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CHRISTIAN EDUCATION  
OF THE  
HYPERACTIVE BRAIN INJURED CHILD

By

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A Thesis

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In memory of  
Dorothy Marie Jewett  
1944 - 1962

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CHRISTIAN EDUCATION OF THE  
HYPERACTIVE BRAIN INJURED CHILD

Introduction

A. The Subject

1. Statement of Subject

It will be the purpose of this paper to present the special educational needs of the brain injured hyperactive child and try to come to some conclusions as to what kind of a program of Christian education will be able to meet these needs.

In the light of his psychological characteristics, what are the child's most pressing spiritual needs? How may special methods overcome the learning problems which the child has? On what basis should the content of the Christian education be chosen?

2. Significance of Subject

We are in a day when we realize that the church has a responsibility to reach all men where they are. It is imperative that we reach these children where they are. Most of them have undergone

hardships and have come to know much of the world and little of what is of God.

The chaplains in the state institutions for the retarded have testified that the retarded have healthy and happy religious experiences. It has come up in the literature concerning the retarded, that the brain injured are especially difficult to reach.

In Retarded Children: God's Children , Sigurd Petersen says that there is a great need for materials to be developed.

### 3. Delimitation of Subject

In the review of the special methods for teaching the brain injured child, only those which would apply to Christian education will be examined. More attention will be given to reaching those children who are not too severely disturbed emotionally. The paper will attempt to focus on the needs of the six to nine year old child.

### B. Method of Procedure

The first chapter will describe the child in terms of the symptoms of brain injury and will include a few cases to illustrate the behavior patterns.

The second chapter will relate brain injury specifically to the learning process in an attempt to bring out the major educational difficulties.

The third chapter will review the methods which are being developed to overcome special learning problems of this child.

The fourth chapter will attempt to outline the spiritual

concepts which children are able to learn. These concepts will then be related to the brain injured child in regard to his ability to learn.

The fifth chapter will make specific application of methods of teaching to the content of Christian education.

### C. Sources

The major sources in the field of brain injury have developed since the work with veterans who were wounded in the two world wars. Major sources of educational technique are outlined in the work of William Cruickshank, Albert Strauss, and James Gallagher. The spiritual problems of children are discussed by Sigurd Petersen. Charles Kemp provides a history of the education of the retarded and shows that the Church has a responsibility to them.

The major sources for background from the standpoint of Christian education are Children in the Church, by Iris Cully, Education that is Christian, by Lois Lebar, and Opening Doors of Childhood by Lewis Sherrill. Many articles from periodicals are used in this study because this is a period of transition for the Church School and a period of development for the field of Special education.

An additional source of information comes from personal experience with handicapped children as a speech therapist, an assistant supervisor of a Church camp for the handicapped and other personal contact with brain injured children.

Chapter I  
DESCRIPTION OF THE HYPERACTIVE  
BRAIN INJURED CHILD

A. Etiology and Diagnosis

Brain injury in children is caused by injury to, or infection of the brain. Many times the injury is prenatal as a result of German Measles, Rh incompatibility, or false labor. Seventy percent of the injuries in children occur at birth.

In early childhood damage is sometimes incurred as a result of meningitis, encephalitis, high temperature, or a blow to the head. According to Ernest Seigel, the incidence of brain injury is about six or seven cases per one thousand<sup>1</sup>. The injury incurred presents unusual learning difficulties and behavior patterns for these children. Some times these children are called pseudo-mentally retarded.<sup>2</sup> The type of injury that is incurred is by no means always the same. The injury may be to any part of the brain. An injury will not always have the same effect. Kurt Goldstein would say that any injury effects the whole brain. Laretta Bender would concur with this point of view.

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<sup>1</sup> Ernest. Seigel, Helping the Brain Injured Child, (New York: New York Association for the Brain Injured, 1961) pp.15-16.

<sup>2</sup> H. Burks, " The Effect on Learning of Brain Pathology", Journal for Exceptional Children, XXIV, ( December 1957) p. 169.



Some of the hyperactive brain injured children will be able to be detected only by observation and psychological tests. The brain damage will not always show up on the electro-encephlograph (a test of brain waves). Some say that this is " because even subcortical injury will produce the syndrome"<sup>1</sup> (of brain damage).

In the literature concerning the brain injured child there is not yet complete agreement on all of the symptoms which would commonly make up the syndrome. It has been found that there are definite psychological problems which arise among children who have been diagnosed as, "cerebral palsey, epilipsy, aphasia,as well as those exhibiting exogenous mental retardation (retardation caused by injury, or retardation in a child whose family has no history of retardation) without motor disability and indeed among hyperactive, emotionally disturbed children who have no apparent specific or generalized neurological disturbance."<sup>2</sup>

It is sometimes difficult to properly diagnose these children, because many times they are multiple handicapped. They may also appear to be normal but have severe problems in reading and language skills in general, They usually exhibit severe behavior problems. They are on the other hand, sometimes quite good looking and very personable.

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1 Ibid.

2 W. Cruickshank, E. Benyzen, F. Ratzburg, and M. Tannhauser, A Teaching Method for Brain Injured and Hyperactive Children, (Syracuse: Syracuse University Press, 1961) p:1.

There are certain symptoms which are most commonly found among these children. Some of these symptoms are always present in these children in some degree. It is interesting to note that no one symptom must be present for a child to be considered brain damaged (although most are noticeably hyperactive). The teacher should have an understanding of the symptoms and how they relate to one another. These factors effect very strongly the learning process and so the teaching method will have to vary in accordance with their presence in the child, and with the degree of their presence.

Many times hyperactive, brain injured children are regarded as discipline problems and are punished for their behavior when they are really helpless to behave in any other way. The problems which their exhibit do make classroom teaching difficult if not impossible, but the children are not trying to break up the class. Many of these children are placed in regular classes because the extent of the difficulty is not great enough for them to be isolated. The classroom teacher and the child bear the burden.

In working with brain damaged people Goldstein does not examine a person with a view to discovering disorders. He examines them as a totality, an organism. He examines behavior positively, not favoring any aspect of behavior. Moreover the descriptions sought are to be complete and correct involving as

many aspects of behavior as possible. A brain injured individual should not be evaluated on the completion of certain tasks but on his approach to, and method of working out the task. The total person and his total activity cannot be divorced.<sup>1</sup> The whole being has undergone a shock. Therefore, test scores alone will not give as much information as is needed. It is preferable to have information regarding the case's approach to the problem.

## B. Symptoms

### 1. Distractibility

One of the characteristics which is found in these children is distractibility. Cruickshank notes that this has been called the chief characteristic. It is called hyperactivity in some places but it seems a cause for this. It has been described as a compulsion in the children to respond to everything around. They have an apparent hyper-awareness of visual, auditory, and tactual stimuli within the perceptual field of the observer. Many of the symptoms which are mentioned in the literature seem to overlap. Strauss says of distractibility that "there are two aspects. The one is an undue fixation upon irrelevant external stimuli; the other is the fluctuation in the perception of the object and ground."<sup>2</sup>

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1 Kurt Goldstein, The Organism, (New York: American Book Company, 1939), pp 21-25.

2 A. A. Strauss, and I. Lehtinen, Psychopathology and Education of the Brain injured Child, Volume I, (New York: Grune and Stratton, 1947), p.28

Recently Zuk spoke of this symptom not as distractibility, but he said there is "not a lack of capacity to pay attention, but instead over attention to moving rather than stationary stimuli."<sup>1</sup> Zuk believes that the distractible behavior rather than being random, is goal directed. He points out that over attention to moving stimuli is a characteristic of all young children. There is a new approach to this problem. These children at any rate seem stimulus-bound. They must run around and see what everything is. They need to touch things. Cruickshank warns that this behavior should not "be interpreted as willed misbehavior."<sup>3</sup>

## 2. Motor Disinhibition

Closely related to distractibility and sometimes joined with it is motor-disinhibition; this too is also called hyperactivity. As an aspect of distractibility it has been defined as "failure to refrain from response to any stimuli which produces a motor activity."<sup>4</sup> Since the child is stimulus bound he is almost a passive captive of his surroundings. He will be urged from within to touch all that he perceives. He will need to comment on all that he sees and ask questions about these things. For this reason many of these children are very talkative. Taylor points out that while they are young

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1 Gerald H. Zuk, "Over-attention to Moving Stimuli as a Factor in the distractibility of Retarded and Brain Injured Children", Training School Bulletin, (February 1963) p. 150

2 Ibid., p 159

3 Cruickshank, et al, A Teaching Method . . . p. 4

4 Ibid, p. 5

this trait is not offensive. They seem very friendly and people are amused and flattered by the interest which the children evidence in them. The children are however learning not to control their impulses. They become more and more uninhibited.<sup>1</sup>

### 3. Figure-ground Disturbances (Perceptual Difficulties)

One of the main reasons that the child has this need to explore his environment so "thoroughly" is his difficulty in perception. Goldstein found in his work with brain injured veterans that perceptual difficulties were prominent. As a normal individual develops he is capable of seeing himself in relationship to the world. Tournier makes this point clearly in The Meaning of Persons.<sup>2</sup> The person gradually becomes able to make more and more distinctions in the world. He is able to focus on smaller and finer elements in his environment. The points of focus are called the figures which are seen against the background or ground. A person is able to see figure and ground in many ways, depending on what the situation calls for. This means he is able to focus on one figure as separate from another, or from the background. Figure and ground are not absolute, they shift according to the totality of their environment. An individual is able to focus on one idea, sight,

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1. E. M. Taylor, Psychological Appraisal of Children with Cerebral Defects, (Cambridge: Harvard University Press, 1961).
  2. Paul Tournier, The Meaning of Persons, (New York: Harper and Brothers, 1957).

sound, etc. to deal with it, while he puts other things in the background. He is aware of the background, but he concentrates on the figure. Goldstein says that "all nervous processes follow the pattern of figure and ground."<sup>1</sup> For every performance there is a corresponding relation of figure and ground. Damage to the nervous system disturbs the relationship. Damage makes it difficult for a person to make sharp differentiation between the figure and the ground. Sometimes figure and background will intermingle. Sometimes the process of differentiation is carried to the reverse and the figure and ground will be confused. The person may see figure as ground and vice versa.<sup>2</sup> Some of the children are not able to make any difference at all. This figure-ground disturbance adds to the problem of distractibility. They cannot find any one thing on which to focus.

Strauss says that perception is the "mental process which gives particular meaning and significance to a given sensation and therefore acts as the preliminary to thinking. It is the means by which the individual organizes and comes to understand the phenomena which constantly impinge upon him."<sup>3</sup> Ordinarily wholes are perceived. The brain injured when tested show that they have no organized procedure when perceiving. They show an inability to organize any perceptions. They cannot organize their perceptions into a figure ground.

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1. Kurt Goldstein, After-effects of Brain Damage in the War: their evaluation and treatment, (New York: Grune and Stratton, 1962), p. 69

2. Ibid. p. 88

3. Strauss and Lehtinen, Psychopathology . . . . . p. 28

relationship. They see fragments. In psychological tests of perception such as the marble board test, the brain injured children show an "incoherent, disconnected or disorganized type procedure."<sup>1</sup> Here the value of observing their total behavior is seen.

#### 4. Dissociation

Closely related to the phenomenon of perceptual difficulty is the characteristic of dissociation. Cruickshank defines this symptom as "inability of the child to conceptualize a totality, ie., the inability to see things as a whole, as a unity, or as a Gestalt."<sup>2</sup> The brain injured child responds to the parts or segments and "has marked difficulty in bringing two or more parts together into a relationship to complete a whole."<sup>3</sup> It is difficult for these children to make associations between objects or ideas or situations. Such a difficulty keeps carry over from being an automatic outcome.

#### 5. Perseveration

Perseveration is the continued repetition of a response in a way which is no longer appropriate to a situation, or a response to a situation which is no longer present. There is a prolonged after effect of a given stimulus to which the person has already

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1. Strauss, A.A., and Lehtintn. L. Psychopathology p.34
  2. Cruickshank et al, A Teaching Method, p. 5
  3. Ibid.

adjusted.<sup>1</sup> Perseveration "occurs frequently after a good performance has been achieved; the organism then confronted with a new task continues to repeat the old performance."<sup>2</sup> The children will often keep on asking the same questions or they will continue to give the same answer to many different questions. If they are writing they will tend to keep making the same letter. In behavior, they will prolong an emotion and frequently laugh until they become silly.<sup>3</sup>

Perseveration may and should serve as a warning to an examiner or teacher. When a child perseverates in a response he may be avoiding a catastrophe which will occur if he is pushed to go to something which is beyond his grasp. He is staying on ground which he considers to be safe.

