Passing Congress in 1975, the Developmentally Disabled Assistance and Bill of Rights Act changed American society. It reinvested public financing in state institutions to community-based services and presented society with a challenging question. After 75 years of eugenic practices, what do we do now?

Imagine that you are on a sandy beach and you come across three sea gulls standing close to the rising tide. Two gulls have black heads and the other has a white head. The white-headed gull “cries” out to the two standing beside it. You are close by observing the three birds.
And what do you do? You can do nothing and ignore the entire scene. Or perhaps you could produce a theory based on your observation. One could be that the white-headed gull is a female and she is initiating mating behavior that is attracting the attention of two males. Another might be that the white-headed gull is a juvenile calling out to be fed by its two parents standing nearby. You are curious so you continue on with your observations when one of the gulls with the black head feeds the white-headed gull. Aha, now you have confirmed your observation and understand that the juvenile is being fed by the more mature gulls.

In this process of observing and theorizing what is most important is how you do what you do as an observer. With the passage of the Act we needed to discover a new practice of caring for people never cared for. There was no time to theorize, build models, draw roadmaps or model new systems of care. In the time it would take to do so, countless and unimaginable atrocities would take place. What to do as observers?

I began my teaching practicum as a scientist-practitioner at the University of Idaho and was taught to observe children, not through the lens of logical theory, but through the work of Swiss psychologist Jean Piaget. Piaget discussed the importance of accommodation – learning guided by discovery data. In a discovery process what is most helpful is to do nothing and take in all that is happening around you without judgement, assumptions, demands or theories. Your curiosity turns into silence as you witness an emergence – a coming into your conscious of something you had not been conscious of before. You are in discovery and you are learning. This is inductive social science. It’s hard and joyful work. It was with this attitude the liberation movement for people with developmental disabilities began. Those of us being taught person centered planning and evidence-based services began without theory, expectations or
hypothesis. Instead we began with love, curiosity and a desire to care for others and ourselves. The wellbeing of those we served and our own was intertwined, generating a social energy flowing through the entire social system. This energy produced scientific breakthroughs in a very short time – a measure of the productivity in large-scale systems change.

The person-centered evidence-based criteria of care had to be invented, and the University Affiliated Facilities funded by the Act needed to innovate through behavioral research and social science experimentation. While the liberation movement had been growing ever since people with developmental disabilities, their parents, family and advocates organized their political actions contributing to the civil rights legislation, the professional contribution funded by the Developmentally Disabled Assistance and Bill of Rights Act had just begun. All of us funded by the Act were working in jobs that hadn’t existed before. The treatment everyone in institutions had the right to, didn't exist. The liberation movement developed out of love, curiosity, freedom and grace, and now had funds for person centered and evidence-based services in communities across the country. At the heart of this transformation were the University Affiliated Facilities. They were the proverbial stone dropped into the still pond – our tabula rasa. They were the center of the scientist-practitioners attention, where everyone went to learn and to develop their capacity to serve people abandoned by society because of the eugenics theory.
University Affiliated Facilities – the Model Preschool for Handicapped Children, University of Washington

Among the first steps to ending institutionalization was funding community care for babies, infants and toddlers. Processes leading to institutionalization such as Jimmy’s referral by his family doctor to Eastern Oregon State Hospital needed to end while at the same time new services needed to be invented that met the criteria of the Act. Children could no longer be sent to institutions. I was attending the University of Idaho and the nearest University Affiliated Facility (UAF) to me was located in the University of Washington’s Experimental Education Unit. The Act funded a Model Preschool Center in the Experimental Education Unit and inside the University of Idaho’s College of Education.

It would be a mistake to characterize the Model Preschool Center as being isolated from communities like so many university facilities are nowadays. The Act funded a large-scale systems change architecture. It’s true that the UAF’s were at the center in a sort of hub and spoke network, but the systems change funded by the Act created collaborative relations whereby every element in the system was connected to every other element in the system by discovery research and an expansion of wellbeing – not just for those to be liberated but for all of us. In fact, we young scientist-practitioners were going through our own liberation movement being free from the social controls of eugenics and free to invent evidence based personal care.

