically, in reviewing the field of E/BD, what are the major changes that have impacted the field over the past 25 years as it relates to higher education?

5. Describe the development of the field of E/BD beginning in 1960 through today.

6. Describe field development patterns specifically in E/BD and generally in special education. What were the driving forces behind these patterns?

7. How have graduate program requirements (or have they) changed in response to changes in the field of E/BD since 1960?
8. What has the impact of government funding, if any, had on programmatic success as it relates to the field of special education in general and E/BD specifically?

9. Describe your research interests, publications, and involvement in the field of E/BD over the past 25 years.

10. Discuss the significant publications, grant acquisitions, or programs that you have authored, initiated, or collaborated on.

11. Describe your work at the University: expectations, accomplishments, and requirements over the span of your teaching career.

12. What additional professional activities, organizations, committees, research initiatives were you involved in while teaching at the university level as they relate to the field of E/BD? Special education?

13. How would you describe your teaching style?

14. Who or what had the greatest impact/influence on your career in the field of E/BD?

15. What components are necessary in special education graduate programs in universities today that will effectively guide the development of teachers and leaders in the field of E/BD today?

16. What do you see as the future of teaching in university programs for the field of E/BD moving into the 21st century?

Document Review

Yin (1994) reported that the use of the case-study methodology is one that both corroborates and augments evidence from a variety of other sources. This augmentation is further
delineated through the use of descriptive validity. This type of validity refers to the accuracy in
the reporting of descriptive information which can be event-based, object-based, behavior-based,
or related to people, settings, times, and places (Johnson, 1997). The document review utilized in
this study is an appropriate data collection strategy in that a review of legislative records and
policies related to the field of special education in general and E/BD specifically substantiated
the development and funding initiatives for the establishment of teacher-preparation programs in
university settings.

The foundation of the funding for E/BD as granted in P.L. 88-164 and the original
implementation of this funding by Dr. Richard Whelan, a leader in the field of E/BD, was
delineated using a case-study analysis. This review provided a research framework that
combined the following elements: (a) the development of an interview protocol to define the
interview process (bounded parameters); (b) a document review of programming initiatives; and
(c) the implementation of a higher education program for teacher preparation in the field of
E/BD at the University of Kansas by Dr. Whelan. Documents reviewed for this study included
curriculum vitae of Dr. Whelan; a student roster and related academic information from the
initial grant funding forward; a review of professional contributions, papers, journal articles, and
related works authored by the professor; and original documentation and reflections on the field
of E/BD.

Data Analysis: Validation Measures

Inherent in case study design, \( N = 1 \), is the difficulty in the trustworthiness or validation
of the data. One measure leading to the validation of research is the ability to show a causal
relationship. Lin (1998) defined a causal relationship as the systematic conjunction of two
factors, one of which, all things being equal, is argued to follow logically from the other. The utilization of narrative configuration is the process that employs a thematic thread which lays out the happenings as parts of an unfolding movement that culminates in an outcome (Polkinghorne, 1995).

Case-study analysis, when utilized in a historical review, provides a narration that brings life and meaning to an event or a set of events in a given time. An emergent design or theme is formulated through inquiry, leading to a constitutive response and the concluding implications (Meloy, 1994). Case-study analysis provides an in-depth, current review of historical significance, documented in the present, recursive in nature, for use and validation of future research efforts.
CHAPTER 4
RESULTS

The primary purpose of this study was to document the history of the field of emotional and behavioral disorders (E/BD) through the teaching, research, scholarship, and life work of one leader in the field. The impact of P.L. 88-164 was instrumental in the support of grant funding initiatives for teacher-preparation programs in higher education; related legislative initiatives that impacted the direction of the field of E/BD, and research and teaching efforts implemented in support of the field of E/BD were addressed.

The investigative results reported in this chapter follow the interview protocol and are outlined in a question and answer format. The development of the interview protocol questions were designed and delivered to align the contributions of Dr. Whelan in the development of one of the first teacher-preparation programs in the field E/BD and the initial federal funding of teacher-preparation programs under P.L. 88-164, The Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963.

The interview protocol was designed to invite a personalization of the history of the field of E/BD through (a) the experience and contributions of Dr. Whelan, (b) the continued development of teacher-preparation programs in higher education to address the needs of children and youth with E/BD, (c) the related impact of legislation on the field of E/BD regarding programming efforts and teacher preparation requirements, and (d) the importance of research-based initiatives in working with children and youth identified as E/BD.

Future directions related to the field of E/BD, the continued development and refinement of teacher-preparation programs at the higher education level, and the necessary components to building effective programming initiatives for children and youth with E/BD were covered in the
The information collected and presented were the results of (a) a direct interview, audiotaped, transcribed, reviewed, and revised in collaboration with Dr. Whelan; (b) a document review of his personal writings, class records, and personal notes; and (c) a review of Dr. Whelan’s publications in journals, monographs, and books.

Description of Participant

Dr. Richard J. Whelan held key positions as Associate Dean for Graduate Studies and Outreach, School of Education; Ralph L. Smith Distinguished Professor of Child Development; Professor of Special Education and Pediatrics and Director of Education, University Affiliated Facility, University of Kansas Medical Center. In 1966, he was assigned as the director of fiscal and budgetary expenditures for the United States Office of Education, Bureau of Education for the Handicapped fellowship funds (P.L. 88-164) awarded to the University of Kansas and University of Kansas Medical Center. He was a consultant, site visitor, Chairman of Review Panels for the Department of Education, Office of Special Education and Rehabilitative Services, Special Education programs, Washington, DC; and was active in leadership and research efforts in the development of teacher education, faculty education, and program development in college and universities at both the state and national level.

Dr. Whelan began his process of discovery in working with children at the Menninger Clinic, where he began as a “child-care worker” and eventually became the Director of Education. The following list of questions, bounded parameters, were developed and formatted to ensure a chronological, cohesive, and systematic way to gather information.
Question 1: Briefly describe your educational and career achievements prior to entering the field of academia.

I was Director (principal) of Education at the Children’s Hospital, better known internationally as Southard School, of the Menninger Clinic, Topeka, Kansas. However, I consider the clinic to be “academic” because it had, and continues today, outstanding postgraduate training programs in psychiatry, clinical psychology and psychiatric social work, to list only a few professional fields. It also provided programs in industrial mental health, pastoral counseling and an institute of psychoanalysis. That was a good choice for me, and the University offered me a tenure-track faculty appointment upon completion of the degree. Of course, the fact that I was functioning as a professor with academic appointments in psychiatry and education, and being a project investigator for about $200,000 in grant funds clearly made the outcome a positive process.

Without those, we wouldn’t have been able to build the entire department like we did. In the area of E/BD, we wouldn’t have been able to go up to 3 to 4 and 5 faculty members just for that area. So we were able to support at any one time just on fellowships eight to ten masters students every year and six to eight doctoral students. What we mainly did was run discretionary grants to support training programs.

Question 2: Describe your philosophy of teaching as it relates to higher education as a field and to graduate students in general.

Well, I guess if I had to summarize it, it would be respect for other professional viewpoints and beyond that, the willingness to analyze those viewpoints, to apply the scientific method to them, to go to original resources, not reject them, and to understand them. And, to look beyond the language of the various approaches to the youngsters’ behaviors that were being described.