#### 6. Fatigue.

Fatigue is the behavior that will exhibit itself in a situation of stress. Fatigue is another warning factor to the teacher. If it is considered and watched for, it is possible to avoid the entrance of distress for a longer time. Fatigue will evidence itself in perseveration, questions, drowsiness, and increased incoordination and distraction.

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1. Cruickshank, et al A Teaching Method . . . .p.7
  2. Strauss, A. A. and Lehtinen, L. Psychopathology .. . p. 50
  3. Ibid. p. 85



### 7. Catastrophic Response

The brain injured have very definite behavior disorders. Some of them have been described as having criminal tendencies. They are destructive and often have terrible temper tantrums. When they are this way their behavior is uncontrolled, uncoordinated, and uninhibited. This behavior naturally makes them socially unaccepted.<sup>1</sup> These tantrums are sometimes called catastrophic responses. The catastrophic response may also take on the form of fainting or even an epileptic seizure. A catastrophic response arises when the person is asked to do more than he can. He will not be able to cope with the situation and his assurance of certain failure will be more than he can bear. His whole behavior will be disturbed. His reaction may vary. He may seek tranquility and withdraw from situations which he cannot handle. He may become excessively orderly in order to gain a feeling of control. Children are more likely to behave disruptively than become over orderly. The characteristics of fatigue and perseveration become very important for those who work with brain injured children. It is the teacher's responsibility to respond to these and keep the child from the catastrophic response if at all possible.

### 8. Loss of Abstract Attitude

Goldstein comments on the fact that all brain injured people have thinking disorders which hinder them from working with

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1. Strauss, A. A. and Lehtinen, L. *op. cit.* pp78-84

abstract concepts. Goldstein considers the abstract attitude loss to be the most important impairment. The brain injured person is able to deal with the concrete more readily than the abstract. Some of his cases were able to use a watch, but were unable to tell if a day was longer than an hour.<sup>1</sup> A concrete attitude works in binding the person to the immediate experience.

The abstract attitude is basic for potential abilities to deal with the environment of which the person is a part. It is necessary for voluntary control or assumption of a mental set. That is, it is necessary for the ability to be able to begin a performance on demand. The abstract attitude depends upon the ability to focus on specific parts of the environment, and so it is related to figure-ground disturbance.

The abstract attitude is also necessary for shifting from "one aspect of a situation to another, or making a choice."<sup>2</sup> The process of analysis is dependent upon this attitude. It also involves the ability to generalize and plan ahead. It enables one to react toward the merely possible as well as that which is real, and to think symbolically. The abstract attitude is also involved with the ability to detach the ego from the outer world.<sup>3</sup>

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1. Kurt Goldstein, Human Nature in the Light of Psychopathology, (Cambridge: Harvard University Press, 1947), p. 55
  2. Kurt Goldstein, Language and Language Disturbances, (New York Grune and Stratton, 1948), p. 6
  3. Ibid.

### 9. Ego-centricity

Goldstein noticed in working with brain damaged patients, that they are ego-centered. Their ability to attend to a task depends upon whether or not they are equal to the task. They are not able to copy or imitate anything that is not part of their concrete situation. In speech therapy and developmental language work it is impossible for some to say something which they know is not real. For instance it would be impossible for some brain damaged cases to say "The snow is black."<sup>1</sup>

### 10. Absence of a well-developed self-concept and body-image concept.

Cruickshank and Block say that the development of the self-concept and the body-image concept are related. They feel that the impairment to the body-image concept is responsible for the inadequate self-concept.<sup>2</sup> They believe that if a good body image is attained the child will be on his way to having a healthy self-concept.<sup>3</sup> Until a good self-concept is developed Cruickshank says that learning will be significantly retarded. Leland and Smith also place a great deal of emphasis on the importance of developing the self-concept. They approached the development not through the body image but through unstructured play therapy which

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1. Goldstein, K., Human Nature . . .p. 12

2. Cruickshank et al op. cit. p. 8

3. W. Block, "Personality of the Brain-Injured Child" Exceptional Children(1954), 21: p. 92

4. Ibid.

they hope will stimulate the child's imaginative processes. They say that the development of the self-concept is necessary to a "sense of being and will give motivation for more self control." They work from the inner life to the outer, whereas the above writers work from the outer situation to the inner. Self control will also lead to more social interaction.

Leland and Smith say that the recognition of self involves the child's learning that "his behavior, his ideas, his reactions to stimulus are his, that they have originated in him and he is responsible for them."<sup>2</sup> They point out that the child may not be aware of any cause-effect relationship.

Seigel feels that the awkwardness that these children exhibit is due to their poor body concept. He says that the child "is not quite sure of his own body in respect to space and cannot always interpret the messages which come to him from the outside world."<sup>3</sup>

#### 11. Emotional disturbances

The result of all these difficulties in the early years can make the child more hyperactive and can lead to emotional disturbances. The pressures on the child make him more prone to

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1. H. Leland and A. Smith, "Unstructured Material in Play Therapy for Emotionally Disturbed Brain Damaged Mentally Retarded Children", American Journal of Mental Deficiency, LXVI, (1962) p. 623

2. Ibid, 625

3. Seigel, op. cit., 26

disturbances. These children have a long history of personal failures behind them even when they are only six years old. They know that they are different and sometimes they are the cause of guilt feelings and shame at home. They begin to feel that they are unloved. The child is pressured to see and do things which are too fine and precise for him to handle. The child is laid open to emotional problems. Some people think that their activity and bizarre behavior are attempts to contact the world.

Beck says that one of the most frequent symptoms mentioned is that of insecurity.<sup>1</sup> They have a very difficult time making sense of the world and therefore they do not feel secure in it. This insecurity leads to the perseveration of questions. They may go into a tantrum if plans are changed because they cannot cope with a new situation. Bender says that the picture presented has been best described as a "predisposition to anxiety."<sup>2</sup>

## 12. Language disorders

The child may have delayed language because his overall development is retarded. They have problems learning concepts and therefore it follows that they would not learn labels for concepts.

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1. Beck, "Detecting Psychological Symptoms of Brain Injury" Exceptional Child September 1961, p. 58
  2. Frampton and Gall, Special Education for the Exceptional, Boston, P. Sargent (1955-1956) Vol. I

Another type of language problem that the brain damaged child has is related to his problems in perception and discrimination. They often do not assimilate sounds in words properly. They may have difficulty in hearing acuity and difficulty in placing parts in sequence. This type of child might say "hopital" for "hospital"<sup>1</sup>. Spivack and Levine note definite deficiency in all types of perceptual discrimination.<sup>2</sup> Many of these children will experience various types of reading difficulties. Minimal brain damage has been found to be related to many reading problems.

### C. Anecdotal Description Of The Child

#### 1. Case 1 (D.M.J.)<sup>3</sup>

D. is a typical Brain injured child. She was a breech birth and after birth it was noted that there were marks of forceps on her head. This was probably the first of many injuries. When she was a few months old she had bronchitis and ran high fevers. Her development was quite normal at first. She sat up at six months and walked at fourteen months. She was awkward and bumped into things. Her acquisition of language was slow. She did not do much more than repeat words until she was four. She did however, seem to understand.

At two years of age she began to have petit mal seizures. She fell several times on her head.

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1. Seigel - op.cit. p. 27

2. M. Levine, and G. Spivack, "A Note on the Generality of Discrimination in Life-long Brain Damage.", American Journal of Mental Deficiency, LVII p. 474

3. The Case described is the writer's sister.

It was noted that as soon as she began to walk, she began to run. She rarely stood still except to stand bent over with her head between her knees looking at the world from a reverse position. Perhaps it looked better that way.

The child was very awkward and spilled milk and food until she was about ten years old. She was embarrassed when she did this, and consequently would become shy. Sometimes the spilling was due to a petit mal seizure, this also embarrassed her and she would try to cover it up. She preferred having people think that she had spilled the milk than to have them think she had epilepsy. She fell many times. It has been noted that many of these children seem accident-prone.

The neurologist warned the family against overprotecting the child. At his advice they allowed her to have a bike. She enjoyed the bike although she rode at a breakneck speed. She seemed to like other children and was friendly with them but could not enter into games because she could not follow rules. She liked to go to the park and run all around. Once while riding the bike she fell and fractured her skull. After this the family noticed more seizures and a slower intellectual growth.

At the age of seven she was entered in a boarding school for retarded children which was recommended by the neurologist. The school program was highly structured. The structure seemed to give the children security, and they made some academic progress. When D. began school, intelligence test results had been poor

and prognosis was also poor. In the school program however, she began to read and was then considered to be educable. The school was able to train her to dress herself and take her own medication. The family and school found that D. did better school work and was generally calmer if she had a routine. Any change in the things which she expected to do daily would cause a complete upsetment. The upsetment might include a temper tantrum or an epileptic seizure. The change in routine could be anything. The child's mother remembers one morning when they had run out of D's regular breakfast food. The child cried and cried because she could not eat what she always ate. One morning she was ill and could not attend school, however, she was so accustomed to getting up, eating, getting her coat and waiting for the schoolbus, that she could not be persuaded to do otherwise. When the doctor arrived at 10 A.M. she had her coat, hat and gloves on and was holding her school books.

If the parents or teachers knew that there was to be a break in the routine, they would tell her days in advance just what would happen. This would usually set off a series of endless questions. The questions would be repeated and repeated. She was exceedingly talkative and knew all of the adults in the neighborhood. She kept up to date on the happenings of everyone's family.



She was able to form friendships as she grew older. In school she had two very close girl friends and got along well with all of the children.

She also had one girl friend in the neighborhood.

As her awkwardness decreased, she was able to gain great enjoyment from helping to care for and play with younger cousins.

She had two summer experiences at a church camp for mentally retarded children. The first experience was better because she was in a group close to her own ability. She spoke fondly of her counsellor for years.

She attended Sunday School but was in a normal class. At times she had insights but usually the fellowship was most significant. Her home religious training made the most important impact upon her.

## 2. Case 2 (C.G.)<sup>1</sup>

C. was the last of three children. She was diagnosed brain injured although no injury is on record. She attends a boarding school with a very routinized curriculum, now in which she is making progress in quieting her behavior. She is retarded but her most severe problem is bizarre behavior. She is an extreme case of a child who will behave catastrophically. When she is aware that

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1. This is a child the writer had as a camper. She was the writer's charge for five weeks one summer and under the writer's supervision for two other summers.

she has lost track of what is going on around her she will react. She has an unusually husky voice, she is a large framed child and has an awkward gait. She often reacts to stress by screaming and rolling on the ground. At camp she had trouble adjusting to being in a situation with so many children. When she was in a bed that was in a central position in the room she found it impossible to sleep and would rock back and forth on her bed and put a towel over her face and sing. When she was in a bed in a corner she was much more controlled and happy.

Large rooms and crowds distracted her and she would cry out and have tantrums in chapel service, or at parties, or in any other large place. She found it difficult to stop doing anything she started. One day on a hike her counsellor could not get her to turn around and start back.

She needed security and on occasion attacked other children to whom her counsellor paid attention. She wanted to be part of the group. She was very outgoing and friendly. Whenever the camp had a visiting day, C. would be the first one out to greet all visitors. She bombarded them with questions about themselves.

She had a habit of commenting on and touching the clothes people wore. She would occasionally be too rough when examining someone's jewelry, and there was always a danger that she would break something.

She wanted to be friendly to others but could not form relationships with other children. She frightened others with her sudden outbursts.

Her religious training was limited to camp. She showed her desire to be part of the fellowship most significantly by detailed prayers on behalf of the campers and the staff.

### 3. Case 3<sup>1</sup> (D.A.)

D. is a seven year old boy. He is quite withdrawn. He reads well and is well developed physically. He rarely talks to other children but will on occasion hit them. He does not seem to have any ill feeling toward them, but may be making contact. He became extremely upset one day to find that a bathroom had been changed into a storage room. He asked over and over where the toilet had been taken. He does not sit still very often. His mother reports that unless she gives him very specific tasks to do such as pictures to color or something to build he will just wander around the house and "waste his time." She says that at home he has displayed a talent for music but he will not sing for anyone else. When he does sing outside, he uses a very high and inappropriate voice.

