Approved: May 26, 1998
Date

MINUTES OF THE HOUSE COMMITTEE ON EDUCATION.

The meeting was called to order by Chairperson Michael R. O'Neal at 3:30 p.m. on February 19, 1998 in Room 519-S of the Capitol.

All members were present except: Representative John Ballou - excused

Committee staff present: Ben Barrett, Legislative Research Department
Avis Swartzman, Revisor of Statutes
Cindy Wulfkuhle, Committee Secretary

Conferees appearing before the committee:
Karla McGlothlin, Kansas Autism Foundation
Professor Don Baer, Kansas University, Human Development & Family Life
Gina Green, Director of Research, New England Center for Children
Cheryl Smith, Parent, St. Pauls, Kansas
Representative Bill Reardon
Representative Tom Sawyer
Fred Kaufman, Superintendent Hay School District

Hearings on **HB 2671 - autism information act,** were opened.

Karla McGlothlin, Kansas Autism Foundation, appeared before the committee in support of the proposed bill. She stated that parents are not receiving information as to their options for treatment of autism. This bill would require that school districts give a list of all treatment options to parents.

Professor Don Baer, Kansas University, Human Development & Family Life, explained to the committee that for many children with autism the only treatment they respond to is Applied Behavior Analysis. The parents who have used this analysis want others to be informed that there is this option. (Attachment 1)

Gina Green, Director of Research, New England Center for Children, appeared before the committee in support of **HB 2671**. Applied Behavior Analysis has been proven to be effective in hundreds of autism cases. Research shows that without effective intervention, most autism people are moderately to profoundly disabled. The cost for providing treatment is at least $3 million per person. It would be beneficial to parents to have a list of treatment options including Applied Behavior Analysis to chose from. (Attachment 2)

Cheryl Smith, Parent, appeared before the committee and told about her son who has autism. She tried several treatments and didn't see any results. After much searching, she heard about the program that Kansas University offers called Applied Behavior Analysis. She has seen much improvement in her son since he has started the treatment and wished that someone would have told her that it was out there. She believes that many parents would benefit from a list of treatment options that are available in the state. (Attachment 3)

Many committee members were concerned that if the State Board of Education provided a list of treatment options parents would expect their school district to pay for any treatment that is on the "list".

Diane Gjerstad, Wichita Public Schools; Mark Tallman, Kansas Association of School Boards; and The Department of Human Resources did not appear before the committee but requested that their written testimony be included in the minutes. (Attachments 4, 5, & 6)

Hearings on **HB 2671** were closed.

Hearings on **HB 2752 - school districts finance preferred pupil/teacher ratio classes, weighting,** were opened.

Representatives Bill Reardon & Tom Sawyer appeared before the committee as sponsors of the proposed bill. They told the committee that limiting class size to 17 would benefit children because they would receive more attention from the teacher in class. (Attachments 7 & 8)
Fred Kaufman, Superintendent Hay School District, appeared before the committee in support of the bill. He stated that U.S.D. 489 have limited their class size for a number of years. He believes that there are fewer discipline problems and that there is more student-teacher interaction. (Attachment 9)

Sue Chase, Kansas National Education Association, & Diane Gjerstad, Wichita Public Schools, did not appear before the committee but requested that there written testimony be included in the minutes. (Attachments 10 & 11)

Hearings on **HB 2752** were closed. The committee meeting adjourned. The next meeting is scheduled for February 23, 1998.

Testimony to the Kansas Legislature

Donald M. Baer

University of Kansas

Let me tell you a little about the history of autism. For hundreds of years, professionals examining a child with autism had no diagnosis other than idiocy to apply. That diagnosis meant no hope and nothing to do. But, at the end of the 18th century, a French doctor named Itard was presented with a recently captured young wild boy. The boy had apparently been living alone in the woods most of his life. He had no language, and he did not want to be with people. The descriptions of him written then suggest now that he was a case of autism. That doctor resisted the psychiatric diagnosis of idiocy; he undertook the boy's education. It took several years. Six remarkable things resulted; they are all of great importance to us today:

First, to some extent, that doctor succeeded. Second, he wrote an account of that success, and got it published. Third, his publication was widely read and acted on; it is still published today. Fourth, it showed us a child's education is always possible, no matter what the diagnosis. Fifth, it gave us the moral conviction that since education is possible, it's mandatory. Sixth, it shows us today how little behavioral science was known in the 1800s.

Today, we recognize what that doctor was doing, and, more important, today we know how to do it much, much better. We know how to motivate learning today, even in children who at first don't want to learn--who don't want to do anything with us. We know a lot more about how to break difficult lessons into easier ones that add up to the same skill. And we know a lot more about the order in which those lessons have to be taught. We have a behavioral science now.

To apply that knowledge to the education of children with autism is difficult. It may be the most difficult exercise behavioral science will ever face. This application has taken the last 40 years to work out. About 500 studies have been published on this problem; each one contributes, or verifies, or improves on another piece of the total effort. Today those studies finally add up to a treatment and education program, usually called Applied Behavior Analysis.

This application of behavior analysis to autism is not a theory, not a philosophy, not an idea; it's a working program. It's a set of procedures. Every one of those procedures has been tested repeatedly and objectively; every one has been proven effective. Those procedures are public, objective, and easily described. Anyone willing to read carefully and be trained can do them; they are not art, not magic, not politics. They are procedures, and they work. They are also hard work.

Much of that hard work is done by the parents of the autistic child. Let me tell you something about those parents. I've spent my professional life studying children with severe

disabilities. Most of them were in institutions. Their parents had decided these children had no future. Today, you are hearing from different parents. These parents have been dealt the worst deal I can imagine for a parent. But they're answering that bad deal by defending their children at home. I can't put into words how much I admire them for that defense. We would all defend our children against a sudden threat; these parents are defending their children against a constant, deadly threat, and they're doing it every day, and it's hard work. They don't want their child's life to be as bad as it will if nothing effective is done.