What I’ve always tried to get across is that the children could care less about the various approaches that would make us comfortable and understanding and trying to figure out what to do. I’ve written about that in other contexts. So, if you know the language of the approaches, you have a better understanding of what the people that advocate that approach are trying to say. One of the biggest things I used to talk to Bill Morse, Nick Long, and all those folks about was that the observation and measurement associated with behavior analysis was a critical piece in working students with E/BD.

The Life Space Interview approach was used. It was an approach that was neutral and that can be used to determine if an intervention was going to work. We used it in our research classroom and in some cases we found that the life-space interview approach reinforced the behavior. In other cases, it diminished it. And that’s important to know.
So, they kind of came along with that, not that either one of them [Morse, Long] had any deep abiding interest in psychoanalysis or anything like that. They just originally thought that behaviorists were too surfacy and nonfeeling and didn’t have that kind of empathy. So, we spent quite a bit of time in studying all of these approaches and appreciating how they came to be and how they were used in a variety of settings. And, we pushed our own structured approach, which, I suppose is different than straight ABA but also we were a part of that whole development process in the field of E/BD.

Question 3: What are the necessary components of an effective graduate program in special education? Is collaboration with other departments in the University necessary in the formulation of degree requirements for students studying E/BD? And, if so, in which fields should these departments concentrate?

The official starting date for Preparing Teachers of Students with Mental Disorders began in 1960. This is when formal courses and practice with the words “emotionally disturbed” (ED) in the course title appeared in the Graduate School catalogue. While the program grew, largely with federal grant dollars, from one doctoral-level faculty member to four, plus varying numbers of research and clinical faculty members and prepared graduate students at the master’s and doctoral levels, this brief historical account focuses only upon the teacher education part of the program gestalt.

Our department was always tied in with our research department, measurement and design statistics. They all had at least 12-15 hours plus any single subject design and research that we taught. We were instrumental in getting that kind of approach to research instilled. We were instrumental in getting non-parametric approach as to statistical analysis started. And, they were good students.

As such, we were always involved in that. Statistics was typically the minor although the earlier students, I think I mentioned, were Ed.D. and didn’t want to take the time to go through the foreign language. But they took the same design measurement and statistics that a Ph.D. did who would minor in that area. We had a few, maybe we had 1 or 2 that took enough hours in clinical psychology to get a minor out of it.

But mostly it was in the research area because our program was pretty strongly research based. Some of them probably took some courses in counseling psych. Interesting, one of my doc graduates who resisted me the most about statistics, when he went to a university and became a statistical expert, which made him immensely proud. He has since told me he was glad he did it.

Replicating the program today would involve the following efforts. First, I would line up professors from the School of Social Welfare who have professional preparation and experience in schools as social workers. Second, I would line up the very best teacher educators in developmental, corrective, and remedial instruction. Third, I would line up experts who know intrapsychic, psycho-educational structure and applied behavior
analysis models. Lastly, I would insist that all faculty members have a strong commitment to program evaluation, not only as it is exists within the teacher-preparation program, but also what graduates accomplish as they interact with children in educational settings.

Question 4: Specifically, in reviewing the field of E/BD, what are the major changes that have impacted the field over the last 25 years as it relates to higher education? (Question was modified to address programmatic changes at the University of Kansas based on the last 25 years).

A general education base is necessary for successful teacher students of ED. The rationale: it is based upon the belief, developed from years of teaching and clinical practice, that the many needs of students with ED are best addressed by teachers who understand the needs of students in general. This principle is one of general-to-specific to general. If one understands the general foundations of effective instruction, one can add a layer of specific, research-based interventions to that foundation and subsequently apply the layers to general education; hence, general to specific to general.

Learning-to-do and doing-to-learn is the second component. Students were involved in practica experiences with students that were identified as ED. They were in constant contact students with ED and their carefully selected teachers. Students learned to do in action as opposed to passive learning in the sense of student seat time. By the time students completed practica, they could teach and therapeutically support individual students and a group of students.

The concept of group learning made up of individuals and the individual student with ED both first and last. If teachers understand and can cope with group dynamics, using them to help individuals improve their affective and cognitive competencies, they can also be successful in teaching and otherwise helping and individual student. Skills in group process are learned; one is not born with them. Program graduates become successful consultant (i.e., crisis) teachers because of their expertise in group and individual dynamics. Structure followed by structure followed by structure.

Long before applied behavior analysis was used in school settings, the concept of structure was practiced in residential treatment centers and public schools. Structure is realizing the simplicity of descriptions versus the complexity of practice; structure is behavior. Change procedures are designed to specify and clarify the interactions among environmental events and behaviors, and these events can be arranged to increase prosocial and decrease dysfunctional behaviors.

In other words, look at and listen to the student; they will tell you if you are doing it correctly or not. Structure is about establishing conditions for student learning, which fosters student achievement (social, emotional, academic) and which subsequently leads to a mentally healthy, balanced adjustment to daily and long-term life. It must be large enough, not theory-bound, to include concepts from a number of perspectives (e.g., intrapsychic, psycho-educational, applied behavior analysis).
Evaluation, the direct observation, recording and display of individual and group behaviors are the essentials of measurement, and measurement provides information that teachers and students can use to evaluate a program of teaching learning. In addition to this and the strong instructional, clinical and research foundations, the teacher education program has since day one drawn on knowledge, skills, and people associated with professional disciplines other than education and special education.

It was and is multidisciplinary in nature, sharing knowledge and skills with psychologists, social workers, psychiatrists, neurologists, occupational therapists, nurses and the like. When a family and student receive services from many disciplines, the probability of miscommunication is high. When a multidisciplinary team speaks with one voice (i.e., interventions), communication errors are reduced, the student is the beneficiary, not the victim.

The question arises as to what type of professional this strong group of teacher educators will prepare? The teacher education program itself needs to be focused upon didactic experiences in classrooms and associated with the knowledge and skills reflected by the family team members. Program graduates would be equally able to function within instructional contexts as teachers, consultants to teachers in general education, and clinicians in home and community settings. They would be prepared to function as case managers who bring personnel together from other agencies to provide services to children and their family members.

The rationale for including the family and agency work is that schools use only one fourth of a 24-hour day. The rest of the day is devoted to activities in the home and community. This particular model would prepare professionals who understand that children, if they are to have a full chance in life, must have the services of the school and every other social agency that may influence or guide them. Based upon insights and understandings obtained from a child’s performance at school, in the home, and in the community, this professional can use a variety of interventions. The important aspect of this approach is that this person can be available to step in immediately in a prevention capacity, or if needed, intervention, whenever a child shows signs of not progressing as expected. And, what do we call this “super-professional?” How about teacher as a novel idea?

As I look back on a 50-year career in our ever-struggling field, I am proud of our many accomplishments. But no accomplishment exceeds my pride in our teacher-education program. The proof of my claim is in the contributions of the many program graduates; they may be few in number, but have made positive contributions to the lives of the many students with mental disorders. The program will not only live on, it will improve each and every day. Although, “finis,” for me, it is really a continuation of the beginning for our hard-working colleagues.