In Sunday School his attention invariably rests on some minute detail in a room. One week in the Worship period his attention was taken by the wire that ran from a microphone to the loudspeaker. He knew the connection and repeated over and over, "Is that microphone attached to that loudspeaker?"

The program of his Sunday School is varied and the children

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1. This boy was in the writer's Sunday School class for one year.

go to different rooms for various activities. Going from place to place causes a problem. It takes D several moments to adjust to the new place and new activity. Noise from other rooms causes him to respond and creates in him a need for a full explanation of who is there and what they are doing.

The second grade room his class meets in has pictures on the walls and the children usually sit in a circle on movable chairs. D constantly moves his chair and attends to the pictures or the window rather than the lesson.

When given something to color D did not stay in the lines on his own accord. He asked to have the picture explained to him. He did not seem to make sense of it. When the figures are outlined in color he is able to "see" them. He seems to identify a certain aspect of a situation or person. When the class was speaking of Jesus one Sunday, he asked "Is that the beard-man?" At times his questions show good understanding. When the class heard the story of Jesus stilling the waves, D asked: "Where did Jesus get that power?"

#### D. Summary

In this chapter the brain injured child has been examined. It was noted that there is no one set pattern which these children follow. There are many symptoms which a majority of them share. Some of the children only have learning difficulties but most of them begin to have emotional problems which arise because of the difficulty which they have in coming to terms with the world about them. Their emotional needs are very strong and they need the

the security which they can find in the knowledge of the love of God, and in the knowledge that He made them and that He made the world.

The following are the major symptoms which have been discussed: distractibility; motor disinhibition; figure ground disturbances; dissociation; perseveration; fatigue; catastrophic response; loss of abstract attitude; ego centrality; absence of a well developed self concept and body image; emotional disturbances; language disorders.

The particular problems of these children will have to be met with very specific teaching devices, and very carefully chosen subject matter.

## Chapter II

### THE EFFECTS OF BRAIN INJURY

ON

### THE LEARNING PROCESS

This chapter will attempt to relate the characteristics of the brain injured child to the process of learning. The foregoing characteristics will necessarily have some effects on the way the brain injured child will learn. There seem to be two major points of view as to how the learning process is affected. The two viewpoints must be understood because the methods of teaching are worked out on the basis of where the trouble is seen to lie.

#### A. Perception

One of the characteristics of the brain injured is that they are not able to perceive clearly. It has been mentioned above that they have trouble seeing figure-ground relationships, and in seeing wholes. The problems that he has in this area will effect his approach to learning. Some writers feel that this disorder will keep the child from thinking abstractly. It must be noted that there are those who do not go along with the great stress which has been made on the thinking disorders of the brain injured. Usually those who state that the perception and the thinking of the brain injured is greatly involved

are those who believe that physiological make-up has a great deal to do with determining one's psychological characteristics. Strauss and Cruickshank base their therapy on this point of view.<sup>1</sup> It is true that a child makes use of his senses to form his first concepts. In forming concepts the child must begin to make distinctions among the many sensations which he receives. Sensations are constantly impinging upon him and he must begin to generalize and classify them. As the child groups the sensations and names them, he will be forming concepts.<sup>2</sup> The sense organs receive the data from the outside world.

The impulses which come into the body do not of themselves give information. The nervous system must interpret the impulses and then direct the body to act upon the information. It is important therefore to be able to interpret the sensations. In studies on perception it has been found that normally a complex form is not perceived as a whole but "rather various parts of the form which later are integrated into a complete impression."<sup>3</sup> Strauss and Kephart feel that it is in the process of combining the parts into the whole that the brain injured individual has a breakdown and therefore does not perceive correctly. The child perceives parts but does not relate or combine them in his mind. "Thus in drawing a square, he is apt to leave the corners unconnected, indicating that

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<sup>1</sup> A. A. Strauss and H. Werner. "Disorders of Conceptual Thinking in the Brain-Injured Child" Journal of Nervous and Mental Disease, 1942 Vol. 96, pp153-172

The reader is urged to read opposing points of view in a collection by Trapp and Himelstein, Readings on the Exceptional Child, (New York, Appleton, Century, Crofts, 1962), pp485-500

<sup>2</sup> Strauss, A.A. and Kephart, N. C., op. cit. p.56

<sup>3</sup> Ibid., p.57

he has drawn a series of four independent lines which are combined spatially but he has not drawn the figure as a whole."<sup>1</sup>

In volved in the concept of perception are the perception of form, the distinction between figure and ground and the fact that aspects of perception are relative. As a person perceives a form he must relate it to something in order to have an understanding as to its size and its distance from him. People learn to use their own bodies as a point of reference. As has been noted earlier the brain injured seem to have a problem of a poor self concept and body image and so they may not have an accurate point of reference. Relationships play a large part in one's perceptions. " Our sensory data are uniquely designed to supply us with information about relationships."<sup>2</sup> Aside from the importance of establishing the correct general relationship with the environment there are also other coordinations to be considered. Strauss notes that, "The process of perception involves a complex system of integration between various sense fields and between present and past sensory impressions out of which integration grows the impressions of relationship upon which action is based."<sup>3</sup> Perception then involves the response as well as the intake of the sensation.

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<sup>1</sup>Ibid., p.57.

<sup>2</sup>Ibid., p.77

<sup>3</sup>Ibid., p.78



## B. Attention

In Educational Psychology, Cronbach says that learning involves willful change in behavior. He says that learning must be goal directed.<sup>1</sup> A certain amount of motivation must be present in order for a person to attend to a task and learn from it. The brain injured child has a problem in regard to this. Those who feel that the child's chief problem is that of perception would say that the child has to learn to attend to the task at hand. The brain injured they say tends to "react to everything at once and move from one place to another."<sup>2</sup> The child does not know how to attend to only one thing. The child does not know how to relate to that which is before him. He cannot pick out an important task. Cruickshank says that the problems of attention will cause the child to react in one of two ways. Some children will over react to everything in the room and not be able to settle down. Other children will sit quietly and not do any work. They will seem idle but in reality they are over attentive. They are attending to "pictures and page numbers in the book, ...flaws and marks on the paper, or...features of the material which are for most children irrelevant."<sup>3</sup> Basically the problems here which are listed by Cruickshank as problems of attention are outgrowths of the problem of perception.

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<sup>1</sup> Lee Cronbach, Educational Psychology, (New York, Harcourt, Brace and Company, 1954.) p. 45.

<sup>2</sup> Cruickshank, op. cit., p. 131

<sup>3</sup> Ibid.

At about the same time as Gruckshank's study, James J. Gallagher also became interested in increasing the retarded brain injured child's ability to pay attention. Gallagher placed more emphasis on the child's motivation than he did on his neurological impairment. He placed great importance on the preliminary set to learning within the individual. He posed the question,

"are the observed perceptual disturbances due to damage in association areas necessary to perception or in attention mechanisms which distort the incoming message and prevent the proper perception of the sensory impulse?"<sup>1</sup>

Gallagher places great importance of the factor of readiness in learning. He says that proper attitudes of motivation must be developed. Self-confidence has to be built up. Iris Gully also says that goals are important in all learning. She says that goals are influenced by,<sup>2</sup> "level of aspiration, influenced by people's opinions."

In an article in the Exceptional Child, G. F. McCoy also reported on a study of the factor of motivation in learning in a group of mentally retarded pupils. In this study it was hypothesized,

"that academically successful mentally retarded pupils are more self-confident, perceive themselves as more accepted and intrinsically valued by their parents, manifest a more realistic....level of aspiration."<sup>3</sup>

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<sup>1</sup> J. J. Gallagher, The Tutoring of Brain-Injured Mentally Retarded Children, (Springfield, Illinois, Charles C. Thomas, 1960), p. 29.

<sup>2</sup> Iris Gully, Children in the Church, (Philadelphia: Westminster Press, 1960), p. 93

<sup>3</sup> G. F. McCoy, "Some ego Factors Associated with Academic Success and Failure of Educable Mentally Retarded Children", Exceptional Child, XXX, p. 80.

Mc Coy found that those who were successful academically were more realistic about what they could do. They also had a higher level of aspiration. He found that experiences of success and failure were great influences on the personality development. He noted that because the mentally retarded are limited they tended to have more experiences of failure and this worked against them. Mc Coy suggests that the program for these children should be geared to their present level of achievement and that many opportunities for success should be made possible.<sup>1</sup>

Gallagher says that the teacher should make sure that the child experiences success. He advocates a one to one relationship between the child and the tutor. The relationship is formed in order that the child may be carefully examined and understood and also to form a source of motivation. Gallagher believes that the child can be helped to conceptualize the world around him if he learns to pay attention to it. The tutor was to help the child form concepts , to use the concepts by solving the everyday problems which the child ran into and also to help the child to improve his communication with those around him. Gallagher feels that they need to learn to understand the behavior of those around them.<sup>2</sup>

Gallagher sees the intellectual development as a process of evolution. He postulated that there are three basic stages . The first is readiness which includes motivation and attention. If the

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<sup>1</sup>Mc Coy, op.cit., p.83,

<sup>2</sup>Gallagher, op.cit.p.48.

first does not develop the others will not follow. The second stage of academic or intellectual development is the acquirement of basic intellectual skills such as language, perceptual discrimination, quantitative thinking and memory skills. The third step is "integration and application of intellectual skills"<sup>1</sup>, which includes conceptualization.

Gallagher will work on special perceptual skills only in special instances, when there is clear indication that the trouble<sup>2</sup> goes beyond the motivation stage.

In her studies of children who have cerebral palsey, Taylor also includes the child's motivation as an important factor in the determination of his educational career. She says, "It becomes increasingly important to provide the child with opportunity for success, regardless of how modest or insignificant it may seem.... Any kind of success makes both the child and his parents happier and paves the way for smoother progress."<sup>3</sup> Attention and motivation are felt to spring largely from adult approval in this theory. The teacher and the atmosphere will take on more importance than the content and the structure of the lessons.

### C. Memory and Conceptualization

Cronbach says that, "transfer of a behavior pattern to a new situation can occur whenever the person recognizes the new situation as similar to other situations for which the behavior has been

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1 Gallagher , op. cit., p. 50

2 Ibid.

3 Taylor, op. cit., p87.

has been appropriate."<sup>1</sup> The brain injured child has very little capacity to remember and to form concepts. Strauss would say that this is because he does not understand the whole task and does not recognize something that he may have mastered in the past. The brain does not form association pathways which help other people to do things automatically. If the child is one who reacts to stress by perseverating, he may continue to give some other response.

Gallagher says that memory "represents an end product of a series of activities"<sup>2</sup> which include motivation and attention and perception. Gallagher approaches the improvement of memory from the standpoint of learning to respond. He tries to make learning seem like a game. Strauss does not feel that the child needs motivation as much as he needs clarification of the material.

#### D. Summary

All of the learning problems of the brain injured child are not yet clearly defined. The special learning problems which will effect the child's initial exposure to education are: difficulties in perception; inability to attend to the material at hand; poor memory; difficulties in generalization which create problems in concept formation. It has been established that the very beginning of his education is a crucial period. He benefits from going very slowly. The child needs increased perceptual aids and increased motivation. The best motivations are aimed at making the child feel adequate.

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1 Cronbach, op. cit. p. 253

2 Gallagher, op. cit. p. 59

Chapter III  
Factors Needed for the Successful  
Teaching of the Brain Injured Child

A. Personal Relationships

In all teaching it has been noted that the teacher's personality is a very strong influence in the teaching situation. A teacher is able to prejudice a child for or against the subject which he teaches. The teacher is an especially important figure in the field of religious education and in working with the handicapped. In both of these fields the relationship takes on special significance. The teacher must identify with the pupil in both of these areas.

1. Psychological Aspects

As has been noted above the child with a neurological impairment is sometimes said to have a "predisposition to anxiety".<sup>1</sup> They have a lack of security in the world because they do not have ease in interpreting it. They become very frustrated by this at times. When they become disturbed they will probably react catastrophically and the learning situation will be disrupted.

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1 Bender in Frampton and Gall, op.cit., p49.