These parents have looked a long time for effectiveness. Too often, they've been told there's none to be had. Sometimes, they've been told there was some effectiveness available, and they took the offer, but their child only got worse. Some of them remember that with great anger. And sometimes those parents discovered Applied Behavior Analysis, almost always by chance. When they took that offer, more than 90% of their children immediately began to improve, and continued to improve, as long as the teaching continued. Ask them. The relevant scientific literature says the same thing.

That's why there here: They would like all other parents of autistic children, and all future parents of autistic children, to discover what finally helped their children. They would like that discovery to be certain, not a matter of chance.

I'm here to report that they're not simply asking you to mandate a prejudice of theirs. Five hundred carefully measured

studies say the same thing. The most recent long-term outcome study says everything that justifies these parents' request. If we start early in autistic children's lives--as early as the moment of diagnosis--and if we work steadily in the best way we know, every day, for perhaps the next 10 years, half these children will have an adult life in the social mainstream. They'll probably earn their livings, and they'll pay taxes rather than cost them. If we don't give them that chance, each of them will eventually cost us $3 million dollars to maintain in an institution.

Half the children who get that program won't make it all the way to adult independence. But they will have learned enough to live real, decent lives in humane settings with other people. They will have some pleasure, some control over their world, and some companionship. They will be able to and they will tell their parents they love them.

The alternative is as dismal a picture of human life as I can imagine for a civilized society.

We can decribe autism, and we can't explain it. But even without an explanation, we know how to treat it. We need to teach each autistic child how to communicate, how to relate to people, the basic self-care skills of everyday life, and a set of problem-solving skills for the modern world. These children often present us with a lot of aggression, self-injury, and self-stimulation, all of which are bad for them and make them difficult to teach. We need to teach them not to do those things.

My point is that we know how to do all that teaching; at various places in the world, we are doing all that teaching. It's a great deal of work, and the parents will do most of it. The sooner we and they can start that work, the better the child's chance for the best possible outcome. That makes it urgent to tell parents what their options are at the earliest possible moment. To not tell the parents at that earliest possible moment is to cheat the children of their best chance.

Testimony to the Kansas Legislature in Support of the Kansas Autism Information Act (Proposed)

February 19, 1998

Gina Green, PhD
New England Center for Children and
E.K. Shriver Center for Mental Retardation

My name is Gina Green. I am the Director of Research for the New England Center for Children, a comprehensive education and treatment program for children and young adults with autism and other severe disabilities in Southborough, MA. I am also an Associate Scientist in Behavioral Sciences at the Eunice Kennedy Shriver Center, a private nonprofit research institute in developmental disabilities in Waltham, MA. I'm grateful for this opportunity to speak to you about the proposed Kansas Autism Information Act.

One of my responsibilities at the New England Center is to help direct our Early Learning Program, which serves young children with autism and other pervasive developmental disorders. Another is to help our educational and clinical staff evaluate the effectiveness of the methods they use with our students systematically and objectively. We try to use methods that have proved effective in sound scientific studies, and to test promising new techniques using scientific methods. We have several reasons for doing this that are directly relevant to the proposed Kansas Autism Information Act. Every few months we see reports on television or in the popular press about another "breakthrough" treatment for autism. Throughout the history of this disorder, there have been hundreds of claims like these, mostly based on beliefs, opinions, and speculations rather than facts. Every year, millions of dollars and hours are spent on therapies and techniques that are claimed to be effective for autism. These range from swimming with dolphins, to special diets, to various educational strategies, to simply having children with autism spend time with typically developing youngsters. Families who may already feel overwhelmed by the difficult task of living with autism are saddled with the additional burden of sorting through

a long and confusing list of therapies. Typically, however, they are not given factual information about the effectiveness, or lack of effectiveness, of those therapies.

The popular view, which you will probably hear today, is that there are many different "options" for treating autism, all roughly equivalent to one another, and that parents and educators should simply choose among them. As much as we might *wish* there were several equally effective and easy methods for dealing with this difficult disorder, common sense tells us this cannot possibly be the case. If it were, these parents wouldn't be here today asking for your help, there wouldn't be some 350,000 people with autism in this country, and it wouldn't be difficult for staff in programs like ours to decide which methods to use with their students. But common sense isn't enough to make important decisions like which methods to use with vulnerable children. We need some reliable means of determining which therapies and techniques can be counted on to produce meaningful and lasting benefits; that is, we need objective methods for sorting opinions from facts. Science provides us with the tools to do this: clear specification of techniques, careful measurement, and controlled testing to see what effects each technique produces. Using the tools and products of science, parents, professionals, and policymakers can differentiate between methods that have been proven to work, and those that are appealing but don't actually help children develop useful skills. The alternative is to rely on wishful thinking and untested assumptions in deciding what to do about autism. When that happens, precious resources are wasted, and many children with autism are deprived of truly appropriate education and treatment (Green, 1996). By passing the Autism Information Act, you will help remedy that situation for Kansas children with autism and their families.

Happily, there is an intervention for autism that has been proven effective in hundreds of scientific studies: Applied Behavior Analysis (see DeMyer, Hingtgen, & Jackson, 1981; Matson et al., 1996). Several studies have shown that when the methods of Applied Behavior Analysis are used in an intensive, comprehensive way with very

young children with autism, most of those children require much less help later in life than they would otherwise. In fact, many require no further treatment or special services at all; they are able to live and learn alongside their typical peers, to *function normally* in regular classrooms without support (Birnbrauer & Leach, 1993; Fenske et al., 1985; Lovaas, 1987; Maurice, 1993; McEachin, Smith, & Lovaas, 1993; Perry, Cohen, & DeCarlo, 1995). I know a number of these children well, and I have seen the data on their original diagnoses as well as the outcomes they achieved through early intensive behavioral intervention. These outcomes are tremendously exciting. They contrast sharply with the findings of several studies showing that for the majority of people with autism who receive typically available services, the condition does not improve much over their lifetimes (e.g., Freeman, Ritvo, Needleman, & Yokota, 1985; Freeman et al., 1991). In fact, one recent study of elementary-age children with autism found that 51% *deteriorated* over the course of four years of special education and various therapies. A minority improved slightly, but remained autistic (Eaves & Ho, 1996).

