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Movement and Drama

with

Mentally Retarded Children

in the United Kingdom

A survey of recent literature and current practices.

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JOHN A. HALE

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A B S T R A C T

In Part One the definition of mental retardation, as formulated by the American Association on Mental Deficiency, is adopted and examined in relation to the needs of mentally retarded children. The definition is seen as useful in that it emphasises current adaptive behaviour, avoids etiological considerations, and sees prognosis as a function of associated conditions together with treatment and training opportunities.

The child's view of himself vis-à-vis the world at large is discussed, particularly as it relates to his and society's expectations. In developing the discussion it becomes imperative to analyse those concepts which appear to describe the child's mental, physical and emotional states and which are thought of as motivating his behaviour. Such concepts include the self-concept and self-esteem; failure and success as personally felt and socially observed phenomena; emotional security, displacement, competence and effectance; sensitivity to external cues and a generalised defensiveness; imagination and creativity.

Part Two investigates the expressive arts in general and drama and movement in particular for the mentally retarded child; their place in his life by right and as a therapeutic mode.

There follows a comparison of proposals and techniques (and their underlying rationale) for drama and movement as advocated by some important teachers and writers, and those they have influenced. Movement as the common denominator of all human activity is discussed and, in conjunction with drama, is offered as establishing and supporting a sense of valuable identity.

The relationship between the capacity for emotional experience and the opportunity for such experience is probed; earned success emerges, from the writers' views, as a corner-stone for the strengthening of self-esteem and the consolidation of emotional security.

A description of a selection of practical movement and drama sessions in which the present writer has been involved forms Part Three of this study. Work described includes one-to-one foundation movement with severely subnormal children (SSN); movement with autistic children; group role-play with SSN children; free drama and one-role sessions with moderately subnormal children (ESNM).

P A R T O N E

Mentally Retarded Children:
conceptual considerations

Before embarking on an elucidation of important concepts - mental retardation, self-concept and emotional security - as they relate to the present study, it seems appropriate and valuable to attempt a descriptive analogue in order to establish the climate, the predicament under which the real subjects of this work - mentally retarded children - have their being.

This predicament was brought home forcibly to the present writer at the recent production of a pantomime. The matinee audience was made up of six hundred children, among them pupils of a hospital school for the severely subnormal. One such boy - an adolescent with the chromosomal abnormality usually termed 'cri-du-chat' - paused in the foyer before the open door to the already filled auditorium. Inside, music was playing: coloured lights flickered in the semi-darkness. He began to scream, lost bladder control and struggled fiercely with his attendant. He was returned to the hospital bus.

The analogy to be drawn is milder, less dramatic, but will, perhaps, allow us partial access to the difficult life situation that the mentally retarded cope with daily.

A newly arrived non-English-speaking normal migrant child from a culture very different from this (i.e. in this case, the Australian culture) is placed in a large local school. In many ways he must feel and act as if he were retarded in his handling of what will be a daily trial. His attempts at communication will be tentative. He must watch carefully for signs and cues from those he meets and from events surrounding him in order to respond in an appropriate way. He must rely heavily and trustingly on others for guidance. He will need their intercession on his behalf. He will avoid those situations where failure seems inevitable (and where continual avoidance would compound his failure). He will be extremely dependent upon his family life, and, because he is not retarded, he will gradually (probably quite rapidly) learn to assimilate and accommodate to his new world.

At first he will use defence techniques - pretending understanding, feigning indifference, avoiding confrontations and so on - to an extent that was quite unnecessary in his 'own' culture. Gradually, if all goes well, the need for such subterfuge will disappear.

For the retarded child, however, these needs are constant - even in his homeland.

Robinson and Robinson (1976, p.180) propose a similar model based on their own frustrating experiences as unaccustomed and non-French speaking visitors to France.

This is not to say, of course, that the mentally retarded child does in fact act in this way, but that this description is analogous to the demands of the social and intellectual milieu in which he lives. And whether or not the foregoing is illustrative of the human condition of retardation, it does point to a need for a closer analysis of that concept particularly as it relates to the current study.

The problem of a lack of agreement among the various disciplines - medicine, psychology, sociology, for example - on a general definition of mental retardation is unlikely to be finally resolved to the entire satisfaction of all. For the purposes of this survey, however, the extensive and clearly formulated deliberations of the American Association on Mental Deficiency (AAMD) provide a valuable baseline. The AAMD, as an interdisciplinary organisation of professional workers, has accommodated in its revised manual on terminology and classification (Grossman, 1973) the various attributes that specialists working in the field of mental retardation, not only in the United States and Canada but also in the United Kingdom, have found acceptable and useful.

The manual's descriptive extension of each of the key terms in its broad definition is also apposite in relation to the literature and approaches here discussed.

The broad definition states: "Mental retardation refers to significantly subaverage general intellectual function existing concurrently with deficits in adaptive behaviour, and manifested during the development period" (Grossman, p. 11). Significantly subaverage intellectual functioning refers to performance which is more than two standard deviations from the mean or average of those standardized tests developed for assessing intellectual functioning. On the Stanford-Binet and the Wechsler tests of intelligence this represents I.Q.'s of 67 and 69 respectively. The definition denotes "a level of behavioural performance without reference to etiology"; not, therefore, distinguishing between retardation associated with psychological influences and that associated with biological deficit. Extremely important for the purpose of this survey, mental retardation is seen as "descriptive of current behaviour and does not imply prognosis", which is related more to

such factors as "associated conditions, motivation, treatment and training opportunities" than to the retardation itself.

The upper age limit of the developmental period is placed at 18 years, and adaptive behaviour is defined as "the effectiveness or degree with which the individual meets the standards of personal independence and social responsibility expected of his age and cultural group". Thus, as expectations vary, so will observed deficits in adaptive behaviour at different times. The definition acknowledges that "an individual may meet the criteria ... at one time in his life and not at some other time. A person may change status as a result of changes or alterations in his intellectual functioning, changes in his adaptive behaviours, changes in the expectations of the society, or for other known or unknown reasons" (Quotations are from Grossman, pp. 11 - 14; emphasis added).

The AAMD definition is basically orientated towards defects or deficits in the person, rather than to his social role or status, or towards characteristics of the environment with which he must cope. Against this must be counterposed the emphasis placed in their programmes, by most of the writers and practitioners to be discussed, upon the similarities between normal and retarded individuals.

Kolstoe (1972), discussing mental retardation from an educational viewpoint, points out the benefits to be gained from dwelling on what the retarded child can do. "Rather than describe retardation in terms of poor memory, reasoning, and so on, educability, for example, implies the ability to deal with concrete objects using thought processes of form constancy, class inclusion ..." (pp. 23 - 24). The viewpoint here developed is a positive description of the condition, and is in keeping with the positive nature of work in movement and drama.

In its discussion of adaptive behaviour, the AAMD focuses attention on those skills "essential to cope with the environment ... self-directed behaviours, social responsiveness and interactive skills". As will become apparent, the writers and workers here discussed take a firm stance in proposing that drama and movement with the mentally retarded offer a strengthening of self-esteem and an opportunity to share an active experience with others in a highly 'social' setting.

The condition described is an intellectually limiting one, which is necessarily reflected in social behaviour (a clear indicator of self-concept);

obviously that limitation is not seen as 'good' or 'bad', any more than can a sensory deficit. Furthermore, the acceptability or unacceptability of the current behaviour of a mentally retarded child is, of course, finally a function of the 'normal' person's view of what is good and acceptable. Szasz (1970, 1972) and Laing (1965, 1966, 1969, 1970) have upheld vehemently a similar position in relation to mental illness. The work here described and the theory on which it rests takes cognisance first of the internal needs of the individual child; secondarily, there is almost certainly a 'spin-off' in amelioration in social effectiveness.

Appropriate to our discussion also is the AAMD's observation that mental retardation is descriptive of current behaviour. In practice it is apparent that the level of arrest, as denoted by social responsiveness, varies, often markedly, from day to day (high-lighting again a similarity between the normal and the retarded). One hears in the Special School comments as, "Sue is having a good day today" - which does not mean that she is being a 'good girl', but rather that her integrative powers are working more harmoniously and happily than often for her.

Work in drama and movement as here described attempts to encompass the developmental and fluctuating nature of the cognitive and affective realms in mentally retarded children, and, in keeping, proposes work-contents consistent with their whole needs at that moment - that is, mode and materials are appropriate to what the child can do or be encouraged to do.

The AAMD's avoidance, in its amplification of key terms used, of specific differentiation of mental retardation from other childhood disorders, such as childhood schizophrenia or brain damage, is also appropriate to this survey. Robinson and Robinson (1976, p. 31) point out that a number of authors have suggested abandoning altogether such differentiation during childhood. And on this point, it is salutary to note that approximately 65 per cent of all cases of mental retardation still have to be placed in the 'unclassified' group, there being no evidence of structural or biochemical abnormality (Hallas et al, 1974, p.46).

Having stated above that work in drama and movement takes cognisance first of the internal needs of the individual, it becomes imperative to clar-

ify what is contained in the notion of 'self-concept', which in turn will establish, as a working premiss, what is here meant by emotional security.

Speaking of man in general, Lecky (Moustakas 1956, p.89) points out that the individual sees the world from his own viewpoint, with himself as centre. Introspection, a lawful occupation again in psychological circles, quickly reveals the validity of Lecky's statement. Without needing to take issue with his humanistic, anti-mechanistic standpoint, one can further assert that the nucleus of the system, around which the rest of the system (the world out there) revolves, is the individual's valuation of himself. It is this valuation and all that it implies, particularly in terms of the individual's response to the world at large, that is here subsumed under the notion of self-concept.

Research evidence is by no means unequivocal in the realm of the self-concept of mentally retarded children. Psychological and sociological research, with its need for objective observation and measurement, has necessarily taken the self-concept as a fact, having an objective existence in nature. Is it not, perhaps, an artefact, what Lowe (Evans 1968, p.259) calls "an epiphenomenon of deeper reality", which man has fashioned that he might better study his behaviour?

It is probably because of the epiphenomenal nature of the construct 'self-concept' that research with mentally retarded subjects has tended to be somewhat serendipitous, emanating as it does from the disparate theoretical views of the researchers regarding personality development and from their success (or otherwise) in devising appropriate research measures.

Self-report as a mode of revelation of the 'true' self does not, on the whole, suffer the Watsonian stigma of a few years ago; and it is, of course, by self-report as response to a questionnaire that assessments of the self-concepts of mentally retarded children have been attempted. A useful summary of this research is contained in Robinson and Robinson (1976, pp. 179-195). Clearly such work is fraught with difficulty and inconsistency, as is any attempt to encompass and encapsulate humanness. The scathing and perhaps over-enthusiastic comment by Chapanis and Chapanis, quoted in McCandless (1967, p.285) in relation to such research with normal individuals gives pause for thought: "the experimental manipulations are usually so complex and the crucial variables so confounded that no valid conclusions can be drawn from the data".

One must also question the ethics of researchers determined, for example, to demonstrate the power of the expectancy of success or failure as a mediator of behaviour. Robinson and Robinson (1976, p.188) call attention to an investigation by Zeaman and House in 1963 which subjected retarded children to a long string of failures. The subjects were eventually so beaten by the experience that they were unable to solve even simple types of discrimination problems which they had previously been able to solve with ease. One hopes that the inevitable weakening of their self-concepts was short lived.

Notwithstanding the foregoing, however, the often insular research does highlight various aspects of self concept in the mentally retarded that have a direct bearing upon the theoretical and practical work discussed in this study later - not least, that there is abundant evidence of individual differences among retarded children, who probably vary as widely in personality and adjustment as do the nonretarded.

Further, as a group, retarded children tend to be more anxious, and many have come to expect failure as a way of life, and have learned to defend themselves against it. An interesting and unusually controlled study (Gorlow, Butler and Guthrie, 1963) lends credence to the view that the retardate, with his experience of constant failure to meet the demands of society, is unduly preoccupied with defence of self. It appears, also, that retarded children are developmentally slow to internalise conceptions of success and failure as the product of their own doing, and are extremely sensitive to external cues. They tend to be passively conforming, and, conflicting evidence notwithstanding, they tend to value themselves less and are more defensive than nonretarded children (adapted from Robinson and Robinson, 1976 pp.179-195).

Of prime importance as a component of self-concept and determinant of social behaviour then is the expectancy of failure, a component that demands further discussion in the subsequent section. Kolstoe (1972) points out, "Since the self-concept of each child will ultimately determine whether he will become essentially a failure-avoider or a success-striver, the development of the ability to handle failure experiences without becoming devastated looms as a major goal. Unearned success experiences seem to be as ineffective as continual failure in helping the child" (p.205). (Work in drama and movement is here seen as promoting 'earned success'.)