Often when these outbursts occur a teacher would be tempted to exclude the child from the group until he could calm down. Bender says that "the one factor that will most increase their disturbance is isolation and deprivation which should be avoided at all costs."<sup>1</sup> In the next section the setting of the room will be described and it will be noted that all stimuli will be greatly reduced. The child will be encouraged to work alone many times. To say that a child should be placed in an environment of reduced stimuli does not mean he should be cut off by any means. Many of these children will physically cling to their teachers. Sometimes they do this because they have poor balance and coordination, but they also do this because "of their inability to recognize perceptual experience. It is as if they could use the adult's body not only for security in mobility and transportation, but also to perceive the world or at least to understand what the perceptions represent."<sup>2</sup>

Bender says that the adult can and must help the child clarify the outer world in order to help the child build up body image concepts. She feels as do others that the child must see himself first. Many experiences should be provided to give meaning to what the child is perceiving and to give clarity to his perceptions.<sup>3</sup> Therapy and education of the brain injured child should "include a closely supporting, warm mothering relationship throughout the

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1. Bender in Frampton and Gall, op. cit., p 51

2. Ibid.

3. Ibid.

period of dependency with an extension of this period for as long as the child needs it."<sup>1</sup> The feeling and experience of interacting is important for the child. Bender suggests the use of siblings or sibling equivalents in the learning situation.

In these relationships it is hoped that the child will identify himself. Bender says that the body image emerges through growth and "the integration into a gestalt of new experiences, physical, and psychological, from one's self and relationship to others and to the outer world."<sup>2</sup> The image is continually being changed "at various levels of development in perception and integration."<sup>3</sup> The child needs the close support of other people to help him interpret the surroundings. He will be caught in a vicious circle without this support. To form a body image and self concept he needs new perceptions. To form new perceptions he needs a body image. He needs his body image as a point of reference from which to view the situation.

The teacher's contact with the pupils is by no means an incidental factor. It is essential. Cruickshank suggests that the teachers who teach this type of child in day school should first go and visit the child in his home. These visits will serve to give the child a chance to relate to the teacher in surroundings that are most familiar to him. He will be able to relate to the

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1. Ibid. 60

2. Ibid. p. 52

3. Ibid.



teacher alone and will not be overly confused by a lot of new objects and a new building. The visits also give the teacher an opportunity to see the child where he is most relaxed. The teacher can be accepted into the situation and identified with the child's parents and family. When the child then goes to school he will most naturally turn to the teacher, who is familiar, for guidance and security. Bender and others stress that anxiety must be reduced and this establishment of a relationship will reduce some anxiety.

Cruickshank makes the teacher the center of all learning in the beginning of lessons. The teacher's identification with the child is necessary for her to carry out his suggestions. She must begin where she feels the child is able to succeed. She must be able in the beginning to do more demonstrating than talking. Her directions must be concise and each word must have meaning for the child. She must be willing and able to supply the crutch that the child needs.

Cruickshank warns that the teacher must "remember that progress comes slowly. When the child has confidence in himself, he will move ahead. He will learn just as much and as fast as he can, if the teacher takes her cue from him."<sup>1</sup>

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1. Cruickshank, et al op. cit., p. 146

Gallagher also places the teacher in a central relationship. He has her program set up so that the teacher and child meet together for an hour daily. "A one-to-one relationship offered the greatest opportunity for the tutor to control the attention of the child and to try a wide variety of methods and approaches that would stimulate adequate motivational response on the part of the child."<sup>1</sup>

The adult was to take control of the situation because "they are not looking for an adult playmate, but rather someone who can give strength through their association with a strong, consistent, and confident adult figure."<sup>2</sup>

In developing the child's readiness to learn Gallagher says that the child's past must be considered. They are not usually "eager to attack problems since they have not been rewarded through adult approval of their past performance."<sup>3</sup> Gallagher's tutoring strategy was to get the child "to attack the problem because it would please someone he liked."

The teachers were advised to show great interest in the child personally and to structure activities in such a way as to "give him a bath of success."<sup>4</sup>

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1. Gallagher, op. cit., p 35

2. Ibid.

3. Ibid.

4. Ibid. p 53

## 2. Theological Aspects.

In forming a personal relationship which will have to be very strong and supporting, the teacher must keep in the forefront of her mind the fact that Christ must be the basis of the relationship. There can be a danger that a teacher will be involved with the child on the basis of pity or because there is a need in the teacher which can be satisfied in the relationship.

In an article in *Religious Education*, Reuel Howe discusses a theology of education. He says that there are three doctrines which affect the teaching relationship. The first which he discusses is the Doctrine of Creation. He says that the idea that man is in the image of God should greatly effect our dealings with man. He says that "our worship of (God) should be measured in part by the reverence in which we hold man."<sup>1</sup> He says that any teacher must really believe that there is possibility for the child to move ahead. In working with the brain injured or retarded there is a great necessity for the teacher to understand the child well enough to have realistic goals which she believes that the child can attain. Howe says that "the teacher whose mind is closed to the possibilities of his pupil cannot possibly be that pupil's teacher."<sup>2</sup> In working with the handicapped the teacher's

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1. Reuel Howe, "A Theology of Education", *Religious Education*, Vol. LIV (November - December 1959) p. 490.

2. Ibid.

faith in the child and love for the child must be constant. The teacher's faith will help the child to learn to trust himself.

Howe points out that every human being is different, and in some ways unpredictable. A teacher must allow every pupil to grow to be himself. The goal must be for the pupil to relate to God. The teacher needs the courage to allow this relationship to be unique and to not impose her own preconceptions of what is good for the child or of how and when the child will respond to God.

The teacher is always serving the pupil. The teacher has the responsibility to teach through the relationship and to keep the relationship healthy. Howe says that neither should "use or exploit the other."<sup>1</sup>

The second doctrine which Howe relates to education is that of Redemption. He says that the teacher "must embody for his pupil Christ's acceptance of him . . . He must provide for him the courage for the perils of learning and growing that are to be faced by him."<sup>2</sup> For the brain injured child whose apprehension of abstract ideas will be very slow the love of Jesus will need to be very clearly expressed to him through the teacher.

The third doctrine which the teacher must always remember is the doctrine of the Holy Spirit. Howe says that in the relationship both the teacher and the pupil must learn to depend upon the work of the Holy Spirit. When progress is slow the teacher may be

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1. Ibid. p. 493

2. Ibid. p. 494

tempted to feel that she is a failure and may show disappointment to the child. Much of the beginning work with these children will be based on the emotional relationship that the child will have to the teacher. It is imperative that the teacher keep on having trust and faith. The first learning that the child will be doing will be attitude learning. If he is able to identify an attitude of acceptance in his teacher, he may be able to accept himself and go on with more joy.

### B. Structured Environment

In the light of the difficulties of the brain injured child one can see why he may need a special environment. In a normal class he would find it impossible to attend to one activity. The normal class decorations which are motivational material for the normal primary child are distractions to handicapped children. Bender says that it is essential for the brain injured child to be part of a program which is well structured. The structure must include the plant or room and the type of lesson materials that will be developed for the child. These children need to learn to pattern their impulses. They need to learn what a pattern is and to follow it. There cannot be too much stress on pattern. Bender says "there should be every effort to organize the disorganized impulses even to the point of producing compulsive behavior, provided that the compulsive behavior, is not anti-social."<sup>1</sup> She goes on to say that to have "per-

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<sup>1</sup> Bender, op. cit. p. 51

missiveness in an unstructured situation leads to confusion, disorganization, and further anxiety for the brain injured child."<sup>1</sup> Strauss and Lehtinen recommend clearing the environment of all distractions. They suggest that the room be free of all posters, bulletin boards and murals. They also suggest that the windows of the room be covered and that the room be as free from noise as possible. The teacher herself is advised to dress simply and to avoid distracting jewelry.<sup>2</sup>

Some of these children since they are distracted by everything will probably be distracted by others in the group. These authors therefore suggest that the group be kept to no more than twelve children. They also recommend that the children be seated at desks or tables which are turned toward the wall and away from one another. Generally it is reported that the children are grateful for the reduced stimuli and appreciate this arrangement. Of course, one must not forget that the most essential thing is for the child to feel the relationship to and the support of the teacher. The child must never feel that he is being separated for reasons of discipline or displeasure. The child must understand that this arrangement is for the purpose of producing the best possible work. This arrangement will help them to learn to do one thing at a time. They will be able to benefit from social contact after they have learned to work alone.<sup>3</sup> In regard to the room

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1. Ibid. 60

2. Strauss and Lehtinen Vol 1, op. cit., p. 130

3. Ibid. 130 - 134

Cruickshank even goes further. He says that the room should be away from all work or play areas. He suggests that the windows be opaque. He believes that the child will be helped if the walls, floor and the ceiling are all of the same color. He says that there should be enough room for each child so that each one has room to stretch out without touching anyone else.<sup>1</sup> Cruickshank had eight children in a group in his experiment. The classrooms were especially altered for the children and each child had his own cubicle in which to do his individual work. He stressed the fact that nothing was to be there that could be a disturbance, there were cabinets for everything. There was a blackboard in the room but nothing was ever left on the board after it was used. The children worked in the cubicles at first and later they began to come out and work together at tables.<sup>2</sup>

Strauss and Cruickshank have both reported that these arrangements bring the child a sense of security and put him in a frame of mind in which he is able to begin to learn how to control his impulses. Lewis in The Other Child makes a point of counselling parents to keep in mind that the child needs to grow in his basic control of his environment. He too stresses going from a highly structured way of life to a less structured way of life.

Cruickshank proposes that "initially that educational program of the school day be completely teacher-directed with little or no opportunity for choice on the part of the child."<sup>3</sup>

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1. Cruickshank, Teaching Method, op. cit., p. 148

2. Ibid. p. 149

3. Ibid., p. 18

He says that the teacher is to control the situation so that . . . .

"The day's program will be so completely simplified and so devoid of choice (or conflict) situations that the possibility of failure experience will be almost completely minimized. The learning tasks will be within the learning capacity and within the limits of frustration and the attention span of the child."<sup>1</sup>

This point of view has been the one that has been accepted for the longest time. Recently there have been some new views expressed. The necessity of providing for the success experience of the child is always a prime factor but it has been suggested that there may be other ways of doing this.

Reger in an article in the Elementary School Journal says that it cannot be assumed that all children will react the same way. This author says that it may be that these children need as much environmental stimulation or more than other children. He was basing his opinion on a study at Vineland. He says that the children need to learn to use stimuli. He says "The point is that the principle of isolation as suggested by Cruickshank should not be extended to all the child's activities and experiences."<sup>2</sup>

The Vineland study pointed out that these children react to moving stimuli and that it might be well to use colorful and moving stimuli in order to make stronger impressions on the child and thereby increase his attention.

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1. Ibid. p. 18

2. R. Reger, "Stimulating the Distractible Child.", Elementary School Journal, Vol. 64 (October 1963) p. 64



Cruickshank does not say that the child should always be kept isolated. He begins working with the child in a very structured environment, but he does not want the child to stay there. The child is not to remain isolated. In fact there is a constant reminder that the child should not feel isolated. The use of moving stimuli would not necessarily be rejected by Strauss or Cruickshank. They both favor material which calls attention to itself.

In an article by Leland and Smith the use of play therapy is recommended for these children. These authors are however, especially concerned with those children who are definitely disturbed emotionally. They seem to have a different approach from that of Bender, although their goals are similar. They note that these children are generally disruptive to any group activity. " They tend to reject their peers, to fight with them, when intruded upon, in an attempt to avoid them or hold them off,.." <sup>1</sup>

These authors suggest that unstructured play therapy be used to begin with. This is in direct contrast with the first method mentioned. They recommend the unstructured approach because "structured provided by the materials in the traditional setting will not permit the child to utilize his own imagination." <sup>2</sup> They also feel that this approach will reduce anxiety. It seems that both groups are trying to reduce anxiety but one group feels that

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1. Leland and Smith op. cit. p.624

2. Ibid.

having to choose will create anxiety and the other that a free and inner directed situation will reduce anxiety. Both want the child to build up a self-concept. Bender would structure the environment in such a way that at first the child only has to learn to fit a pattern. Cruickshank says that the child should be teacher-directed to such an extent that he never has to make a choice. Leland and Smith say that the child will learn about himself in the free situation and that he will form a body image. Then the second phase of therapy will be geared to "learn control and organization of behavior"<sup>1</sup>. They say that the whole therapy process will take the form of "forcing the child to think"<sup>2</sup>. The material in the room will all be unstructured. The child will be able to play with sand, water, blocks, clay and other materials which cannot be broken.<sup>3</sup> These articles do not have to be played with in a certain way. The authors feel that this setting will help the child to structure his own impulses.