The attitude energizing the system is revealed in a letter three Model Preschool Center researchers wrote to students and teachers like me. Jane Rieke, Linda Lynch and Susan Soltman published a book on language development strategies in 1977, just two years after the...
Act passed Congress in an incredible testament to the productivity of love, learning and liberation. In their letter to their readers they reflected on their research and collaboration.

We thought you should know how this book came to be written – but more than that, how the strategies were developed and for whom. We want you to know that the underlying philosophy of this material: there should be a careful considered rationale for the decisions we make about programs for children.

This book is a compilation of the strategies and procedures which we found useful in helping all kinds of young children to develop better language skills and to use them in their everyday lives. As we have supervised university students and conducted workshops for teachers and clinicians across the country, we have found that some of our ideas have been particularly well received. We have been told that some of them are unique. We have been told that certain aides, such as the Pupil Profile, have been especially helpful. We have been asked repeatedly to get the strategies into print so they could be shared, and this is why we have put the material together – for our students, for those of you in the field who are always looking for useable ideas, and for students in other colleges and universities who will be the teachers and clinicians of tomorrow. We hope the ideas help you toward success and that they help the children you serve to communicate more effectively. (J. A. Rieke, Lynch, Linda L & Soltman, Susan F, 1977)

Now why on earth would researchers comment on philosophy? Perhaps they recognized that the theory of eugenics came from philosophy and not science. A new scientific philosophy was needed to understand children’s intelligence. Piaget described intelligence differently than
the eugenists. He explained intelligence as a process of adaptation to ones’ environment or learning through accommodation and the shift to inductive social science applied to daily living.

Moreover, for teachers and all those whose work calls for an exact knowledge of the child’s mind, facts take precedence over theory. I am convinced that the mark of fertility of theory in a science is its capacity for practical application. (Piaget, 1926)

Piaget described intelligence arising as a system of relations between people and the environment in a process he called accommodation. The functioning of human beings in accommodation is to conserve the cycle of the system’s organization and incorporate the knowledge of that conservation into the cycle itself. Piaget presented his inductive theory of intelligence in children as a theory of child development – a manner of understanding intelligence by studying how children develop over time.

The three Model Preschool Center researchers; Rieke, Lynch and Soltman described the consequences of changing from eugenics emphasis on diagnosis to understanding a child’s development as they continued on with their letter to the readers of their book on strategies for language development.

The material for this book has been in the process of development for a long time. All three of us were concerned about children with language disabilities when remarkably little was known about what to do to help them. We worked at the Child Development and Mental Retardation Center at the University of Washington in Seattle, and saw children who were referred because no existing program was appropriate. The diagnostic approach to intervention was not meeting the needs of the children whom
we were seeing. In other words, finding what a problem is, did not tell us what to do. From the beginning, we saw children who were in some need of individualized treatment. What were we to do about it?

The “what to do about it” developed in two directions. First, staff of the Communication Research and Training Division of the Child Development and Mental Retardation Center recognized the need for more information about early language development. Specifically, they identified information about the sequences of behaviors children pass through in developing normal language, and consequently they embarked on a research project to secure this information. The result of the research has been published as a diagnostic instrument, *The Sequenced Inventory of Communication Development (SCID)*. This research gave impetus to a strategy that seemed more useful basis for “what to do,” a strategy derived from information about normal communication.(J. A. Rieke, Lynch, Linda L & Soltman, Susan F, 1977)

**From pathogenic to salubrious processes**

Our professional attitude in teaching, training, research and consulting is often pathogenic – what is the problem causing the social, behavioral, or organizational ill? We express our role as helpers, healers, change makers and problem solvers in relation to the problem. This is the value proposition – you have a problem and can employ me to solve it. The three researchers working at the Model Preschool Center took a very different approach. They abandoned the eugenics emphasis on pathogenesis and the hypothesis that those who were
feebleminded were the problem behind social ills such as crime, prostitution, alcoholism, drug addiction and laziness. The preschool researchers transformed pathogenesis into a salubrious process of living well together from day to day. They began by understanding what the child could do and created a profile display that tracked a child’s progress in a continuous improvement cycle.