William James, in his Principles of Psychology, published in 1896, wrote succinctly of the web of interrelating forces that create in us a view

of ourselves: "... a man's Self is the sum total of all that he can call his, not only his body and his psychic powers, but his clothes and his house, his wife and his children, his ancestors and his friends, his reputation and works, his land and horses and yacht and bank account" (Vol. 1, p.292).

In a sense, the mentally retarded child's 'bank account' in life is perpetually in the red. The comfortable view of such a child at once appealing and romantic (like those currently popular mass produced paintings of a child, down whose 'innocent' face a large tear drop is forever trickling) which sees the child as growing like a hedgerow flower in innocence, contentment and trust, does not appear to be borne out by the facts. Any worker in the field of special education will know that such children are often swamped by feelings of anxiety, rejection, hostility and unworthiness - just as nonretarded children are. The self-defeating techniques the mentally retarded child develops - withdrawal, aggression, disinclination to test out the unknown, and so on - are a reflection of his self-esteem as he struggles to accommodate to a confusing world.

To put it another way, the way he views himself becomes the way he views the world. Alan Davie, a teacher in special education of many years standing, writes of the mentally retarded that "Their inner reality is to them as real as, or more real than, outer reality. This inner reality is projected so that their environment, particularly the classroom and all its contents, becomes an extension of each child's world" (1971, p.73).

The core of that "inner reality" is here seen as the child's valuation of himself; a low self-esteem, confronted by Davie's "outer reality", creates a negative feedback loop and a further lowering of self-esteem unless experiences are provided that enhance self-worthwhileness. Such experiences, to be discussed later, may be simply to promote an awareness that one's body and one's 'self' are reciprocally related. (My hand moves: I move my hand.) They may be concerned with the opportunity, the necessity even, to make a decision, to initiate action, rather than to accept passively the comfortable and well-meant directions of others.

Few would deny that a realistic self-appraisal is desirable; but an accurate perception of one's competence, low or otherwise, should run parallel with a feeling that one is worthy in one's own right.

Anderson and Messick (1974) state "Here is a case in which the goal is

not necessarily to develop higher and higher feelings of worth but rather to avoid any instances of extremely negative self-deprecation" (p.289). The current study, however, will suggest that the provision of positive yet self-evaluatory experiences in drama and movement can at the same time ameliorate feelings of worth, creating a 'positive feedback loop' in relation to the world at large. Carp (1960) has said that much of the anti-social behaviour found in retarded children is as a result of the child's reaction to being treated as less than human.

The belief that one is worthy in one's own right is clearly a *sine qua non* for emotional security. Research and theory are more complete and sophisticated for social than they are for emotional development, where, as McCandless (1967) demonstrates, the 'science of human behaviour' (sic) is still quite primitive (pp. 436-46). But we are not so much concerned here with emotional development as with a general emotional stance within which various emotional states or instances will occur and interrelate.

A simple but self-denying emotional security can, of course, be engendered in the mentally retarded through overwhelming protectiveness - a swamping of the desire to initiate action, take a decision, test out potential ability (creative, physical, imaginative, and so on). But as Hallas et al (1974) point out, "we do not promote the mentally handicapped to incompetence" (p.7). Emotional security at the expense of the opportunity individually to strive must quickly dissipate when it is faced with the demands of the world beyond the school's protective environment.

Speaking of normal personality development, Angyal (Moustakas, 1956) seems accurately to sum up also the position described above in relation to the mentally retarded child: "... the self-determination of a person may be impaired by trading the birthright of mastery over his own destiny for the mess of pottage of protection - and dependency. In addition to the assumption of his weakness, an overvaluation of the power of ... protection ... induces the child to make this fatal bargain" (p.53).

This is not, of course, to argue against protection of the mentally retarded child from exploitative and damaging forces (a major premiss under the terms of the British Mental Health Act of 1959), but to support conditions where the opportunity for personal growth and enhanced self-concept can flourish, and where activities demanding, amongst other things, individual effort and the need to dare to go beyond immediately available competence

can lead to a feeling of earned success, whilst also consolidating feelings of security. It is in this context that the concept of emotional security is offered.

The non-retarded child dares (through exploration, imagination, role-play, for example), and pushes out his immediate horizons secure in the knowledge that should things get out of hand, help will be forthcoming. Curiosity is supported and tempered by a basic security. Not only does the retarded child have the same security-need, but also, as proposed by the writers and workers here discussed, he has, within his limitations, the potential, the urge even, to explore, expand and create his universe. Work in movement and drama is offered as one way, amongst many, by which, mutually and reciprocally, the self-concept may be strengthened, self-esteem raised and emotional security consolidated.

In this regard it should also be stated that research generally into the 'simply mentally retarded' has been unsuccessful. Webster (1970), for example, reports that "Efforts to find a child who was simply retarded, one who was developing just like other children except more slowly, were in vain. Even those retarded children who showed the best emotional development were not comparable to non-retarded children of the same age" (p.17). In the light of this, work aimed, inter alia, at promoting and consolidating emotional security would seem to have a direct bearing upon the happiness and development of mentally retarded children.

Whilst the compass of the current study does not allow detailed analysis, the present writer believes that two concepts - displacement and effectance - demand at least acknowledgement in that, in his view, they are integral to an appreciation of what has been previously referred to as the 'predicament' of the mentally retarded child.

Francis Braceland, writing under the heading "Emotional Problems of Contemporary Life" in Torrance and Strom (1965), makes the point that whilst "it is true that we are normally and naturally concerned about everyday worries, ... it is also known that there is a phenomenon called 'displacement' and by means of it we can change the focus of our worries from more difficult, disagreeable and painful problems to much smaller and more harmless ones, and by accenting the latter forget the larger issues" (pp.32-33; emphasis added). Observation of mentally retarded children indicates that such a change of focus is often beyond them, forcing them into the unenviable

position of frequent concentration upon "difficult, disagreeable and painful problems".

The present writer knows of no published research directly to support or invalidate this observation, though he believes it would be borne out by teachers in the field. It would follow that such an inability would not be conducive to a strong self-concept, would widen the disparity between, to use the terminology of 'normality', 'self' and 'ideal-self', and would be debilitating of emotional security. The issue is raised here because movement work and drama are seen as both involving and extending the individual and as providing an arena in which he sees himself as part of a group with corporate interests or with a common problem to solve. Such work may, in a sense, force displacement upon the individual child, enabling him to seek beyond the thoughts and worries that may beset him.

The concept of effectance is closely allied to that of competence, "the organism's effectiveness in its interaction with its environment" (Robinson and Robinson, 1976, p.181). Effectance is concerned with the human being's - and particularly the child's - constant engagement in increasing and sharpening his ability to deal with the world. Robert W. White, cited in Robinson, points to effectance motivation which underlies normal children's sparetime activities, their exploration and their manipulation of events and people, their trying out, changing and attempting to control the world about them.

He makes the fundamental point that such activity occurs only when the child's physiological needs are reasonably well satisfied. The present writer would add that of equal foundational importance is the child's emotional security.

Harter and Ziegler (1974) have reviewed the available body of research in effectance motivation. What most clearly (and rather obviously) emerges is that mastery produces pleasure and that "the greatest pleasure is derived when a task is optimally challenging" (p.169). Mentally retarded children, however, typically meet tasks which are so difficult for them that there can be little pleasure in accomplishment, if and when attained. We are back to the "wind knocked out of their sails" condition. Harter and Ziegler's comment about optimally challenging tasks is extremely appropriate to this study, for work in drama and movement with mentally retarded children is held by its practitioners to be both joyful and optimally challenging.

P A R T T W O

Approaches to Movement and Drama
With Mentally Retarded Children.

"That creative activities serve as a means for emotional release and adjustment, that they promote the independence and flexibility of thinking, that they can be used for group dynamics and social interaction, has not yet penetrated the thick walls of most of our institutions. Happiness apparently is still a luxury which handicapped people cannot afford in a materialistic time, in which the education of the handicapped is almost exclusively geared toward preparation for making a living" (Lowenfeld 1957, p. 431).

"Art, music, drama and dancing are increasingly used therapeutically in work with handicapped children. Therapists working through the arts are concerned with the child's emotional life. Through mainly non-verbal forms of communication they seek to build a relationship which fosters feelings of self-confidence. These techniques are particularly valuable with severely retarded, non-communicating and emotionally disturbed children. They help to develop self-expression, enable the child to cope with anti- and asocial emotions and prepare the retarded child for a learning situation" (Young-husband, 1970, pp.272,3).

Thirteen years separate the above quotations. The first comes from the United States, from Viktor Lowenfeld's Creative and Mental Growth, and the second from Britain, from Living with Handicap, edited by E. Younghusband for the National Children's Bureau. They do not so much illustrate differing national attitudes, but rather point to the development of thinking generally in regard to the expressive arts and their place, by right, in the lives of handicapped children and adults.

Nevertheless the observation can still be made, for example by Schattner (1971) that "The emphasis today is still on rehabilitation and on helping the child to become merely a self-supporting, well-mannered member of society" (p.56). The word "merely" is clearly intended to imply that the handicapped, like their happier-placed confrères, do not live by bread alone; for "self-supporting" does not here mean secure in one's self, but capable of taking whatever position in the economic, materialist world at large.

Sue Jennings, editor of Creative Therapy (1975), points out that the focus in Western society on verbal methods of treatment in, for example, psychoanalysis, psychotherapy and counselling, has led to viewing non-verbal approaches as means to an end (some vaguely defined and usually socially-orientated amelioration) and not as having value in themselves (p.28). In a previous book, Remedial Drama (1973), of which she was author, Jennings

speaks of "the therapeutic value of creativity itself" (p.42), and she is, of course, only one in a long line of such commentators.

Jennings goes further, claiming that non-verbal means of therapy provoke much anxiety on two counts: first, "... we do not feel comfortable unless we can understand through reductionist means, communication through art, music or movement. There seems to be difficulty in accepting them as other dimensions of communication. Also, there is a pressing need to make a verbal interpretation of symbolic non-verbal communication" (1975, p.28).

The second level of anxiety is mainly concerned with the physical action of the body. The body may be utilized in therapy provided someone else is 'doing' the therapy - e.g. electro-convulsive shock treatment.

Violet Bruce (1969) elucidates this anxiety further. "It is perhaps because in movement and dance so much arises from the child himself, because dance can allow for the individual to express in his own way, that teachers find the work so frightening. There seem to be few pegs on which they can hang, few border lines or measurements, and a teacher has doubts about an activity seemingly so loosely structured. This is not so, of course, but one must have understanding of movement and a creative attitude toward teaching... for a child who is failing, here is an activity where there are no outside obstacles, no competition, no rigid right or wrong" (p. 162).

This study does not, of course, seek to highlight a finally abortive verbal versus non-verbal approach controversy, but to review those opinions and attitudes that are relevant to work in drama and movement with mentally retarded children. In fact, drama may at any time be verbal or non-verbal, and movement may, of its own necessity, demand vocal, if not verbal, accompaniment.

In her The Educational Needs of Severely Subnormal Children (1971), Mildred Stevens has emphasised that "The need for first-hand experiences and constant repetition of real experiences is greater for a child who is mentally handicapped than for any other group of children I have ever known" (p.12). In the context of this study, movement and drama are viewed as "first-hand experiences". That they often operate in the realm of fantasy does not deny the real involvement of the child.

"In movement, dance and drama", says Audrey Wethered in Drama and Movement in Therapy (1973), "we have a medium through which absorption can be exper-

ience, playfulness indulged, fantasy given rein without becoming too diffuse, and emotions played out without any loss of face" (p. 34).

For mentally retarded children "fantasy is release, enrichment for the imagination, and a way to creativity. Through fantasy they can come to terms with their fears, hopes and thoughts. They are often much less inhibited imaginatively than [normal] children" (Bruce 1969, p.171).

'Imagination' and 'creativity', and particularly their interrelatedness, are concepts that crop up not infrequently in the literature of drama in general. Whilst it is beyond the scope of this study to encapsulate satisfactorily what others have required volumes and life-times to capture, we can say that the realm of imagination embodies that mental activity that releases the thinker from the constraints of his everyday, factual life, and allows him to project himself forward or backward in time and space, to alter his state and to weave about himself a life-fabric, if only momentarily, of his own devising. Imagining is a god-activity - without the entailment of being a god.

'Creativity', on the other hand, implies a bringing into being, an evolvment sequential to and dependent upon thought or imagination. (For our purposes here, we are disregarding claims to spontaneous creativity in such techniques as 'action painting'.) What is created is not necessarily new to the world at large, but is new to the creator.

R. Heavey, headmaster of a special school in Lancashire, England, speaks categorically of the importance of creativity in the total development of the child. He says, "The aims of all teaching when working with the severely subnormal child are to develop, through our teaching methods, a purposeful outlet of creative activity which encourages him to use all his senses in such a way as to help him to overcome his disabilities and foster any abilities he may have" (1973, p.25).