Perhaps these approaches are two extremes and the teacher will have to decide how she will lead each child. It is well to note that all of these children are individual cases and no one set of rules will suffice for all of them. In one sense the teacher is always the focal point because it is she who must make the goals and decide which road to take.

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1. Ibid.

2. Ibid.

3. Ibid. p. 627

Gallagher's approach does not speak of the overall structure of the situation. He does however, necessarily limit it by reducing all the people in the situation to the teacher and the pupil.

He advocates field trips for the child in order to develop language skills, and suggests that the teacher guide observations during the trip.<sup>1</sup>

The teacher in a church school situation would probably find it more suitable to try the structured approach due to the fact that the time is short and more important the goals are not primarily therapeutic.

#### C. Structured Materials

As has been noted the activities which are stimulating and appropriate for the average primary group, are over-stimulating for the handicapped child. Even some of the materials which would be appropriate for retarded children would not be usable for the brain injured child without some modification. Materials for retarded children are good to use for direction in choosing content as are lessons planned for two and three year old children because none of these children are able to cope with abstractions. The material for the brain injured child must take into account the fact that he is not always handicapped in an overall way. He may be having some problems but his prognosis is good if he is met in the right way. His development will be varied and he may do very well in some areas. The materials which are presented to him need to be clear of distractions.

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1. Gallagher, <sup>op cit</sup> p. 58

Strauss and Lehtines suggest that the child be given material which is "divested of everything but the merest essentials."<sup>1</sup> The borders of the pages are usually removed altogether, and sometimes the material that is there is covered in such a way that only one line or less is visible at a time.

The child should be constantly evaluated and the materials varied and the difficulty increased as called for. In the beginning it may be each page or card will have only one word or sentence on it. As well as reducing the complexity of the material there should be an increase in the intensity of the materials. The appeal to the senses should be very strong. The attraction should be such that the child's wandering attention is captured. "The visual field can be restricted by placing a piece of construction paper or blotter paper under the book, paper or form board, or by adding colors to the work itself."<sup>2</sup> M. Talmadge in an article written early last year described an experiment performed to help emotionally disturbed brain injured children who had reading difficulties. In this experiment there was great stress upon increasing the sensory value of materials. The author worked on increasing the visual tactile and kinesthetic impressions in order to help the child to focus on the material. The method included first work on "recognition of differences and likenesses in visual configurations - beginning with objects and proceeding to letter forms."<sup>3</sup>

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1. Strauss and Lehtinen, *op. cit.*, p. 134

2. Cruickshank et al. *op. cit.* p 20

3. M. Talmadge, A. Davids and M. W. Laufer, "A Study of Experimental Methods of Teaching Emotionally Disturbed Brain Damaged Retarded Readers", Journal of Educational Research Vol. 56, (Feb. 1963), p. 312.

In this method each vowel was associated with a specific color. The procedures were centered more on the kinesthetic approach than on the visual, or perhaps through kinesthetic to the visual. Some authors suggest finding the one modality which is best for the child, others suggest using all. The study made use of large block letters which fit into a rectangle of wood. The vowels were still painted their various colors. The children were able to handle the letters and see them from different angles. "The letters cut out of the blocks though was of the same color, also had sandpaper grit sprinkled on it. Thus it was slightly lighter in color than its surroundings."<sup>1</sup> When it was in the piece of wood it would be seen in the way it would appear on a printed page. The sandpaper grit allowed for the use of another sense, modality. At other times the children traced the letters in sand. "While tracing the letter in the sand the child simultaneously pronounced them aloud."<sup>2</sup> In this technique the child was getting the letter through the pathways of sight, sound and touch. Generally in this study whole words were presented. Only vowels were presented in isolation.

Because of the fact that these children are hyperactive it is generally advisable to include some activities in the day that require them to move or to manipulate things. The sand writing and blocks serve to meet this need.

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1. Ibid. p. 312

2. Ibid. p. 313

Although Bender says that the child should be ordered and given security by the use of routine, Strauss says that the teacher should vary the activities of the routine. If the child is one who perseverates he may fall into the habit of using one device to help him learn and then never be able to give it up. A child who perseverates should learn to use many devices. Drill work must be approached cautiously with these children because they may learn to give automatic answers with no understanding as to meaning.

All activities should be short in order to account for the short attention span which the child has.

Color and sound are both helpful teaching aids. Colors will help to keep attention. Color can be used as a clue to help a child see relationships which he may otherwise miss. Sometimes each word in a sentence is a different color so that he can learn to analyze the parts of a whole. When using pictures "Heavy colored lines help him to see actual shapes."<sup>1</sup> It has been found that very bright colors make a more significant impression and similarly a louder voice or greater sound will also help some children.

When these children read they tend to confuse similar words, skip whole words and sentences. The teacher must try to help him to relate to the meaning of what he is reading.

Although the progress may be slow and the child may make mistakes the teacher is warned not to accept work which does not come up to standards which the child can meet. If he is allowed

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1. Cruickshank et al, *op. cit.* p. 193

to get by he will be learning to get by.

The teacher must learn to present the same information in a variety of ways, so that it can be repeated.

Audio visual materials are useful tools for teaching. Films and filmstrips are good for focusing attention and allows him some movement if he participates in placing figures on the board. Recordings and taperecordings are good because they can be turned up and increase the stimulation.<sup>1</sup> There are some children, however, who seem to be very sensitive to sound and will have a very bad reaction to too much noise.<sup>2</sup>

Gallagher says that materials must be chosen in regard to the child and to that which the teacher tries to teach. He says that conceptualization and reasoning must be taught. "One of the most effective methods of tutoring for conceptualization was to spread a wide variety of pictures on a table and ask the child to select from the group of 30 or 40 pictures the ones that had to do with eating, traveling, playing, etc."<sup>2</sup>.

The child was also asked to tell the tutor everything of which a particular picture reminded him.<sup>3</sup>

#### D. Group Relationships

Cruickshank found that each child had to feel secure in the

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1. K. C. Cotter, "Audio Visual Education for the Retarded", Elementary School Journal Vol. 63, (May 1963) pp 441-447
  2. Gallagher, op. cit. p. 61
  3. Ibid.

school situation before he could relate to other children. In the Syracuse experiment only one child was added to the class at a time. The children at first learned to use the structured material and work independently.

At first group activity only consisted of things like lunch time or listening to records or seeing a filmstrip.<sup>1</sup> Participation in group activities and learning to relate to other people is necessary to the child. He will learn more about himself in relationship with others. The group activities cannot be pushed on the child. The group may be too distracting for the child at first. It has been suggested that the teacher wait until she notices natural, spontaneous friendships form and take the presence of these as a cue that the children are now ready for group work.

The group may be used as a tool in teaching. The group can reduce a child's tension and his fear of failure. If he thinks that he is the focus of attention and he must answer a question he may freeze, but "the small child, watching another child falter, comes through time and again with answers and insights that were previously out of his reach."<sup>2</sup> A brain injured child may be able to recognize a wrong answer more easily than he is able to state the right answer.

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1. Cruickshank, op. cit., p. 162

2. Ibid. p. 204



### E. Summary

Each child must be related to in terms of his particular personality and ability. There is evidently a good prognosis for the child who is reached at an early age. There is need for a great deal of individual attention to help the child to concentrate and to encourage him in his work when he is making progress, and when he is unable to make progress.

The teacher is of primary significance in the relationship the child makes to learning. The teacher must establish a warm relationship with the child. The child must be able to depend on the teacher for support.

The environment should not hinder the learning process. It should be regarded as a material in the lesson. It must be kept free of any non essential material.

The lessons should be aimed at the child's particular needs. The material should be highly structured and allow for opportunity for motor activity. All of the senses should be employed and all of the stimuli should be intensified. Individual lessons and series of lessons should include repetition.

The teacher must maintain control of the environment and of the child. The child must be seen as in the process of building up his own inner controls. Until he builds up a sense of inner discipline, he must be supported by firm structure and direction from outside himself.

## Chapter IV

### SPIRITUAL CONCEPTS TO BE TAUGHT TO CHILDREN

WITH

### SPECIAL REFERENCE TO THE BRAIN INJURED

This chapter will attempt to show how the teaching of certain concepts meets children's needs.

#### A. Understanding the world as God's Creation

Children are curious about the world they live in. They have a need to be able to understand their surroundings and they have also the need to feel that they are able to master their surroundings to some extent. It is important that they come to view the world as a creation of God. Through this understanding they can be lead to worship God and to be thankful for all that He has provided.

Sherrill in Opening Doors of Childhood says that children are excited about the world about them. They recognize life in the world and they quite naturally assume that there is a God.<sup>1</sup> When children begin to think of God it is in relation to the world around them. They are naturally curious about the world and how it came to be. Because of the early interest which the children show, it seems that the doctrine of creation would be a good place

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<sup>1</sup> L. Sherrill, Opening Doors of Childhood, New York: Mac Millan Co., 1944, p. 33.

at which to begin teaching. Alva I. Cox says that this doctrine is central to our faith.<sup>1</sup> It is essential to our teaching because from it stems important attitudes as well as knowledge of God's power and His person and one's self. Cox says that this doctrine leads to a humble attitude on the part of one who holds it. It also produces a "joyful acceptance of the world God has made and proper use of its fruits."<sup>2</sup> The doctrine of creation will also lead to acceptance of good and evil and suffering because they will all be seen in a "context of God's love and care."<sup>3</sup> Cox says that this doctrine also includes the concept that a person is individually and wonderfully made. When man sees himself as created he realizes that he has a purpose.<sup>4</sup>

Sherrill makes a statement that for young children "the idea 'God' is suggested to them first out of their immediate environment, by the people whom they know, by the things they hear, and by the events they observe."<sup>5</sup> In respect to the brain injured child it is not likely that he will come to a knowledge of God as easily. He will have to have someone who will help him to interpret the sensations which he has. If the brain injured child can come to feel that the world has order it will help him to have more

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1 Alva I. Cox, "What do we teach", International Journal of Religious Education, XXXVI, (Sept. 1959), p.14.

2 Ibid.

3 Ibid.

4 Ibid.

5 Sherrill, op. cit., p. 33

security in it. It has been pointed out in previous chapters that the child responds well when he knows that the lesson and the atmosphere is controlled. It may be that the knowledge of God's activity will help him to feel secure. The Concordia Bible Lessons for the retarded try to help the child see that God supplies and sustains life.<sup>1</sup> The concept that the world is a place in which we are able to find care and love is essential to these children, who may have only experienced frustrations, and have not had any opportunity to enjoy life. In Retarded Children: God's Children, Sigurd Petersen that the world of the hyperactive child, "is what can be seen and done at the moment."<sup>2</sup> It will be necessary to be very concrete in teaching. An aim in lessons on creation might be to help them see how they are related to their world. They could be helped to see how God has provided for their care by means of parents and teachers. They can learn to appreciate friends and to be a friend. They should be helped to appreciate the elements of nature that are in their midst.

#### B. Knowledge of Right and Wrong

Children have needs which can be met by teaching discipline and concepts of right and wrong. The brain injured child has a

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1. Bible Lessons for Special Classes, Board for Parish Education, Missouri Synod, (Missouri: Concordia Publishing House, 1959)

2. Petersen Sigurd, Retarded Children: God's Children, (Philadelphia: Westminster Press, 1960), p. 17.

special need for structure. They need to learn to approach the world in an appropriate way. They need to be accepted and so they they must try to learn acceptable behavior.

Cox says that Christian educators must teach what man has done. This involves teaching that God has given man freedom, and man has misused it. Cox says that man has misused his freedom "by asserting his dominion over others and in effect, attempting to make a god of himself and his accomplishments."<sup>1</sup> He says that man has also tried to run away from his freedom. In this analysis are included sins of commission and omission. The fact of sin must be pointed out to a child.