In short, research shows that without effective intervention, most people with autism are moderately to profoundly disabled. The cost of providing them with special education and other services over their lifespan is enormous, at least $3 million per person currently. Most of that comes out of taxpayers' pockets. Of course, the personal costs to these individuals and their families really can't be calculated. But if all families were given scientifically accurate information about treatments for autism when their children were first diagnosed, and if states like Kansas were to invest in early intensive behavioral intervention, considerable expense and anguish might be saved. Recently Dr. John Jacobson of New York, Dr. James Mulick of Ohio, and I analyzed the potential costs and benefits of early intensive behavioral intervention for autism for the Commonwealth of Pennsylvania. Based on current research evidence, we estimated a range of effects after an average of three years of competently delivered early intensive behavioral intervention, with 20% to 50% of children achieving normal functioning, 10% making some gains but

continuing to require intensive services throughout their lives, and the remainder making enough gains that they require substantially reduced educational and adult services. Obviously time doesn't permit me to go into detail here, but the bottom line is this: Using rather conservative figures, we estimated cost savings of about $200,000 per child for ages 3-22 years, and nearly $1 million per child to age 55 (Jacobson, Mulick & Green, under review).

If just 100 Kansans with autism receive good intensive Applied Behavior Analysis services while they are young, you can see that the financial benefits to the Kansas education and adult services systems are potentially huge. It is impossible to place a dollar value on the benefits for children with autism and their families. The first step toward realizing those benefits is passage of the Kansas Autism Information Act. I thank you for considering it.

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Dear Members of the House and Senate:

Our son Eric was diagnosed with Autism in January of 1997. He was born 12 weeks prematurely and had developed at slower rate that his siblings. We received Birth to Three services since he was 4 months old. At the age of 21/2, Eric's grandfather had collected a lot of information about Autism over the internet. He had been around another child with autism in the family and noticed similar behaviors in Eric, such as lack of eye contact, no interest in play, and his constant self-stimulatory behavior of flipping handles.

We knew that Eric may possibly suffer from disorders due to prematurity, such as cerebral palsy, as was his diagnosis at this time. We thought we could manage, no matter the disability, but when his grandfather gave us the DSM III diagnostic criteria for autism, we were shocked! Our child had 6 of the 8 criteria, and not one person in the medical profession had picked up on this. As we read more information and the prognosis for our child, we became deeply, deeply saddened at the thought of what our child's future would be like. As of this time, he could not walk properly, nor talk and appeared not to understand or care about anything.

We were devastated. We took Eric to his neurologist in Wichita with our list of symptoms. He told us Eric possibly had Landau-Kleffner Syndrome and wanted to put him on extremely high doses of steroids. We did not feel comfortable with this and took Eric to Mayo Clinic in Rochester, Minnesota for a second opinion. Our fears were confirmed there. No he didn't have cerebral palsy, he is autistic. Before we went to Mayo's we were given a book to read by our relative in Arkansas. It was titled "Let Me Hear Your Voice" by Catherine Maurice. This is where we first found out about the principles of applied behavior analysis. Not one professional from Mayo's thought that ABA would help our child. Not the pediatric neurologist, not the child psychiatrist, not the Dr. of Speech Pathology, no one from his special education preschool--which was the treatment of choice by the Mayo Clinic, along with giving him lots of love and affection and as much speech therapy as possible.

We found out about the Center for Autism and Related Disorders [CARD] through our relative in Arkansas. We contracted with them to set up a home program. We had some improvement but not as we had hoped, and partly due to only having consultations available to us every three months. We have found a consultant from Kansas and now receive follow-up services every 2 weeks. He is improving! Our son now can look us in the eye, we know that this sounds like a simple act, but it was very difficult for him to do, and now every time he looks at us we feel so thankful. He's walking and running and can play certain activities with assistance and some all by himself, he can sit still in a chair and listen to a story, and now he is beginning verbal imitation. We pray that our child will one day talk. You cannot imagine the hope we now see in what first seemed such a hopeless existence for Eric. He is learning how to learn. We see his progress, we are now seeing a brighter future for him. Had we depended on the "proffessionals", our child quite possibly would still be lying on his bedroom floor endlessly flipping his heating vent.

House Education
2-19-98
Attachment 3

Knowledge is power. What better advocates for autistic children than their parents? Who wants them to succeed more than we do? If proven research methods are not brought to our attention, then we can't help them. If we have learned one thing this past year is that only parents can truly find out and pursue what is in the best interests of their children. We now give Eric approximately 37 hours a week of one on one therapy. What if our relative did not share this information about this particular method? We may never have found out in time to help our child. If he doesn't learn to speak before the age of 6, he may never learn to speak. Time is of the essence with autistic children.

We've cried for a year. Our hearts were broken. We cried for the child we felt Eric could never be. Now when Eric smiles at us, or gives us a hug we are so thankful. Thankful that we found out about applied behavior analysis. Our son will hopefully be a productive member of society, not a person whom society forgot. We can reach him now, he can learn, and it just took information on which to act on. Doesn't every parent of an austistic child deserve to feel hope, to know that their child can do more than was ever thought possible? Please give the parents a chance to give their child a meaningful life. Let other parents look to each new day with joy, not despair.

Sincerely,

Mark and Cheryl Smith

St. Paul, Kansas

WICHITA
PUBLIC SCHOOLS

February 18, 1998
Submitted by: Diane Gjerstad

Testimony on H.B. 2671
House Education Committee
Rep. O'Neal, Chairman

Mr. Chairman, Members of the Committee:

The special education directors' legislative committee met earlier this week and prepared the following comments concerning HB 2671:

Page 1, Line 15: The term "legitimate interventions" is not defined. A school's multidisciplinary team would not propose "illegitimate interventions", but is bound be law to base its recommendations for services upon evaluation and assessment information and the child's present levels of educational performance.