Question 5: Describe the development of the field of E/BD beginning in 1960 through today.

If you go back to the work of Fritz Redl and David Wineman in *The Aggressive Child*, I think you find the beginnings of an effort to have small residential treatment centers and
then place the children in public schools with support, but as you read that you’re struck by the idea that really the therapy took place in the centers with the individual therapy sessions, group therapy and then just the therapy of living together with good child care workers and group social workers and so on. And that was done with probably 6 children or fewer than a dozen anyway. But it had a major impact. It didn’t receive federal funding. I think the Junior League supported it and other organizations, so it really had a major impact.

Interestingly enough, the true “died in the wool” psychoanalysts didn’t appreciate this very much, because these characters talked about surface behaviors and good management techniques. They gave them funny names like reality rub-in and massaging techniques and so on, but if you get behind the label and looked at what they were actually doing it made sense, even from an applied behavior analysis point-of-view. So, we had that going and then if you go back to the early Child Guidance Clinics. Jim Kauffman writes a beautiful history of this by the way.

You get some of that as well, but you don’t get the notion that the public schools really did much. I’m sure they did, in a sense that good teachers always help kids or that principals were supportive or that individuals along the way helped them in so far as they could deal with the youngster and probably a nonfunctional family or a youngster who has had developmental problems other than the emotional reactions. There weren’t even state hospitals for these kids. As they got older, they probably went into adult placement facilities or eventually got in trouble with the law and so on and so forth. So, they lived with it.

Of course, when I started, in ’50-’51, there weren’t really medications like there are today. Our philosophy at Menningers was to surround them with people. So, at that place we didn’t have a building that looked like a prison. Yeah, there were locks on some doors. The kids weren’t locked in. The only locks were provided by people. We didn’t have many runaways or elopements as they were called, so it worked.

The residential treatment centers for children and adolescents typically had schools, and because the founders of those institutions believed in the business of children going to school, which they did, and that schooling was important. Of course, we observed early on that one of the last things that children let go of was going to school, or one of the first things they did when they came back was want to go to school. We had kids run down to the school building and wait and knock on the door to get in and it was a structure for them, something they could hang on to. If they could get into a science experiment or problem, it took their mind off other things and if that could keep the wild thoughts and fears away, well then that was good.

What we were told, for example, as teachers, is by being a good teacher you’re being therapeutic, but you’re not a therapist, and we weren’t aspiring to be therapists in that sense, but we presented reality to the kids and we let the therapist deal with the inner thoughts not that you could draw a bright line on anything like that.

Question 6: Describe field development patterns specifically in E/BD and generally in special
education. What were the driving forces behind these patterns?

The field of E/BD was driven by the individuals who were working to develop programs for students identified as E/BD, the development of teacher-training programs to work with children and youth identified as E/BD, and the related federal requirements to educate students with disabilities in public education settings. There was not a “set pattern nor any definite ideas.” The field began with the development of Teacher’s Colleges vs. Big 10 programs. Programs were developed to enhance research efforts, to ensure development of scholarship efforts in the field of E/BD, to determine behavior patterns and responses to those patterns, and to extend the focus to the families of students’ identified with E/BD characteristics.

Federal funding in the form of grants were critical to the development of programs in public schools for students’ identified as E/BD. Grants were provided to university programs for teacher training and research efforts. Additional grant funding was provided to public schools to ensure programs to support E/BD students in the public school sector. Grants for research efforts related to the development of academic and behavioral supports to effectively support both students and teachers working in the field were critical to forward movement in the field and are just as critical today.

Question 7: How have graduate program requirements (or have they) changed in response to changes in the field of E/BD since 1960?

Effective programs in the field of E/BD have changed in response to the changing demographics of students, technology, and the need to collaborate with other departments in the formulation and development of degree requirements. One thing that has occurred is the respect for other professional viewpoints, the incorporation of other departments in the education of graduate students. Degree requirements have been expanded to include research-based practices, measurement design and statistics, clinical training, counseling, and nonparametric statistical analysis in addition to the foundation courses.

There has been an increase in the application of the scientific method to the field of E/BD coupled with willingness to analyze the data and then implement programming efforts in accordance with the findings. Additionally, there has been an increase in looking to the original source for information (historical) and looking beyond to the ever-changing language of the children (future) to ensure appropriate educational services and supports for the professionals working with students identified as E/BD and for the students and their families navigating the educational process.

Question 8: What has the impact of government funding, if any, had on programmatic success as it relates to the field of special education in general and E/BD specifically?
Program development funding of special projects supported different models of training with $20,000-$25,000 to start it, getting it up to speed and then in a couple of years evaluate and put the program into place. The approach we used, we dubbed it a catalytic approach, the idea being if we put in minimal amounts of dollars, then we would expect the private institutions and public institutions to take that over and those dollars could be gradually withdrawn. Now, they haven’t been withdrawn over the years, but they have in other programs.

In other words, okay, for a number of years we’ll support three full-time faculty members with grant dollars and most of the major programs have been implemented. In fact, one requirement to get a doctoral grant was the idea that the university would pull these people in under its regular budget and that usually happened. The other catalytic factor is if you have a strong master’s program and if you can have ten full-time master’s students; part-time people can come in and take those courses, so constantly we taught a great deal in late afternoon. So, rarely did we have daytime classes except for full-time doctoral students. That was the process used and how many of these programs grew. They were categorically funded grants.

When I was in Washington, we went to what was called the block grant approach. The idea being that it would give universities more flexibility in how they could spend funds. What I found interesting is, of course, in Washington new ideas were out in a hurry. Essentially, the funding has gone back to categorical funding; for example, Autism or Asperger’s Syndrome. Then, they went to other types of categories. Leadership training was a general category. Then, there were initiatives in transition and there still are.

In other words, the funds were targeted rather than blocked and they just came back, instead of disability categories, they came back under other kinds of categories. So that type of funding has kind of changed. Instead of giving the block grant to the university and say all right here’s $500,000 to train people in E/BD, you go with the RFPs that come out and say well, the country is short on transition specialists, and we really don’t know what we’re doing in the area of technology so we need research and development grants.

Question 9: Describe your research interests, publications, and involvement in the field of E/BD over the past 25 years.

This question is an easy one, a “fat pitch” as ball players say. My primary interest was identifying and using effective treatment and intervention approaches to help youngsters with mental disorders to help themselves. To that end, I decided early on that I would not reject out-of-hand, or unconditionally accept for that matter, a treatment theory and its procedures unless valid data supported such a decision. I have made the point numerous times in publications and during presentations that children really don’t care about our theories—they want us to understand them, their needs, aspirations, etc., and help them with those issues. Professionals have the theories to help them help children. However, the semantics associated with those theories get in the way of professional to professional
communications, leading in many cases to acrimonious interchanges that add nothing to our knowledge base.

My first preparation was in psychoanalysis, then psycho-education, and, simultaneously with that, applied behavioral analysis. I speak the language of all three so that I can better appreciate the efforts my colleagues in these areas are making on behalf of children with problems. I tried to convey the importance of this knowledge-base to students, and, from what I observed over the years, they adopted this interest too. In fact, I used to tell students, somewhat tongue in cheek, that when they completed their course of study they would know more about “psycho-education” than the major contributors to that approach. They didn’t believe me at the time but many of them over time have told me that they came to believe it rather soon in their careers.