Sherrill says that children must be carefully taught to discriminate between right and wrong. As the child grows to learn how to govern his behavior and to make choices it is most desirable that he learn to do so in the light of his knowledge of God. Sherrill points out that a child first learns to distinguish between right and wrong by adopting the standards of those around him.<sup>2</sup> He says that it is not desirable for the child to merely reflect the ideas of those who surround him in earliest life. "You wish him to grow into a conception that right is right before God, and that wrong is wrong before God."<sup>3</sup>

Sherrill says that children can be taught to see that sin

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1 Cox, op. cit., p.15.

2 Sherrill, op. cit. pp. 92-93.

3 Ibid.

has social meanings and that it breaks relationships. He says that children can be lead to "measure self by the standards of Christ, to be willing to confess one has fallen short or shot beside the mark."<sup>1</sup> He says though that an excess of guilt will destroy the child's religious experience. The child's guilt feelings should be a preparation for the experience of forgiveness. It would seem best to work from a positive point of view and stress that which is good.

Andrew Murray points out that not only must a child be told but he must be shown what is good. He must see a high standard in the lives of those around him.<sup>2</sup> Teaching a child to obey will help him to control his will.<sup>3</sup> Gilbert says that even a child of two can learn that he can be helped and that he can help others by curtailing his freedom and desires. Gilbert says that a child of three can understand that others have rights and he can learn to be sorry when he has hurt others. At four he can "begin to understand that he is capable of wrong doing and in need of God's forgiveness."<sup>4</sup> In the primary years children can learn the concepts of honesty and they learn the need to get along with others.<sup>5</sup>

The brain injured child will be helped greatly if he can be

1 Ibid.

2 Andrew Murray, The Children for Christ, Fleming H. Revell Company: New York, 1904, p.173.

3 Ibid., p.179.

4 W. K. Gilbert, The Age Group Objectives of Christian Education, prepared by the Boards of Parish Education of The American Evangelical Lutheran Church, The Augustana Lutheran Church, The Suomi Synod, The united Lutheran Church in America, (1958), p. 26

5 Ibid., pp33-44.

taught a correct knowledge of right and wrong. Petersen says that this knowledge gives the retarded support. Petersen suggests for the retarded lessons on The Ten Commandments, the will of God and self-control and responsibility.<sup>1</sup> These concepts may be too abstract for the brain injured child if they are taught in words. The best way to teach right and wrong to the brain injured is to very clearly draw limits for their behavior and then enforce these limits consistently and with explanations. They should be able to expect the same responses to their behavior. They will not understand why they may be allowed to do something at one time and then be corrected for it another time. The parents of the brain injured child will have to speak to the child very carefully about how God wants him to behave. The parents and teachers must stress to the child that God wants what is best for him. The child should never feel that he is in a position to lose God's love. The child will usually be aware of many failures and for this reason he should be given a great deal of praise. It would never be kind to let the child misbehave.

### C. Knowledge of the Love of Jesus

All children have a need for emotional security. Included<sup>2</sup> in this need are the needs for acceptance and assurance of love.

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1 Petersen, op.cit., p.104.

2 Cully, op.cit., p.19.

These needs are met through the family and through friendship. Ultimately each child needs to know the unwavering pure love of God in Jesus Christ. Cully remarks that " Only the love of God can be completely satisfying"<sup>1</sup>. A child looks for assurance and security in the world. He will find security in his family relationships and in the Church. A child learns acceptance by the way he is treated. As he learns this he will be free to face any situation. After the child has experienced accepting love, the love should be interpreted to him so that he is able to see that God uses people to convey His love. Sherrill says that it "is easy to meet God and never know it is God."<sup>2</sup>

Cully says that " the good news that God loves him is the most important reality that a child can receive. This can sustain him whenever he feels misunderstood and keep him when his friends momentarily shut him out (as children will do),"<sup>3</sup>

Since children learn that they do wrong they will feel a need for the loving forgiveness of Jesus. Cox says that the reconciliation which Jesus has made possible should be stressed. The child can be lead to see that he is reconciled to God and that he can be also reconciled to man.. Gilbertt says that children in the primary

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1 Cully, op. cit., p.19.

2 Sherrill, op. cit., p.44.

3 Cully, op. cit., pp. 56-57.



grades can understand that Jesus came to show love and understanding.

They can also understand that Jesus can be their friend.<sup>1</sup> Many children have fears of new places, or fears of the dark, or loneliness. They need to know that Jesus is with them. Cox says that knowledge of God's love will help a person to adjust to the demands which are made upon him. The person will be freed from anxiety because, "confident that God knows him as he really is, the person is freed to accept his own life with the stature and value which God gives it."<sup>2</sup>

The brain injured child has many problems in gaining emotional security. Some security may be gained for a normal child through their own mastery of the environment. A child who is physically awkward or even crippled has an additional burden of realizing that he is always in need of help and may have great fears of being left alone and being helpless. This child has experienced much failure in his life. He may have been moved from school to school or class to class. He may have even been moved around in Sunday School.

Some of these children have spent time in hospitals. Some may have been in crowded and impersonal institutions. A child may be aware of the fact that his parents are upset about him, and may fear that he is going to be sent away.

These children need to have the love of Jesus expressed and interpreted to them. They need to know that they do not have to earn love by "being like other children!" A teacher needs to realize that Jesus may be the only Person who does love a particular child.

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1 Gilbert, *op. cit.*, pp.33-44.

2 Cox, *op. cit.*, p.17.

It is difficult to love the unlovely, and these children are sometimes unlovely. Unloveliness seems to spring from the fact that the children are different. The difference may be in their looks. Some children with brain damage drool and are very awkward. The behavior patterns are also different. These children are quite aggressive in their behavior, either because of emotional problems or because of poor motor control.

It is necessary for the teacher to have a clear understanding of the fact that the child's behavior is part of his total disability. She should have an understanding of the characteristics outlined in chapter one. A teacher may feel that a child is acting aggressively toward her or being deliberately disobedient to her, when he is only exhibiting the symptoms of his condition. Even when the teacher understands the reason for the behavior it will be difficult not to take some things personally. It is hard to be objective about an emotional temper tantrum, especially if the child slaps, kicks, or bites. The child's emotional state may quickly transfer itself to the teacher.

The teacher and the Church should be prepared to help the child's parents at this point. They may not be able to accept the child because they have guilt feelings which cannot be divorced from the child. The members of the family may feel responsible for the child's overall condition. They may also feel that they have failed in training the child if he has severe behavior problems. The parents may not want to share their feelings with anyone.

The teacher must depend on the Holy Spirit to give her supernatural love and concern for the child.

#### D. Knowledge of Concepts

The emotional needs of children which were mentioned above will be met in part by the relationships which the child forms with his parents and other people, his relationship with the world around him and his relationship with God through Jesus. The child also has a need to build up basic concepts concerning the Christian Faith and Life. The content taught must be "tied up with life as it is lived".<sup>1</sup> Petersen says that "in order to identify himself with the good things of life a child needs to understand such concepts as God, Jesus, the Bible, Church and Prayer...."<sup>2</sup>

##### 1. Jesus

In teaching young children about God it is usually suggested that it is best to begin with Jesus. Sherrill says that the child should be acquainted with the character of God through Jesus. Jesus is to become real to the child. " We wish the child to know the character of Jesus through the stories about Him, until He is as much a part of their childhood as the persons whom they encounter day by day."<sup>3</sup> Gilbert says that a child can first identify with

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1 Cox, op. cit., p.14.

2 Petersen, op. cit., p.104.

3 Sherrill, op. cit., p. 27

Jesus as a baby, and then grow to think of Jesus as a friend who helps people. Gilbert says that the average five year old can begin to understand that Jesus died and rose again for our salvation. <sup>1</sup>

In working with the handicapped child it seems best to begin with the concrete figure of Jesus, and help the child to get as full a picture of Him as possible.

## 2. God

The concept of God according to most writers, will best be taught through the understanding of His role as Creator and His relationship to the child in Jesus.

## 3. The Bible

The Bible should be a part of the child's growing religious experience. In an article in Religious Education, Rachael Henderlite says that sometimes the Bible is not a significant part of the child's life because people avoid it. She says that there has been misunderstanding of the Bible message. There has been fear of the realistic point of view which the Bible presents. The result of neglecting the Bible is lack of commitment. <sup>2</sup> She says that the Bible must be taught without compromise and rationalization.

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1 Gilbert, op. cit., p. 31.

2 Rachael Henderlite, "The Child's Appreciation of the Bible Message", Religious Education, LVII, (July August 1962) pp. 268-272.

The Bible, Sherrill remarks is the "finest resource"<sup>1</sup> for teaching the character of God. Gilbert says that the young child can understand that the Bible is connected to his understanding of God and Jesus. The young child should learn to enjoy Bible stories and then to associate the Bible with feelings of respect and reverence for God.

The brain injured child, or any retarded child who cannot read, may learn to associate the stories he hears with the Bible. These children may also be able to learn simple Bible verses. They can learn that God has given this message because He loves them, and wants to speak to them. They can be lead to make application of Bible truths to their own lives.

#### 4. The Church

When we have been reconciled to God we are also reconciled to one another and bound to one another in love.<sup>2</sup> Sherrill says that children must come to feel that they are part of a fellowship. He says that they must feel their relationship to the whole church. Children will tend to think of the building when they think of church. The experience that the child has in the church school will have great influence on his concept of the church. Gilbert says that the child should to begin to develop attitudes of respect and reverence for the church.<sup>3</sup> Sherrill points out that the Sunday School may

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1 Sherrill, *op. cit.*, p. 42.

2 Cox, *op. cit.*, p.49

3 Gilbert, *op. cit.*, p.34.

be the child's first group experience, and that he should begin to learn cooperation and concern for others. As the child learns this personally, he can be lead to an understanding that the Church has a mission and concern for the world.

The brain injured child will probably not come to too much of a theoretical understanding of the Church. He can learn that it is a place where he is accepted. He can learn to anticipate going to Sunday School with joy. He and his family can experience fellowship with those who love Jesus.

#### 5. Prayer.

Sherrill says that the best way for a child to learn to pray is by being part of the family's worship.<sup>1</sup> Prayer should result from the knowledge and love of God. Petersen says that prayer is an important element in the lives of the retarded. He says, "We are conscious of the many disturbing elements in their lives, but here for a minute, the stillness of God's healing Spirit is present."<sup>2</sup> The child will learn an attitude toward prayer long before he learns any basis for prayer or patterns for prayer. Petersen's statement indicates that the retarded respond to prayer on an almost totally emotional level. They do not have to know of the promise of Jesus to be with them in order to sense His presence. This knowledge of prayer is preferable to one which regards prayer as merely asking for things.

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1 Sherrill, op. cit., p. 137.

2 Petersen, op. cit., p. 114.

### E, Summary

The various concepts and attitudes which must be taught to the young children will overlap in the presentation. The teacher must remember that the whole child is being taught. The child in verbalizing an idea correctly does not necessarily understand it. On the other hand, if a child is not able to give expression to an idea it does not mean that he lacks understanding of a concept. The teacher must be able to appreciate and accept the expression that the child is able to give.

The brain injured child can benefit greatly from learning spiritual concepts. In learning that God has created the world he can begin to see that the world is not haphazard, but is ordered. An important concept for the child is that he is part of God's creation and so he is the recipient of God's love. God has made the world as He has made the child. He can learn to appreciate the parts of the world. He can see that they relate to one another.

In learning the concept of right and wrong, the child can learn that there are consistent rules for his good. He can learn to seek the best for those around him.

The love of Jesus must be expressed to the child through the teacher. Her acceptance of him as he is, her stabilizing procedures, her consistent discipline and her personal concern and warmth toward the child, should be interpreted to him as love.

The concepts which are taught to the six to eight year old child are in some cases too abstract for the brain injured child. He

can learn about Jesus. He can learn that Jesus came to show God's love. His understanding of God will be limited to Jesus and God as Creator.

He can learn that the Bible tells about Jesus and he may learn some simple verses. His knowledge of the Church will center around the idea that it is a special building. He can learn an attitude of joy at going to Church.

The brain injured child can learn that prayer is talking to Jesus. He will need to first learn about Jesus and be present when others are praying.