Page 1, Line 25: Language skills of children with autism are highlighted here as a common area of delay. In the reauthorization of IDEA, the multidisciplinary team is now required to consider the communication needs of each students. Therefore, this already exists in federal law.

Page 1, Lines 31-37: This paragraph addresses the need for teams to give information to families. Again, this is already in law, and parent education and counseling are identified as related services. Additional information can be written into the IEP (individual education plan). Research is available to support different approaches and methodologies for autism, and any other area of exceptionality.

Page 1, Lines 38-41: The state maintains a list of professionals qualified to evaluate children to determine eligibility for special education services. Parents may request this through their local district of student support services.

Page 1, Lines 42 to page 2, line 6: The state department of education provides a variety of resources to parents, including the Governor's Commission on Autism, various centers specializing in autism across the state, a web page devoted to autism, and a state early childhood autism team. In addition, student support services provides financial support to an autism project at KU Medical Center, which is a resource for evaluation, information, and parent support.

Page 2, Lines 7-12: Autism already exists as an eligibility category in Kansas regulation (KAR 91-12-22(d)).

Providing accurate and current information on all handicapping conditions is paramount for families and the child's educational benefit. This well-intentioned bill does not belong in statute. We would encourage the group to use the avenues available to disseminate information; and respectfully request that the committee not recommend this bill favorably. Thank you for your consideration.

House Education
2-19-98
Attachment 4

KANSAS ASSOCIATION OF SCHOOL BOARDS

1420 S.W. Arrowhead Rd, Topeka, Kansas 66604
913-273-3600

TO: House Committee on Education
FROM: Mark Tallman, Director of Governmental Relations
DATE: February 19, 1998

RE: Testimony on H.B. 2671 - Autism Information Act

Mr. Chairman, Members of the Committee:

KASB appears today as an opponent of H.B. 2671 because our organization believes that the state should not adopt special education mandates for disabled students that exceed federal requirements. Last December, our Delegate Assembly adopted the following position:

> KASB supports the provision of special education services to exceptional children, as well as continuing to include education for the gifted child in the special education mandate. State requirements and regulations for the provision of services to disabled students should not exceed federal requirements.

Following that action, our Board of Directors adopted the following priority issue statement:

> Special education state laws and regulations for children with disabilities should comply with federal requirements. Additional mandates and procedures should be repealed. Local districts should have more flexibility in serving special needs children.

Based on these positions, we believe the Legislature should not adopt H.B. 2671. We believe federal law provides adequate protection for disabled or handicapped children, including the area of autism. It certainly provides extensive due process rights for students and parents. Passage of H.B. 2671 could open districts up to greater legal liability, and would certainly set a precedent for other categories of disability. We believe that concerns about autism treatment should be addressed through the State Board, not state statute.

Thank you for your consideration.

House Education
2-19-98
Attachment 5

STATE OF KANSAS
DEPARTMENT OF HUMAN RESOURCES

Bill Graves, Governor

Wayne L. Franklin, Secretary

COMMISSION ON DISABILITY CONCERNS
1430 S.W. Topeka Boulevard, Topeka, Kansas 66612-1877
Voice: (785) 296-1722 • TTY: (785) 296-5044 • Fax: (785) 296-0466
Toll Free: (Outside Topeka) 1-800-295-5232

February 19, 1998

TO: House Education Committee

FROM: Kansas Commission on Disability Concerns

SUBJECT: HB 2671 - Autism Information Act

The Kansas Commission on Disability Concerns (KCDC) would like to wholeheartedly express our support for the Autism Information Act, HB 2671. The intent of this bill is to require public schools in Kansas to inform parents of their options concerning education plans for children with the diagnosis of autism.

KCDC does not take a position regarding which type of education plan is most fitting and appropriate for any particular category of disability. We support individual choice regarding what type of plan is most appropriate for their own child. The Kansas Autism Foundation has presented us with evidence that although Applied Behavioral Analysis is a viable alternative to some of the current education plans being offered to children with the diagnosis of autism in Kansas, it is not always given to parents as an option.

KCDC was established by Kansas law almost 50 years ago to promote independent living for people with disabilities. Since 1949 we have seen great strides taken to create a living environment favorable to people with disabilities both in our state and nation as a whole. Children are a vital part of what is still a very transitional phase in the enforcement of the current civil rights laws today. KCDC urges your support for legislation which will allow parents to choose a means of educating their children in the method of their choice after being given adequate information regarding all the options available.

HOUSE OF REPRESENTATIVES
STATE OF KANSAS

STATE CAPITOL, ROOM 327-S
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REPRESENTATIVE, THIRTY-SEVENTH DISTRICT
WYANDOTTE COUNTY
2206 EVERETT
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TOPEKA

COMMITTEE ASSIGNMENTS
RANKING DEMOCRAT: EDUCATION
MEMBER: CALENDAR & PRINTING

WILLIAM J. REARDON
ASSISTANT DEMOCRATIC LEADER

The purpose of HB 2752 is to encourage school districts to reduce the student-teacher ratio in Kansas kindergarten through third grade classrooms to 17 students per teacher. There is evidence from a comprehensive five year study in Tennessee that reducing class size to 17 in the first four grades is the most effective way to ensure that every child leaves the third grade being able to read, write and do basic math.

HB 2752 would give school districts an incentive to voluntarily lower classroom size by adding a new weight of .1 for every K through 3 child in a class of 17 or fewer students.

In the Tennessee program, kindergarten through third grade students in classes of 13 to 17 scored an average of 11 percentile points higher in reading tests and 12 percentile points higher in math tests than students in regular-sized classes.

The bill does not apply to those districts who, in effect are currently receiving funding for small classes in the form of low enrollment weighting unless their current weighting was less than the .1 weight provided in this bill. Districts between 1523 and 1799 currently receive less low enrollment weighting than .1 and therefore would be included in the funding provided in HB 2752 if they meet the presribed class size requirements.