Tied with interest in theories is my commitment to evaluation of them. Because the numbers of children with E/BD are few in comparison to other populations, the measurement procedures associated with applied behavioral analysis serve our needs quite well. For example, if we want to find out if a life-space-interview (LSI) procedure is effective with a child, we can observe, record, and display the behavior. The LSI application is predicted to decrease or increase. In this way, decisions to continue LSI or “try another way” are based upon data. I suppose it is fair to say that I am driven by data, but I am not controlled by data. That is, I want to know what the data are, and if they are reliable and valid; then I will use them as part of a process in making a decision. Again, I believe that most, if not all, of the students who completed the E/BD program believe in the importance of precise measurement when evaluating intervention procedures.

Question 10: Discuss the significant publications, grant acquisitions, or programs that you have authored, initiated, or collaborated on.

One of my first administrative and service responsibilities at the University of Kansas was the Co-Chairman, of the Department of Special Education at the University of Kansas/University of Kansas Medical Center (1966–1968) followed by the assignment of Chairman of the Department of Special Education (1968–1972). During this time, I became the Director of Fiscal and Budgetary Expenditures for United States Office of Education, Bureau of Education for the Handicapped fellowship funds awarded to the University of Kansas and University of Kansas Medical Center in the writing, coordinating of faculty writing, and submission of grant applications from September, 1966–September, 1972.

The latter assignment was in conjunction with much of the initial federal pieces of legislation and funding mechanisms that were awarded to the University of Kansas in the development and implementation of Teacher Training Programs in the area of E/BD: (a) Program Development Grant (P.L.85-926); (b) Training Provisions for Teachers of Mentally Retarded Students (P.L. 86-158); and (c) the Mental Retardation Facilities and Community Mental Health Centers Construction Act (P.L. 88-164). From 1974–1977, I worked as the Director of a national evaluation project on personnel preparation for the

I have worked extensively with contributions to the construction and program grants as a Member of the Clinical Advisory Committee and the Mental Retardation Research Center from 1966 through the present. I have continued working in the area of grant acquisitions from 1965–present with awards ranging from $65,000.00 - $500,000.00 (except for 2 years in federal service). I have authored, written, and presented numerous papers, and these are referenced in my Curriculum Vitae.

Question 11: Describe your work at the University: expectations, accomplishments, and requirements over the span of your teaching career.

Like many people in our field, I became a part of it somewhat by chance. One of my major fields of study as an undergraduate student was psychology, especially the discipline of abnormal psychology. I had some great teachers who piqued my initial interest in the field, and that, in turn, prompted me to move on to more advanced courses.

I began work as an Assistant Professor in Education at the University of Kansas in 1966 and became a full Professor in Education in 1971. From my initial appointment in 1966 through 2004 I chaired Search Committees, Promotion and Tenure Committees, Graduate Committees and acted in the capacity of both Associate Dean for Graduate Studies and Outreach, School of Education (1988-1994) and Dean, School of Education (1992-1994) at the University of Kansas. I have also served as the Director of Special Education at the University of Kansas School of Medicine from 1994–2004.

I have been identified as Who’s Who in America, Leaders in Education, Phi Kappa Phi, Pi Gamma Mu, and Outstanding Educators of America. I received the Award for Service to Exceptional Children, Kansas Federation, Council for Exceptional Children and the Award for Leadership in Behavioral Disorders (Midwest Symposium).

My consulting and service activities began in 1961 and continue today. A sampling of these activities are as follows: (a) Mental Health Committee, Kansas School Health Advisory Council (1962-1966); (b) Leadership Training Institute, Special Education, University of Minnesota and U.S.O.E., Bureau of Educational Personnel Development (1970-1972); (c) Chairman, Evaluation Training Consortium, national evaluation training project sponsored by U.S.O.E. (1972–1981); (d) Menninger Clinic, Topeka, Kansas (1962–1972); (e) public school special education programs, local, state, national and college and universities (teacher education, faculty development, site visitor, review panels, chairman of review panels) 1966–current; (f) Member, Board of Examiners, National Council for the Accreditation of Teacher Education, Washington, D.C. (1988–1995); and Hearing Officer, Bureau of Indian Affairs, Washington, D.C. (1995–present).

Instructional responsibilities in which I was involved at the University of Kansas involved practicum supervision, advisement (course scheduling, thesis and dissertation supervision, committee member on master’s and doctoral programs), and curriculum planning for the Department of Special Education. At the University of Kansas Medical Center I was involved in instruction, demonstration, and clinical supervision of students in Pediatrics, Psychiatry, and other Departments of the College of Health Sciences.

Even when I started to work at the Menninger Clinic, I didn’t have a clear end goal except the most important one for all professionals in our field—helping those youngsters who may be few in numbers but many in needs. It was only during and after I completed my doctoral degree that I set clear goals of preparing special education professionals, conducting applied research and giving all that I could in the area of public service. During my tenure as a major advisor: 110 completed Master’s Degrees in Education, 7 completed Specialist Degrees in Education, and 35 completed Doctoral Degrees in Education.

I’ll leave it for others to decide if those goals were at least partially attained.

Question 12: What additional professional activities, organizations, committees, and research initiatives were you involved in while teaching at the university level as they relate to the field of E/BD? Special education?

My professional preparation began in 1952 in the United States Army Radar and Guided Missile School studying electronics, computer, and power control systems. I received my B.A. (cum laude) in 1955 from Washburn University with a major in history and political science, and minors in psychology and education. I completed 25 hours towards an M.A. in American history at the University of Kansas in 1956. In 1966, I completed by Ed.D
from the University of Kansas majoring in special education (emotional and behavioral disorders) and educational psychology & research.

In 1974, I completed Labor Relations Training; Mediation at the U.S. Civil Service Commission in Washington, D.C. and in 1995, I completed Mediation Training and Conflict Management Skills at the Justice Center of Atlanta, Inc. in Atlanta, Georgia.

My professional experience began in 1951 as a recreational therapist, Menninger Clinic, in Topeka, Kansas. This was followed by my work in the U.S. Army from 1952–1954. I returned to Menninger Clinic initially as a child care worker (1954-1957), an elementary and secondary teacher (1957-1959), and as the director of education of the clinic from 1959–1962. This was followed by working as a demonstration instructor at the Children’s Rehabilitation Unit at the University of Kansas Medical Center, Kansas City, Kansas.

I became an instructor of psychiatry and instructor of education at the University of Kansas Medical Center and the University of Kansas, respectively, from 1964–1966. My first assistant professor position was came in 1966 (1966- 1968) and as an assistant professor of pediatrics at the University of Kansas Medical Center (1966-1989).

I was elevated to associate professor of education (1968-1971) and professor of education (1971–present) at the University of Kansas. During this time, I briefly served as the Director for the Division of Personnel Preparation, at the Bureau of Education for the Handicapped, Department of Health, Education, & Welfare, Washington, D.C.. In 1974, I began work at the University of Kansas Medical Center as the Ralph L. Smith Distinguished Professor of Child Development (Endowed Chair). And, in 1980, became a professor of pediatrics, at the University of Kansas Medical Center in conjunction with my continued work as a Professor of Education at the University of Kansas. My work in both of these institutions continues today.