Dorothy Heathcote (1971) sees work in drama as having two significant aspects and aims; the one she defines as 'creative work', the other as 'coping-work'. "Both are significant areas of experience in the developing person" (p.12). As she develops her theme, it becomes clear that these two aspects are equally applicable to children in the entire range of mental ability. Later, during the Sydney lectures of April, 1975 (published as a monograph by the University of Sydney and the New South Wales Educational Drama Association) she refined this point in demonstrating that in drama

(and movement, which is inherent in drama) "the means of expression are the same as the means of reflection, namely the person himself" (p.5). Considerable reference will inevitably be made to Dorothy Heathcote's work later in this study.

Alan Davie (1971), in a chapter entitled "Freedom to Grow", says that "A teacher making provision for the expression of thought and feeling in fantasy will, besides gaining insight herself, be helping children to free themselves from the preoccupations and inhibitions of their inner worlds" (p.74). He goes on to illuminate the "incalculable benefits" a child gains from giving expression to his inner reality.

Davie also makes a very earthy comment which is entirely appropriate to a study of this nature. It concerns the need to guard against over-evangelising, against the 'panacea for all ills approach'. He says:

There has never been a time, in my experience, when great claims were not being made for the success of this or that remedial technique. It will not have escaped the notice of others that the kinds and degrees of success claimed are invariably similar although the techniques themselves are dissimilar or even conflicting. It is my considered opinion that such remedial successes as are achieved are due mainly to one common factor, which is the personal relationship between the teacher and the pupil (p.70).

In this regard the position must be clearly and unequivocally stated.

At no time can the writers and workers to be discussed point to statistical confirmation or even tangible hard evidence that the techniques and approaches they are using, and thereby advocating, do incontrovertibly establish or consolidate emotional security, or greatly strengthen self-esteem, or create the ability to 'displace', or increase effectance-motivation and thereby competence in the children with whom they work. Nor would they wish to. There is no Q.E.D., children not being geometrical figures.

The foregoing represents a cluster of encapsulated, and therefore superficial, opinions on and attitudes towards the place of creative, expressive work in general and drama and movement in particular in the development of all children. It is the present writer's intention now to look more closely at the proposals and techniques of some important teachers (or, as some

would style themselves, therapists), and of those they have influenced.

A return to William James for some quiet wisdom will set the scene.

"My own body and what ministers to its needs are thus the primitive object, instinctively determined, of my egoistic interests. Other objects may become interesting derivatively, through association with any of these things, either as a means or as habitual concomitants; and so, in a thousand ways, the primitive sphere of the egoistic emotions may enlarge and change its boundaries. This sort of interest is really the meaning of the word mine. Whatever has it, is, eo ipso, a part of me!" (1896, p.324).

For the mentally retarded child, the limitations placed upon his environment and his experiences by reason of his disability throw emphasis on what James calls "the primitive sphere of egoistic emotions". But the child (any child) needs to 'appropriate' his own body first in order to grow, in order to feel security, in order to enable the "enlargement" of those egoistic emotions to occur.

William James' felicitous exposition is taken up and remoulded by Hirst and Michaelis (1972):

"Our body is the point of reference from which we organise and construct the relative impressions which we receive into a coherent personality. A false conception of one's body image will result in faulty actions and faulty perception of others. The body image is a learned concept which results from experimentation with body parts and the realisation of their relationship to each other and to the external environment" (p.7).

It is the appropriation of one's body that lies at the core of the work and teaching of Veronica Sherborne.

Her approach and the nature of her work is most clearly demonstrated in the films she has made with her students and their pupils. The films are entitled Explorations (1970), In Touch (1972) and Church Hill House (1976), and their details appear in the bibliography.

In a brilliant and lucid expository chapter in Jennings (1975) entitled "Movement for retarded and disturbed children", Sherborne sets out her beliefs and practice. She says, "Over the years I have noticed that children can make progress in certain fundamental areas as a result of movement experience of different kinds. It is possible to help developmentally retarded children

relate to their bodies, to become more self-aware and more confident. This progress can be brought about by work with a teacher who understands the process by which bodily experiences affect the child developmentally" (p.68).

Sherborne holds that a large number of mentally retarded children can develop socially and emotionally to almost a normal level. Whilst it is difficult to say which bodily experiences will be most useful to all mentally retarded children, all children need security, and "the teacher's main job is to build up the children's physical and emotional sense of security through bodily experiences of different kinds" (p.69).

A child who is secure is confident in himself and trusts himself - what Dr. Walli Meier of the Laban Art of Movement Centre calls "Ownness before otherness". This self-trust is expressed in the way the child relates to the weight of his body - the way he lets his body rest on the ground or the way he lets an adult carry him or swing him. The degree to which he will, or will not, commit his weight is an indication of his self-trust.

It is an essential part of the development of the young child to gain a concept of himself, his weight and strength through bodily experiences which go with and against the pull of gravity - 'the architect of the body'. The mother usually 'feeds in' this sense of weight (and the father, perhaps) and with attendant feelings of concern and affection she also feeds in a sense of his value.

Mentally retarded children often lack this appreciation of weight and value for varying reasons - for example, deprivation of an early, close association with a supportive adult; inability to make, mentally, the integrative link between the parts and the whole of the body; a restricted and restrictive environment which discourages bodily activity and exploration. Exercises with a trustworthy and trusting adult can do much to make up the deficit.

Sherborne speaks of the child's experience of the flow of weight, for which activities involving rolling ("the smallest falling"), swinging, rocking, bouncing, pulling and pushing and playing in water are carried out. It is necessarily a one-to-one experience, for mutual trust and commitment are the aim. "They are most likely to trust an adult who has trusted them" (p.73).

The buoyancy of the body in water makes it a very beneficial medium for learning to trust weight. Some children become more tense, but almost all finally enjoy. The present writer recalls a boy of fourteen whose tenseness

at the pool was occasioned by his firm belief that a tidal wave would occur at any minute, and anyway the water would get into him through his navel. With buoyancy aids and lots of support we eventually made a circuit of the pool clinging on to the rail.

'Centreing' is an important concept, Sherborne believes. "There are two ways in which one can increase a child's sense of security: one is by helping him have confidence in the base on which he is sitting, standing or lying, and the other is by helping him discover the centre of his body as a place from which he can move, as a home he can come back to, as the middle which connects his extremities" (p.76). Curling up activities and elementary somersaults, swinging and pulling as a bundle, and so on, promote his self-trust in a safe, contained, supported situation.

These are whole-body activities; others are designed to promote awareness of the parts of the body, particularly those parts that vanish - knees and elbows. The mentally retarded child seems often dissociated from his extremities. (One has only to see the tip-toe walk of an autistic child to be aware of this.)

For the child confined to a wheel-chair, or who cannot walk, awareness of the parts of the body is very important and requires constant encouragement. (We all know that feeling of having to 're-learn' the body after a sustained period confined to bed.)

"Through helping the child to become aware that his knees, hands, face are part of him, one is strengthening, reinforcing his body image, his body concept" (p.79).

Speaking of locomotion, Veronica Sherborne believes it is important for the child to re-experience the stages which a baby goes through, and to experience some of the stages of evolution out of which man has developed an upright stance.

The momentary weightlessness of a jump is enormously satisfying, and therefore confidence building.

Canalizing of energy involves the focussing of attention, a capacity which is essential to development. "His power of concentration increases with his capacity to organise strength, and these experiences contribute to his sense of identity". (p.84).

'Strong activities lead to sensitive, gentle, caring activities.

"Strength and tenderness are part of our emotional equipment and it is in this area that the adult can help ..." (p.86) and "The way a child moves is a truthful indication of what is going on inside him, and teachers need to read these signals" (p.88).

The activities are enjoyable in themselves for the child and the adult "because people feel more at home with others and more at home in their own bodies" (p.89). "There is no competition, no right or wrong way, everyone is successful in his own way, nobody fails" (p.90). But it is earned success.

It is extremely difficult and inevitably distorting of emphasis to condense Veronica Sherborne's compact writing.

Her beliefs and methods are tested continuously and rigorously by her past students. What she proposes is a body ground-frame on which, once firmly established, can be built more work in more trust. Security in one's own body is the base-line for emotional growth and self-valuing.

"Movement play can develop very easily into dramatic play, into dance, into movement and singing, and into sound making; all activities which the retarded and disturbed child need. I feel the movement experiences provide the core from which the child can develop in many directions" (p.90).

In reading of and practising Veronica Sherborne's techniques one is reminded of Kolstoe's comment: "What seems to be called for is not the avoidance of failure but rather the opportunity to turn failure into success by the application of effort" (1972, p.205, emphasis added).

In another context, but directly related to Veronica Sherborne's provision for a re-enactment of baby-like movements, is the observation by Alan Davie that mentally retarded children (probably all children and most adults) have a need sometimes to regress. He provides in his classroom "small dark enclosed places... made out of large cardboard boxes in which radiograms and washing machines are packed ... The teacher will not know all that goes on inside these dens when children are in them, but she can be sure regressive needs are being met" (1971, p.77).

He speaks also of "regressive movement - climbing, crawling, turning, rising, falling, jumping, bouncing, rolling, rocking, swinging, catching, throwing, punching, kicking. These are invaluable in helping to establish

a sense of self" (p.78). The children he writes about are less severely retarded, but not necessarily older than, the children that Sherborne's 'core' activities are designed for.

It is significant that Mildred Stevens, a highly respected doyenne of many years' experience in the realm of special education in Britain, devotes seven out of ten pages of her chapter titled "General Educational Needs" to the need for movement - both 'free' movement about the school and 'motivated' expressive movement (1971, pp.14-21). She brings a practical and penetrating light to bear on the theoretical position adopted by Veronica Sherborne when she points out that "Many, many handicapped children are still being deprived daily of working through even the basic stages of their gross motor and intellectual development because they are being encouraged to remain at sedentary tasks, by provision of equipment which does little else but encourage sitting down and being quiet all day long" (p.15).

She stresses that the severely subnormal child's desire to move (and this desire will probably require stimulation) should be seen "as a sign of his natural needs, of his level of development and often as showing his curiosity, initiative and growing independence" (p.16).

Bruce (1969, p.161) quotes Patrick Meredith as saying, "The commonest factor about all of us is that each has a living body, the whole of our culture springs from the movement of our bodies". This seems at first something of a sweeping statement but on analysis becomes a truism. Perhaps we who are "at home" in our bodies or believe ourselves to be (which comes down to the same thing in our everyday living experience), accept and ignore its movement rhythms and its general dependability to the extent that we are almost 'disembodied'. On the whole, it is only when we are sick or have an accident or a sudden realisation that the years are creeping up on us that we become 'body-conscious'. It is interesting that the phrase "have an accident" immediately conjures up bodily damage; we do not have an 'emotional accident' or a 'psychological accident'.

These somewhat obvious comments are made to allow attention to be focussed on the primacy of body-image and bodily movement in respect of the total self, the self-concept as discussed in Part 1, of which emotional security is a corner-stone.

Audrey Wethered sees herself as a therapist (rather than a teacher) using the functions of movement and drama as her theoretical and practical

mode. Her work is more in hospitals than in schools, and in the preface to her Drama and Movement in Therapy (1973) she points out that "as yet there is no recognised training for a movement therapist, on a par with physiotherapy or occupational therapy".

Along with others already cited Wethered makes the initial point that "The common denominator of all human activity is, in fact, movement" (p.ix). We are conceived in movement, and, even in stillness, heartbeat and breathing continue.

Audrey Wethered describes the normal development in a baby of its body-image (p. 32), and it is apparent that her reading of that development gives added validity to the type of work proposed by Sherborne for those children who, by reason of the mental retardation and emotional insecurity, have not made this all-important identification.

A fundamental point is that the vocal and movement activities progress interdependently. (This will be taken up later in respect of Dorothy Heathcote's approach). "He finds he can yell and coo, he can hold a hand tightly, he can blow bubbles, he can roll his head slowly or shake it quickly, he can hit out, or curl and twist his legs, using all the kinaesthetic and motor qualities" (p. 32). Wethered quotes Dr. Paul Schilder: "We do not know very much about our body unless we move it. Movement is a great uniting factor between the different parts of our body". In these ways the baby builds up some sense of his own identity. "Gradually he gets the idea he can touch his toes, he wants to roll over, and he finds what he can do" (p. 32).

Audrey Wethered is describing the bringing together of the body, its wholeness and its parts, the mind and their relationship to the external environment - Alan Davie's harmonisation of inner and outer reality, Walli Meier's "ownness before otherness", and the state of being that we recognise as 'me-here-now'.