Chapter V  
CRITERIA FOR CHOICE OF CONTENT  
AND  
SUGGESTIONS FOR THE PRESENTATION OF MATERIAL

Chapters one and two described the brain injured child, and discussed his problems of learning. Chapter three discussed the theories and practices which have evolved in the task of educating brain injured children. In this chapter the development of a curriculum for the Christian Education of the child will be considered. The curriculum will be considered in the light of the methods which have been developed in secular education, and in the light of the spiritual concepts which have been found understandable to young children. Subjects for lessons for the brain injured with reasons for their choice. Suggestions will be made for ways in which the ideas may be presented to the children. In the appendix a beginning unit will be included. It is important for any teacher to remember that each child and each class is an individual case. Probably no curriculum should be completely accepted. It is especially important to remember this when one is working with exceptional children whose development is more than likely to be uneven. The stress should never be placed on the material but on the child's comprehension. The teacher must see where the child is, and then help the child to perceive the truth she has to offer. A teacher

may have to find new ways to repeat some lessons many times. It may, at times, seem that these children cannot perceive such abstract truths. There is a place in every lesson where the Holy Spirit must teach and make the applications. The teacher must depend on God to reveal Himself.

#### A. The Setting for Christian Education

All of the methods which have been discussed stress that in the beginning sessions few children should be present. The beginning lessons are important for building up rapport. One of the goals for the child is that he come to feel a special relationship to the Church. The Church must communicate its love to the child. The child should feel that the Church is concerned about him. For this reason the beginning lessons and the child's beginning association with the Church might well take place in the Child's own home. He will be most relaxed and at his best at home. The child can be lead to see that God is related to home life. He will see that God is interested in all of life. Then he can learn that he goes to Church to worship God in a special way. The room at Church should be very quiet. It should have no distracting decorations or charts. The furniture should be sturdy.

#### B. Suggested Content for Beginning Lessons

##### 1. Creation and God's Care

The idea of the world as God's creation is a good subject to begin with for the brain injured child. The subject lends itself to

a very concrete presentation. The lessons can center around the things in the world around him. The lessons can be built around the things that the child can see and touch and smell and hear.

A second important reason for beginning with this concept is the fact that these children need to see themselves as part of the world. Gallagher, Cruickshank and Bender have mentioned that they do not readily see their relationship to the world, and that they make inappropriate generalizations and relationships. It was suggested in an article by Elizabeth Brown that all children in today's world need to clearly understand that God has made the world, and that they are part of it and as such are in His care.<sup>1</sup> She suggests that outdoor experiences are good for teaching this. She says that "Outdoor experiences offer the child a sense of interrelationship or interdependence among all things."<sup>2</sup>

The whole family should be brought into the teaching of God's care. The child should be lead to see how the family is part of God's creation and a means by which God cares for him.

A fourth reason for including lessons on the Creation is that lessons dealing with his immediate environment will help the child build up his vocabulary. Gallagher says that the child needs to be encouraged to learn the names of things in his environment, and to talk about his environment. Lessons on the things which God has created will help the child to clarify his sensations and to more clearly perceive his environment.

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1 E. Brown, "Out door Experiences are not Extras", International Journal of Religious Education, XXXIX, pp.10-11.

2 Ibid.

Finally, this concept is good because the material is such that the child will be relaxed and the establishment of rapport will be facilitated. The beginning lessons should be aimed at winning the child's confidence and friendship.

In presenting the lessons the teacher should plan the time very carefully. The material should be easy to see and differentiate. Bright pictures of familiar objects should be introduced. The teacher should avoid using any stories at first. The teacher should keep repeating the fact that God made and cares for the various aspects of the environment and the child himself.

## 2. The Church

There should be specific lessons on the church for the child. The brain injured child is best able to respond to things which he understands. He is upset by new places and events. The child will be helped by learning what he can anticipate will happen in church. It will be helpful if the schedule of the morning and the meaning of the activities can be discussed before he goes to a Sunday School class.

In teaching the child about the church, if the church is in walking distance a lesson could be planned around a visit to the church. It would be helpful if the child could explore the rooms in which his class will meet. He might be less distracted if he were familiar with the situation before hand.

In teaching him of going to worship and learn of God the

story of Jesus visiting the Temple might be used. The child will be able to identify with Jesus, and the visit to church will serve two purposes. It would be helpful if the child could meet the pastor on an informal visit to the church. It would be good for the child to think that the pastor is interested in him and in what he learns.

### 3 The Life of Jesus

The child should quickly come to see that Jesus is of central importance to him, to his family, to the Church and to the world. The brain injured children should center their studies on the world they know and on Jesus. If Old Testament stories are presented the children are likely to get the various characters confused in their minds. They do not develop a sense of time or history until they are quite old. It must be remembered that they will always have problems attending to the lesson and remembering the details, therefore they can quite easily get people and events mixed up. For this reason simple stories about Jesus will help the child to get the most out of the lesson.

The use of stories is good for these children because they need to learn a sense of sequence and cause and effect.

They can also benefit from the use of stories if new words are included in the story and explained in the context of the story. Cruickshank said that things have more meaning for these children

if they are presented in a context.

Stories are also useful means of encouraging a child to speak in sentences. They provide him with material about which he can think and express himself.

In an article published by the National Catholic Education Association it was stated that moral truths may be best presented<sup>1</sup> in the context of a story. All lessons should have an application. The application may be designed either to help the child gain emotional security, or to help him to recognize right behavior, or both of these. These applications should be specific. If the child is in a group, each member should be encouraged to state the application to his own situation.

Since these children are so active the story should be presented in such a way that the child is doing something. Pictures of several scenes in the story should be available. The child should be asked to put the pictures in the correct sequence. He should be asked to talk about what he sees in the pictures. If a child can speak in sentences, he should not get away with one word explanations. A helpful exercise may be to have him suggest a caption for each picture. The teacher could then write the child's words under the picture and have the child practice reading these. In this way he would be reviewing the story, learning, to express himself and drilling reading. He would also be having the experience of seeing his own words valued enough to be printed.

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<sup>1</sup> Sister Mary Lorraine, "How to present Religious and Moral truth to Mentally Handicapped Children", National Catholic Education Association, LXIII, p. 417.

### C. Music

Petersen reports that the retarded respond very well to music. The brain injured will enjoy and profit from the opportunity to enter into singing. Singing will give the child a structured and controlled way to express himself emotionally. Singing can give him the opportunity of joining in and enjoying a group experience. He will be able to enjoy the group without having to bear the burdens of coordination and cooperation. Singing may be one of his first formal responses to God. Foster says, ". . . of all our responses to God in reverence and love, one of the most enjoyable is that in which the whole being expresses its praise and commitment in music and song."<sup>1</sup>

Music in lessons should be considered very carefully. Both the words and the music should be appropriate for the child. If these children have problems in auditory perception and memory, the hymns and songs chosen must be simple and short in order for them to have meaning for the children. Marsch suggests that children can profit from listening to recordings of hymns. Hymns should be chosen which relate to the unit of study.<sup>2</sup> Since the tune may be an aid to memory, it would be wise to teach the children Bible verses which have been set to music.

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1. V. E. Foster, "Music a Response to God", International Journal of Religious Education, XXXIX, p 2.
  2. V. S. Morsch, "Hymns for Children", International Journal of Religious Education, XXXXX, pp. 18-19.

#### D. Evaluation of the Concordia Materials

The Board of Parish Education of the Missouri Synod has developed a series of lessons for the mentally retarded. There is a series of eight packets of lessons. Each packet contains lessons for three months. The series is called Bible Lessons for Special Classes. In each series are six Bible stories, six related stories from life and six related activities. These materials would be helpful to a teacher planning for brain injured children. The weekly lesson material is printed on a four page folder. The first page consists of a picture to illustrate the story. The second page contains the story and a smaller picture. The third page has a Bible verse under the heading " My Bible Words", a prayer, and a song related to the story. The fourth page contains the lessons procedure and advice for parents and teachers.

The lesson material is appropriate for the brain injured in terms of the length of the lesson and the vocabulary which is used. The layout of the material would make it difficult to use with these children. The pictures are very full of details. The figures are not always clear enough. The centerfold containing the picture, story, verse, song and prayer would definitely be distracting. The paper could be cut up so that only one thing was presented at a time. The activities which are included are appropriate for the brain injured because the figures are clearly defined and the colors are very bright. Some of the figures are movable which would appeal to the brain injured. Some of the activities call for fine motor skills such as cutting, and these would not be appropriate for all of the children.



The lessons are grouped around a unit idea such as, God cares for us. The material is selected from the Bible on the basis of the unit idea. The arrangement of content in this way would not be too helpful for the brain injured child. It would be hard for him to see continuity in this way.

The lessons include material from both the Old and the New Testament. In some units the lessons skip back and forth. Skipping back and forth would be confusing. It would be better to center on Jesus. The application lessons which are included are excellent. They bring the Bible truth into the life of the child. These lessons include the type of questions which these children ask.

#### E. Summary

##### 1. Environment

The setting for any lesson with the brain injured hyperactive child is very important. It must always add to the lesson, it cannot be considered neutral, because it is not neutral to the child. The setting may be the teacher's ally or foe. This chapter suggest that the teacher first go to the child's home and teach him.

The environment in the Church should be simple. A quiet, almost drab room with covered windows would be best.

##### 2. Content and Goals

The lessons should begin with helping the child to understand the world around him in terms of learning vocabulary and his own relationships with things in the world, and with God, the creator.

The child can learn to love to go to Church. He can begin to learn that peOPle are an important part of the Church. He can

learn to want to go to Church and identify himself with a particular Church.

The Person and Work of Jesus should be the main content of the lessons once the child has come to feel at home at Church.

### 3. General Criteria for all lesson material.

The lessons should contain material which is:

- a. highly structured,
- b. appealing to all the senses,
- c. intensified in sensory appeal ( bright colors, large letters, loud noises),
- d. designed to allow for motor involvement ,
- e, concrete,
- f. related to the child's own experience,
- g. repetitive,
- h. broken into small attention units,.

The brain injured child cannot be expected to learn many new ideas in a short period of time. The child will however be able to develop good attitudes and increase his motivation to learn more.

Some churches may find it impossible to provide a special class for the handicapped. It may be that if the brain injured child is able to receive some individual lessons and have special materials he would be able to benefit from being in a regular class. It would not be advisable to plan on this however, because it is not likely that the child would be able to follow class discussion.

No program will be effective without reinforcement form the home. The lessons which follow endeavor to include the family.

APPENDIX

Sample Lesson Plans

Sample Lessons  
from  
a  
Beginning Unit  
for  
Brain Damaged Children

This unit is designed for use with children who cannot participate in a regular class because they have learning problems or behavior difficulties.

The teacher of the material is advised to work in a room with little or no decoration. The child should be able to concentrate on the material at hand. The teacher may find it advisable to turn the child's desk to the wall. If the child is in a group, each should have his own desk. It will<sup>be</sup> helpful for the teacher to speak in a loud clear voice.

It is important to remember that these children are highly excitable and therefore they should not be called abruptly or in any way startled. The child will do best if he knows what is expected of him. It may take quite a while for a routine to be established if the child has a class only once a week. The writer has found it helpful to write to the children in the middle of the week and simply review the activities which take place in class. In writing to the children, as in all lesson content, the material should be structured in such a way as to give the child clues as to what the important ideas are. The clues in the letters consist of the size and colors of the words,

Dear

John,

We were so happy to have you  
with us last Sunday.

We will be looking for you next Sunday.

We will sing.

We will study about Jesus.

We will color.

We will be looking for YOU.

Tell your brother the story you heard last week.

Sincerely,

These letters can contain review exercises. The review helps the child to learn by repetition and also serves to involve the child's family in his spiritual growth.

The lesson time will vary. The lessons which are planned for the child's home will be shorter than later lessons. If the child gets restless the activity should be changed. The teacher should however, be in charge and be firm.

## Lesson One

At Home

Creation

God Made You

### Aims:

- 1 To establish rapport.
- 2 To learn by observation how the child reacts.
- 3 To encourage the child to communicate.
- 4 To present the idea that God knows and cares for the child because He made the child.
- 5 To help the child see his relationship to others.
- 6 To see the parts of and the whole family.
- 7 To help the child to see that God cares for his family, and for him through his family.

### Materials:

Colored paper  
Paste  
Photographs of each member of the child's family or pictures from magazines of people corresponding to his family.