With information about the natural hierarchy and prerequisite behaviors we began to look more closely at children’s abilities rather than their disabilities – at what they could do rather than what they could not do. We began to use this information about normal development as a guideline for making decisions. Those of us who are writing this book were also trying to plan language programs which would work. Since it is not possible to plan programs that would meet all foreseeable problems, we began to define useful strategies. We developed ways of writing lesson plans and keeping track of results, so we knew which procedures worked and which didn't. Because no two of our children were ever alike we developed cross-child strategies for teaching – ways of making decisions – which are what the following material is all about. (J. A. Rieke, Lynch, Linda L & Soltman, Susan F, 1977)

Students of the Model Preschool Center were master teachers at the University of Idaho’s Child Development Center and presided over my student teaching at the preschool classroom in the College of Education. They were masters of their craft, worked harder than us and taught the children while they were teaching us how they expanded the wellbeing of all of us was my first lesson. Preschool teachers helping children develop language needed to be free to spontaneously interact with their children. The key to conserving this freedom was the use of
data to track the child’s development and in order to do so the data had to be timely, actionable, relevant and accessible. Rieke, Lynch and Soltman presented their approach to continuous improvement as their letter to the reader continued.

The three of us who refined the strategies discussed in the following pages have worked together in the school of the Child Development and Mental Retardation Center, the Experimental Education Unit. We found it helpful to transfer the information about language sequences to a graphic display – a profile format – to help us look at prerequisite behaviors and to help our trainees learn to make decisions about programs. Each profile gave us an individual record of what a particular child could do. It also gave us information about what the next step in the normal sequence should be. The Pupil Profile, which is included with this material, became our guide for making some of the program decisions. When we were plagued with the problems inherent in helping children generalize from the therapy situation to their “real world,” we learned more about the effectiveness of attending to the child’s environment before as well as after we selected the therapy goal. The environment we could observe most readily was the child’s classroom. Strategies developed with classroom teachers are therefore much a part of the entire picture and an integral part of the material. (J. A. Rieke, Lynch, Linda L & Soltman, Susan F, 1977)
The Preschool Profile

The Preschool Profile Rieke, Lynch and Soltman described in their book was an effective decision-making guide and accelerated the productivity of the teacher, in part because the teacher’s wellbeing improved with every bit of data showing progress in the child’s wellbeing. We used the Preschool Profile to record where the student’s language was prior to starting the class. This was baseline data I have shaded in yellow. As the child developed their abilities, we used differently shadings to show their progress. This table is from the language section of the Preschool Profile invented by teachers at the model preschool (J. Rieke, Lynch, & Soltman, 1975). The Preschool Profile helped childhood development decisions in eight domains of daily living; gross motor skills, fine motor skills, pre-academic skills, self-help skills, music/art/story skills, social skills and play skills, understanding language and oral language. Laid out in a matrix, each domain spanned 0-12 months to 60-72 months of age.

<table>
<thead>
<tr>
<th>Understanding Language</th>
<th>Oral Language</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>0-12 months</strong></td>
<td></td>
</tr>
<tr>
<td>Looks at people who talk to him.</td>
<td>Makes different vocal sounds.</td>
</tr>
<tr>
<td>Responds differently to a variety of sounds. E.G. phone, vacuum, closing doors, etc.</td>
<td>Makes different consonant-vowel combinations.</td>
</tr>
<tr>
<td>Responds to simple directions accompanied by gestures E.G. come, give, get.</td>
<td>Vocalizes to the person who has talked to him.</td>
</tr>
<tr>
<td><strong>12-24 months</strong></td>
<td></td>
</tr>
<tr>
<td>Responds to specific words by showing what was the name:E.G. toys, family members, clothing, body parts.</td>
<td>Asks for items by name.</td>
</tr>
<tr>
<td>Responds to simple directions with gestures: E.G. go, sit, run, walk.</td>
<td>Answers Where’s that? With name of object.</td>
</tr>
<tr>
<td></td>
<td>Tells about object or experiences with words used together (2-3 words): E.G. more juice.</td>
</tr>
<tr>
<td>Age Range</td>
<td>Language Development</td>
</tr>
<tr>
<td>------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>36-48 months</td>
<td>Responds to Put it beside and Put it under. Responds to commands involving two objects: E.G. Give me the ball and the shoe. Responds to commands involving two actions: E.G. Give me the cup and put the shoe on the floor. Responds by selecting correct item: E.G. Hard vs soft items. Responds to walk fast by increased pace and to walk slowly by decreased pace.</td>
</tr>
<tr>
<td>48-60 months</td>
<td>Responds by showing penny-nickel-dime. Responds to command involving 3 actions: E.G. Give me the cup, put the shoe on the floor and hold the pencil in your hand.</td>
</tr>
<tr>
<td>60-72 months</td>
<td>See pre-academic skills</td>
</tr>
</tbody>
</table>
Following this developmental ability, the child practices with increasingly complex descriptions and conversations.