If the present writer may coin the word, it is the development of 'me-here-now-ness' that underlies and underpins the theory and practice of all the writers discussed in both movement and drama with mentally retarded children. Subsumed under its aegis are all those concepts examined previously: mental retardation, self-concept and emotional security; displacement and effectance; expectancy of success or failure; self-esteem.

Some severely retarded children seem to have a distorted body-image, appearing to themselves quite other than they are. As Wethered says, "... they may think parts of their bodies are out of shape when they are quite normal. They may dislike their own appearance, or may be disgusted by the natural functions; they may feel stiff, tense, awkward or ungainly, or they may feel themselves threatened by any physical contact, even of anything inanimate, and recoil from touching anything themselves as well as from being touched" (pp.50-1).

These last points do propose difficulties (but not, in practice, total barriers) to Veronica Sherborne's approach. Such reticence and recoil is often evident when working with children deemed autistic, who seem so unaware that they cannot tell where they are being touched, or who seem to deny the actuality of their bodies.

The inclusion of autistic children in this study of work with mentally retarded children may require some justification. It rests on the premiss clearly articulated by Cliff Judge in his recent book, Retarded Australians (1975) under the sub-heading "Are autistic children retarded?":

It would be quite extraordinary not to discuss autistic children in a book about mental retardation, even though a number of people consider that autism has absolutely nothing to do with retardation. The only basis for such an opinion is an unfortunate one, namely, that because there are few residential centres for autistic children they must be admitted to hospitals for retarded children. This type of thinking is a gross over-simplification of the problem. It would seem that at present many autistic children cannot be classified as of potentially normal intelligence with any more justification than can retarded children (p.90).

As stated above, the apparent barriers to working in close physical contact with children who find this threatening are not insuperable. Audrey Wethered makes the point that qualities other than knowledge and skill are necessary for such work: a teacher "needs to have the basic qualities of warmth, concern and understanding... but without the capacity to communicate and relate, these can be of no avail" (pp.102-3). She likens this capacity to the old 'bedside manner'; "if really genuine it can inspire confidence, and such confidence can produce an attitude ... which is in itself an assistance towards healing" (p.103).

The preparation for this mutual build-up of confidence and its practical

demonstration are made explicit in Veronica Sherborne's film, In Touch.

Audrey Wethered acknowledges her close agreement with Sherborne by describing segments of the film, almost frame by frame, and the way in which students, with each other and later with severely retarded children, develop a mutual trust and reliance.

A similar evolution is graphically exemplified in the final segment of Dorothy Heathcote's BBC film, Three Looms Waiting (1972). There is one climactic sequence (climactic in the sense that it demonstrates a breakthrough, an acknowledgement of trust) where an autistic boy climbs purposefully up his male partner ("Who's this up my lighthouse?"), and, on reaching his shoulders, smiles.

For Audrey Wethered, "Movement, dance, mime and drama merge into one another, for any dramatic action involves movement, whether in mime, dance or acting ... we can play out our own, or other people's or imagined characteristics, emotions and events, either with speech, or without, as in mime and dance ... In playing a role, we are attempting to portray a character in changing moods and emotions and states ... In such portrayal, excess emotion may be drawn off ... or, by being able to sink the personality in the part, a person may contact other people or find a new freedom. Inner problems may be eased temporarily by absorption in the drama, and so may perhaps be seen more objectively by the participant, relieved of the emotional pressure for the time being" (p.61).

This basic premiss is not, of course, dissimilar from that which holds for any work in drama with any children or adults of whatever capability. Whether or not it holds good for mentally retarded children will be examined later in this study.

Sue Jennings (1975) makes an intriguing point when she suggests that not only does man have a basic disposition to move, but also he is disposed to move rhythmically. This clearly has a bearing on movement work with mentally retarded children, whose movements may be sluggish, erratic, perseverative, bizarre, spasmodic or almost non-existent.

Jennings, who works considerably in social anthropology, is here "reversing the present thinking which tends to say that man needs to dance in order to express himself, or children need to play games in order to channel their aggression" (p.43) - or, of course, that drama is useful because it diverts the children. Jennings says, "If man needs to move rhythmically then this

will be how he orders his universe, i.e. he will work, play and worship developing these [rhythmic] patterns and this will vary between different cultures" (p.43).

If we view mentally retarded children as attempting to order both themselves and their universe (William James' enlargement of egoistic awareness) against a movement background that is, for whatever reason, inhibited or distorted, then it seems realistic to propose movement activities for these children that will promote not only a secure body-image but also rhythmic awareness.

Ferris and Jennet Robins (1972), the founders and proponents of 'Educational Rhythmics', state this position, albeit rather lyrically, as follows:

The universe vibrates. Life is full of movement and every living creature has a rhythm of its own. Perhaps the secret of the universe itself is hidden in this rhythm, if we could only find the key. Watch the rhythm of a child. It is not a complicated vibration but is the essence of simplicity (p.104).

Space does not allow an extensive analysis of the approach, and the language of their exposition tends to obtrude - sometimes vaguely descriptive - "Happiness is motivated by the joy of learning through playful, remedial-therapeutic exercises"); sometimes prickly jargonese - "The principle on which the method is based is that every human being needs to experience what psychiatrist Paul Haun refers to as 'synchronization of efficiency, automation, rhythmicity, alternation and effort' " (p.105). (The article cited is a translation.)

Activities are firmly based on "the natural inclination for rhythm and music", and learning areas comprise the motoric (muscle stretching, relaxing, balance, co-ordination of body movements, counter movements, etc.), the cognitive (concentration, recognition, following directions, up-ness, down-ness, etc.), and the affective, which includes "gain in poise, self-esteem, creativity and imagination; happiness in moving in unison with others and also in self-creativity; enjoyment of learning and doing; satisfaction of co-operating with others; a desire to learn and practise good manners in social interactions ..." (p.105).

'Educational Rhythmics' is being used as a remedial/therapeutic approach quite widely, particularly in Switzerland and the U.S.A., across an extensive

range of childhood physical and mental disability and emotional disturbance.

A teacher in special education in Luxembourg, practising the Robins' approach, endorses it thus:

Through the co-ordination of the components of space, time and movement, it creates a structured awareness of self-concept in 'body-image', and in this way also extends help in the preparation of reading and writing.

Why rhythemics in education lead to great positive results in the remedial efforts is best explained by the fact that it enables us to reach the handicapped child in his totality. This occurs not only through the help of the spoken word and the thoughts behind it, but also especially through music and rhythm which, transformed through the child's body into movement, gives him access to a perception of things which he otherwise hardly, or only with difficulty, can understand (p.109, emphasis added).

A full exposition of the theory and practice of this approach is set out in the founders' Educational Rhythemics for Mentally and Physically Handicapped Children, published in 1968.

Strong support for the need for rhythmic awareness, and indeed confirmation through her own practical work with mentally retarded children, comes from Violet Bruce (1969), who states:

Through movement the child comes to awareness of rhythm involving his whole self. He becomes aware of pauses and stillness, of going and stopping, of movements which flow on into one another. So often these particular children have great need of harmony in their rhythmic lives. Many have never been able to establish their own rhythms whilst struggling with those of the outside world which did not seem to fit. With the assistance of conscious movement phrases, of repetition, of success and pleasure, the rhythm of life might become more established, less erratic, and more conducive to emotional and personal growth. These children may come through movement to a realisation of self, to a self-confidence which allows them to communicate in other ways (pp.163-4).

Work in movement which stresses bodily and life rhythms is usually tacitly acknowledging the debt to Rudolf Laban, who, far from proposing a system or method, insisted rather that his observations of movement and dance led him to a way of working based on the principles underlying all movement, which could be applied in every walk of life - the arts, industry, education, drama, the stage, in therapy and everyday living. Later he became interested

in the links between movement and the development of personality.

Diane Davis (1965), in an article entitled "Movement Therapy: a means to greater awareness", says that "To Laban the only difference between Movement Education and Movement Therapy was that the first uses movement as a tool to maintain, reinforce and widen the natural harmony of the normal person, whereas the second uses movement as a means of remedying lopsided and distorted movement patterns ..." (p.22, emphasis added).

The basic premises underlying such work bear directly on approaches discussed above. They are that "movement is an outward expression of the various inner states ... and thus the practice of movement can affect the inner man and influence his personality and ways of behaving ... and that there is a basic harmony in the movements of man and that this harmony or lack of harmony ... can be discovered and learned" (p.22, emphasis added).

It would seem that 'harmony' as here used is synonymous with, or strongly akin to, the concept of rhythm examined above; in fact Bruce speaks of "the harmony of their rhythmic lives".

Interestingly, and somewhat paradoxically, the words 'harmony' and 'rhythm' do not appear in the back-index of Cynthia Hirst and Elaine Michaelis's book, Developmental Activities for Children in Special Education (1972). Both authors are Assistant Professors in the Department of Physical Education at a North American university.

Like other writers, they hold that "motor experimentation and learning are the foundations upon which the child learns about himself and the world around him, and they are the premiss upon which knowledge is based" (p.5).

They also acknowledge that "Children form a body-image which is based to a great extent upon capabilities gained from bodily movements". This image is seen as basic to the developing personality, and "Remedial physical developmental work is capable of activating dormant potential for personality development" (p.5).

Posture is seen as a crucial factor in that "All other movement patterns develop out of basic posture, which is the means by which we relate to our environment" (p.6). The authors do not discuss reasons why a mentally retarded child has difficulty in co-ordinating and controlling his movements other than to say, for example, he "has missed the experiences of the normal child of rough-and-tumble play on the livingroom carpet ..." (p.87). The purpose

of the activities seems to be more concerned with the recognised objectives of physical education (development of physical fitness and development of performance skill) and with the improvement of "scholastic achievement" than with the total well-being of the child. Such a comment is not intended as derogatory, but serves to establish the focus of the author's theoretical considerations and the intentionally developmental nature (from simple to difficult) of the exercises tabulated and illustrated.

It is another type of approach, very different, for example, from the Laban based mode of Violet Bruce, who says, "By movement I am not first considering the acquisition of skills recognised in athletics, games and sports, but use of the human body to express in gesture, in dance-like movement play, in dance and dance-drama" (p.161).

Movement activities suggested by Hirst and Michaelis are clearly task-and-skill orientated. Little or no concession to imagination or creativeness is made. A step-by-step programme is set out, starting from simple identification of body parts, which will "provide an opportunity for the student i.e. the retarded child to develop movement skills, body image, and concepts about space, time, direction, dimension, speed, quality, rhythm and mood" (p.12).

A level of language comprehension seems to be demanded which is out of keeping with that of most retarded children. For example, the second, and early, set of exercises instructs the child to "Press your wrists against the floor and move your arms in an arc until you can clap your hands above your head" (p.18) - this is the "back-lying position"; and again, "Twist your neck like (sic) you were a tall giraffe trying to see over the fence at the Zoo" (p.22). As the activities become more complex, so the language of the instructions becomes less accessible - for example: "Every other member of the circle weave in and out of the remaining members of the circle" (p.38).

"Movement exploration is a good way to stimulate and motivate a child to learn and progress in his development" (p.13). What the authors do not explain clearly is what this development is towards. For example, what is meant by "a coherent personality"? (p.7).

The general impression gained is that retarded children can, through exercises, be brought somewhere near (but necessarily short of) a level of physical ability (or "performance") attainable by normal children - and that, of course, is not a bad aim.

An interesting section on "movement exploration using equipment" suggests some fascinating group activities with parachutes - real ones, "available for about \$30 at Military Surplus stores" (in 1972). Various "stunts and games" require group unity, and it is clear that one would need to know the children very well before attempting some of them. A retarded child given to emotional instability might find it hard to cope with this one:

The children raise the chute. Two children at a time are selected to get under the parachute. As the chute begins to lower the children on the outside force the chute to the floor. The children under the chute attempt to get out from under the chute while the children on the outside try to keep them in (p.44)! (Anyone for a birth trauma?)

Parachutes, tyres painted bright colours, hoops and large circles of knicker-elastic' are suggested as a potentially rich source of group and individual movement materials.

Work discussed in this Part so far has concentrated almost exclusively on movement, and any reference to drama has been incidental. In fact, of course, the division is unrealistic, the one being inherent reciprocally in the other: the separation is made purely for discursive reasons.

To re-establish their Siamese twin-like association it is valuable to quote two comments, both by Violet Bruce, because they are totally applicable - to movement, dance, dance-drama, mime and drama.

The first concerns the teacher (or in some cases the teachers - for work of the type that Veronica Sherborne proposes often demands a one-to-one relationship), and one recalls Alan Davie's firmly-held belief that finally it is the personal relationship between the teacher and the pupil that ultimately determines what gains are made.

Bruce is writing of communication between child and teacher, and says that the teacher "should try all the time to express herself [or himself] richly in language, body attitude and gesture, and with any other aids she feels right and necessary or useful, being always ready to abandon ideas and to try again" (p.170).

