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Advocating for Children with Emotional and Behavioral Disorders: An Interview with Eleanor Guetzloe

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Advocating for Children with Emotional and Behavioral Disorders: An Interview with Eleanor Guetzloe

Throughout her career Eleanor Guetzloe has been a national leader in advocacy for students with emotional and behavioral disorders. Dr. Guetzloe is Professor Emerita of Special Education at the University of South Florida, where she taught for 35 years. She began her career in 1953 as an elementary teacher, music specialist, and then as a special education teacher in Florida before completing graduate studies at USF and the University of Florida and joining the USF faculty. Dr. Guetzloe considers herself primarily a teacher, but she has also published extensively on topics such as depression and suicide, aggression, and gay and lesbian issues of youth. In 1973, she helped found the Florida chapter of CCBD and later served as its president. Dr. Guezloe also has served in many leadership roles in national and international professional organizations, including the Council for Children with Behavioral Disorders (CCBD), where she served as president and many other positions and the Council for Exceptional Children (CEC), where she has been a strong voice for children and youth with EBD.

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Intervention: Would you tell us how you got into the field of the education of students with emotional and behavior disorders? Guetzloe: This is not a very dignified answer, I want you to understand. I had been a regular teacher. I was a normal person...a regular education music teacher in an elementary school. I had taken several years off to have children, and I was now ready to do something more than wash diapers. I was complaining bitterly to my husband, and he came out one morning as we were having coffee on our deck with two little articles from the newspaper...very small. One was an ad for flying lessons, which he thought was a really good idea because he was a Marine pilot. He thought, "Good, she'll learn to fly and we'll buy a plane and we'll zip around with...kiddy seats for the children." The other one was an announcement of ESEA fellowships, which were going to be available at the University of South Florida in my hometown. They were going to pay a certain amount of money, a flat rate, tax free, and extra money for each child that you had. And at that point, we had three. He figured, "Tax-free money, this is another opportunity."

He would have preferred flying lessons, however I went off to apply the following morning. I took the Graduate Record Exam and the National Teacher Exam in a single day, smelling of bleach from washing diapers. And they offered me a fellowship on the spot. They made several errors in their judgment because they picked us (based) on scores on the GRE and the NTE, and then they tried to make a cohesive group out of this group of twelve. They called us *Fellows*, and we were paid by *Elementary and Secondary Education Act* funds. So that is my long answer and my short answer to "how did I get here?": it was government money.

Intervention: Tell us about where you studied and what you did.

Guetzloe: I got my bachelor's degree from the University of Tampa in music and music education. I was a voice major. I taught elementary music for seven years...and then took the two years off before I went for the master's degree

at the University of South Florida and that was a two-year program. It was a wonderful program - equivalent to many people's doctorates. Many of the professors had just graduated with their doctorates and that's all they knew...how to teach doctorate students. We had a lot of seminars, and we were forced to go to conferences and conventions, so we were thrust immediately into such things as Council for Exceptional Children and our choices of CEC divisions. That kept me happy for a few years, and then they asked me to stay at the University of South Florida and become a faculty member. I needed a doctorate in order to be comfortable there, so I went to the University of Florida for my doctoral program, and Lyndal Bullock was my chairperson. That took awhile from 1971 – 1975 - but I was teaching at the University and going to school nights and weekends. That's my story and I'm sticking to it.

Intervention: How would you describe your career in the field?

Guetzloe:I am primarily a teacher and I always try to be a teacher at the university level as well. It was my primary choice.I think I was forced to be a researcher, because it was expected of me if I wanted to progress, which I eventuallydid, as far as I could go. I only researched things of great interest to me or things that I couldn't find answers toin the textbooks I used or the literature at the time. Being a teacher of tired out teachers who have been workingall day and came to class at night, I tried to be as cheerful and as jubilant as possible and present a good futurefor them, but I did tell them the truth, which they told me later they appreciated. My students have a reputationfor staying in the field for many, many years. They said knowing what was real as well as what ought to beprobably kept them there and kept them safer.

So teaching was my primary issue and I had to do research. As I said, things that interested me were terrible things, controversial issues - suicide, depression, violence, aggression, gay and lesbian students, and the like. And, very often it was a topic of which there wasn't a lot of educational literature. That's what I did during my career at the university, and I was there for 35 years.

