Charting changes: a conversation with Norris Haring

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Charting Changes: A Conversation with Norris Haring

Dr. Norris Haring, University of Washington Professor Emeritus and Founding Director of E.E.U. Center on Human Development and Disability, has had a profound impact upon the field of educating children with a disabilities. Dr. Haring earned his master’s degree from UNL (1950) and his doctorate from Syracuse University (1956). He has been coordinator of special education at the University of Maryland (1957-1960) and later a professor at the University of Kansas (1960-1965). He was the founding president and the first editor of the Journal of the American Association for the Education of the Severely and Profoundly Handicapped. Dr. Haring has been recognized by Syracuse University with an honored alumnus award, the UNL Teacher College Alumni Association award, University of Nebraska Kearney with a Distinguished Alumni Award, U.S. Department of Education award for dedicated service and the Distinguished Career Award.

Professor Haring is credited with pioneering leadership in developing the means of teaching physically challenged children to become self-sufficient and successful. He is internationally recognized for drawing attention to educational development and has offered proof that education directly affects behavior. He is widely credited for pioneering the incorporation of Precision Teaching into a classroom-wide model.

Norris and his wife Dorothy have an ongoing commitment to providing support to students with a wide range of disabilities through their endowment of a research center to develop educational strategies for learning and behaviorally disabled students. The Norris and Dorothy Haring Center for Applied Research and Training in Education (Haring Center) will serve as a lasting legacy of a lifetime commitment to not only making positive changes but also charting these changes to optimize the positive impact for children. Dr. Haring sat down for a
conversation with a member of the Janus Oral History Project in July of 2012. The following is a transcript of that conversation.

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Intervention: How did you first get into the field of education of children with behavioral or academic challenges?

Haring: Well it’s interesting. Some of it was chance. It wasn’t all well planned but there are parts of my background that came to the front when I came back from the service. I was in three years. That wasn’t too bad because one year they sent me to the University of Pittsburgh for a pre-engineering course in electrical engineering. When I came back I had the great opportunity to pretty much plan the remainder bachelor’s program. I had a lot of work in music, literature, and in other areas that probably, if one were headed towards a hard science, you wouldn’t get. I majored in psychology with a minor in music.

In the meantime, I taught music at the Boys Training School in Nebraska, just a little bit west of Kearney. At that point, there were young men, ages probably 8 years through adolescence - 18 or 19. So many of the young men didn’t belong there, particularly those who had dropped out of school and had gotten into trouble. Their background was very interesting. Little things that we could have intervened with in their early years in education would have helped keep them in school. I was really concerned with a lot of the young men.

I was teaching band, and some of them were just natural musicians. It just came to them. Many of them were from Omaha and had a great sense of rhythm and I enjoyed that a lot. I enjoyed the way in which their acquisition of
information would be so rapid. I knew that there wasn’t anything wrong with them cognitively, but at the same time, they were flunking out of school. One can judge by the acquisition of new skills just about what intelligence is. These kids were totally misjudged across the board. We could’ve kept them in school.

I finished my bachelors and then my master’s degree. I met my wife Dorothy during my master’s degree work. Two of her nieces were in the gifted program that we were running. I was a student of Bill Hall, who was a student of Carl Rogers, I believe, at Ohio State University. I was a counselor in that gifted program and it was a very positive, creative experience. We were studying creativity among preschool kids who were 3-5 years of age. That was a population of great interest to me at the time. But as we went ahead I gave that up and got my master’s degree. My first job after my masters was a school psychology position at Omaha, Nebraska, and I was assigned to south Omaha on a project. The very, very good director of special education was Don Warner and he initiated a study of dropouts in 1951.

I began to become very interested in the whole dropout picture. It starts with difficulty in learning and acquisition of information and then it goes to a lack of social standing at the school. Dropouts have no friends and they’re almost isolates at which point their interest in school drops. I became interested in that and then the sociology, the network of friends who have supportive relationships that keep kids in school.

I had spent two years there when I ran into Bill Cruikshank at CEC, Council of Exceptional Children. I was working with planning, arranging, and
room assignment and we assigned a wrong sized room for Bill. At this point he was studying brain injury and minimal brain dysfunction in relationship to learning and that became a great interest. I made sure that we reassigned him into a larger room with a capacity of at least 150 because it was a very popular topic. Soon after, I got a letter from Bill that said if I had interest in going forward with a doctoral program there’d be a place for me at Syracuse University. I had become interested in his work so I immediately said, “You know, I would really like to do that.”