And of movement and drama generally she speaks of "increased awareness which helps the head to lift, and gives alertness to the whole body. There

is also the result of increased metabolic aliveness, circulatory stimulus, and nervous awakening, the whole being becoming more fully aroused, more sensitive, more tonic. It is in this lesson, well conducted, that eyes can really begin to shine" (p.172).

Dorothy Heathcote speaks with emotion, and somewhat scathingly, of the artificial divisions that have been created between verbal and non-verbal communication in drama-work. They have "sprung from that old, old fallacy: that because the child is born without words, you can't do drama till you've moved ... And they always ignored that one of the first things a child does is cry ... the moment a child is born he's talked to, and he starts 'talking' back ... this artificial split is quite false" (1975, p.80).

And so it proves, in the event, in doing drama with severely subnormal children whose language level is comparable to a 'normal' two year old's or less.

It would not be difficult to compile a mini-encyclopaedia under 'd' for 'drama' in respect of what it is and does. The common factor running through all entries would be the human being (even if he is being a lion at the moment) in his relationship with others of his species and the world at large.

Colourful and succinct, Dorothy Heathcote would say, "... drama is not stories retold, but confrontations between individuals standing up, lived at life-rate" (1971, p.15), or "Drama is a real man in a mess" (Three Looms Waiting, 1972), or "Drama is the spaces between people being filled by meaningful relationships ... and experiences" (1975, p.3), or "True drama for discovery is not about ends; it is about journeys and not knowing how the journey may end" (p.18).

"All drama does all of the time is place decision-making and use of life-experience in the hands of the classes. The teacher acts as midwife" (p.28), because "Drama uses the same rules as life does" (p.1).

Without doubt Dorothy Heathcote's influence and lead in drama in education would be nationally acknowledged. In a way her work has become the yardstick by which others measure; and so the present writer may be forgiven for the above salvo. A less 'punchy', but by no means less true description of the purpose of drama would be that of Hourd (1949), who says that "Drama

has a double psychological function. It acts as a release for fantasy and also as a means of grasping reality. Both aspects are equally important and finally interdependent" (p.63).

How may such work be carried out with mentally retarded children, and why should it? A group of Heathcote's ex-students published in 1967 a "beginner's guide - written by beginners". Speaking of basic principles, they include under "Personal development" a set of aims that are particularly related to drama work with such children:

1. To help to bring about the fullest possible realisation of the child's potential.
2. To help a child to be aware of his strengths and abilities ...
3. Drama presents children with experiments which deal more specifically with persons than with things, and stimulate and encourage the child's awareness both of his own 'selfhood' and of the needs of others.
4. It gives opportunity for recollection of experience which, harnessed to the imagination, can lead to new discoveries, because all new information must be tied to the already known to be truly learned.
5. It can give a desire to communicate with others in a shared experience (Anon. 1967, p.31).

It is against guidelines like these that we may usefully examine some differing approaches.

"Creative drama", says Heavey (1973), writing of his work with severely subnormal children, "stimulates the child both mentally and physically and so, as a teaching medium has untold possibilities. In a series of four articles he lucidly illustrates some of the "untold possibilities". To enumerate a few, there is the unknown imaginary parcel that each child holds and unwraps; stories told, with help from the children, often related to topical 'school' events; games for body-awareness, with the encouragement of "shouting, babble and jargon" at every level; telephone games; soothing, stretching and relaxing activities.

A member of staff stands in the centre of the Hall, and the children are told "she is really very naughty". The children go up in a group and shout at her. And now she is "really a nice person - almost a Fairy Princess ..."; so the children tell her how nice she is and how much they love her.

"Of course, not all the children get the full meaning of these exercises, but the important thing to bear in mind is that you are giving them experien-

ces to tune into, both physically and mentally, and they are having a chance to develop through their own use of language and emotions" (p.31).

Heavey does not merely tell a story, believing that a useful idea to gain the children's interest is to make them feel useful and the dramatic experiences purposeful. As he relates "Mr. McNab's Birthday" he has pinned an envelope containing a letter on the wall in front of the children. The children become essential active participants in the development of the story, and at the end it turns out that the letter is from Mr. McNab expressing his thanks and delight at the way the children made his birthday so happy. He thanks them "for their kind thought and lovely playing" of brass band instruments. "Mr. McNab's Birthday" is included as an Appendix 2 to this study.

Heavey gives further examples of stories requiring different sorts of involvement from the children.

He describes an elaborately planned "programmed drama" which took four weeks to complete and involved children from 8 to 16 years old. It required the co-operation and involvement of the entire staff, including the caretaker, who telephoned in as 'Bluebeard', and "a friendly Indian Chief", who worked in a local store and was free on Thursday afternoons!

Finally, he describes "The School Play" which involves all the parents. ("The most wonderful aspect of doing drama with mentally handicapped children is that ... it is not possible to impose scripted plays upon them" (p.136).)

Heavey ends his stimulating articles thus:

The more I read and observe, the more I realise that 'drama' is far too small and insignificant a word for such an important and comprehensive subject. Drama means doing - drama means life, and therefore if life begins at birth, so then must drama ... If we analyze the skills involved in drama we find that we embrace the child's total development, particularly in the areas of language and sensory motor and perceptual motor development (p.141).

With what one takes to be a puckish glee, Heavey solemnly ties all he has so colourfully described to the sober imposing theories of Piaget, Hebb, Luria, Skinner, Doman-Delcato, Barsch, Kephart and Getman, with a friendly nod in the direction of Mildred Stevens.

Earlier (p.27) he says:

The greatest achievement of all is that we have developed a sense of humour together and we have learned to enjoy being involved together in an exciting activity like climbing mountains, building rafts, going through the jungle, dancing on the beach, swimming in the sea, riding in a spaceship, going through a haunted castle and learning to look, listen, feel, taste, smell, shout, laugh, jump, creep, run and have fun together.

It seems almost presumptuous to break down the total gains for the children implicit in drama work of this nature into such areas as strengthened self-esteem, enhanced emotional security, and so on. All such gains are inherent in Heavey's comment about the "child's total development". What one can do is salute his energetic dedication and variously creative imagination.

Schattner (1971) has made an appropriate observation in this regard: "... the creative arts are designed not to give one a vocational skill, but to enrich the lives of all human beings. To deny these experiences to the handicapped child is to stunt his growth and deprive him of one of the most powerful forces we have for moulding personality" (p.57).

In that one of the main concerns of this paper is the emotional security of the mentally retarded child, which, subservient to a fitting body-image, is here seen as basic to his total development, it is salutary to examine the emotional component, if such can be separated, within drama work.

Hallas (1974) in his down-to-earth and clinically orientated "manual for the caring professions", states:

The most vital driving force behind human behaviour is emotion, and when the capacity for emotional experience is lost, activity and the capacity to react with feeling are lost also (p.231).

The writers here discussed would clearly agree with Hallas, and would further point out that the capacity for emotional experience can be maintained only if there is regular opportunity for such experience to flourish. It is probable that Hallas's statement could be reversed, and that loss of activity experience leads to the dulling, and perhaps the extinction, of the emotional life and the "capacity to re-act with feeling".

An interesting and relevant anthropological observation (and one with which we are all familiar in everyday life) is made by Douglas Kennedy (quoted

in Bruce, 1969, p.165): "If a primitive feels joy and dances because of the feelings, he can subsequently induce that joy by repeating the joy dance".

The emotional life of the mentally retarded child is often a difficult 'book' to read, and, as Sue Jennings (1973) points out, "It is easy to forget that however severe the handicap, such children's emotional needs are as strong as or stronger than those of the normal child. It is not that these children cannot communicate but that their means of communication are limited" (p.59).

Lecky (Moustakas, 1956) sees emotional states as "different aspects of a single motive, the striving for unity", and behaviour, the external expression of those states, as a demonstration of the effort to maintain the unity and "integrity" of the organisation, the total person (pp.89-96). As here discussed, it is apparent that work in drama (and movement) is similarly aimed at consolidating the 'unity' and 'integrity' of the child.

With her customary incisiveness, Dorothy Heathcote (1975) says "... emotion is at the heart of drama experience, tempered with thought and planning. The emotion is experienced through the tension and the elements [of darkness/light, stillness/movement, silence/sound]. The thought and planning are experienced through the reviewing process ... If we take the emotional guts out of drama there is only the burden left" (pp.15-6).

Reading of Heavey's four week long "programmed drama", with all the physical and emotional demands (including those of disappointment and consternation) that it placed upon his severely retarded children, one appreciates the truth and validity of Heathcote's statement that drama "takes a moment in time, uses the experiences of the persons who work with that moment in time, forces them to confront their own actions and decisions, and go forward to whatever outcome they find themselves able to create belief in and gain satisfaction from. This enters classes into those areas which, in the main, are avoided in school, namely: emotional control, understanding the place and importance of emotion, and language to express emotion" (p.19). "The proper tools of drama are, one, emotional reaction, and two, being trapped so that one only escapes by working through the situation" (p.3).

One thing that becomes paramount is that work in drama with retarded children (or any children) can never be a haphazard affair - which does not, of course, deny its "experience of spontaneity", to use Peter Slade's phrase (1968).

Violet Bruce (1969) states: "It is necessary to put a framework around the activity within which imagination can be set free" (p.174). She means not only a physical framework, but also an organisational framework. "So often one sees dramatic activity where the teacher is trying to give freedom for the children to express, but there is not enough guidance and only a disheartening confusion arises, an end being an abrupt intervention by an angry teacher who is then more convinced that these children cannot use this kind of activity (p.175).

(It is interesting, and rather sad to note, that when speaking of movement Violet Bruce refers to the teacher as 'she', and when speaking of drama as 'he'.)

The steps towards what Bruce calls a "sponsored framework" have been clearly elucidated by Dorothy Heathcote, and it will be beneficial to reproduce those and then set them alongside a 'typical' Heathcote drama session with retarded children. They have been taken from the invaluable 'Sydney Lectures' of 1975.

1. We make the world smaller by the isolation of an area of concern.
2. We involve groups of people, which in turn involves them in group decision-making.
3. The situation must be defined.
4. The group's viewpoint has to be put to use so the drama starts from where they are - simply because you cannot start from where you aren't.
5. There has to be some instigation to review progress.
6. Strategies need to change to suit where the class and the drama have reached.
7. The work must go slowly enough to make an experience happen to a class.
8. Tension of some kind must be present in the drama.
9. Feelings and thoughts which exist inside each person have to be made explicit to the group so that he can see and respond to the expression of the group.

The session is with moderately retarded boys and girls, "big lads and lasses", who are investigating the sort of predicament that Macbeth finds himself in at the beginning of that play. They are not 'doing Shakespeare'. Dorothy Heathcote's full description is included as Appendix 2 to this study.)

She has asked them, "Do you think a man could get promoted during peacetime if he were a regular soldier?", and they discuss this.

Eventually they are in a forest and 'Macbeth' is escorting 'Duncan', with various followers. An element of danger is introduced in the presence of a wild boar. Macbeth and others must protect the King. They look after him - 'You're not letting me go out. I can't even go to the toilet', says 'Duncan'. 'You're not going to the toilet - use the tree'. ("Don't laugh, we haven't time - and it's deadly serious".)

Eluding the boar in his lair, they escort the King safely through the forest. They want to repeat the experience, but, says Heathcote, there would be no gain in that. So the teacher, still in role, changes the circumstances. Now the boar is rampaging. It has killed. She tells them, "There are dead women in my hut". Then a new and mysterious element is introduced: "Three strange ones have appeared".

"The task provides you with the opportunities that you can see; so you choose that task ... But as you do the task it reveals to you the needs of the class, which makes you then know the purpose of that task" (pp. 131-3).

To revert to the framework above, the world is reduced to a forest in which a group must make vital decisions. Royalty must be protected and a review of the predicament is instigated. Strategies (the whereabouts and predelictions of the boar) change, and the events happen to the group. There is always tension, and its quality changes ('There are dead women in my hut'). Individual thoughts ('You're not letting me go out') are made explicit, and the group responds so that they can "go forward to whatever outcome..."

Elsewhere Dorothy Heathcote has said the factor special to drama is that it achieves expressions of the interpersonal relationships of the group and the individual strengths and weaknesses "in 'heated' not 'cold' circumstances, for it draws directly upon the individual's life and subjective experiences as its basic material, and achieves this in circumstances that are unique - that is, when 'a willing suspension of disbelief' applies, and when those concerned are using their subjective world to illuminate and understand the motivations of others through role-playing" (1971, p.18).

Heathcote draws attention to acceptance of what she terms "the one big lie" (1975, p.7). She finds that all people understand the idea of the big lie - the agreement to pretend that we are in the situation we have chosen.