Question 13: How would you describe your teaching style?

What I’ve always tried to get across is that the children could care less about the various approaches that would make us comfortable and understanding and trying to figure out what to do. So, if you know the language of the approaches, you have a better understanding of what the people that advocate that approach are trying to say.

In other cases, it diminished it. And that’s important to know. So, they kind of came along with that, not that either one of them had any deep abiding interest in psychoanalysis or anything like that. They just originally thought that behaviorists were too surface and nonfeeling and didn’t have that kind of empathy. So, we spent quite a bit of time in studying all of these approaches and appreciating how they came to be and how they were used. And, we pushed our own structured approach, which, I suppose is different than straight applied behavioral analysis but also we were a part of the development of applied behavior analysis.

In summarizing my teaching style, it was important to lay out the information in field (class) and to provide a foundation. Theory, understand it, read it, and discuss it—make it hands-on (if possible). It is important to get the students involved. It was important to
teach them how to research and how to write, as well as to obtain grant funding. It was an evolutionary process—one that changed over time.

Question 14: Who or what had the greatest impact/influence on your career in the field of E/BD?

I had the opportunity to visit with Anna Freud, Margaret Meade, Aldous Huxley, and others who were visiting professors at the Clinic. My years as a staff member at Menninger’s, plus a continuing association with the institution, were truly satisfying, inspirational and educational. The Clinic was a “learning community” in every sense of those words.

For that reason, I still consider it as a highlight of my career in academia. The clinic granted me an academic leave of absence to complete the doctoral degree at the University of Kansas and the University of Kansas Medical Center. I had every intention of returning to the Clinic, even though it did not require me to do so as a condition for the leave, when I completed the degree.

However, after collaborating with my doctoral advisor, Dr. Norris G. Haring and others at the University, I believed that the opportunity to make contributions to the treatment and education of children and adolescents with mental disorders resided in a university setting. That was a good choice for me and the University offered me a tenure track faculty appointment upon completion of the degree. Specifically, the five greatest individuals who influenced my career were Drs. Norris Haring, Anna Freud, Margaret Mead and two of my colleagues: Bill Morse and Bill Rhodes.

Question 15: What components are necessary in special education graduate programs in universities today that will effectively guide the development of teachers and leaders in the field of E/BD today?

The development of a multiplier effect that is equivalent to that of a catalytic effect, there are basically three arenas that need to be addressed. They are the (a) philosophical approach which involves an ongoing comparison of a structured approach with that of a psych-educational approach; (b) grants with which to ensure continued funding of programs, research initiatives, and increasing departmental resources for continued growth; and (c) the implementation of a behavior management approach in working with students which involves some type of applied research.

In essence, “we learn to do and we do to learn. Children could care less about theory—it is in knowing the language of the approach.” There should be a focused effort on problem solving to adapt to new information and knowledge. A continued focus on the issues that continue to confront colleagues in the field of E/BD: prevention, theories, teacher
education models, research/evaluation skills, and modes of knowledge dissemination. It involves adopting a model of “learning to do and doing to learn.”

In summary, for graduate programs in special education to be successful today the following components are necessary: (a) presentation of the history of the field of E/BD; (b) effective presentation of materials; (c) a thorough grounding in research and statistics; (d) training; (e) an understanding of grants and the grant process; and (f) “a together” approach between the student and the teacher.

Question 16: What do you see as the future of teaching in university programs for the field of E/BD moving into the 21st century?

When I started in our field, educational programs in the public schools were few and far between. The exceptions were the so called “600” schools in New York City for the education of E/BD students. Some of these programs were located in general education buildings, while others were in residential treatment centers. Classroom teachers, and professors to be, learned knowledge and skills by working in clinics, research programs, and residential treatment centers.

The children were our teachers; they let us know in an “eye blink” when our procedures were correct or incorrect. So when a person asks me about the best teachers I have had in our field, I always say “the children taught me; they know best.” Of course, this is a bit of an exaggeration but not much. I have many professors and students to whom I am deeply indebted to for what they have taught me.

I hasten to add in the strongest way possible that the U.S. Congress, helped by many advocates, through appropriations of federal grant money to support teacher education and research for students with E/BD, enabled many universities to build strong programs that still exist today. The highly competitive grant dollars paid for student stipends, and faculty salaries were important.

Eventually, faculty salaries were weaned from federal dollars to the standard university budget resources. I refer to this phenomenon as a “catalytic strategy or effect.” Those comparatively few federal dollars generated more teacher education and research graduates than would have been produced by only student stipends given to just a few universities.

However, while the direction our field has followed the last 60 years or so is correct, there is still much to be accomplished. We are still addressing many of the same issues now as we did before—providing effective educational and therapeutic services for students with E/BD.
CHAPTER 5
SUMMARY, IMPLICATIONS, AND RECOMMENDATIONS

While a substantial amount of research exists in the field of emotional and behavioral disorders (E/BD) in relationship to the acquisition of social skills and skill streaming (Gresham, Cook, Crews, & Kern, 2004; Lane et al., 2003); multiculturalism and its related impact on student outcomes (Farmer, Goforth, Clemmer, & Thompson, 2004; Harriott & Martin, 2004); inclusion (Simpson, 2004); service-delivery initiatives (Blue-Banning, Summers, Frankland, Nelson, & Beegle, 2004; Browder & Cooper-Duffey, 2003); intervention strategies (Knoster, 2004; Leedy, Bates, & Safran 2004; Rozalski & Moore, 2004) and research involving the historical implications of the field of E/BD remains limited (Bullock, 2004; Forness, 2003; Kauffman, 2003; Nelson, 2003; Sugai, 2003). This lack of research into historical programming efforts and the significance of the leaders, teachers, and professionals (the pioneers) in the field of E/BD is disconcerting to a field that is largely based on the history of public education and the related lack of educational supports for students identified with special needs.

In essence, these pioneering efforts become both the basis and the foundation, a framework from which teacher-training programs were constructed, research and interventions for student with E/BD developed, and from which future directions will effectively evolve. The work of these pioneers was essential to the development and maintenance of a theoretical framework involving research-based practices and initiatives, scientifically validated instruction and interventions, recorded through scholarship, and taught in HEIs as a baseline from which to both measure and provide forward movement in the field of E/BD.

The purpose of this study was to document the historical significance and professional contributions of Dr. Richard J. Whelan, Professor Emeritus, University of Kansas and his
contribution to the development of teacher-preparation programs in the field of E/BD in higher education. The second purpose of this study was to document the legislative and program initiatives that have impacted the services, education, teaching, and research initiatives in the field of E/BD as interpreted by Dr. Whelan. The final purpose of this study was to examine the views of Dr. Whelan regarding the need for future developments in the field of E/BD.