I had a Ford Foundation Fellowship at Merrill-Palmer Institute and Cruikshank said, “Stay. See what you learn there.” I learned a lot. We had Abraham Maslow as a guest for two weeks. Clark Moustakis was a regular faculty member. It was a great experience.

I finished the year and then we moved to Syracuse University. I became very fascinated with the way in which you arrange an environment for kids with ADHD; however, they were not called that at that time. We were still referring to kids as “garden variety slow learner.” Were they just hyperactive because they were hyperactive, or did they have a minimal brain dysfunction? What became most fascinating of all, was arranging the environment for learning. With minimal brain dysfunction, the arrangement is very important. There are learners where this is not necessarily the concern, but with the distractible population it’s crucial. So, finally I finished the doctorate basically with a major in learning disabilities, which we were calling “minimal brain dysfunction.”

Intervention: Once you completed your doctorate what was your next step?
Haring: There weren’t many jobs but I got one as director of special education in Arlington County, Virginia. I decided to take an opportunity to get my own thing going. I talked the board into allowing me to set up two classrooms for kids with learning disabilities and hyperactivity and behavior disorders. I came into contact with E. Lakin Phillips, who was head of the guidance clinic for George Washington University and a professor there. He had also taken several courses with B.F. Skinner. He was living in Fairfax County, which was adjacent to Arlington County, so it was very handy for him. He said, “I’d like to work with you on that.”

Phillips brought in a component that was very interesting and, I think, very important. We had 20 kids with learning disabilities, hyperactivity, distractibility, and behavior disorders. They all go together, often in the same kid, but they can be internalized as well as externalized. These kids happened to be 100% externalized; they were the first to be referred for removal from the regular class, which is no longer the idea at all.

We really appreciated the opportunities to demonstrate two major principles. One is to make sure the environment is conducive to learning and the other is to make sure that learning is rewarded. So, we established that concept, which has come to be an important component in applied behavior analysis. We were just approaching the whole idea of reinforcement as a major theory, which Skinner produced not as a theory, but a major principle of learning, and we did make excellent progress during the two years that we were there.
I was able to continue with the University of Maryland where I spent a
couple more years and that worked out very well. We finished the project and E.
Lakin Phillips and I wrote a book called, “Education of Emotionally Disturbed
Children” based on our experimenting in Arlington County.

At this point I had the opportunity to have my own school, The Children’s
Rehabilitation Unit at the University of Kansas, so I moved there and my career
all came together. This was the population of my great concern. It got me very
deep into the whole area of learning disabilities and behavior disorders.

Intervention: Take us from your time arriving at Kansas and moving forward through your
career in the field.

Haring: This is where the career begins. As you can see from my jumping ahead so
rapidly, you already have the idea of how I got involved. I got involved through
the obvious, that kids were not understood well during those periods. We’ve made
a tremendous amount of progress but that’s what got a lot of us involved. The
field was wide open at the time. We had only a few areas where you could finish a
doctorate in special education so that was an opportunity for many of us who got
involved very early on. Sometimes I’m confused with the ‘fathers of special
education.’ I wasn’t the father of special education but I took advantage of an
early opportunity.

Kansas is where it became clear to me that it’s very, very important to
establish the environment to make sure the opportunity to learn is there. The
second condition needed, if students haven’t had positive experiences with
learning, is the reward. We have to sometimes get it started by establishing what’s
called “stimulus control” - using reinforcement that increases the probability of a behavior recurring.

Before this, I would say that I began to see the light in the two classes in Arlington County. I began to see what really makes a difference. To say that that was applied behavior analysis, would fall short, I think. At this point, I do have some evidence that this might have been the first application of concern about reinforcement in public schools. We called it reinforcement, but we used the term as the kind of reinforcement you put into concrete to build strength. In order to call it reinforcement as it’s used in ABA, it does have to be related to whatever behavior you’ve targeted.

After I had moved to Kansas to become the director of the Children’s Rehab Unit in the University of Kansas Medical Center, Lakin Phillips and I wrote the book, “Assessment and Modification of Behavior.” This was the reason that they thought I would be a good person to be the education director.