An example of how HB 2752 would work: If currently, a school had 51 first grade students with two classrooms (and 2 teachers), the board may decide to provide three first grade classes with 17 pupils per class in order to access the .1 weighting for all 51 first graders. Using the Governor's proposed base for next year of $3705, this would provide an additional $18,895 in state funding. This additional funding would not cover the full cost of a new teacher but would serve as a significant incentive.

Aside from the expected benefits to the young children of Kansas, a significant feature to the bill is the creation of an opportunity for boards of education to exercise meaningful local control. It will be their decision whether to utilize the provisions of HB 2752 or not.

Finally a comment on the fiscal note. Please note that the estimate of $30.5 million is valid if HB 2752 were a mandate and all districts were forced to comply with its provisions. As an option however, it is difficult to guess how many districts will reduce their class size. Personally, I doubt that half of all K-3 students will meet the provision necessary to receive the additional weighting.

Education is the biggest cost and most important responsibility of state government. Encouraging local districts to reduce the size of K-3 classrooms could be the most cost effective method of improving the quality of education in Kansas.

State of Kansas
House of Representatives

TOM SAWYER
House Democratic Leader

Topeka Address
State Capitol
Room 327-S
Topeka, Kansas 66612-1504
(913) 296-7630

Office of the Minority Leader

Mr. Chairman and members of the committee:

Thank you for giving me the opportunity to speak to you today on behalf of reduced classroom size.

I believe that there is no better return on our tax dollars than investing in our most valuable resource - our children. If we commit now to investing in our children with the skills they need to succeed in life, we can save tax dollars down the road on more costly alternatives like welfare and prison space.

By setting the goal now that no child in Kansas be in a kindergarten through third grade classroom larger than 17 students, we will go a long way toward assuring that every child leaves the third grade able to read, write and do basic math. If we provide them with those basic skills early in life, chances are that their success in school and throughout life will be increased.

This bill gives school districts the incentive to implement small classrooms and rewards districts that are already doing so, without imposing a mandate.

I urge you to invest in the future of Kansas by supporting this bill.

House Education
2-19-98
Attachment 8

Testimony in Support of House Bill 2752

Fred Kaufman, Superintendent, Unified School District No. 489, Hays
Thursday, February 18, 1998

I want to thank the chairperson and the members of the committee for allowing me to express my opinion on House Bill 2752 and the advantages of small class size.

We have placed a premium on small class size for a number of years in the Hays public schools. The school finance act of 1992 helped us to further reduce class sizes because we immediately initiated a local option budget. We have had the full 25% since the beginning, and are currently levying 21 mills to support high priority items like small class size.

In kindergarten through the third grade we now average slightly above 17. Small class sizes are a high priority with our teachers, parents, and principals. We are all confident that small class sizes bring about positive changes, perhaps even in ways that are not easily measurable. We know that smaller classes have more student-teacher interaction, and fewer discipline problems. We believe that students in a large lower elementary class will have difficulty catching up with those who were in a small one. We know that they are something that everyone can see and count. You can show how dollars are spent.

We have followed the Tennessee study from the beginning and certainly concur with the opinion that it contains some real evidence in support of small class size. I want to call your attention to four more publications that I think strongly support keeping class size small.

Two popular education writers, Caine and Caine, make the point that early childhood education is of critical importance to children. They say that the young brain will grow if it is stimulated by high quality instructional programs, programs that include what we refer to as higher level thinking skills. We don't just reiterate facts, we connect these facts to other known facts, and we use these facts to come up with new conclusions and solve problems. Can we do this best in a class of 17, or a class of 24?

One of my favorite educational writers is Howard Gardner. Gardner's research out of the Harvard Educational Project concentrates on seven major kinds of intelligence. He says that all children have varying amounts of these different kinds of intelligences. The key is to determine which way each child learns best, and to plan lessons that will take care of the ways that all children learn, and stimulate the growth of all kinds of intelligence. Can we do this best in a class of 17, or a class of 24?

Another of my favorites is David Perkins. What I like best about Perkins is his belief that ability is not fixed, but there are some things we can do to increase children's ability. We need to teach children to think, to ask themselves how they arrive at answers, and if there would be a better way to arrive at the answer, to ask them to become aware of their own thought processes. What implication does this have for grading papers? Where can we do this best, in a class of 17, or a class of 24?

I like Berliner and Biddle, mostly because they say the public schools are lots better than we give them credit for, but also because they point out ways we could be even better. They quote a study done in Texas by Ronald Ferguson. Ferguson says that average class size, years of teacher experience, and teacher ability account for much of the difference in test scores between Texas school districts.

They also quote a study by David Card and Alan Krueger. Krueger used data about men who were in school in the 1920s, 1930s and 1940s. They found that those who were in schools with small class sizes were earning more money in a lifetime than those who were in large classes. We all need to decide for ourselves whether we believe that.

I know that if I had children in the lower elementary school, I would be looking for a school district with small class sizes. Thank you for allowing me to express my opinion.

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Gardner, Howard. *Multiple Intelligences: The Theory in Practice*. BasicBooks, 1993.

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KANSAS NATIONAL EDUCATION ASSOCIATION / 715 W. 10TH STREET / TOPEKA, KANSAS 66612-1686

Susan Chase Testimony Before
House Education Committee
Thursday, February 19, 1998

Thank you Mr. Chairman and members of the committee. I am Susan Chase and I represent the Kansas National Education Association. Thank you for allowing me to speak in favor of HB 2752.

KNEA has a long-standing belief that class size affects the quality of student learning, especially in the lower grades. Research has now begun to establish not only the importance of lower class sizes, but also the optimum size for classrooms. We now know that classes under 17 students are much more effective. It is for this reason we are supporting HB 2752.

We believe that HB 2752 approaches the issues in a very sensible manner. HB 2752 encourages optimum class sizes in the grades where research has shown it has the greatest effect. It also provides incentives for those districts who are currently lowering class size or who plan to lower their class sizes without penalizing those districts who may not have the ability to make that change immediately. It also allows districts to phase in the lower class sizes over a period of years.

As we know from much of the brain research, resources targeted to young children are much more cost effective than those spent in the later years of childhood. HB 2752 helps target those resources. It is for this reason we ask you to support HB 2752.