Summary of Findings

The interview protocol developed and disseminated in chapter 4 represents the historical significance and the related impact of one leader in the field of E/BD, Dr. Richard Whelan, Professor Emeritus, on the field of E/BD and the development, implementation, and growth of the E/BD program at the University of Kansas from 1960 through 2004. A chronological narrative of legislative initiatives and funding were reviewed in conjunction with the field of E/BD. The accompanying need for continued improvement and innovations for students with E/BD, necessitated by legislative initiatives at both the federal and state level, were reviewed. Programmatic development in higher education, research initiatives, personnel preparation, and the need for scientific-based prevention and intervention efforts are the continuing call of those educators who work with the children and youth identified as E/BD. The call is to ensure appropriate instruction, social-skill acquisition, emotional development, and a comprehensive behavioral support system that is delivered to meet the individual needs of the student within a comprehensive and inclusive system.

Results of the Study

According to the research data as documented and outlined, Dr. Whelan actively worked
toward and achieved the programmatic goals as set forth in P.L. 88-164, and he continues to refine, rework, and engage in ongoing research efforts to ensure that the graduates of the E/BD program at the University of Kansas have the necessary tools with which to develop, enhance, and move the field of E/BD well into the 21st century. The following exemplifies the importance of historical inquiry and the relevance of qualitative inquiry in the form of case-study analysis in research inquiry.

In 1966, Richard Whelan outlined three educational treatment approaches related to the emotionally disturbed child: (a) psycho-educational therapy with behavior contextualized in the psychoanalytic theoretical framework; (b) life space interview with an associated focus on environmental factors and a psychotherapeutic approach; and (c) structured approach with a focus on behavior and related consequences, known as behavior modification. Associated implementation efforts in the school environment would necessitate the training of teachers, administrators, and school personnel beyond mere educational efforts to include therapeutic and behavioral modifications to ensure academic success.

Dr. Whelan (2001) in his presentation, “The Changing Scene in Service Delivery for Children/Youth with Challenging Behavior: Where We Have Been, Where We Are, What We Need to Do Next,” reiterates the educational treatment approaches he first posited in 1966. He addresses the changes that have occurred during that 35-year span and the associated legislative, demographic, socioeconomic, research-based initiatives, and continued scholarship efforts in the field that have occurred in support of his original premise.

Implications

History is that which is known, albeit subjectively or objectively. In “Teaching History”
(2006), history is defined as the ever-changing interpretation of the past that humans have used and continue to use to explain successes, failures, the preservation of ideas, the documentation of innovations, and the memories (written or oral) that mold cultural, educational, political, group, and individual identities and ideologies.

Inherent in history is innovation. And, innovation drives societies in new directions that require a continual adaptation to knowledge, ideas, relationships, expectations, values, and a related vehicle of choice, often education, formal or informal. Lewis Carroll in *Alice and Wonderland* posed a similar question: “If you don’t know where you are going, how will you know when you get there?” (Carroll, Tenniel, & Byatt, 2003, p. 23). The same can be said of education. If you don’t know the history, the pioneers, the innovations, the research, the foundational aspects of learning and learning differences, the academic and behavioral supports and interventions, how can you measure or predict future outcomes and innovations? How is educational success to be measured and not repeated?

The results of this study imply that the foundation of educational strategies and supports for children and youth with E/BD have changed little. What has changed is the increase in the knowledge base used to implement the necessary interventions and supports for students with E/BD and their families, the environmental factors that continue to impact the educational process and delivery of supports, the necessary components for the effective implementation of training programs for personnel working with these students, and the importance of scientifically validated information to both strengthen and enhance the field of E/BD.

**Recommendation for Future Research**

The findings in this study suggest a need to document the history of the field of special
education, specifically E/BD, the leaders associated with the development of the field, the legislative initiatives that have impacted the field and continue to impact the field of E/BD, and to establish a historical/theoretical framework that encompasses the leadership efforts of the pioneers in the field of E/BD.

Qualitative analysis provides for an in-depth knowledge and understanding of a specific phenomenon, individual, or theme culminating into a narrative configuration based upon observations, interviews, document reviews, and related forms of inquiry. It is a baseline from which current research can be compared, validated, invalidated, and/or understood.

Research indicates that students identified as E/BD are more likely to dropout of school, commit crimes, and engage in deviant behavior, as well to develop drug and alcohol problems (Talbot & Fleming, 2003). Additionally, these students are more likely to have difficulty sustaining employment, engaging in meaningful relationships, and conforming to societal expectations and norms (Kohler & Field, 2003; Wilde, 2003). Consequently, there is a tremendous educational as well as community need to document the history of the field of E/BD, through the personal reflections and experiential learning that can only come from the historical perspective of one who has worked in the field, worked with the students, and dedicated his or her life to the continued development of interventions and innovations to address the needs of the students identified as E/BD.
Before agreeing to participate in this research study, it is important that you read and understand the following explanation of the purpose and benefits of the study and how it will be conducted.

Title of Study: The Historical Significance of Professional Contributions of a Leader in the Field of Emotional and Behavioral Disorders in Special Education: A Qualitative Case Study of Richard J. Whelan.

Principal Investigator: Carolyn Smyth, a graduate student in the University of North Texas (UNT) Department of Technology and Cognition: Special Education.

Purpose of the Study: You are being asked to participate in a research study which involves: The purpose of the this study is to document the historical significance and professional contributions of Dr. Richard J. Whelan, Professor Emeritus, University of Kansas, in the implementation of PL 88-164 and the development of teacher-training programs in the field of Emotional and Behavioral Disorder (E/BD) in higher education.

Study Procedures: You will be asked to answer questions relating to the original funding of the Mental Retardation Facilities Construction Act (P.L.88-164), the development of teacher-training programs at the University of Kansas in Emotional and Behavioral Disorders (E/BD), your contributions to the field of E/BD and the impact to teacher training programs. The interview will be audio-taped and transcribed. You will be provided a copy of the transcription for review and revision purposes prior to submission. It is estimated that the interview process, document gathering and review of information will take approximately 20 hours of your time.

Foreseeable Risks: There are no foreseeable risks participating in this study.

Benefits to the Subjects or Others: This study is not expected to be of any direct benefit to you. The benefit to others is threefold: E/BD as a field is moved forward through the preparation of personnel, an ongoing analysis of students and their related handicapping conditions, the research and scholarship efforts of leaders in the field, and the dissemination of educational supports in the form of resources, technology, funding, and programming efforts in an environment that leads to successful teaching and learning outcomes enable the field to move forward. Understanding the history of the field, the foundational framework from which research and evidence-based practices have emerged, is paramount to forward movement in the field and necessary to the measurement of effective interventions and strategies in support of the students, their families, dialogical discussion that guides future generations in their understanding of the field of E/BD through the life experiences of those who have contributed to the service, research, and legislative efforts that are the field.

Procedures for Maintaining Confidentiality of Research Records: The research information will be maintained at my personal residence and a printed copy of the information will be
published in a dissertation. Any original documents will be returned, via certified mail, to the participant. The participant agrees that his identity will be reported at the end of the study.

Questions about the Study: If you have any questions about the study, you may contact Carolyn Smythe or the faculty advisor, Dr. Lybdal Bullock, UNT Department of Technology & Cognition, at telephone number 940-565-3583.

Review for the Protection of Participants: This research study has been reviewed and approved by the UNT Institutional Review Board (IRB). The UNT IRB can be contacted at (940) 565-3940 with any questions regarding the rights of research subjects.