- Intervention: What events, policies, innovations, and people have had the most influence on your professional career and professional life?
- Guetzloe:Well, interestingly enough, the people that we're with here at this conference [2011 International Conference on
Children and Youth with Behavioral Disorders] the professionals in the field of emotional and behavioral
disorders probably have had the most to do with making my life what it is. They are not only my heroes and
my mentors, but they are also my very best friends. What do they call it when the kids text...*Best Friends*
Forever? BFF. They are my *BFFs* for sure. Many of them have been temporary mentors or have given me advice,
which was always good, and they are such a wonderful group of people that they are very attractive anyway.

They are good with small children, the elderly, their peers - wonderful at having conversations with anybody and very bright, very caring.

Intervention: Are there people in particular?

- Guetzloe: Well, I would start with my doctoral chair. Lyndal Bullock has done a great deal of nagging me and pushing me into participating, first in Council for Children with Behavioral Disorders and then in Council for Exceptional Children, so it's really his fault that I went through almost all positions available in CCBD and eventually was president, past president, and I'm still a regional coordinator for the Southeast. He didn't do it to me with the [CEC] Pioneers Division, but I am now President of the Pioneers and have talked him into coming back as an officer. So, I think Lyndal Bullock is primary. There are others that were very important to me. William C. Rhodes, Bill Rhodes, was one of my dearest friends and a very enjoyable person and...I hate to name just one or two because there are so many people that are such wonderful professionals and have been good models for me. Intervention: What events have most influenced your professional life?
- Guetzloe: Well, beginning again to go back to school. I should've been happy to stay at home and be a mother, but I always felt sort of guilty. I felt that it was my responsibility that if I knew something, I should be sharing it. I think being encouraged to go back to school was very important. My husband has been extremely supportive all these years, and that's one of the greatest influences.

Among the things that have had the most effect on my career, there was the government money that put me in the field to start with, and that has certainly been responsible for a lot of improvements in the area of behavior disorders. If the government had not acknowledged that kids with emotional and behavioral disorders and people with other mental disorders have disabilities, the programs would never be where they are now. That was extremely important.

I have always been involved in CEC since I was a master's level student, and I think that has had a very good effect on me as well. It enabled me to see what other people were doing and other professionals in the field besides those that I had as professors of my own. I've enjoyed those relationships very much.

Intervention: Are there policies at either at the federal or the state level that have made a difference in your career?

Guetzloe:Certainly, once again, federal involvement in the field has made a big difference because without that, we would
not have had master's students funded by the federal training programs, and we would not have the programs
that we have. I feel that *Public Law 94-142* and its predecessor, the *Rehabilitation Act of 1973*, were very, very
important to us. Until then, people were rather lackadaisical about programs for EBD kids. They had them in
hospital programs and in daycare, but certainly not in the public schools to any extent. Of course, I was in special
education before *PL 94-142*, so I could see the big difference thereafter. That was important.

Intervention: What has had the greatest positive influence on the field of EBD?

Guetzloe: I think that the coming together of professionals to try to understand the children. We have people here who have spent their entire lives trying to decide what to call them. They have been arguing over this definition as long as I have been in the field. We still don't have it exactly the way we would like, but it has improved to some extent.

> I think having the people in the field that we do, people like Eli (Mike) Bower, who reminded us all not too many years ago, just before his death, that we are trying to exclude socially maladjusted children using a definition at the federal level that was used in California to describe socially maladjusted children. He wrote the definition.

> I think our folks are more open about what is real and what is not real. I'm afraid they become fearful sometimes because school systems are more concerned with compliance and with the federal law and stacking up the papers to support their claims, than they are about what to do with the children. The positive impact, I think, is that we've been able to attract a great number of very fine professionals who genuinely care about kids with emotional and behavioral disorders and are most unwilling to quit trying.

Intervention: What has had the greatest negative impact on the field?