### Activity:

#### Motivation

These children ask a lot of questions. The teacher should be prepared to have the child ask about her. The teacher should have pictures of her own family to show the child and to use to introduce the concept of family. The child will probably ask for a lot of information on his own.

#### Lesson

( Structured material and motor activity)

Ask the child about his own family. Bring out a picture of each member of the child's family. Encourage the child to talk about each one.

As this is done let the child paste the picture on a previously prepared piece of construction paper. The teacher should label each picture.

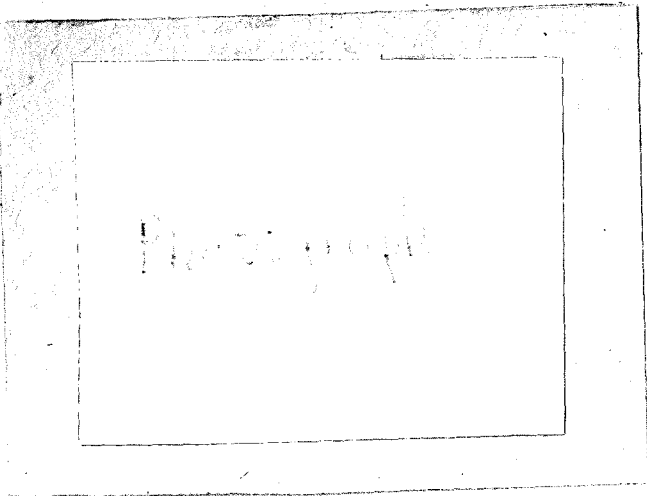
These should then be pasted on a larger piece of paper which is labeled " Family".

At the bottom of the board place cards which refer to each member of the family. The card should match the background of the picture. The child can associate the color while the teacher reads the words, if he cannot read.

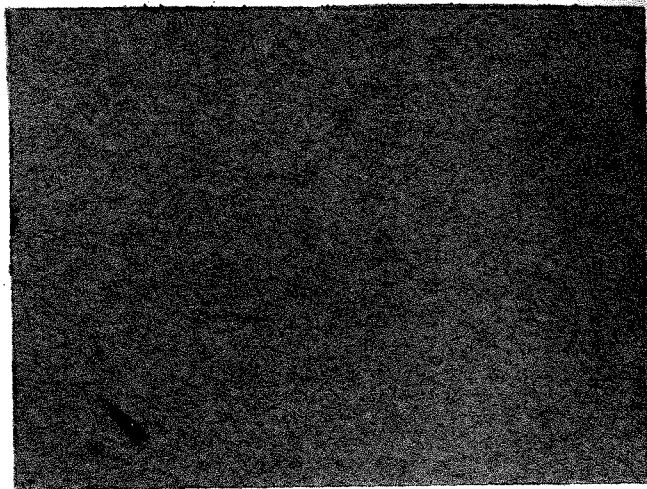
Close the session in prayer for each member of the family.

Leave the material for the parents to review with the child.

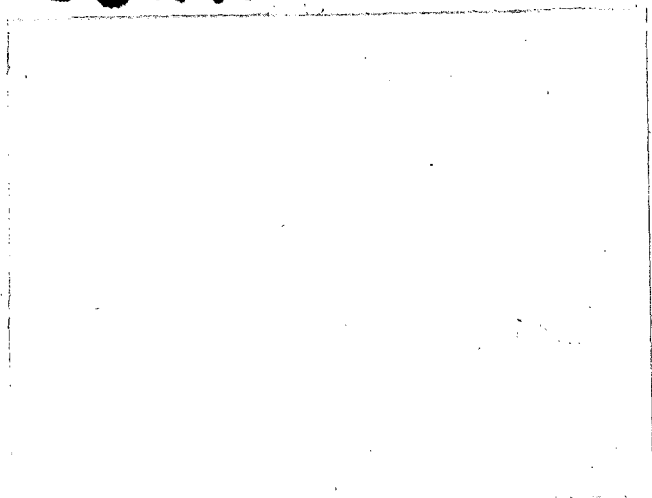
Mother



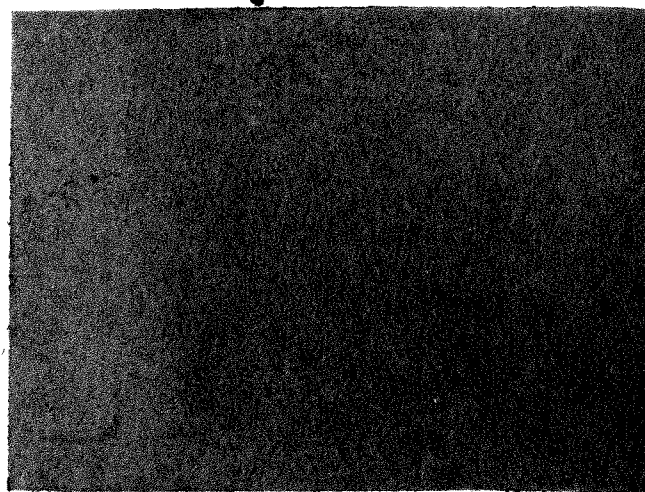
Father



John



Mary



God loves my family

Lesson Two

At Home

Creation

God Made the World

Aims:

- 1 To continue to establish a relationship with the child.
- 2 To develop vocabulary.
- 3 To help the child recognize new words in a context.
- 4 To establish the fact that God made the life he sees around him.

Materials:

Colored paper  
Bright, simple pictures  
paper to write on  
large crayons

Activity:

Motivation

Take the child out for a walk. Notice and comment on such things as:

animals	lake
trees	flowers
grass	sun
sky	birds

Let the child touch and smell some of these things. Let him listen to the birds. Help him to perceive as much as possible.

Lesson

( Motor Activity and Structured Material )

Let the child paste pictures of the various things he has seen in a scrape book, as the teacher shows a picture of each object and the name of each.

Write on a poster-"God made\_\_\_\_\_." Have the child fill in the blank with either the picture or the word or both.

If the child reads the Bible verse " God made all things." Rev. 4:11 may be used.

1

Song: Who Can Make A Flower



Picture  
of  
Flowers

made

## Lesson Three

At Home

The Church

### Aims:

1. To acquaint the child with the church routine.
2. To prepare the child to go to church for lessons.
3. To help the child to construct sentences.
4. To motivate the child to try to remember.
5. To help form concepts.

### Materials:

Pictures of several churches and other buildings.  
A picture of the child's local church.  
Paste  
Construction paper

### Activity:

Motivation

( practice in conceptualization and generalization)

Let the child look at the different types of buildings.

Ask him to try to put all of the same types of buildings together.

Have him place all of the churches on a large piece of paper in outlined spaces.

Have him, or help him to write " Church"

Show him the picture of his local church and help him to mount it and to label this " My Church".

Lesson

Ask him what people do in church.

Make up a series of sentences to introduce the words, " sing", " pray", "talk about Jesus".

Let him fit these words and phrases in to the form

" In church we \_\_\_\_\_."

To develop memory:

Tell him that if he remembers, next time he will be taken to visit the church.

## Lesson Four

### Church

#### Visit

#### Aims:

1. To introduce the child to the church building and the class room.
2. To help the child feel welcome at church.
3. To help the child identify with Jesus.

This experience should be planned when there is no meeting going on in the church. If at all possible the pastor should be there to greet the child.

#### Activity:

On the walk over to the church tell the child the story of Jesus' trip to the "church". Before going into the church tell the child that there is a verse in the Bible that says "I was glad when they said unto me let us go into the house of the Lord." After the child meets the pastor, let him visit the class he will go to. Help him to feel at home. Let him ask questions about the things he notices.

Lesson Five

At Home

Church

Jesus Goes to Church

Aims:

1. To continue to prepare the child to go to church.
- 2 To give practice in word recognition and reading.
- 3 To give practice in self expression.
- 4 To help him see a sequence of events.

Materials:

On strips of poster paper have the following sentences:

- 1 Jesus was 12.
- 2 Jesus learned about God at home.
- 3 Jesus learned that God loved him.
- 4 Jesus went to Church.
- 5 Jesus learned about God at Church.

Activity:

Show a picture of Jesus at home and have the child read the first two sentences. If the child cannot read help him to recognize the underlined words. Help him to make the association with the picture.

Show a picture of Jesus with His parents and discuss the third sentence in the same way.

Show the child a picture of Jesus in the Temple and repeat the same procedure.

Ask the child to make up a story about his trip to the Church. Encourage him to remember as much as he can. Write up the "story" of his trip to church.

## Lesson Six

At Church

Life of Jesus

### Jesus and the Children

#### Aims:

1. To introduce Jesus as one who is a friend to children.
2. To motivate the children to want to hear more about Jesus.
3. To help the child follow a sequence of events.
4. To introduce the Bible as a source of stories.
5. To learn what the child already knows about Jesus.

#### Materials:

Bible- open to show source of story

Stick figures of: Jesus, Disciples, Parents, Children

Plain background

Scenes to be constructed:- also have pictures of these scenes

- 1 Jesus teaching
- 2 Disciples talking to parents and children
- 3 Jesus with children

#### Activity:

Motivation

Show figure of Jesus and ask the child to tell what he knows about Jesus.

Explain that Jesus was well liked and people went to hear Him speak.

( This lesson could not be the first lesson for a whole group. The first time a group of these children are taught together it would be wise to include a short filmstrip and a short time to get acquainted and sing.)

#### Lesson

Scene 1: Here is Jesus. He is outside. He is talking to many people. Jesus tells the people about God. The people like to hear Jesus.

Scene 2: Here are some children. The children say, " We want to go up and talk to Jesus. We like Jesus." The men say, " Jesus is busy now. Jesus is talking to the grown-ups." The children are very sad because they wanted to talk to Jesus.

Scene 3: Jesus saw the children and said, " Let the children come to me. I like to talk to the children." The children were very happy and they ran to Jesus.

Put out the three pictures of the three scenes and ask

the child to put them in the correct order. Try to help him tell what is happening in each scene. Have him color the pictures and the paste them in a " Bible Story Book"

Songs: Jesus Loves Me  
Jesus Loves the Little Children of the World

Prayer: Thank you Jesus for loving children.  
We are glad that we can come to Church to learn about You.

Amen.

Lesson Seven

Life of Jesus

At Church

Jesus Still the Waves

Aims:

- 1 To continue to help the child come to know Jesus.
- 2 To relate Jesus to the Bible.
- 3 To help the child to see the power of Jesus.
- 4 To help him see that Jesus cares for people, and is worthy of trust.
- 5 To help the child to listen.

Materials:

- Story of Jesus stilling the waves. The story must be written so that it has many repetitions of the essential facts.
- Pictures to show as the story is told
- 1 Picture of men fishing
  - 2 Picture of Jesus sleeping in the storm
  - 3 Picture of Jesus stilling the waves
- A frame in which to insert the pictures

Activity:

Tell the story:

One day Jesus was with His friends in a fishing boat. Jesus was very tired. He had walked and walked that day. He was very tired. He was so tired that He sat in the back of the boat. He said, "I'm so tired that I think I'll take a nap right here in this fishing boat."

Jesus' friends started to sail the big fishing boat that Jesus was sleeping in. The men sailed out to the middle of the lake. Jesus kept on sleeping in the boat.

All of a sudden the sky became dark. There were big clouds in the sky, and it was very dark. The sun was covered up and it almost seemed like night.

The men began to hear a noise in the sky. Do you know what it was? It was thunder. The men heard loud

thunder. Then they felt rain. There was thunder and rain.  
Then a big wind came and rocked the boat.

Jesus was so tired that He kept on sleeping. The men saw the rain and heard the thunder. The men were afraid. They said, " This boat is going to tip over! " Then one of the men said, "Jesus will take care of us." They were afraid and they asked Jesus to help them. They woke Jesus.

They said, " Jesus wake up." Jesus got right up. He came right away. Jesus looked at the water. He saw the big waves. He saw the black sky. He saw the rain. He heard the thunder. Jesus was not afraid.

Jesus looked at the storm and said, "Stop it."

All of a sudden the storm was gone.

Discuss:

Tell the child that Jesus can help them.

Ask the children what things they are afraid of.

Sing: " I will trust and not be afraid."

Prayer:

Jesus, sometimes we are afraid of \_\_\_\_\_.

We know that you are not afraid.

We know that you are with us.

Thank you for taking care of us.

Amen.



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