Research Participants’ Rights: Your signature below indicates that you have read or have had read to you all of the above and that you confirm all of the following:

- Carolyn Smythe has explained the study to you and answered all of your questions. You have been told the possible benefits and the potential risks and/or discomforts of the study.
- You understand that you do not have to take part in this study, and your refusal to participate or your decision to withdraw will involve no penalty or loss of rights or benefits. The study personnel may choose to stop your participation at any time.
- You understand why the study is being conducted and how it will be performed.
- You understand your rights as a research participant and you voluntarily consent to participate in this study.
- You have been told you will receive a copy of this form.

Richard J. Whelan_________________
Printed Name of Participant

Richard J. Whelan_________________ 1-22-2007
Signature of Participant Date

For the Principal Investigator or Designee: I certify that I have reviewed the contents of this form with the participant signing above. I have explained the possible benefits and the potential risks and/or discomforts of the study. It is my opinion that the participant understood the explanation.

Carolyn Smythe_________________________ 01-22-2007
Signature of Principal Investigator or Designee Date
Curriculum Vitae: Richard J. Whelan

Present Position: Ralph L. Smith Distinguished Professor of Child Development  
Professor of Special Education and Pediatrics  
The University of Kansas Medical Center

Office:  
Department of Special Education  
The University of Kansas Medical Center  
Kansas City, Kansas 66160-7335

PROFESSIONAL PREPARATION:

1952–1953  
United States Army Radar and Guided Missile School, El Paso, Texas.  
Area of Study: Electronics, Computer, and Power Control Systems

1955  
B.A. (cum laude) Washburn University, Topeka, Kansas  
Major: History and Political Science  
Minors: Psychology and Education

1956  
(25 hours toward M.A.) University of Kansas, Lawrence, Kansas  
Major: American History  
Minor: Far Eastern and European History

1966  
Ed.D. University of Kansas, Lawrence, Kansas  
Major: Special Education (Emotional and Behavior Disorders)  
Related Areas: Educational Psychology & Research

1974  
U.S. Civil Service Commission, Washington, D.C.  
Area: Labor Relations Training; Mediation

1995  
Justice Center of Atlanta, Inc., Atlanta, Georgia  
Area: Mediation and Conflict Management Skills

PROFESSIONAL EXPERIENCES:

1951–1952  
Recreational Therapist, Menninger Clinic, Topeka, Kansas

1954–1957  Child Care Worker, Menninger Clinic, Topeka, Kansas

1957–1959  Elementary and Secondary Teacher, Menninger Clinic, Topeka, Kansas

1959–1962  Director of Education, Menninger Clinic, Topeka, Kansas

1962–1964  Demonstration Instructor, Children’s Rehabilitation Unit, University of Kansas Medical Center, Kansas City, Kansas

1963–1964  Remedial Reading Instructor, Orthoptic Clinic, Kansas City, Missouri

1964  Visiting Professor of Education, Texas Women’s University, Denton, Texas

1964–1966  Instructor of Psychiatry, University of Kansas Medical Center

1964–1966  Instructor of Education, University of Kansas, Lawrence, Kansas

1966–1968  Assistant Professor of Education, University of Kansas

1966–1989  Assistant Professor of Pediatrics, University of Kansas Medical Center

1967  Visiting Professor of Special Education, University of Minnesota, Minneapolis, Minnesota

1968–1971  Associate Professor of Education, University of Kansas


1978–1979  Honor Lecturer, Mid-America State Universities Association

1971–present  Professor of Education, University of Kansas

1974–present  Ralph L. Smith Distinguished Professor of Child Development (Endowed Chair), the University of
Kansas Medical Center

1980–present  Professor of Pediatrics, the University of Kansas Medical Center

ADMINISTRATIVE AND SERVICE RESPONSIBILITIES (not inclusive):

University of Kansas/University of Kansas Medical Center:

1966–1968  Co-Chairman, Department of Special Education

1968–1972  Chairman, Department of Special Education

1966–1972  Director, Fiscal and Budgetary Expenditures for United State Office of Education, Bureau of Education for the Handicapped fellowship funds awarded to the University of Kansas and University of Kansas Medical Center (involved writing grants and coordinating faculty writing and submission of grant applications)

1966–1972  Member, Department of Pediatrics Committee, School of Medicine

1968–1969  Member, Search Committee (Dean, School of Education)

1968–1972  Member, Graduate Selection Committee, School of Education

1969–1970  Member, Promotion and Tenure Committee, School of Education

1970–1971  Member, Promotion and Tenure Committee, School of Education

1971–1972  Member, Area II Committee of the University Graduate Council


1976–1977  Member, Committee appointed by the Vice Chancellor for Academic Affairs to evaluate the School of Education

1976–1977  Member, College of Health Sciences, Promotion and Tenure Appeals Committee
1976–1978  Chairman, School of Education Promotion and Tenure Committee

1966–present  Director of Education, Children’s Rehabilitation Unit/University Affiliated Faculty

1966–present  Member, Clinical Advisory Committee, University of Affiliated Facility (written contribution to construction and program grants)

1966–present  Member, Research Committee, Mental Retardation Research Center (written contribution to construction and program grants)

1967–present  Director, Title I (PL 89-313) program funds, University of Kansas Medical Center

1974–present  Member, Graduate Committee, College of Health Sciences

1974–1983  Member, Postmaster’s Committee, Department of Special Education

1975–present  Member, Liaison Committee, College of Health Sciences and University Affiliated Facility

1978–1980  Acting Chairman, Department of Special Education

1980–1981  Chairman, Performance Review of Committee of Dean, School of Education, for the Office of Academic Affairs

1983–1988  Chairman, Department of Special Education

1988–1994  Associate Dean for Graduate Studies and Outreach, School of Education

1992–1994  Dean, School of Education

1994  Member, North Central Association, Self-Study Committee

1994–present  Director, Special Education, School of Medicine

**INSTRUCTIONAL RESPONSIBILITIES**

*University of Kansas/University of Kansas Medical Center:*
Major Advisor: 110 completed Master’s Degrees in Education
7 completed Specialist Degrees in Education
35 completed Doctoral Degrees in Education

Instruction, Demonstration, and Clinical Supervision of students in
Pediatrics, Psychiatry, and other Departments of the College
of Health Sciences

Instruction (6 hours per semester), practicum supervision, advisement
(course scheduling, thesis and dissertation supervision, committee
member on master’s and doctoral programs), and curriculum
planning for the Department of Special Education

PROFESSIONAL SERVICES/ACTIVITIES

Publication Boards:

1962–1963 The Forum for Residential Therapy
1966–1972 Exceptional Children
1969–present Focus on Exceptional Children
1979–1981 Viewpoints in Teaching and Learning
1978–1993 Behavioral Disorders
1980–1990 Counterpoint
1980–present Learning Disabilities Quarterly

Organization Activities:

1967–1972 University and College Directors (programs for
preparing teachers of emotionally disturbed
children)
1959–1995 National Council for Exceptional Children; Vice-
President–1962-1963; President–1963 –
1964
1966–1995 Teacher Education Division, National Council for
Exceptional Children
1966–1995 Council for Children with Behavior Disorders,
National Council for Exceptional Children

