

Psychiatrist shows how reading levels dropped

The "New Age" approach to education, which the DARE program typifies, is having a disastrous impact on how children learn—or fail to learn—the Three R's. In his book *On Learning to Read* (Alfred Knopf, 1982), psychiatrist Bruno Bettelheim advances various hypotheses on the decline of reading in the United States, focussing on the role of grade-school primers as they have *devolved* over the years, and on the destructiveness of their boring repetition on a child's desire to learn to read. He cites a 1971 study by Harris and Sipay which documented a shocking decline in the content of the most widely used primers. (This was before the full onset of "affective education," and the situation today is much worse.)

"Harris and Sipay report that the first readers published in the 1920s contained on the average 645 different words. By the 1930s, this number had dropped to about 450 words. In the 1940s and 1950s, vocabulary had become further reduced to about 350 words. Analyzing seven basic readers series published between 1960 and 1963, they found that 'the total preprimer vocabulary ranged from a low of 54 to a high of 83 words; primer vocabularies from 113 to 173 words.' "

The readers became perforce repetitive and dull. Bettelheim notes that even the least verbal group of first graders has command of about 2,000 words, which cuts through the argument that children from culturally deprived homes need such simple readers. On the contrary, as he shows, the manifest decline in reading skills, which was used to justify continuing reductions in vocabulary, is actually due to children's increasing boredom with the material presented.

This negative assessment has been repeated in studies conducted by a variety of academic behavioral psychologists, the latest done in Kentucky in 1991. These studies all show that DARE and its progeny are capable of changing the "attitudes" of students toward drugs, but not their behavior. DARE officers "test" the children at the end of the course, and the children politely repeat what the nice policeman has been telling them to say for the last 17 weeks—and then go out and use drugs anyway, often at higher rates than if they had never met the DARE officer at all. Advocates of the DARE program cannot produce a single study, except these useless questionnaires filled out by the students themselves, which shows that a child subjected to the curriculum is less likely to use drugs than one who is not. Since the bulk of the claims on behalf of DARE come from the officers who administer it, it is useful to note that the *DARE Implementation Manual* instructs the officers that "the DARE officer's classroom performance is graded by (among other things) how well he rephrases students' responses as needed."

Judy Mcemore, an anti-DARE activist in Alabama, notes that one of the most damaging indictments of DARE comes from "Nata Preis of USC's Project SMART . . . [who] said that in its first year her institution's experimental alcohol education program . . . stressed decision-making and self-esteem for children. . . . On conducting the scheduled followup research, however, *she and her colleagues found significantly more members of the experimental group than the control group imbibed. . . . It was as if we'd driven them to drink!*" In fact, they had.

Project SMART was designed to compare two parallel systems of "resistance training," one focussing on social forces (parental pressures, etc.) and the other focussing on affective elements. The issue being addressed was the apparent superiority of the methods which appealed to social pressure and the example of authority to induce a change in attitude toward smoking, alcohol, and drugs. As will be seen, this "social forces" program itself is no prize, and the "affective" curriculum is even worse. SMART was supposed to find ways to make the affective approach, which does not have the "defect" of appealing to parental or adult models of behavior, as effective as the social curriculum. The improvements in the affective methodology which resulted from this work led to the DARE program.

The course outline for the Social Curriculum includes the following topic headings:

- Promoting group identification
- The nature of peer pressure
- Role playing
- Role playing resisting peer pressure to use drugs
- Positive and negative parental influences
- Saying "no" (practice)
- Public commitment
- Videotaping of students' commitment to say "no" to pressure to use drugs.

By comparison, the Affective Curriculum differentiates

for the National Institute of Drug Abuse (NIDA), called "Project SMART." Project SMART was reviewed by a group of psychiatrists from the University of Southern California in a paper published in the *Journal of Preventive Medicine* in 1988, and that review states flatly that the techniques utilized in the DARE curriculum had a *negative* effect on the students who were exposed to them. The summary concludes that "by the final post-test, *classrooms that had received the affective program had significantly more drug use than controls.*" The SMART study is the basis for a RAND Corp. program using similar techniques, and underlies a family of "anti-drug" programs which go by the name ALERT, as well.