Thank you for your attention to this matter.

House Education
2-19-98
Attachment 10

Telephone: (785) 232-8271 FAX: (785) 232-6012

Testimony on HB 2752
House Education Committee
Rep. O'Neal, chairman

February 19, 1998
Submitted by: Diane Gjerstad

Mr. Chairman, members of the committee:

Today we are discussing a bill that would, if passed, help kids. Most noticeably a policy to lower class sizes would help students in urban districts. Nationally urban districts with shifting demographics tend to have student achievement going the wrong direction. USD 259 is *not* one of the crowd. The largest district in Kansas with over ten percent of the students is bucking the trend where student achievement, *for all students,* is headed up.

Even the harshest critics of USD 259 acknowledge we didn't get there on our own. Concentrated poverty is a powerful tide. Of our 23,618 elementary students **53%** are free and reduced lunch eligible. In the past ten years this population has increased by **43%**, while total enrollment has increased by one percent.

The district has changed. A focused training effort has included all personnel--vertical slices from principal to custodian have been trained. The Boeing Company has sponsored and shared total quality management systems improvement. The entire system has been altered: budget process aligned with strategic plan; stricter polices improving classroom discipline; graduation competencies set for the class 2001; benchmark assessment development for grades 3,5,8 & 10; and teacher training geared to campus improvement.

The efforts are reflected in improved student achievement across the broad, safer schools, improved parent/student satisfaction and involvement in our schools. As directed and focus the efforts within the school system have been, there remain significant policy issues which only the legislature can address.

Research suggests that efforts to reduce class size in the early grades and to provide early childhood education reap the largest benefits for poor and minority students. The state's role is to target resource to high-need schools.

Turn to the Kansas Assessment Results 1997. Throughout the test summary scores when broken out by size of district and free/reduced lunch eligibility show:

- Smaller districts tend to have higher test scores.
- Free lunch students perform under non-free lunch students
- The greatest achievement gains have been in the districts over 10,000 enrollment

Pupil teacher ratios compiled by the State Department of Education clearly shows that smaller districts tend to have smaller class sizes. This ratio includes all certificated personnel in a building, not only teachers.

The pupil teacher (as calculated by KSBE) for the "big 6" is 17.25, but Wichita is 20% greater at 19.5. The rest of the large districts have full local option budget authority. Wichita attempt to increase the LOB to 21% in August was defeated. A portion of those funds was to be dedicated to reducing class size in reading and math grades K-2. The actual student:classroom teacher ratio in USD 259 K-3 is 24.

While we support this bill there remain several barriers, such as teacher supply, facilities, and the bill as written would not fully fund the required teaching positions to achieve 17:1.

I would recommend a more modest proposal: a three-year Kansas pilot to test the Tennessee findings by setting aside a grant for certain districts with elementary populations eligible for free and reduce lunch greater than 50%. These districts could apply for additional weighting of .25% for K-3 students. The additional weighting would specifically be used to lower class size in core academic areas as determined by the building. Districts receiving these funds would monitor student performance and report annually to the legislature.

Thank you, Mr. Chairman, for hearing this bill which would be an educational benefit for many students.

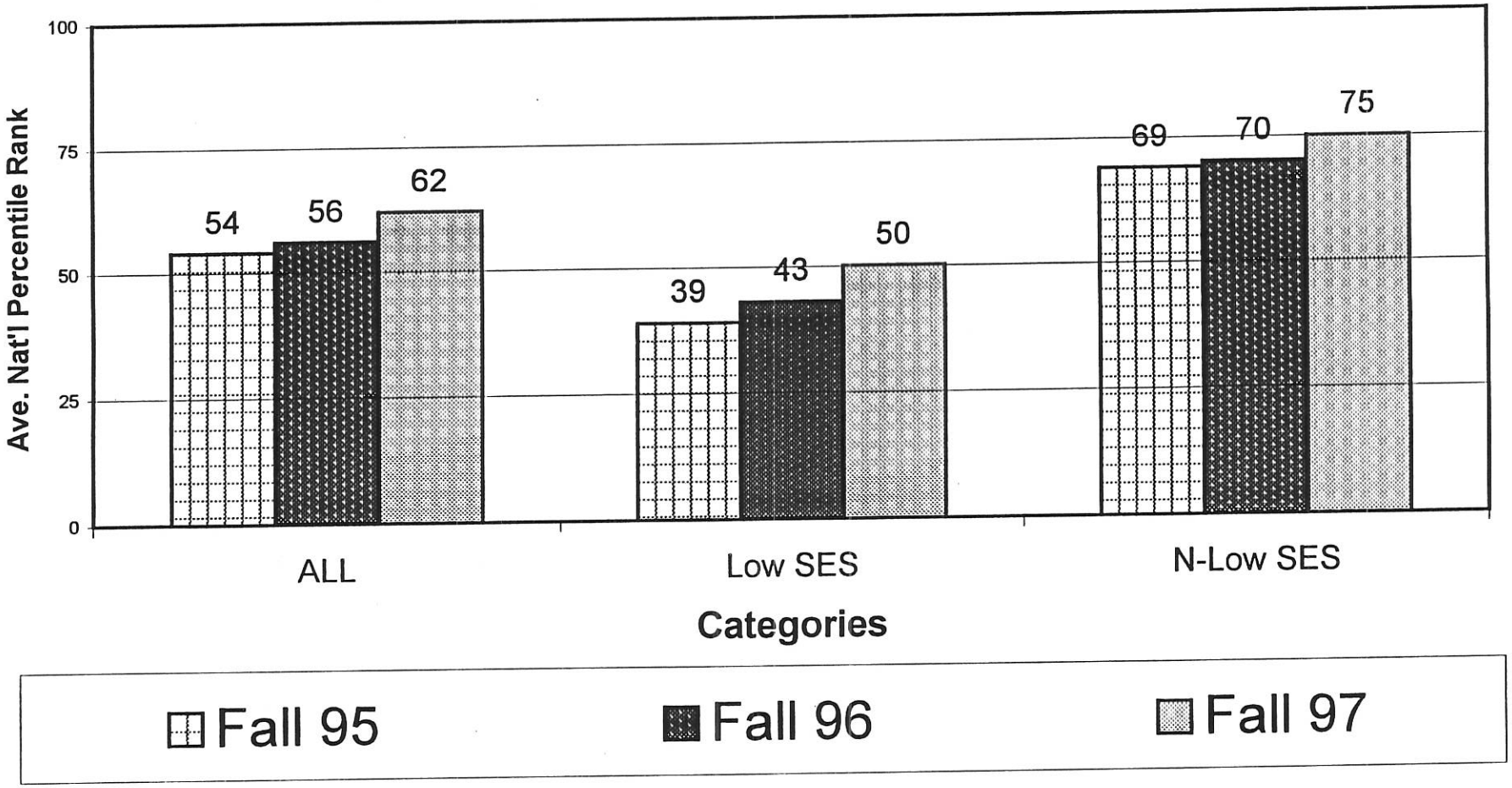
Wichita USD 259
Date Source: Free and Reduced Meals
Grade Levels K-11
5/30/97 Data Collection