1978–1981  Member, International Relations Committee, National Council for Exceptional Children

1980–1982  Member, Vice President and President, Society for Learning Disabilities and Remedial Education


Societies and Awards:

Pi Gamma Mu

Phi Kappa Phi

Leaders in Education

Who’s Who in America

Who’s Who in the Midwest

Who’s Who in the South and Southwest

Outstanding Educators of America

Award for Service to Exceptional Children, Kansas Federation, National Council for Exceptional Children

Award for Leadership in Behavior Disorders (Midwest Symposium)

Consulting and Service Activities (sample listing):

1961–1962  Shawnee County Association for Mental Health, Topeka, Kansas

1962–1966  Mental Health committee, Kansas School Health Advisory Council

1965–1966  Mid-Continent Regional Educational Laboratory

1965–1972  Topeka State Hospital, Topeka, Kansas
<table>
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<th>Year Range</th>
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<tr>
<td>1969–1972</td>
<td>Educational Modulation Center, Olathe, Kansas</td>
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<td>1970–1971</td>
<td>Missouri State Division of Mental Health, Jefferson City, Missouri</td>
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<td>1970–1972</td>
<td>Leadership Training Institute, Special Education, University of Minnesota and U.S.O.E., Bureau of Educational Personnel Development, Minneapolis, Minnesota</td>
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<td>1972–1981</td>
<td>Evaluation Training Consortium (national evaluation training project sponsored by the U.S.O.E.), Chairman</td>
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<td>1962–1972</td>
<td>Menninger Clinic, Topeka, Kansas</td>
</tr>
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<td>1966–present</td>
<td>Public School Special Education Programs, Local, State, National</td>
</tr>
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<td>1966–present</td>
<td>Department of Education, Office of Special Education and Rehabilitative Services, Special Education Programs (consultant, site visitor, review panels, chairman of review panels), Washington, D.C.</td>
</tr>
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<td>1966–present</td>
<td>College and Universities (teacher education, faculty development, program development and evaluation), State, National</td>
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<td>1977–present</td>
<td>Special Education Due Process Hearing Officer and Hearing Officer Trainer, Kansas State Department of Education</td>
</tr>
<tr>
<td>1978–present</td>
<td>Special Education Compliance Site Visitor, Kansas State Department of Education</td>
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1980–1982  Member, Interdisciplinary Training Committee, Kansas State Department of Education and Kansas Department of Health and Environment

1980–1992  Chairman and Member, Kansas State Board of Education Advisory Committee on Comprehensive Personnel Planning for the Handicapped (CPPH)


1987–1990  Member, Governor’s Coordinating Council on Early Childhood Developmental Services; Chaired Subcommittee on Personnel Needs Assessment

1988–1989  Member, Board of Directors, Keys for Networking, Kansas Department of Social and Rehabilitation Services

1988–1989  Chairperson, Program Review Board of the Kansas State School for the Deaf; appointed by the Kansas Board of Education

1988–1995  Member, Board of Examiners, National Council for the Accreditation of Teacher Education, Washington, D.C.

1991–present  Member, Consulting Board, College Meadows Hospital, Lenexa, Kansas

1993  Chairperson, Kansas State School for the Deaf and Kansas State School for the Blind Legislative Study Committee, Authored Report for Legislature and Kansas State Board of Education

1995–present  Hearing Officer, Bureau of Indian Affairs, Washington, D.C.

Presentation and Papers:

1960–present  Colleges and Universities: Average of 4 per year
1960–present  Professional Organization:  Average of 3 per year
1960–present  Other Agencies:  Average of 5 per year

EXTERNAL FUNDING

1965–present  Range $65,000.00 - $500,000.00 (except for 2 years in federal service)

PUBLICATIONS (not inclusive)


Overview of the Professional Contributions of Richard J. Whelan (1933 - )

Born in Emmett, Kansas, Richard J. Whelan received his B.A. (cum laude) from Washburn University in 1955 with majors in history, political science, psychology and education. By 1957, he completed all course requirements for a M.A. in history, with concentrations in American, European and Far Eastern history at the University of Kansas. In 1966 he received the Ed.D. from the University of Kansas with concentrations in special education (emotional and behavior disorders), educational psychology and research. He is currently licensed as a social studies and psychology teacher as well as a teacher of students with emotional and behavior disorders. He also holds licenses as a special education supervisor/coordinator, director of special education, and school psychologist.

The Supreme Court of the State of Kansas has certified him as a mediator and an approved trainer of mediators. He also serves as a special education administrative hearing officer and hearing officer trainer for the Kansas State Board of Education. In addition, he is a special education hearing officer for the Bureau of Indian Affairs. During the Korean War, he served as an Instructor of Electronics, Computers and Power Control Systems at the U.S. Army Radar and Guided Missile School.

Whelan’s earliest professional experiences were at the Southard School of the Menninger Clinic where he served as a recreational therapist, child-care worker, teacher and director of education. At the University of Kansas and University of Kansas Medical Center, he has held academic appointments in psychiatry, pediatrics, and special education. His administrative posts have included Chairperson of the Department of Special Education, Dean of a Graduate Division, Dean of the School of Education, and Director of Education for the University Affiliated Program at the Medical Center.
Since 1968, he has held the Chair for the Ralph L. Smith Distinguished Professor of Child Development. He averaged over $500,000.00 per year in external grant dollars, most of which were used to fund graduate-level fellowships. He was a major contributor to grants that supported construction and programs for the Mental Retardation Research Centers and the University Affiliated Facilities located at Parsons, Kansas, the Lawrence Campus and the Medical Center Campus.

He has retained principal investigator status for a $750,000.00 per year grant from the Department of Health and Human Services. This program grant provides technical assistance and training to Head-Start programs of the DHHS Region VII. From 1972-1974, he served as Director of the Division of Personnel Preparation in the Bureau of Education for the Handicapped (now Office of Special Education and Rehabilitative Services) in the Department of Health, Education and Welfare.

Dr. Whelan has held numerous board memberships and serves as a consultant to psychiatric hospitals, universities, government agencies, schools and other education related organizations. During his career, Dr. Whelan, has served on seven publication boards and has held offices in state and national professional organizations. He was the Chairperson of the Evaluation Training Consortium, a nationwide evaluation training project funded by the U.S. Office of Education. He was founder and officer of the Kansas Federation of the Council for Exceptional Children. He is a member of Phi Kappa Phi, Who’s Who in America, and Outstanding Educators of America. He has received several service awards including the Award for Leadership in Behavior Disorders from the Midwest Symposium Organization.

Dr. Whelan has over 100 publications, including Emotional and Behavioral Disorders: A 25 Year Focus (Whelan, 1998); and Educating Students with Mild Disabilities: Strategies and
Methods (Meyen, Vergason, & Whelan, 1998). His professional preparation included extensive experiences in psychoanalysis, psychoeducational and applied behavior analysis theories and interventions. He emphasizes experimental research designs and precise measurement in his own research, as well as in the classes taught for graduate students.

More importantly, he believes that the best teachers of professionals are the children they serve: they will let you know if you are doing it correctly. Whelan has put this belief into practice while teaching and while directing a psychoeducational clinic for children with disabilities and their families at the University of Kansas Medical Center.
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