At that point, we had eight classrooms that were involved in a variety of things. We had more autistic kids and a great increase in our understanding of autistic behaviors. We had a classroom that was somewhere between behavior disorders and autism. It was at a point where many of the children were just interested in what they could generate in their own head rather than what we had for them. That would describe that class, I think. Then we had a class that was very hyperactive and aggressive, and a class of students with physical disabilities.

Intervention: Was this a day school? Where did these children come from?
Haring: They came from the local school districts. At that time, there were a lot of referrals for learning disability. The growth in referral for kids with LD was similar to what we’ve seen with the growth rate for autism over the last 10 years. We were trying to develop classifications at that point, because we felt that there was a relationship between the classification and the way you would teach. Well, that classification is a faulty conclusion. We were looking at that whole notion of increasing the teaching potential.

We were also beginning to look at the possibility of enhancing our measurement system. We were doing charting, but each teacher developed the chart that they liked the best. It was not standardized. Then I had a great opportunity, and I think the late Ogden Lindsley would say it was a great opportunity for him as well. I had read an article that he had written about the prosthetic process of teaching. Then I also heard that he was interested in bringing some of his ideas applied from the laboratories to the field. We were able to get a significant amount of money at that time through the legislature. We were given eight positions in leadership training, which gave us a budget to bring in another faculty member. I actually called Og, who was at the Metropolitan State Hospital, working closely with B.F. Skinner at Harvard. He was a Harvard graduate with his PhD, a natural to bring from the lab. He said, “Yes, I’m very interested.”

At this point, Lindsley had developed one of the most elegant charts, called the Semi-logarithmic Acceleration Chart. It’s now called simply the Standard Celeration Chart, which has evolved over time. This is the most precise chart that combined with a single case design where a child is his own control.
That combination is probably one of the best to enhance our ability to teach and recognize when to teach. It always starts with the stimulus response, where we recognize this is working and this isn’t working - “precision teaching.”

We had education doctoral students on the grant and Og brought two of his own students. One was Eric Haughton and the other was Tom Lovitt, who gives Og credit for being supervisor of his dissertation. Tom did a very elegant design and a contingent reinforcement system that involved physical exercise. The harder and faster that the participants did the exercise, the more the picture would show up. The amount of the picture that was visible was contingent upon the intensity the subject expended doing the exercise and it worked out as a great reinforce. It was something you knew that the subject was very interested in.

Intervention: How did you come to leave the University of Kansas to go to the University of Washington?

Haring: In 1965, I had a chance to come to the University of Washington. We reached Seattle, safe and sound. I don’t think we realized how far it was from Kansas City to Seattle. We got the family together and we actually drove but our dog got a chance to ride in the airplane. We got settled and I checked in at the University and the Center of Mental Retardation. We had what was called the School Unit and I came there to direct the School Unit. We had a study of biology in the School of Medicine, the study of social learning in the Social Research unit and another dedicated to the testing of kids’ speech, hearing, visual, intelligence, potential for learning in the Clinical Training Unit. We had four major units set up right in the center of the medical center.
I changed the name of the school unit to the Experiment Education Unit. “Experiment” was kind of hot at that time, as sayings develop. “Experimental” is not so hot, in the sense that it’s an experimental study in a laboratory setting. If it’s a natural study in the applied area then you’re in the neighborhood. You’re right down where the action is.

Of course, I had the experimental education unit, but we were definitely applied. Twenty-one school districts sent kids and we increased our enrollment to 200. We started first in the coach house that was built for the 1962 World Fair. They were condominiums basically. We were growing very rapidly. By the time we moved into the EEU it had 12 classrooms. We filled every classroom. We moved from preschool up through secondary level.

We had a number of things going on that were very, very significant. One of the trainees, Harold Kozuma, who had been trained by Og Lindsley was our principal. He was born in Reardon, Kansas. He had the same adjustment to make along with his wife, who was a nurse. Harold really took over immediately and trained all the teachers. He was well trained by Og. He had everything that was necessary including the six cycle, the standard celeration charts. All the data we were taking, we could share so that became reinforcement for teachers as well. I think that was significant and one of the first times that you could say that this is applied behavioral analysis. It was totally applied with the necessary precision in the charts. We all became very familiar with single subject or single case designs. By 1975 there was a textbook by Hersen and Barlow on single subject design. At that point it was becoming obvious that we were getting some transfer out of the
experimental clinical situations and laboratories. Schools were coming along with this now.