Guetzloe: Oh I'm so glad you asked. I think...and this is just Eleanor Guetzloe 2011...I think the movement toward total full inclusion has done a great disservice to our children. We had, for example, in my home state, a full continuum of services. Everything was available from just the consultant in the elementary school to a full hospital program that was excellent. But once we moved our kids toward the mainstream, or toward inclusion...they would close down those programs. It's an awful lot harder to open them up again than it was to get them in the first place. We were driven by federal law to open them, and it was a shame that we had to wait for federal law to drive us toward a full continuum of possible placements and services. But once the total full inclusion movement began, they were throwing our children back into the regular classroom with no help. That does not work for everybody, and I will go to my grave screaming that it is not for everybody. One size does not fit all. One set of services is not going to work for every child. We have children who honestly cannot stand it in the regular classroom and the teachers can't stand them. One of the best things we can do for the child's sake and the teacher's sake is move him or her to a more restricted placement until the child has the skills to be successful in the regular class. We ask dumb things of children anyway in the regular class and our children are much less likely to tolerate it. So, I'm displeased that we are still on that road and I wish we could have our full continuums back. There are rays of hope. Some school districts are closing down special schools while others are building

them. I think that the pendulum will swing again and if I can just stay alive long enough, I will see it come back. I do hope so.

Intervention: What would it take to get us to a more balanced approach to working with these kids?

Guetzloe: It would take a great deal of advocacy and, I'm afraid, a lot of lawsuits, because the only thing that seems to work with some hardheaded school administrators is a lawsuit. They are scared to death of non-compliance and ...I think just having lawyers trained to call them and threaten them would probably be enough. You wouldn't even have to go to court.

Intervention: You mentioned advocacy as a positive thing. What's been CCBD's role in advocacy?

Guetzloe: We have been the leaders in the country and probably, therefore, the world in advocacy for children with emotional and behavioral disorders. We are rather untiring. I was personally involved as a legislative and advocacy chair when we re-authorized *Public Law 94-142*, and it was funny...I even found myself arguing with CEC. They said, "We can compromise. We may have to give up something." And I would say that the thing we are not going to give up is the free appropriate public education for kids with EBD. We will not. I can remember sitting in senators' offices and handing them a single page that I had typed that showed that, for example, the crime rate in Tampa, FL goes up immensely the day after school is out. And it's our kids that are doing this. They are bored, they need something to do, so they go out and steal and pillage and goodness only knows what else...vandalize. And as soon as school starts up again, the crime rate goes down. They have data, and they know that these data are true. I can remember showing that single sheet to people. I had one senator ask me, "Would you be terribly disappointed if we didn't do anything to this law this year?" I said, "I would be delighted. Are we through here?" And he said, "As far as I'm concerned we are." And it didn't even get on the calendar. So, our advocacy, the person speaking to senators, speaking to aides, having parents help, those things have been effective. We know they are effective. I can't quit. I just can't quit...won't quit!

Intervention: What sets of skills do teachers need to work with this group of kids?

Guetzloe: I think it's more of what a teacher *is* than the skills he or she *has*. I can teach a teacher the skills, which are behavior management, to the nth degree, and not just one philosophical basis either, they need to know it all. They need to be able to work with physicians, social workers - the entire team - and use every tool that any of those people have. We have many children that need medication, therapy, behavior management, rewards, punishers (yes - appropriate and non-violent), and everything that we know in our business.

What really aggravates me is we know what teachers need to know. At the same time, we define quality teachers as anybody who's had two courses on the Internet and have never seen a child. I used to say, "I have a

test. I have the *Guetzloe Draw A Child* test for anyone that wants to be a teacher." Some of them, I swear, do not know what a child looks like and have certainly never seen one with a behavior disorder.

Intervention: You said it's not about the skills, but about the teachers. Can you elaborate?

Guetzloe: To be effective, a teacher needs to be a calm person who is able to take punishment from a child without reacting in kind. A person with a good sense of humor would be nice, and I would like the teacher to be intelligent. In my last few years at the university teaching, I don't know if it was my lack of patience but prospective teachers didn't seem as bright as they used to be. They could not write, they could not do math, yet they were going to be teaching kids to do writing and math. I don't think so!

> Those skills, along with having to ignore a lot of behavior that was absolutely inappropriate, to choose their battles, and to know what to do and to know what to say and not escalate a situation, are necessary. I think it is the personality and the ego of the person involved as much as it is specific skills. I can teach future teachers the skills, I can watch them and tell them what they did not do right and what they should do next time and have them practice until they get it right. We know how to do this. We have some very fine professors and very fine teachers in our business.

