

**Seminar speakers charge:**

# Services for retarded inadequate

by Anne Fanciullo

It almost erupted into a verbal melee between parents and a board of education official last week, when the philosophies of the state and mental health advocates clashed at a special education forum at Susan Wagner High School.

The seminar was designed originally as an information session to enable parents and mental health workers to get an up-to-the-minute account of the availability of services for the handicapped and the background on recent legislation and court rulings related to the care and education of the retarded.

As the evening wore on, however -- five speakers and two hours later -- the audience was finally given a

chance to ask the questions that really needed answering.

● If 18 classes for the emotionally handicapped were promised and only six are currently operative, isn't this a violation of the law and what can be done about it?

● What about the more than 200 children at Willowbrook who should be in this district's public school classes for the handicapped, but aren't?

● Why hasn't this district formed a Committee on the Handicapped as mandated in the education law?

● And why does the system classify and so discriminate against certain mentally retarded children with I.Q. scores as a basis for terming them "educable" or "trainable?"

It was obvious from the

audience reaction to the answers to these questions that Islanders are indeed dissatisfied with the budget-oriented priority system of the city and state, especially after hearing Dr. Daniel Ringelheim, a deputy assistant commissioner of special education in New

Jersey. He told how New Jersey practices the view that "even if every district in the state may go bankrupt, the child must still be served."

In the state, Ringelheim noted, each mentally or physically handicapped child must be evaluated by the

school psychiatrist, a social worker, a learning disabilities teacher consultant and a medical examiner. Known as "child study teams," each of the 600 school districts in New Jersey is mandated to have this service which is completely free of charge.

He was quick to add the negative aspects of such a system in that it is costly to each district, very time consuming to administer, and it is oftentimes difficult to get so many professionals to agree on a diagnosis. Despite these drawbacks, Ringelheim said, "if it were my child, I would want this very careful analysis."

The deputy commissioner in the Garden State also explained that mental health advocates there are pushing for mandatory "child study teams" for all children, handicapped or not, mandatory pre-school classes for children 3-5 years of age, mandatory "resource rooms" in public schools, a parent grievance procedure, and access to records.

**Poor Response**

In closing his remarks, Ringelheim asked the audience for a show of hands indicating how many parents had ever read the state education law regarding the handicapped. The response, as he expected, was poor.

He advised parents that in order to make gains in New York State, they should know what their rights are under the law and suggested parent advocate workshops be started to aid that purpose.

Perhaps the most biting presentation -- in that it was a virtual indictment against the state policy of institutionalization over community placement of handicapped persons -- came from Dr. Burton Blaas, director of special education and rehabilitation at the Center on Human Policy at Syracuse University.

Condemning the policy which places those with a 25-50 I.Q. score in the "trainable category" and those with an I.Q. of 51-75 in the "educable" group, Blaas said estimates show that of the more than 200,000 handicapped individuals in this state, some 96,000 are receiving no formal education or training in the local school districts.

Instead, he said, the state has chosen to spend less than one per cent of the mental health budget on community programs and classes for the retarded and has concentrated its efforts on capital construction of more institutions -- to the tune of \$11 billion.

Blaas was also critical of the changing American family. Where years ago, elderly grandparents lived with their children, today they are sent to nursing homes and retarded

youngsters are no longer taken care of by their families. "Now we need the state to help us," he said, questioning not only the state's handling of the institutional problem, but the need for families to turn to the state "instead of taking care of our own."

Updating Blaas' budgetary statistics, Dr. William Bronston, also of Syracuse University and a former physician at Willowbrook State School, told the audience that despite widespread protests and public awareness of the pitfalls of institutionalization after the Willowbrook scandal, the state is still spending \$930 million a year on state schools. It costs the state about \$17,000 per year per patient at Willowbrook, said Bronston.

Instead of spending this exorbitant sum for minimal custodial care at Willowbrook, he asked, why can't the more than 200 school-aged children who are legal residents of this district be placed in special public school classes?

Dr. Helen M. Feulner, executive director of the office of special education, responded to this and a number of other questions posed by the audience. Feulner noted that it would be ideal to place these children in local schools, but that budgetary problems are an oppressive concern.

Feulner expressed her own version of the ideal educational setting for retarded youngsters in this state: "We should have a continuum of services from birth to death, beginning with medical evaluation and parent consultation from birth to age three."

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