School	Rank	% Free & Reduced	# Free & Reduced	Enrolled
H Mann/Irving/Park	1	92.58	761	822
Washington	2	91.07	204	224
Lincoln	3	90.27	167	185
Cloud	4	90.24	499	553
Colvin	5	90.20	506	561
Harry Street	6	85.59	190	222
Payne	7	81.75	233	285
Caldwell	8	80.86	300	371
Greiffenstein	9	80.49	33	41
Franklin	10	80.00	224	280
Ingalls-Isely/Edison	11	79.32	675	851
Hamilton	12	78.76	497	631
Wells	13	77.22	61	79
Stanley	14	76.39	220	288
Jefferson	15	76.12	220	289
Lawrence	16	75.56	238	315
Gardiner	17	73.97	233	315
Jardine/Edison	18	73.62	692	940
Anderson	19	72.34	285	394
Sowers	20	71.82	79	110
Linwood	21	68.91	133	193
Dodge/Edison	22	68.88	394	572
Pleasant Valley M	23	68.85	526	764
Marshall	24	68.07	388	570
Kellogg	25	67.50	189	280
Curtis	26	63.31	535	845
Clark	27	63.20	146	231
West	28	61.96	909	1,467
White/Funston	29	61.92	322	520
Cessna	30	61.62	183	297
Pleasant Valley E	31	61.59	178	289
Kelly	32	61.19	246	402
Allen	33	60.23	156	259
Mead	34	60.17	346	575
Enterprise	35	60.05	242	403
Griffith	36	59.62	155	260
Levy	37	58.59	58	99
North	38	57.34	898	1,566
Adams	39	56.90	165	290
Truesdell	40	56.79	619	1,090
Alcott	41	56.67	17	30
Chisholm Trail	42	56.21	240	427
Woodland	43	56.20	145	258
Minneha	44	56.04	246	439
Black	45	52.53	135	257
District Average		**51.67**		
Metro-Midtown	46	50.00	61	122
Woodman	47	48.98	264	539
Bryant	48	48.65	126	259
Mayberry	49	48.30	326	675
College Hill	50	47.33	204	431
Allison	51	46.91	235	501
Mueller	52	45.88	284	619
Hadley	53	45.55	415	911
South	54	42.47	666	1,568
East	55	41.70	816	1,957
Brooks	56	40.44	256	633
Cleaveland	57	39.51	96	243
Earhart	58	38.54	116	301
Kensler	59	38.39	162	422
Price/Harris	60	38.31	159	415
Coleman	61	38.19	367	961
Beech	62	37.75	171	453
Lewis	63	37.10	69	186
LOuverture	64	37.07	119	321
Buckner	65	36.21	88	243
Riverside	66	36.20	101	279
Metro-Boulevard	67	36.13	43	119
Southeast	68	35.92	624	1,737
Metro-Meridian	69	34.69	34	98
Seltzer	70	34.36	100	291
Benton	71	32.62	122	374
Emerson	72	32.18	65	202
Robinson	73	32.03	205	640
Northeast Magnet	74	28.93	116	401
OK	75	27.97	73	261
McLean	76	26.50	75	283
Wilbur	77	26.46	154	582
Heights	78	26.32	350	1,330
McCollom	79	25.69	74	288
Gammon	80	23.55	130	552
Hyde	81	21.21	63	297
Bostic	82	20.08	53	264
Downtown Law	83	20.00	10	50
Northwest	84	18.58	275	1,480
Peterson	85	16.55	70	423
Booth Early Child	86	0.00	0	0
Little	87	0.00	0	0