Baseline September 29 1976
Midterm December 20 1976
End of term June 6 1977

Rieke, Lynch and Soltman concluded their letter to the reader with a purpose statement and behavioral description of the children they taught, and by so doing they ended the eugenics labels and statistical categories of intelligence.

The book was written for teachers and clinicians about the many difference kinds of children who need special help. The children who were enrolled in our communication classes came from all walks of life and presented the widest possible range of problems. They were children who functioned below the five-year range in language skills and most of them had other problems as well. They were classified as neurologically impaired, language-learning disordered, language delayed, hearing impaired, emotionally disturbed, autistic, environmentally deprived, and mentally retarded. For some the etiology was known; for many there was no etiology – no diagnosis – just a problem. For all of these children the strategies have proven useful.

The teachers with whom we worked are using the lesson plan format and the strategies for decision making which are presented here as they plan individualized programs for children in other developmental areas. They have found the strategies
adapt easily. In addition, the teachers in the communication classes have developed a Preschool Profile which they use to guide their decision making about other areas of child development, much as the Pupil Profile and its language sequences have been used widely by teachers across the country.

We have written a book about our experiences in the hopes that it will help others to individualize language programs for children, and also that the new language which children learn will be used in a meaningful way in the world in which they live. (J. A. Rieke, Lynch, Linda L & Soltman, Susan F, 1977).

Rieke, Lynch and Soltman’s letter to the reader exemplifies UAF research attitudes and their relations with scientist-practitioners in the field. Love is the relational behavior that conserves living well together, and this social wellbeing brings forth productivity. The Model Preschool Center research focused on decision making using timely, relevant, actionable and accessible data. Data guides decision making in inductive behavioral science. Data based decision making occurs in a network of conversations where everyone is free to contribute to the wellbeing of those being cared for. These two relational dynamics of love and freedom intertwined as the liberation movement of those denied the most basic human rights grew across the country.

In the classrooms of the University of Idaho, I was not alone in my interest to understand and support people with developmental disabilities. The Pacific Northwest had become the birthplace for novel research in the UAFs at the University of Washington’s Experimental Education Unit, the University of Oregon’s Specialized Training Program, and the
University of Idaho’s preschool for the developmentally disabled. The Experimental Education Unit research led the nation in the area of language development. In Eugene, Oregon, the Specialized Training Program developed behavioral research and created a system of precision training for teaching adults most vulnerable in institutions to perform complex employment tasks. In Moscow, Idaho, our preschool was aimed at supporting children’s development with our primary focus being on language development. We teachers were taught how to do evidence-based precision training. Here’s how the psychologist Ogden Lindsley described the environment we were creating.

It sounds more like an adult cocktail party, or a school recess, than a school classroom. The "precision teacher" performs like a coach, an advisor, and an on-line instructional designer. She arranges materials and methods for the students to teach themselves, including self-counting, timing, charting, and one-on-one direction and support. In this precision teaching (PT) classroom there is almost no lecturing. The entertainment is the thrill from students' visible performance gains. All the students are performing at once. It is noisy. It is mayhem. How can you tell how the students are doing? From their charts!

(Lindsley, 1992)

Where to begin?

We started in the child’s home because the teaching strategy was aimed at generating wellbeing throughout the child’s life, so we included parent training. We oriented the parent, not toward diagnosis of deficits, but toward the growth of their infant and began by telling the
parents that their child was always learning. Together we observed that when the child smiled, watched the parent hold an object, and reached out their hands, they were ready to play. Conversely, if the infant cried, turned their gaze away from their parents, or looked drowsy, they were overstimulated and needed rest and comfort, not play. We taught the parents that the infant's seeing, hearing, touching, moving, tasting, and smelling constituted the infant’s multisensorial experience and emphasized loving. “Touching, eye-to-eye contact, kissing, cuddling, holding, gentle rubbing, and feeding are all good ways for mothers and fathers to begin a positive relationship with their baby” (Kleckner, 1999).