Drama, of its nature, does not lend itself comfortably to psychometric

analysis, and that is perhaps a good thing. Even attempts at sociometric assessment must necessarily acknowledge the uncontrolled life-variables that interplay around a tidy Skinnerian drama-box.

T. K. Clitheroe (1965), for example, noted in A. E. Tansley and R. Gulliford's The Education of Slow Learning Children (1965) that 'Sociometric surveys made at the beginning and end of a term's Drama sessions had revealed the benefits which derive from the work' (Clitheroe, p.7).

He worked with moderately retarded children of eleven and twelve years old, five boys and five girls, administering a sociometric questionnaire at the beginning, middle and end of a period of "free drama" sessions.

For two children only was there any significant difference between first and last test results in the number of 'social' votes received. A girl increased her votes from nine to thirty-four; a boy from one to nine. The other eight children's received votes remained extremely consistent.

Clitheroe is able to show, descriptively, why the two quantitative changes occurred in relation to the drama sessions, and he acknowledges that other outside factors may have had a bearing. More interesting, and probably more valuable, are his qualitative comments.

Drama as problem-solving and personal problem-orientated is viewed by Jennings (1973) as unfortunate in that many people see it only in this light. It reflects "the current trend for using drama only to diagnose and examine problems, thus neglecting the therapeutic value of creativity itself" (p.42).

Whilst it is not this study's aim to examine psychodrama as a mode for use with mentally retarded children, it is necessary to acknowledge that such an approach is used, though to what effect the writer has been unable to ascertain.

The term 'psychodrama' should strictly be applied only to that type of therapeutic work developed by Moreno in Vienna and the United States in the 1920's and continued by his adherents. It should only be used by those who have followed the prescribed training or, possibly, under the advice of a psychiatrist.

Unfortunately the term 'role-playing' is often used interchangeably with 'psychodrama', and not a little confusion has arisen.

Such a confusion of terminology is evident from L. Gerald Buchan's Roleplaying and the Educable Mentally Retarded (1972), where the theoretical considerations, approach and specific techniques are all those of 'classical' psychodrama. Buchan holds that roleplaying, "an elaborate social learning method ... gives pupils an invaluable opportunity to:

1. explore behaviour 'safely',
2. express strong feelings which are not normally acceptable,
3. learn to respect the ideas and feelings of all members in the group".

"It involves the individual wholistically ... and permits [him] to see himself in action while he is in a neutral situation" (p.2).

The book is written specifically with the moderately mentally retarded child in mind who, Buchan says, "gets caught in a vicious spiral that limits his social development. His social immaturity isolates him and leads to emotional difficulties caused by feelings of rejection and deprivation. His resultant lack of social skills further limits his opportunities to participate in social experiences" (pp.19-20).

Buchan's proposals contain, in this writer's opinion, a basic contradiction. The teacher of the mentally retarded who is "unfamiliar with roleplaying" is enjoined to "use the format of procedures outlined in Chapter 4" (p.21). Chapter 4 is entitled "Roleplaying Techniques and Procedures", and explains such psychodrama terms as 'warm-up', 'role-reversal', 'mirror technique', 'role training', 'magic shop' and 'modelling'.

Immediately following the last quoted sentence, we read, "However a great deal of modification will be necessary when these procedures are applied to the EMR" (Educable mentally retarded) (p.21).

The "unfamiliar" teacher is apparently offered a bone (possibly of contention), only to find that he must supply the meat to it.

The foregoing should not in any sense be construed as denigratory of the techniques of psychodrama proper, when carried out under the conditions for which they were originally developed. Neither, of course, does it deny the inalienable link between psychodrama and roleplaying: the Director of a psychodrama session directs the 'actors' to play roles - to play, indeed, the role

of themselves.

But the idea of role-play is of a far wider significance than its specific use as a synonym for 'psychodrama' allows - for example, the stranger who appears suddenly and 'in role' amongst a group, demanding some sort of attention merely because of his presence. Such an approach is one of three ways of structuring drama that Dorothy Heathcote proposes.

She speaks of selecting an incident for review and "clothing it" with such elements as "place, period in time, people present at that relevant time, season of the year, and any 'fixing' device". The 'fixing (in the photographic sense) should be the work of the class concerned, for it should really reflect their 'prejudiced' view. The "clothing" must feel real to the children, not to some future audience (1975, p.2).

Dorothy Heathcote discusses three ways of choosing how to structure the drama situation ("There are probably a hundred, but I've only managed to isolate these three!"): a "simulation" way, an "analogy" way, and a role-play way - that is, the teacher, or, better, an accomplice enters the room "in role" as, for example, a derelict, a policeman or a queen. Here the role is already 'fixed' and demands an immediate emotional response because of its strong 'fixedness' (p.3).

She often works in role at first when meeting a group because "it 'fixes' emotional reaction, and to it can gradually become accrued all the other less important facts of the matter" (p.3). She likens it to providing good clay or paint and proper tools.

Carolyn Pickett (1976), an ex-student of Dorothy Heathcote, has made an analysis of roles which have been used with mentally retarded children. Basing her comments on Heathcote's exposition, she formulates the following gains in using role:

- a. a person for the class to respond to,
- b. a life-style which comes into the room,
- c. a holding 'device' which 'lures' interest,
- d. something to enquire into - a focus,
- e. a specific example of emotional-intelligent life and attitudes to challenge,
- f. a pressure exactly where you want it.

It is essential for the teacher to have planned and to remain alerted to:

- a. what the pressure is to be,
- b. exactly how the role will exert the pressure on the class,
- c. exactly what symbolic objects will be essential to communicate the life-style,
- d. exactly what you want the class to experience through meeting the role.

A role can teach facts, teach attitudes, pose questions, demand understanding, help you question yourself and modify your class behaviour.

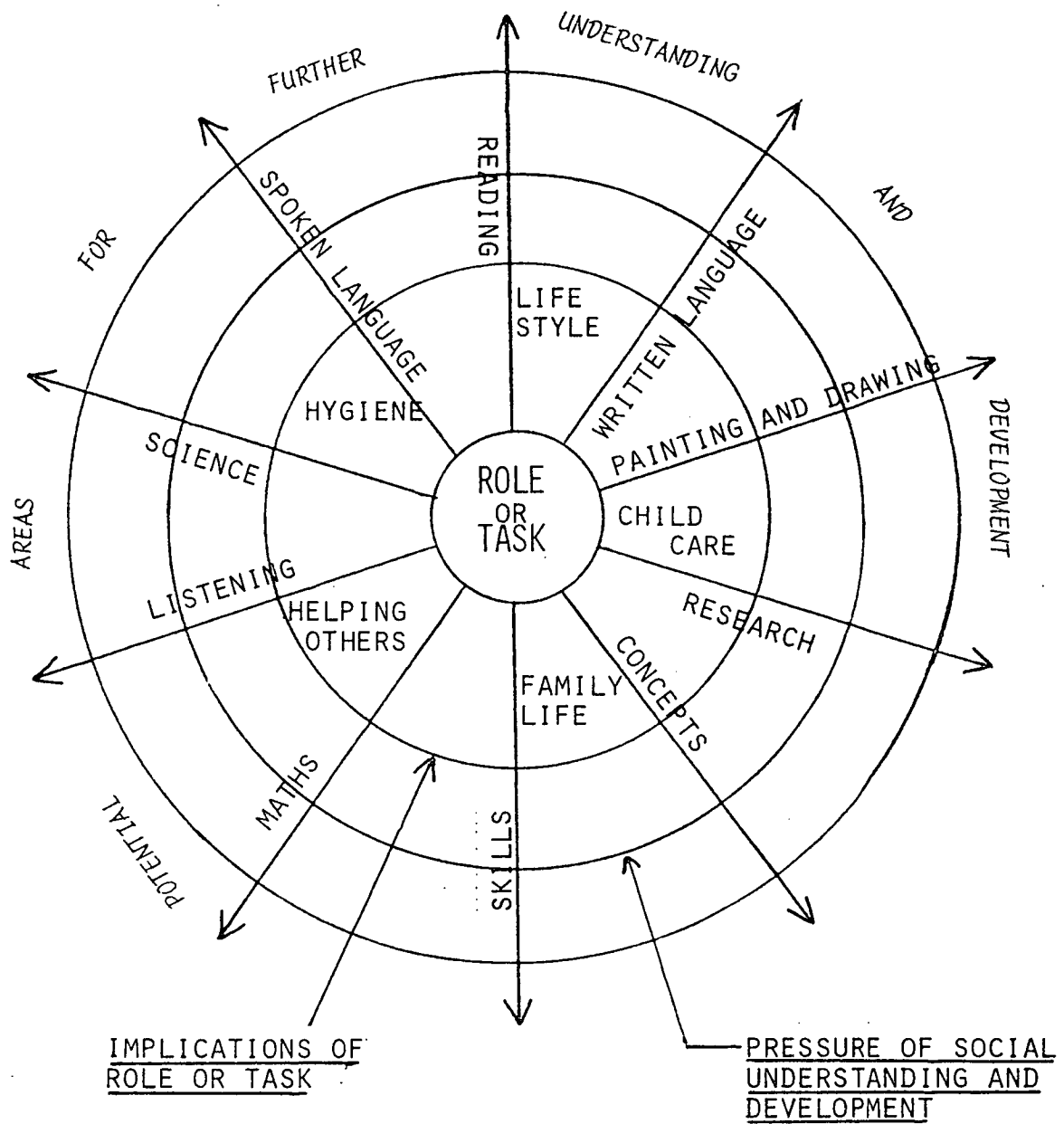
For obvious practical reasons the role must be unusual enough to demand attention ("pressure of role"), and the 'problem' that the role brings should not require verbal explanations but should be explicit 'on sight' (implications made explicit). Uncluttered signals are made by the role (gesture, stance, facial expression), and the few vocal or verbal signals should be highly selective and slow, "to allow and demand response" by the children.

The role brings a way of life into the room rather than a task to be undertaken - though tasks may flow from the relationship built up between the role and the children. This is illustrated diagrammatically overleaf.

Because the role is a potent force, particularly with excitable children, an easing of intensity of involvement should occur towards the end of the session. (Descriptions of the actual use of groups and individuals 'in role' with severely and moderately retarded children are presented in Part Three of this study.)

Carolyn Pickett classifies types of role according to the 'pressure' they bring to bear on the class, as follows:

1. Roles that need help or help others.
2. Roles to modify behaviour.
3. Roles that exert power over the class.
4. Roles that are task-based.
5. Roles that invite close contact.
6. Roles that teach social graces.
7. Roles that have captured someone, and



Adapted from Caroline Pickett's
An analysis of roles used with
the mentally handicapped

- might capture you.
8. Roles that are on journeys, or suggest journeys to discover things.
 9. Roles that are slow to catch on.

Such an 'in-role drama' for, for example, a mixed class of eight to ten year old mentally retarded children, might be structured as follows:

As if uninvited, a fireman, wearing his uniform and fire-helmet, walks into the classroom carrying a puppy and a small plastic bowl. The teacher pretends to ignore him until the children draw her attention to his presence. She encourages them to find out who he is and what he wants. It emerges that he is worried because he has nowhere to leave the puppy for the day: he has to report for duty shortly and is at a loss as to what to do.

The 'facts' are discovered by the children as, individually and together, they make contact with him - orally and, probably, physically. He volunteers no information; it is up to the children to elicit his dilemma and, concurrently, his life-style (why has he nowhere to leave the puppy?), prompted by an occasional question or observation by the teacher, directed not to the fireman but to the children - "I wonder why he wears that funny hat", for example.

The general intention - the "pressure" - is to provide an opportunity for the children to help someone (a thing they very seldom have the chance to do: for some it is always the other way round); but many areas for involvement and development are potentially present (see diagram).

Some extensions might be : the children construct a safe place for the puppy to sleep in; they learn and supply its needs - feeding, drinking, handling, playing, hygiene; they ask permission of the Principal to keep the puppy in their classroom, explaining why; they draw the puppy, perhaps write about it and, of course, talk about it; and so on.

If we set this drama-experience alongside the aims under 'personal development' enumerated by the group of Dorothy Heathcote's ex-students (p.29) it is clearly in harmony with them. Further discussion in Part Three of actual in-role dramas will confirm this. To revert to Heathcote's own framework (p. 33), we notice that "the world has been made smaller" as focus is riveted on the fireman and the puppy, and that the group must make decisions. The strong 'fixedness' of the role defines the situation, which starts from the children's emotional reaction to the stranger's appearance. The teacher will review progress - "What have you found out about him?"; and will change

strategies (the fireman has to go on duty, leaving the puppy) as the children and the drama move forward. Slowly the fireman's identity and his problems are elicited, and the initial tension of his presence is modified as new tensions appear - "What will Mr. So-and-so say? Will he let us keep the puppy?". Each child is given the opportunity to express feelings and thoughts to the group, and sees and responds to the expression of the group.