I don't know how, legally, we would screen appropriately to get the teachers we really need. We can wear them out by sending them into the schools early in their programs and throughout their entire university program, so they are in the schools as well as the college classroom. They may excel in the college classroom, and bomb out completely their first day with children.

Intervention:What do you see for the future of the field of education for children with emotional behavior disorders?Guetzloe:I believe we will have a more eclectic approach to management. I was happy when the federal government
finally realized that there was such a thing as a behavioral approach. We all know that it would be far better for
everybody if the entire school had a good incentive system of some sort and that everybody knew how to use it.
I see two tracks here. I see some people becoming ever so much better at their jobs, because we know so much
more than we knew before. We do have better medications, we do have more skilled psychotherapists than
ever, and we do have teachers with behavioral skills who know when to ignore and when to reward. But I also
see a lot of teachers that haven chosen these children as a last resort. They are the ones who can't get a job
anywhere else and they'd like to be out as quickly as possible, so they teach the class with the most children
with behavioral problems. They do not last long and they're sort of spoiled forever, I think. I see that as part of
our future. We're going to have a lot of really good teachers and we're going to have a lot of people who should
not be teaching at all.

I also see that the school will have greater responsibility than ever over a variety of issues that never have been the province of the school. I would like that. I would be happy if we had schools where parents could come for parent training, and for job help, job placement, job training - to have a clinic in the school. Everyone knows the way to the school. And we've got the children for most of their awake lives through their childhood. School is where the kids are, that's where services should be. And I believe that will happen. I think the school will accept that responsibility and it's really not totally a school responsibility. But, I think we could get it done. Intervention: What advice would you offer to those just entering the field of emotional behavior disorders? Reconsider! No, what I really tell them is, "This is not going to be easy, but if the kids get better, you know that you did it. It was not the 50-minute a week session with the psychotherapist that fixed his behaviors. It was you with your daily program...a highly structured program. It was you because you really cared enough to take these

I've always rather liked people with mental disorders and they seem to know that. If there is someone in the neighborhood, he'll find me, anywhere. My husband and I can be out to dinner and somebody will stop at the table and ask me, "What are you eating?" And Bruce will say, "One of yours?" And I will say, "Yes, yes, one of mine. I don't know this person, but..." He looked at me and I looked back at him and I wasn't afraid of him and would take him seriously. This is a serious issue. I've had people, patients at mental institutions, lean over and kiss me on the cheek as I walk by. They would look at me and I would just look back. All it was was a look. It was not a daring look or a hostile look, it was just a look. I acknowledged them. They are real people, I'll nod my head, I'll speak. Not too long ago I had a parent thank me for speaking to her daughter in a supermarket. Her daughter had Down Syndrome and they were walking together, and the younger woman said, "I work here." I said, "Do you really? What time do you work?" And she said, "3 o'clock. I work at 3 o'clock and I get off at 7." And she said, "I do that every day." I said, "You must be very proud of yourself. That's a good job." She said, "Yes it is." And she leaned over to pick something up and her mother said, "Thank you." "For what, ma'am?" "For speaking to my daughter. So many people ignore her." And I thought, I could go into my routine here, I can tell her I'm a retired professor of special education and I know how to speak to your daughter. But I didn't. It didn't occur to me that a lot of people do ignore persons with disabilities, and that's not fair.

We need public education, most of all about children with EBD. People are so afraid of them and they just ask to be treated as human beings. Normally, if they're loose on the street, they're safe enough to be out there. People are afraid. We need more public education. That would be a massive project. And if the federal government would fund it, I would take it on.

Intervention: Eleanor, this has been such a great pleasure. Thank you so much.

Guetzloe:

children on to start with."

Guetzloe: You are welcome!

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Dr. Guetzloe was interviewed as part of the Janus Oral History Project at the International Conference on Children and Youth with Behavioral Disorders in New Orleans. The conference celebrated the 50th anniversary of the founding of Council for Children with Behavioral Disorders in 1961 as a division of the Council for Exceptional Children. Over the past 40 years, Dr. Guetzloe has served in variety of leadership positions in both CCBD and CEC , where she has been a strong voice for effective educational programs for children with emotional and behavioral disorders.