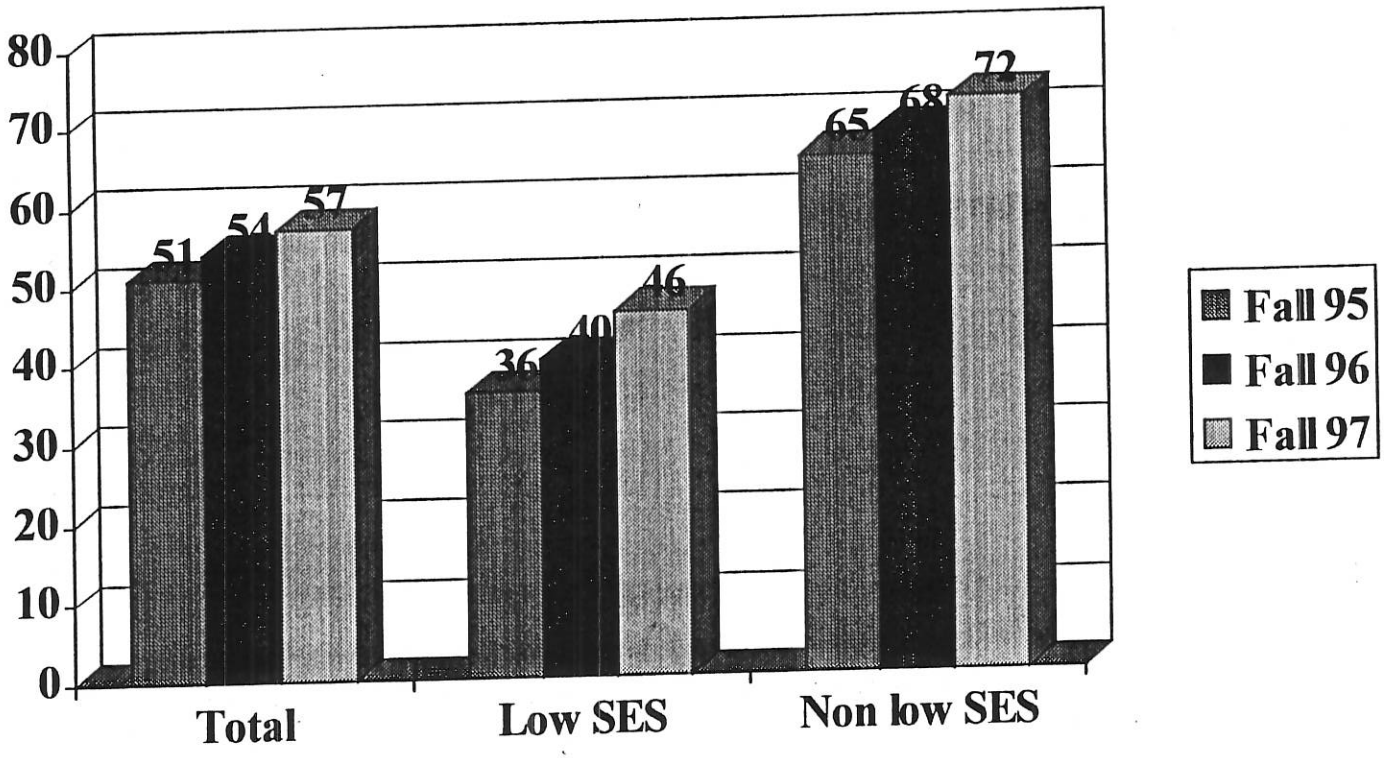
6/3/97

USD 259: MAT7 Grade 5 Math Trend for All, Low SES and Non Low SES Students

Low SES includes those students who are receiving free or reduced cost school lunches.



USD 259: Percent of Grade 4 Reading Scores at/above the national percentile rank of 50



Trend Measures for USD 259 Elementary
African American and Other (including White) students

grade	area	test	crit.	Afr.Am yr 1	Afr.Am yr 3	diff.	Other yr 1	Other yr 3	diff.	summary
3	read	MAT	ave	32	39	7	58	63	5	2
3	read	MAT	% ab	28	39	11	57	66	9	2
3	math	MAT	ave	24	32	8	50	62	12	-4
3	math	MAT	% ab	22	32	10	50	61	11	-1
3	read	KRA Narr	ave	48	50	2	61	63	2	0
3	read	KRA Narr	% ab	49	60	11	76	79	3	8
3	read	KRA Expos	ave	46	53	7	58	64	6	1
3	read	KRA Expos	% ab	45	60	15	71	79	8	7
4	read	MAT	ave	36	43	7	60	65	5	2
4	read	MAT	% ab	33	42	9	58	67	9	0
4	math	MAT	ave	26	36	10	54	63	9	1
4	math	MAT	% ab	24	37	13	56	67	11	2
4	math	KMA	ave	41	43	2	52	56	4	-2
4	math	KMA	% ab	23	31	8	54	65	11	-3
5	read	MAT	ave	37	43	6	62	69	7	-1
5	read	MAT	% ab	37	42	5	64	73	9	-4
5	math	MAT	ave	29	37	8	62	73	11	-3
5	math	MAT	% ab	31	40	9	62	74	12	-3
5	writing	W.A.	% ab	23	30	7	37	53	16	-9
				Average of Gains		**8.16**			**8.421**	**-0.263158**

Differences between first measure and last measure for African American students.

Differences between first measure and last measure for Other (incl. White) students.

The difference between average gains for African American and Other (incl White) students shows that the average gains for these two groups were almost equal.

qis (hgg) 01/98

Trend Measures for USD 259 Elementary
Low SES (free/reduced lunch) and Non Low SES

grade	area	test	crit.	Low SES yr 1	Low SES yr 3	diff.	N/low SES yr 1	N/low SES yr 3	diff.	SUMMARY
3	read	MAT	ave	37	41	4	63	69	6	-2
3	read	MAT	% ab	36	43	7	62	71	9	-2
3	math	MAT	ave	32	39	7	54	63	9	-2
3	math	MAT	% ab	31	39	8	54	64	10	-2
3	read	KRA N	ave	52	53	1	62	65	3	-2
3	read	KRA N	% ab	58	60	2	79	81	2	0
3	read	KRA E	ave	49	55	6	61	66	5	1
3	read	KRA E	% ab	51	63	12	77	82	5	7
4	read	MAT	ave	39	45	6	67	70	3	3
4	read	MAT	% ab	36	46	10	65	72	7	3
4	math	MAT	ave	32	43	11	58	67	9	2
4	math	MAT	% ab	33	45	12	61	70	9	3
4	math	KMA	ave	43	47	4	54	57	3	1
4	math	KMA	% ab	30	41	11	61	69	8	3
5	read	MAT	ave	45	47	2	67	70	3	-1
5	read	MAT	% ab	45	47	2	70	75	5	-3
5	math	MAT	ave	39	50	11	69	75	6	5
5	math	MAT	% ab	40	52	12	68	75	7	5
5	writing	W.A.	% ab	25	33	8	41	58	17	-9
				AVERAGES		7.157895			6.6315789	0.53

Differences between first measure and last measure for Low SES (free/reduced lunch) students

Differences between first measure and last measure for Non Low SES students

The difference between average gains for LOW SES and Non LOW SES students shows that the average gains for these two groups were almost equal.

11-6