You’ve seen the growth of more precision in teaching and how that kind of merges or morphs into the requirement of RTI, response to intervention. Now, in general we have to demonstrate that intervention is improving the learning capabilities.

I think the most important legislation went into effect in 1975 mandating education for all. We were very much part of the education for all legislation in the state of Washington. We were the first to have education for all children as a state requirement. So, I think our state was part of the pioneers in that whole area.

In the meantime, we became very interested in the early education of children with Down syndrome. Our theory was that they can learn and they can learn much better if they’re under very well organized, systematic instructional programming. We started at two years of age and we said, “We must start earlier than this.” So, the second year we had two classrooms of kids with Down syndrome. This was probably one of the most significant findings - children with Down syndrome can learn to read and anything else necessary in Kindergarten. They entered into the First Grade and in many cases they moved right into the regular classroom. This was about 10 years ahead of full inclusion. I later had a doctoral student that wanted to see how they were doing at 12 years of age or so. Their language skills had remained very good and social skills remained. We brought the intelligence up as a group, in many cases to within normal range if we accept 90 to 110 being normal range.
Intervention: I was thinking of recent efforts to open the avenues for individuals with Down syndrome to have a collegiate experience. Did you deal with that?

Haring: That became part of the emphasis as our school population got into high school and then into the necessary skills for placement beyond high school. We felt that we had covered everything from birth up to adult to their 22\textsuperscript{nd} birthday. Without getting too far afield we’re still without much in the way of resources for a person with disabilities who hasn’t been able to grasp the skills necessary. We’re kind of out of resources when it comes to beyond age 22. I think that’s one of the most important periods that we need to find out what we’re going to do. I would say that if you could extend the health insurance up to 26, why couldn’t we continue on with the transition period up to 26? I think we should lobby for something like that.

Intervention: Were you at the University of Washington until the your retirement in 1996?

Haring: Well I hung in there until our son, Tom, became ill and he passed away. I became more interested in something else not associated with the directorship. I actually had left the unit a couple years before and started working with the deaf-blind. We never really brought deaf-blind students into the unit. That was one of the greatest learning experiences that you could ever have, with the most severely disabled.

I’ve had a number of really outstanding students at the doctoral level, Mark Worley at Peabody, Felix Billingsley, who is now retired, but stayed at the University, Dale Gentry, who was the dean of education at the University of Idaho. I’m so proud of Tom Lovitt, whose career developed here and who became
known as an outstanding teacher of reading and other academic areas. I felt the career was powerfully successful.

Intervention: Looking back, what events, policies, innovations, and people have most influenced your professional life?

Haring: I think that people are an important place to start because there are some wonderful, gifted educators. I think I got started with one in Bill Hall. He always looked at what’s good, what’s the positive, where are we going with that, and how is it going to contribute? That was his nature. He didn’t spend time with criticizing and negative thoughts. Another person that I felt was into something very important was Bill Cruickshank. His basic training was clinical psychology but he was a neurological psychologist if ever there was one. He had put together some of the very basic ideas of a better understanding of the brain. As we move forward we will see the importance of studying brain behavior and the identification of areas that are responsible for behavior.

A person that I’ve always felt was so significant in applied behavior analysis was Sid Bijou. Sid had a wonderful team of people that he had brought to the University of Washington in the development psychology lab; Don Baer & Todd Risley. That whole group was just perfect applied behavioral analysis. Sid, did a study of children in the Rainier State School. He had such a successful class of kids that were at a state residential school and one of the best experimental analyses of behavior in a laboratory setup. The team that he built coming out of psychology and tying into education was one of the most important advances that we’ve ever had in the education of kids with disabilities.
I think the future is in our ability to look at social and behavioral research and say, “What could be almost ready to come out of the laboratory into the applied setting?” I found out today that the University of Washington has established an institute of translation from the laboratory, in this case, to the products, which are marketable. Why don’t we do that in education? Why not look at some of the social research that’s going on and support it into a product? I think we can look at these kinds of events as being the future.

Intervention: Looking back, what do you think has had the greatest positive impact on the field?

Haring: Well, we would have to recognize the importance of legislation. You hate to be driven by the legislation or legislatures but even so it started with “Education for All Handicapped Children Act.” Then legislation for partial inclusion in the same school in resource rooms, which was a step, and finally full inclusion.