This is where we began, at home with the infant and their family, modeling what we were learning in the preschool. We brought the positive environment of the preschool home for the parents and family to see and feel. “Oh look! Did you see that when I touched her cheek she turned toward my touch? This is a nursing reflex. She wants to nurse. Here, would you like to feed her?” Perhaps this was our most important lesson: keep all interactions positive and the child will learn and grow. We were discovering that if we kept our social interactions positive, learning and development progressed quickly and this is still true today for all of us at work, at home, and within our communities.

Sitting around a family's kitchen table, I discussed the new bill of rights legislation with the parents—how their child had a right to education—and my responsibility for teaching the child skills that expanded their independence. I described our process. I began with an assessment of their child’s skills at the preschool and then wrote long- and short-term goals and measures of progress that I was accountable for achieving while presenting my plan for the child to family for their approval. I ended the home visit by inviting the parents to enroll their
child in our preschool. If they accepted, I scheduled a visit for them to bring their child to the preschool for the assessment.

I approached each child’s assessment with excitement, joy and wonder, never really sure what I would discover. I was open and curious to understand the endless variety of development humans experience. As observers we know so much more than we can ever be taught. This is where we begin - re-cognizing how we know what we know something that can never be taught. Re-cognizing being a process of “seeing anew”.

The assessment looked like organized play. In one corner of the classroom, a miniature kitchen—complete with refrigerator, cups, spoons, plates, fruits, and cereals—was busy with children and teachers playing and “cooking” their meals. When we used the same space for our actual snacks and lunch, one hardly noticed the shift. A table filled with water or sand sat in another corner. The children used spoons, spatulas, and buckets to scatter, spill, and spread the contents of the table all over the area. This is where we did our baseline assessment—in our brightly lit preschool filled with playthings.

We played with the children and highlighted independent behaviors we observed, including: gross motor skills (walking, jumping, and running); fine motor skills (copying shapes, printing letters, and printing numbers); pre-academic skills (naming basic colors, naming basic shapes, and naming some letters); and self-help skills (cutting food with a knife, dressing self, and tying shoelaces).

While simple and efficient, our practice of systemic observation was elegant and sophisticated. Playing for the first time with the child, I would catch their gaze with a shiny ball
and then cover the ball with a blanket. This was Piaget’s experiment he called “object permanence”. Sometime around nine months old, a child knows that the ball that still exists even after I cover it with a blanket. Piaget described childhood development as occurring in stages and how object permanence revealed a stage or cognitive transition. We really didn’t care about the age most children make the transition as much as inducing the transition itself.

We teachers had created a systemic feedback process. The measure of the child’s performance was the measure of our performance. The measure of our performance was the measure of the UAF’s performance, and the measure of the UAF’s performance was the measure of the Bill of Rights Act’s performance. This is the brilliant insight behind person-services planning. The assessment architecture of the entire social-care system grew from the measurement of a single child’s acquisition of a single step in a complex chain of actions. If this measure of the child’s positive behavior change was not in place, the right to treatment was denied.

**Creating an Environment of Well-Being by living well together**

I remember the first day I walked through the doors of the preschool, it felt like walking into pure pandemonium. I loved it! As a student teacher I observed how Katie, my master teacher and supervisor taught. Perhaps a few children sat at a table the height of the Katie’s knees as she presented colors or shapes to the children. Gently drawing attention to herself, she presented them with joy, almost singing the nature of the object, “This circle is round! Can you say round?” Even though the child may not have said a word, when the child’s eyes would
drift over the object and meet her own eyes, Katie would burst into laughter and exclaim, “Yes! That’s right! It’s round!!” In the presence of children who could not feed themselves, dress themselves, use the toilet by themselves, or speak words, this was an emotional oasis, a celebration of humanness and development in action. This explosion of joy and delight was common in our preschool as teachers, children, and families became more and more connected. Language and love united us in liberation.

The preschool classroom was an opportunity for children to respond to the playful activities we prepared for them. Whenever any child responded—joy, laughter, and praise filled the air. Language was our destination and play our journey. We were constant jabber mouths, clowns, and commentators of the goings on within the classroom:

“Look! Dennis is dressed like a fireman. Isn’t he silly! There is no fire here!”