As an approach to engaging the whole child, physically, emotionally and mentally, this type of role-play appears to offer enormous possibilities, not least because of the feelings of value each child experiences, being placed as he is in a position of some responsibility and trust and caring. Veronica Sherborne, speaking of the enjoyment mentally retarded adolescents get out of working in movement with much younger children, says "The children have as much need to care for others as to be cared for themselves" (1972, p.6).

This part of the study has endeavoured, through the examination of various approaches, to illustrate the ways in which movement and drama can modify the self-concept of the mentally retarded child, and, through the provision of joyful and demanding experiences in which earned success is possible, can encourage physical and emotional security and strengthen self-esteem.

It has been stressed previously that the expectancy of failure generally for many retarded children is a severely debilitating factor. Work and play such as here discussed can do much to lift the burden these children bear of being themselves.

The amplification of the AAMD definition of mental retardation can now be set alongside the intentions and approaches of the writers discussed above and the "training opportunities" that they provide.

It will be recalled that prognosis is seen as related to "associated conditions" and motivation, and that areas of deficit in adaptive behaviour are specified and become criteria for mental retardation. Areas such as appropriate personal independence and social responsibility are further subdivided into sensory-motor, communication, self-help and social-interaction skills, and social responsiveness.

Turning to the various programmes and approaches discussed above, one notes the conditions and opportunities for first-hand experiences (as urged by Mildred Stevens); for Heathcote's 'creative work' and 'coping work';

for the building up of the children's physical and emotional sense of security through bodily experiences (as advocated by Sherborne); for accommodating the emotional and intellectual fluctuations of the child - the need to regress (Davie, 1971, p.77) and the opportunity to extend his grasp of reality and his release of fantasy (Hourd, 1949, p.63); for the practice and development, within the security of Bruce's "sponsored framework", of sensory-motor, communication and socialization skills, as inherent, for example, in Heavey's extended drama programme or Heathcote's role-play situations.

These conditions and opportunities do appear to cater positively for those areas of deficit formulated in the AAMD definition.

P A R T T H R E E

Practical Sessions:

a descriptive analysis

This section of the study comprises descriptions of a small selection of practical movement and drama sessions in which the present writer was involved, and which seem to him illustrative of some of the approaches discussed in Part Two. The sessions described took place in England over the first half of 1976.

In view of the writer's personal involvement in these experiences it is intended to discard the academic third person.

John Cannon is an ex-student of Veronica Sherborne, and works as movement therapist at the New Fosseway School, Bristol. He is employed full-time specifically for movement work.

New Fosseway is a school for severely subnormal (SSN) children, and any spare adult helpers and one or two older and less retarded children willingly lend their support during the 'one-to-one' movement sessions.

With one group comprising children of seven to ten years old we engaged in many of the basic activities for 'grounding' and 'centring' and for whole-body and body-parts awareness referred to previously.

I worked with a very delicate boy of nine in such activities as making a body-cave for him to fall about in, escape from and return to; various games involving appearing and disappearing elbows and knees; many different ways of moving along the floor - wriggling, sliding, caterpillaring, duck-walking, rolling and so on; pushing and pulling the other across the floor; strength games - back to back, shoulder to shoulder, hip to hip ...; handwork, making patterns with fingers - a fan, a fish, a butterfly, crabs; curling up in a tight ball, tucking the head in, and carrying in a bundle; swaying, and then swinging games (a bit cramped for space).

We linked hands with others in the group and tested the circle for strength and shape; did a long and complicated one-behind-the-other holding round the waist dance in which the way of moving (waddle, hop, slither ...) kept changing.

The session ended with some close and quiet one-to-one swaying and rocking.

Without doubt the children (and the helpers) thoroughly enjoyed the activities. I had expected timorousness in my partner, but he very quickly gave

trust, which was remarkable considering I was a 'bearded stranger'. It was important not to let him 'win' easily when it came to strength and energy flow.

Because they so clearly demonstrate the overall gains that children can make through this kind of work, especially when coupled with music sessions and hydrotherapy (New Fosseway has its own swimming pool), I reproduce here (by permission) a letter from a mother acknowledging the changes in her daughter, and two teacher's reports on the same child.

Weston-S-Mare,
Avon.

5th May, 1977

Dear Mrs. Sherborne,

My daughter C, aged 10 years attends Westhaven School and Mrs. O. has been using your P.E. programme for this class.

Yesterday when visiting the school I was asked to tape my opinion of this class, and say whether it has helped my child. I was pleased to do this but wish that I had expressed myself better.

I wonder whether you realise the miracles that happen in such small ways through people such as you carefully studying our children's problems. Both of my daughters are mentally handicapped, speech being the worst problem. C. has always had weakness in her wrists and hands, although she has always enjoyed walking she was awkward and rather a 'fragile' walker (ankles suddenly give way and twist). Since attending your classes with Mrs. O. she has suddenly become completely aware of herself, her movements are strong and confident. Her wrists, arms and hands are much stronger and she will struggle to lift heavy objects.

The exercises give her pleasure, and often she comes home and shows me some new thing that she has done. Although I tried to help her by taking her to dancing class, also she did usual P.T. at school, and swimming, these things weren't basic enough to help her find her level. C. has always liked music, but has seemed incapable of expressing herself with music and beating time with music, but I have noticed during the last few weeks that she is moving more naturally with music, so obviously this is another stage to give her pleasure.

Her finer co-ordination is improving, very suddenly, writing is becoming much better, concentration is also improved. C. has changed from a timid child to a rather 'bossy' little girl.

To say that I am grateful for your help is an understatement, as I am convinced that through your work you have broken down a terrific barrier for C., and made life feel quite a bit better for Mum.

Yours sincerely,

C.D.

Teacher's reports:

October, 1975.

Without any doubt at all C. has improved in concentration. She is of very low intelligence, and when we first began pushing C. she fell at a touch. Now real effort can be made in pushing C.; she resists very strongly.

She has poor hand control, but is beginning to write without tracing. Her people-drawings used to be two circles and two eyes, but since January we have been getting four circles - two for legs and two for arms.

The confidence she has gained shows in her voice. She has a very bad speech defect, but the volume of her voice has increased, and the little mouse that was will now hotly defend herself.

Perhaps the most incredible of all is the fact that C., all unco-ordinated as she is, has learnt to swim. She managed one length of the pool and we are sure that if she had not trusted us she could never have done this, and, more important, she had to trust herself.

March, 1976.

C. will take short messages to various parts of the school and is mixing well. She made mother come to school as she could not make her understand what we were doing and she wanted mum to do them the movement activities at home.

Smith's Hospital and its school cater for autistic children, most of whom are residential. It is almost impossible to work in movement with more than one or two children to each helper as the children tend to wander off, or become engrossed in some perseverative activity.

I worked with an eleven year old boy who outwardly expressed all the behaviour and desires of a six month baby. He was very small, and best enjoyed being cradled and rocked. His only sound, and this when being rocked, was "Ma-ma-ma-ma".

Eventually we walked about a little - he on 'tiptoe' sometimes. Quiet music played on the record-player, and we tried some small floating movements. On the floor he sat on my chest, and allowed himself to be gently lowered and curled up. I kept some physical contact all the time, patting his feet, elbows, knees and encouraging him to do the same to me and to himself.

With an older boy I played swing boats on the floor, sitting face to face, legs locked, and the more violent this became the more animated his face became. He also much enjoyed swinging around at arm's length.

The belief among the team of helpers was that extended and frequent activities such as these and with the same one-to-one relationship, could improve body and even social awareness, and certainly appeared enjoyable.

I worked with a group of teachers, from special schools in Leicestershire at the Glenfrith Hospital School for severely subnormal children, the sessions being led by Anne Leonard, an ex-student of both Dorothy Heathcote and Veronica Sherborne.

One session involved Sherborne-type movement, but with the addition that the children, working only with Anne Leonard at first, drew in the adults and 'taught' them, one-to-one, the activities they were doing. Bottom-spinning, hand-clapping games, 'rowboats', and so on led to the child 'building' an adult into a supportive framework up and over which he could climb.

Much amusement and movement occurred as we blew an imaginary feather from one to the other. We made protective tunnels or caves for the children, who ventured out, skipped about to a tambour beat, and, as the tambour ceased, rushed back to their own cave.

On the following morning the 'visitors' (or the "Leicester people") were instructed to arrive dressed as derelicts and down-and-outs. Twelve of us straggled in to the classroom dejectedly and huddled by the door. Anne Leonard was at the end of a ten-minute 'warm-up' with the children. She took no notice of the intruders until a child frantically drew her attention to us.

"Who are these people?" she demanded of the children. Blank looks and

consternation. They discussed us, and eventually one child made an approach.

Gradually a rapport was established. We were allotted to children who set us to work (I scrubbed the floor) because it was considered proper that we earn the lunches that we would be given. The children were placed in a position of strength (what Dorothy Heathcote calls 'passing the power'), helping, teaching and giving, when normally they are, by nature of their limitations, the receivers.

An important aspect of the session was the manner in which, occasionally, Anne Leonard would bring all the children back together to share what had occurred to individuals.

It was all the adults' belief that the children knew perfectly well that we were 'those teachers yesterday', but that they found satisfaction in subscribing to "the one big lie".

Pinewood School, Ware, in Hertfordshire, is a mixed day and residential school for moderately retarded children (ESNM) from eleven to sixteen. Anne Leonard is now the Deputy Headmistress, and her class is well used to drama work out of which the 'formal' work in literacy and numeracy may grow. She is likely to walk into the classroom and say, for example, "How much longer are we going to have to stay on this desert island?" - which is enough for her class to adopt roles and move into the action.

While I was working with her class, it happened that we needed a 'native hut' for the drama - at which point, in their goodwill and security, they planned, drew to scale on paper and then transposed onto the floor in chalk-lines the dimensions of the hut, which was then erected with desks and chairs; after which everybody stepped back into role!

At an evening session of 'free drama' in the hall, for anybody who wished to take part, it was agreed that we would be a group of travellers in a strange land. Very quickly the drama moved into a fantasy of magic powers, watching eyes and strange omens, ending in ritual marriage between a boy and a girl (who had in reality been 'friends', but who had split up). It is interesting to note how often children move naturally into elaborate, timeless and probably cross-cultural ritual and ceremony.

The deepest moment of involvement came when the bridegroom suggested a prayer or hope should be offered by the bride and the groom and by anyone else who felt moved to contribute. The groom was, in reality, highly imaginative and sometimes violent and uncontrollable, having suffered various horrors from his father when younger. The girl was reticent and nervous, and, having been picked out by the boy as "the most beautiful", had to choose between marriage and death. "I s'pose I'll have to marry him", she said - and her "prayer" was acceptant and hopeful.

The next day I appeared in the classroom, with the collusion of Anne Leonard, when the morning's activities were well underway, 'in role' as a filthy and tattered tramp, with only a few fragments of my lost language.

The class recognised me immediately, of course - and just as immediately suspended disbelief.

"Who do you think he is?" asks Anne Leonard, and they begin to make contact individually. "Where are you from?" No clear answer, but an indefinite reply: "Water". Various basic needs are established. They fetch tea and biscuits from the staffroom ("Please, Miss, can I have a cup of tea for the tramp?"), but they have to teach the tramp about 'tea'. He shocks them by cutting the biscuit with the spoon, hiding half for later, and eating secretly, guardedly.

He offers a moment of recognition - a faint smile. All the time they 'report' to Anne Leonard, but they do not break involvement. "Miss, he's smiling", "Miss, he's hidden it". Responsibility for 'accepted' social behaviour and reaction is placed squarely on the children, who respond generously and genuinely as teachers, living the drama through, and yet able (or needing) to pull out every so often ("Miss, he's ... etc., and one boy quietly saying in the tramp's ear at frequent intervals, "You're good at drama, aren't you?!")

Anne Leonard: "What are you going to do with him?" (Lunchtime is approaching.) "Mr. J. wouldn't like it". "Yes, he would - he's soft".

The first necessity is to get him cleaner clothes. Anne Leonard has made the customary, social comment: "He's not going to sit on my coat". In the 'prop' cupboard they find him female slacks, a blouse and a dinner jacket. The girls take over and change his filthy shirt - but his trousers? They decide to go into the cupboard while the boys change his trousers. One girl wants to stay and watch, and pressure is exercised by the other girls.

He is put to bed on desks and covered with coats, including 'Miss's'. One girl whispers, "Don't ruin them". They tend him, fetching water and a flannel. The girls bathe his face and hands, wiping off encrusted mud. He meets their eyes.

The tramp sleeps, and they talk about him now he cannot hear. "His feet smell". "His hair's clean, though". One boy produces a tin of cold 'spaghetti rings'. It is opened and one fork is found. They wake the tramp and teach him about the tin of food. Something clicks, and he murmurs "brother", "sister". A ritual of eating develops. Each child acknowledges that he is (or is NOT) brother or sister, and receives a spaghetti ring on the fork into his mouth. It goes against all their social and hygiene training. One girl calls out "No - no - no I'm not your sister". (Her real sister, standing beside her, has just acknowledged that she is.) But when the moment comes for the tramp to seem to go, she holds him down by the legs, and says "He mustn't go - he mustn't".

They are taking 'second lunch': what to do with him till then? They lock him in the cupboard for his safety/for their safety, so he will not go/get away, and they go outside.

The tramp changes, washes, puts on a suit and tie, and appears 'as usual' for lunch. For the lunch-hour only he refuses to acknowledge he was the tramp (I've been in town all morning - I had to go to the bank").

Everything is 'usual' in the afternoon session, and the children are not overconcerned whether he was or was not. That was drama - no need to confuse it with real life.

Being at the same time at the heart of and once removed from this drama session allowed me, in retrospect, to test it out against drama's aims in general, and, in particular, for mentally retarded children. The experience is offered here as one more example of the rich veins that exist in drama work - its "untold possibilities".

"Drama is the spaces between people being filled by meaningful relationships and experiences". (Heathcote, 1975, p. 3).

APPENDIX I

American Association on Mental Deficiency:

Definition of Mental Retardation

The definition of mental retardation in this manual is slightly changed to reflect the deletion of the Borderline category. The definition used for the current manual is:

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

Mental Retardation as defined, denotes a level of behavioural performance without reference to etiology. Thus, it does not distinguish between retardation associated with psychosocial or polygenic influences and retardation associated with biological deficit. Mental retardation is descriptive of current behaviour and does not imply prognosis. Prognosis is related more to such factors as associated conditions, motivation, treatment and training opportunities than to mental retardation itself.

Intellectual Functioning may be assessed by one or more of the standardized tests developed for that purpose; significantly subaverage refers to performance which is more than two standard deviations from the mean or average of the tests. On the two most frequently used tests of intelligence, Stanford-Binet and Wechsler, this represents I.Q.'s of 67 and 69 respectively. (It is emphasized that despite current practice a finding of low I.Q. is never by itself sufficient to make the diagnosis of mental retardation...)

The upper age limit of the developmental period is placed at 18 years and serves to distinguish mental retardation from other disorders of human behaviour.

Adaptive behaviour is defined as the effectiveness or degree with which the individual meets the standards of personal independence and social responsibility expected of his age and cultural group. Since these expectations vary for different age groups, deficits in adaptive behaviour will vary at different ages.

These may be reflected in the following areas:

During infancy and early childhood in:

1. Sensory-motor skills development and
2. Communication skills (including speech and language) and
3. Self help skills and
4. Socialization (development of ability to interact with others) and

During childhood and early adolescence in:

5. Application of basic academic skills in daily life activities and
6. Application of appropriate reasoning and judgment in mastery of the environment and
7. Social skills (participation in group activities and interpersonal relationships)

and

During late adolescence and adult life in:

8. Vocational and social responsibilities and performances

During infancy and early childhood, sensory-motor, communication, self help, and socialization skills ordinarily develop in a sequential pattern reflective of the maturation process. Delays in the acquisition of these skills represent potential deficiencies in adaptive behaviour and become the criteria for mental retardation.

The skills required for adaptation during childhood and early adolescence involve more of the learning processes. This involves the process by which knowledge is acquired and retained as a function of the experiences of the individual. Difficulties in learning are usually manifested in the academic situation but in evaluation of adaptive behaviour, attention should focus not only on the basic academic skills and their use, but also on skills essential to cope with the environment, including concepts of time and money, self-directed behaviours, social responsiveness, and interactive skills.

In the adult years, vocational performance and social responsibilities assume prime importance as qualifying conditions of mental retardation. These are assessed in terms of the degree to which the individual is able to maintain himself independently in the community and in gainful employment as well as by his ability to meet and conform to standards set by the community.

It is these deficiencies in adaptive behaviour which usually determine the need of the individual for programmes or services and/or legal action as a mentally retarded person.

In infancy and early childhood, deficits in sensory-motor development, in acquisition of self-help and communication skills, and development of socialization skills point to the needs for medical services, for early childhood education, or for family guidance.

During childhood and early adolescence, deficits determine the needs for vocational training, placement, and a variety of supportive services.

Both the intellectual level and the adaptive behaviour level should be considered in making classifications. While it is recognized that there is a positive correlation between intelligence and adaptive behaviour, demonstrations of variability in individuals indicate that separate measures are warranted. Only those individuals who demonstrate deficits in both measured intelligence and adaptive behaviour are classified as being mentally retarded...

Within the framework of the definition of mental retardation, an individual may meet the criteria of mental retardation at one time in life and not at some other time. A person may change status as a result of changes or alterations in his intellectual functioning, changes in his adaptive behaviours, changes in the expectations of the society, or for other known and unknown reasons. Decisions about whether an individual is classified as mentally retarded at any given time are always made in relation to behavioural standards and norms and in comparison to the individual's own chronological age group.

Extracted from:

Manual on Terminology and Classification in Mental Retardation.

Herbert J. Grossman (Ed.)

American Association on Mental Deficiency. 1973. pp. 11-14.

APPENDIX 2

MR. McNAB'S BIRTHDAY

An envelope containing a letter is shown to the children. "This letter is very important and it comes towards the end of the story I am going to tell you. It is a very sad story and that is why I played the sad music on the record player as you came into the hall. You see the story is about Mr. McNab - oh, just a minute, I'd better put the letter somewhere very safe - I'll pin it up here on the wall because as I said, the letter is very important. Well, as I was saying this story is about Mr. McNab. He was feeling very sorry for himself, in fact he was almost crying, because always on his birthday he would go to the park to listen to the brass band playing. Mr. McNab loved brass bands, he really did. He liked the trumpets, the trombones, the big drum. He loved every musical instrument in the band, and he would sit all the afternoon listening to the band playing. But today he couldn't go because he was ill in bed. Poor Mr. McNab. Now how do you think we could help him?"

"I was sure you would want to help and this is what we will do. Oh before I start I want to show you this little trumpet. When I blow it, wherever you are, come back to me as quickly as you can. Listen to the noise of the trumpet. Now over there across the road is a music shop that sells brass band instruments. I want you to go to the shop and look in the window and then choose an instrument that you would like to play in a brass band. Oh, but before you go I must remind you that you have to cross a very busy main road, so you'll have to be very careful."

At this stage you can discuss with the children the type of traffic on the road. You can even have a Traffic Warden, Green Cross Code, etc., and after crossing the road there is opportunity for more discussion on road safety. When the children have had time to choose their instruments you blow the trumpet to bring them back to you.

"That was very good. I thought you crossed the road very carefully. Now I forgot to tell you one more thing - before you go to the shop you will need some money. The Post Office is over here and I want you to go into it with your Savings Book and draw out some money, then cross the busy main road to the music shop and this time you go into the shop and buy your own musical instrument. This time you come to cross the road, you will hear all the different noises of the traffic. Off you go."

Taped street noises can add to the situation as will brass band music when they come into the area of the shop. When they have all made a purchase the signal (the trumpet noise) will bring them back again to the teacher when the instruments chosen and how they are played can be discussed.

"Now listen to this record of a brass band playing. It is a very nice tune called '76 Trombones' and I think you will like it. Close your eyes when you listen and think of your own in-

strument. If you listen very carefully you will hear how it sounds .. This time I'm going to play the record again but I want you to stand anywhere you like in the hall and when the music starts practise playing your own instrument with the band. Very good. Now, this is what I want you to do. Creep over here because just in this corner is Mr. McNab's house. We're going to give him a really big surprise. We're going to parade right under his bedroom window. I want you to march past his house, playing your instruments as loudly as you can and if you like you can shout Happy Birthday, Mr. McNab. When you hear the music, start the parade."

Allow the children to have a really good parade. As the music dies down signal the children once again with the little trumpet.

"Now that was a really super brass band wasn't it? Did you shout Happy Birthday? Oh, I'd almost forgotten the letter. It's addressed to me, so I'll open it. Well, would you believe it, the letter is from Mr. McNab, I'll read it to you:

"Dear Mr. Heavey, Thank you very much for your Birthday Card. As you know I was ill in bed and I was really very miserable because I couldn't go out into the park as I usually do on my Birthday to listen to the brass band. I was very disappointed and then you'll never believe what happened. Lying in bed I heard music nearer and nearer, it got louder and louder until it seemed to be right under my bedroom window. I just couldn't believe my ears and I simply had to get out of bed to see who was playing. And there, going past my house, was the best brass band I had ever heard and it was played by children. It had trombones, trumpets, triangles - everything including a drum. It was grand. But there's one thing I can't get over, in fact you'll hardly believe it, the children shouted "Happy Birthday, Mr. McNab". I don't know how they knew it was my Birthday, but I was so pleased that I didn't feel ill any more. In fact I got up, went downstairs and made myself a cup of tea. It was the happiest Birthday I've ever had, thanks to those very clever children. I wish I knew where they came from because I would like to thank them for their kind thought and lovely playing. Best Wishes, from Mr. McNab."

By permission of R. Heavey

"Creative Drama with the
Mentally Handicapped Child".

APPENDIX 3

I'll give you a very quick example: Imagine a group of educationally subnormal big lads and lasses, and they've got them to this thing of Macbeth (not Shakespeare). I have asked: "Do you think a man could get promoted during peace-time if he were a regular soldier?" And they said: "Yes, because if somebody dies you've got to move the Generals round. If you've done something real nice in a battle then you might be promoted after the battle and so on." So we'd reached the point where these educationally subnormal children are taking the King through a forest. So far the fellow that's taking the King knows he's got a name, and it's Macbeth. And the King knows he has a name and it's Duncan. But they are both educationally subnormal children like all the rest of the class are. That is they're very, very, very slow learners. So, in order to create the power of Macbeth to look after the King's body, I create a very tangible danger. So I dash in and say: "My Lord, do you go through the Great Forest with King Duncan?" And of course he says: "Y-yes" (he's a stammerer). So I said: "You realise my lord that in your absence the great boar that was wont to roam, has not been hunted." So immediately the implications become clear. The King is going to be in a bit of danger. So straight away, the job they're really doing within the context of Shakespeare's Macbeth begins to be possible: "Now don't you move away from here. You keep by us, we'll send some troops out in advance." And so they look after the King's body who really doesn't seem very afraid. He gets to feel afraid by the way they look after his body. "You're not letting me go out, I can't even go to the toilet" says the King. "You're not going to the toilet, use the tree," you know. Don't laugh at it, we haven't time and it's deadly serious. They are looking after the King's body. And so you see they said: "Oh! Miss" when they get past the boar: "Oh! he was in his lair and we did get the King past" and every one of them said: "Can we do it again?" And of course you say: "Yes!" But you know they can't get that again. This is not possible, and this is where people fall down all the time. They say: "Alright, let's start back where you were," and I come in again and I say: "My Lord." And of course I can knit it again because I've got the wool to do it with, but they haven't. They are now in a state of 'what they know they want', so I have to alter the tension whilst making it seem the same: "My Lord, the boar is loose." And now there isn't one place that they know they're heading for where he'll be dangerous, he's everywhere. And so they had to look after the King's body all round. And it's a new tension to keep them in the same place, right? So they say: "Oh! Miss, can we do it again!" "Of course you can" (thinking fast!). "Yes my Lord you sent for me." "Where is the boar?" "I do not know my Lord, I only have dead women in my hut, and I am not going with you." So now he's killed! And if he's killed he's smelt blood and he's tasted it, and that man that knows where he is usually won't go with us. And so now it's harder and then they say: "Can we do it again, Miss?" But it was working, and the King's body was getting more royal.

This is what's happening. There are all kinds of extra dimensions entering into it. You can't now just bully him as you could the first time: "Duncan, you keep with me!" has changed to: "My Lord, there is great danger" (even though he's still stammering). "My lady wife demands that you come quickly and there are women dead in the hut." And so, the next one which was just about my end, you know: "There is a boar, but there are still three strange ones." Now it's just distorted the play a bit, but now there's the boar and three strange ones, and you've moved it into the next development. Do you see what I mean? You need skill in staying in one place. So we set up a task and most teachers think when that's happened they've done the teaching. The task provides you with the opportunities that you can see so you choose that task. I've got all these different ones. But as you do the task it reveals to you the needs of the class which makes you then know the purpose of that task. That was the opportunity you foresaw, but that is the content level they're working at. So now you know really what that task can do. And as soon as you know this and these purposes begin to be understood, that task is very subtly altered. And that's how a lesson oscillates all the time, O.K.?

Dorothy Heathcote
An extract from "The Sydney Lectures".
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