Measurement, in terms of progress that you’re making in the schools, is still not where it should be and we need to go a little bit further, but it certainly is increasing and that is important. We have a brilliant future tightening our own measurements in education. Again, I do think that single subject designs are the answer. As we become more refined, as we become more interested in making trend lines to show what we are actually teaching, I think we’re on the way to achieving that. These are the bright spots.

I’m still engrossed with the idea of looking at laboratory work in the social studies and seeing what applied value they might have.

Intervention: What’s the greatest negative influence you see on the field?
Haring: Well, the other side of the coin is not doing what you know you should be doing. That’s the most troubling. If we don’t do what we know that’s better than what we’re doing. I’d say one of the things that we should know better is not giving all teachers more experience working with kids with disabilities. They have no experience, they may take an introductory course, and you really don’t learn anything in an introductory course. The whole idea of expecting a regular classroom teacher to take a child without any of the skills that you were expecting, including the social skills, and teach without any experience whatsoever: that’s unfair and I think, a serious mistake.

Intervention: Where do you see this field going in the future?

Haring: Well, the Norris and Dorothy Haring Center is the most optimistic set of conditions that we have right now. One of the problems that we’ve had is to get by on our own rather than with a lot of federal help. The Haring Center consists of a professional preparation unit, in terms of research about being ready to teach. The other unit is more information about individual children. We’re concentrating right now on autism. What autism means and how to get early support for the child. One of the areas is the measurement of how much of what’s coming in is being used intellectually or cognitively. We have what I call an individual measurement system of the potential of problems. As we get into the whole area of autism, some of the classification is causing almost an epidemic growth rate. We really need to get more refinement. Is it really autism or is it something that’s similar to or related to autism?
I’m equally pleased because in the other unit has a $40 million grant for training Head Start teachers throughout the nation. The University of Virginia has one of the centers, and I believe Peabody has another center assisting us in this project. We’re getting some nice training programs here for infancy and we’re seeing the importance of starting even before Head Start, at least in the training and the education that’s necessary for professionals. I’m excited about that.

The Center is named after Dorothy and me that is a great honor. I’ve avoided the use of “reinforcement” because I’m not sure it accelerated my behavior in any way. Ultimately, our estate in the Center will be in the hands of our two daughters. Martha is a clinical psychologist. She must love it because she spends most of her time working with patients, making home calls, and setting up symposia. She has a place on one of the islands and so getting up on the island and intensive study, working on group therapy, is a thing she does enjoy doing. Katherine, is a professor at the University of Oklahoma. She’s very interested in teaching in the area of disabilities. She also concentrates on early education and then she has a chair in literacy. Her major studies are in Russian Literature. So, I think we’re totally fulfilled. We’ll always make sure that the funding level there will provide at least ten fully funded scholarships. We expect to train some leaders with ideas of what will work and what won’t work.

Intervention: What advice do you have to those just entering the field either practitioners going into classrooms, serving kids with special needs or higher education positions?

Haring: It would be an error to respond to that unless you can identify the trends, stay focused and utilizing the strengths that you have in carefully focused areas. Get
ahead of the parade if you can and be one of the producers of the fundamentals of where we should go. I think we’ve had success in better measurement and more responsiveness to the measures. Some of the answers are coming from better measurement, which is coming out of the laboratories, and there are other ideas from the laboratories that should be translated. I would advise people entering the field to follow the trends, stay focused, and don’t expect probability to take care of you.

Intervention: Is there anything that we haven’t asked about that you would like to add?

Haring: Here’s one thing that I have to share. Dick Whelan came to KU from the Menninger Foundation where he was the head of the school. After I left, they appointed him head of the Children’s Rehabilitation Unit at the University of Kansas. He’s a marvelous educator, just a tremendous educator. I’ve had the fortune of having such students that are way beyond me in all areas. I can’t begin to name names at this point but I think about them and wish them the best. They’ve all succeeded so well.

Intervention: Thank you for your hospitality and willingness to share your thoughts and experiences. We wish you continued health and success and look forward to coming back to the Center.

Norris Haring has witnessed and guided many pioneering developments in special education during a distinguished career that continues to have a positive impact on generations of children and students. His decades of promoting and charting the positive changes are a
model of service to the field. The authors thank Dr. Haring for sharing his experiences, commitment, and wisdom.