“Oh! Look at what David just did! He put the bucket of water on his head!”

“Wow! That smells so good! Is that lunch you are making? Look everyone, Sally is making lunch for us. What are you cooking, Sally?”

The classroom’s activities were organized around one purpose—to create a loving space for language, learning and liberation. We became very curious observers, looking for any opportunity to engage each child. At first, we would look for a response to our presence when the child’s gaze would meet ours. Later, we might create excitement in the classroom. Somedays we brought in brightly colored balloons filled with helium and watch the children carefully for their response, especially when one of the teachers would open the end of a balloon and, after breathing in the helium, talk to the children in a voice they had never heard
before! One child would open their eyes and track the balloon as we exclaimed, “Yes! That’s right. It’s a balloon!” Another child might pucker their lips and exclaim, "bah," and we would reply, “Yes, of course! Would you like to hold the balloon?” We would float about the classroom seizing every opportunity for the children to control our behavior through their language in celebration of their newfound freedom.

Institutions and state hospitals were the home of human decay and our preschool classroom was a place of love, living, and human growth. Noise? We loved it. The louder the better! Spontaneity? We would abandon our plans for the day whenever spontaneity became the source of our instruction (Halle, 1987; J. A. Rieke, Lynch, Linda L & Soltman, Susan F, 1977). The more we lived in the moment, the happier and more productive we all were. The master teachers, like Katie were best at teaching spontaneously.

One of the values we preschool teachers had was that we felt responsible for the child’s development (Parks, 1975). This was our profession and responsibility. When a child peed in their clothes, we took responsibility by quickly helping them to change into clean clothes while taking note of the time they peed. The next day we would begin to ask them an hour before they had peed the day before if they needed to pee now. Recognizing this timing regularity, we anticipated their needs and asked them if they needed to pee before they wet their pants. Soon they were independent in staying clean throughout the day. Maybe a parent came into the class to find that their child had just thrown a jug of water across the room. Before the parent could comment, we would say, “Oh, I am sorry! I should not have placed the water there.” We owned the classroom environment we created, and any failure was our failure.
To study language, we sampled the child’s language. One teacher invited another teacher to observe them playing outside with a puppy. The teacher might be petting the puppy or playing tug of war using an old piece of cloth, and as the child approached and said, “Da! Da!” the observing teacher would take note of the child’s utterance. This continued until the teacher had collected twenty-five initiations of conversations by the child. Why study the child’s initiations instead of the child’s responses? Because, initiations were the child’s freedom to coordinate collective actions; whereas, responses were the child’s mimicking of the teacher and did not, by itself, lead to the independence of the child.

After school, we studied the language samples. When did the child initiate conversations? What environment had the teacher created when they did so? With this data, we conserved and adapted those environments watching wellbeing bloom. How long were the child’s utterances? We counted the words they used. What was the structure of the child’s sentences? We found early patterns such as agent (me)→action (want)→object (ball). We were using data to create an environment of well-being so each child could use language to consensually coordinate the actions of the classroom, and thereby co-create our collective knowledge of creating an environment that conserved living well together.

The Model Preschool Center’s research showing that the acquisition of language lead to students’ independence paid off. Most of the children graduating from preschool went straight into their neighborhood schools. Many needed continued special education, but the preschool strategy invented by the researchers at the University of Washington worked. This was the design of the Bill of Rights Act: to educate people with developmental disabilities in the environment children without developmental disabilities were educated in. This was the least


The nature of language

The focus of our preschool was language. Language is the coordination of consensual actions and we believed that the more proficient the child was in language, the more independent they would be at home and school in their consensual coordination of actions with others.

Data is language, and we created data (language) we used to consensually coordinate action for developing the language (data) of our preschool children. Data is language and language data in the recursive coordinations of collective actions.

We human beings are emotional beings living in language. Language is the process we coordinate actions. As described by Humberto Maturana, conversations are flows of language intertwining with our emotions (Maturana & Bunnell, 1998). Conversations flow in a network of networks that occur spontaneously in the present and conserve our living well together. We collectively coordinate our social actions in networks of conversations when we both listen to others and share our own preferences for living well. Listening and talking, talking and listening occur in a flow of consensual coordinations of actions. If we teachers taught children to only listen and do what they were told to do, they would only learn obedience in a network of
conversations controlled by others. The Model Preschool Center changed the role of teachers controlling the classroom, to being a role of creating an environment for expanding children’s independence by asking two questions.

1. Is the child initiating communication?


As a result of applying this teaching strategy when a child’s initiation of conversations grew, a wonderful thing happened. Because language is the coordination of action and we learn from our actions, by initiating conversations the child conserved his or her freedom and learned how to conserve and expand their freedom in a network of conversations with other children their age and the adults they lived with. They were learning how all of the networks of conversations (dressing, recognizing colors or objects, etc) were constantly changing while the network of conversations conserving their wellbeing was something they could trust would continue to happen in the classroom.

The preschool classroom was an applied research laboratory immersed in love, caring, and celebration in the joy of development in the children, parents, or teachers. Using scientific evidence to guide our teaching strategies and to develop the entire preschool system, the new system of social caring could not be mandated by administrators, it had to be created by innovative teachers in love with the opportunity to do so. Our managers shared the same love of discovery, spontaneity, and joy we felt. The ethical movement liberating people with developmental disabilities was and always will be managed bottom-up, not top-down because it is person centered.
Love, Learning and Liberation without Leadership

These days, it feels like we are infatuated with leadership. We have so many styles of leadership: laissez-faire, participative, transformational, autocratic, transactional, democratic, bureaucratic, strategic, team, cross-cultural, facilitative, coaching, charismatic, visionary, coercive, affiliative, pacesetting, commanding, innovator, developer, activator, maximizer, and stabilizer. As if this isn’t enough variety in leadership, we have within just the authoritarian style of leadership: coordinating, controlling, delegating, directing, empowering, guiding, advising, collaborating, and participating substyles.

I do remember our preschool days when leadership was not so popular. Take for example, Dr. Alice Hayden, the UAF director of the Model Preschool Center at the Experimental Education Unit and Rieke, Lynch and Soltman’s boss wrote in the forward to their book:

Over the years, I have enjoyed a unique vantage point for watching the authors develop the processes you will read about in this book. As Director of the Model Preschool Center for Handicapped Children where the procedures have been developed, tested, and refined, I have been able to see the direct benefit they bring to children and communication problems and their families. But I have also watched with great pleasure as Jane Rieke, Linda Lynch, and Sue Soltman have worked with other teachers and communication disorder specialists here and throughout the country—sharing information, training, exchanging ideas. It has been especially rewarding to receive feedback about these outreach endeavors, and to know how valuable the assistance and
exchanges have been to staffs of diverse programs. Through the ripple effect, the benefits therefore extend to even more children than those served here.

As the authors will tell you, what you will read about here is an approach to communication problems. What I particularly appreciate is that it offers a way of considering problems rather than a set of rules or a dogmatic assertion that there is only one way to do things. It invites teachers, communication disorder specialists, and parents to observe, ask questions, try different approaches, and use their own considerable judgment. There is no ‘gospel’ really—only careful observation, a spirit of inquiry, and a willingness to consider almost any setting a therapy setting. To me, it seems entirely appropriate to approach children’s problems in this open way, relying on our ability to see and grasp what is happening in the environment rather than to adhere to a rigid set of rules which may or may not be appropriate in helping to resolve the many and varied communication problems observed in children, and the problems of the adults who work with them. I think that it is significant that the most crucial part of the approach is stated as questions rather than answers.

Finally, I believe that the approach is especially useful because it has great respect for the individuality of children and adults: it is not child specific, and not adult specific. It does not ask anyone to fit into a mold or a pattern. Rather, the procedures can be used to work with children having the widest possible
range of problems. I hope that you find them useful, as so many others already have.

Dr. Alice H. Hayden PhD (Hayden, 1977)

Instead of writing about leadership and herself Dr Hayden wrote about the expansion of care, her staff, approaching problems without rules, careful observation, trying different approaches, the spirit of inquiry, openness, respect, and focusing on questions rather than answers.

When someone is truly committed to the well-being of others, leadership disappears because their focus is not on themselves or their management peers but the well-being of others and, in our case, the outcomes of social caring. Those most who are responsible let love unite us. The question of how do we do what we do as collaborators in the liberation movement didn’t not start by definition a problem. It began with a single question “how do we live well together?

My-oh-my, what we can all learn in preschool!
References: