SUPPORTING GENERAL EDUCATION TEACHERS IN WORKING WITH
STUDENTS DIAGNOSED WITH AN EMOTIONAL BEHAVIOR DISORDER

A Project

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by

Doris Elaine Tirado

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SUPPORTING GENERAL EDUCATION TEACHERS IN WORKING WITH STUDENTS DIAGNOSED WITH AN EMOTIONAL BEHAVIOR DISORDER

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Graduate and Professional Studies in Education
Abstract

of

SUPPORTING GENERAL EDUCATION TEACHERS IN WORKING WITH
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by

Doris Elaine Tirado

Students with Emotional Behavior Disorder (EBD) are one of the most challenging and difficult student populations to work with. Additionally, according to Allday et al. (2012), teachers are not equipped to work with the challenges that students with EBD may present due to their lack of training, knowledge, and understanding of these specific students. School reform has recently focused on including all students with disabilities, including students with EBD in the general education setting. Inclusion of all students as stated by the Individuals with Disabilities Education Act 2004 (IDEA) requires that students be included and are participating in the Least Restrictive Environment (LRE) which is the general education classroom.

In order to provide necessary instruction, teachers need adequate information and training in working with students diagnosed as EBD. This project provided training in a series of three presentations on the topic of supporting students with EBD. The specific topics addressed were how students are diagnosed with EBD and the
assessment process, a description of the EBD programs in the Elk Grove Unified School District, and strategies teachers can implement for students with EBD.

______________________________, Committee Chair

Rachael A. Gonzales, Ed.D.

______________________________

Date
DEDICATION

I dedicate this project to my loved ones, including my parents, Guillermina Salcedo and Artemio Tirado. Your love, support, and encouragement have been instrumental in the completion of this project. You have helped me reach my goals and taught me to never give up and to persevere when times are beyond challenging. A sincerest thank you.

David Tirado, my appreciation for checking in on me and sending inspiring messages. You are just as much my rock. I love you.

To Jesse Johnson for your words of motivation on a daily basis. The impact you have made in my life and in the completion of this project are not worthy of words. From the bottom of my heart, thank you. I appreciate you.

Last, but not least, I appreciate the time, effort, and the calming words that everything is going to be okay from Dr. Rachael Gonzales. Your reassurance through this process has been a godsend. Thank you.

D. E. T.
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Chapter 1

INTRODUCTION

Teaching students diagnosed with Emotional Behavior Disorders (EBD) is a challenge to many teachers in the school setting. Students diagnosed with this type of disability are on the rise in our society. According to the National Center for Education Statistics (NCES) in 2013 just under 1% of students served in special education were diagnosed as having an emotional disturbance. However, historically, the NCES has documented an increase in serving individual students identified as EBD. Students with EBD may present with behavior, social-emotional, and academic toil that can manifest as any of the following examples: behavior outbursts, anxiety, and depression which can be disruptive and challenging and may hinder the learning environment for staff and other students (Kehle, Bray, Theodore, Zhou, & McCoach, 2004). As stated by Reddy (2001), this population is even more difficult to work with because the behavior occurs across multiple environments and is increasing possibly due to environmental factors such as, living with a single parent, poor nutrition, or drug abuse.

Most students begin their schooling career in a general education classroom setting. When significant difficulties arise regarding behavior and classroom safety becomes a concern a referral for extra support is usually initiated. An assessment must be completed by a complete team including a school psychologist, teachers, parents, and other school staff. In this instance a student may be diagnosed as having a disability in the category of EBD. The results of the assessment are shared at a
meeting with the entire team. Upon initiating this meeting it will be determined which services, if any, are appropriate for the student. There are a number of different service options that can be discussed, some of these may include, but are not limited to remaining in the general education setting, having an instructional aide, being able to take a break in a designated spot, being able to check in with a trusted adult, and/or having a special education teacher oversee the supports for the student. If a student remains in the general education setting a teacher may not have the strategies or knowledge on how to best handle the behavior outbursts for a student with EBD.

Background of the Problem

The Individuals with Disabilities Education Act (IDEA) of 2004 set the foundation that aims to include people with disabilities in accessing the same rights as non-disabled people (U.S. Department of Education, 2010). Before IDEA, many individuals with disabilities were sent to state institutions with little to no interventions for learning and rehabilitation specific to their disability. In the 1950s and 1960s the Federal government started to develop appropriate practices for people with disabilities and their families. This initiated the building of the foundation for IDEA legislation and the belief that including all students in public education is, in fact, important to our society (History in Educating Children with Disabilities through IDEA, n.d.). In 1975, IDEA was enacted by Congress to ensure that children with disabilities have the same opportunities that their non-disabled peers do for a free and appropriate public education. The law itself has been revised as needed with the most recent revision in December of 2004 (U.S. Department of Education, 2010).
Best practices for inclusion consist of educational leaders clearly communicating that facilitating inclusion is not just an add-on to the general education classrooms, but is an extension of research based educational practices that positively affect the learning of all students. According to Bricker (1978) and Stainback and Stainback (1992) the best practice for inclusion is identical to the best practices for providing an education for all learners. The effectiveness of inclusion may be influenced by the feelings and attitudes of teachers and other school personnel (Kohanek & Buka, 1999).

A teacher’s attitude and perceptions toward students with disabilities affect the integration of students in general education classrooms, especially students with Emotional Behavior Disorders (EBD). The fact that teacher’s perceptions toward students’ specific disabilities may affect their inclusion implies that the teacher’s attitude toward inclusion should be explored further. The EBD population is one of the most at risk groups, thus it is critical that educators have the knowledge and tools to help all students be successful in school. Walker and Bullis (1991) and Yell (1995) state that many teachers have biased ideas about students with EBD, they may be confused or unclear on how or why the student displays their emotions the way they do and how best to support them.

Statement of the Research Problem

Research according to Allday et al. (2012) points out that teachers need more training and support in how to work with students that are EBD. Additionally, ongoing support, training, and collaboration with other service providers, teachers and
staff, and parents are important to the well-being and success of both teachers and students (Shapiro, Miller, Sawka, Gardill, & Handler, 1999). In a study by Avarmidis and Norwich (2002), it is suggested that teacher attitudes towards integration were strongly influenced by the nature of the disabilities, for example, students with EBD and/or other educational problems rather than by the professional background or experience of the respondents. A study by Scruggs and Mastropieri (1996) suggests that although many teachers agree with the idea of inclusion, only 40% thought it a realistic goal for some children, the responses seemed to depend on the specific disability of the child. The study by Scruggs and Mastropieri (1996) was done by surveying teachers about their views on inclusion from 1958-1995 (pp. 59-74). There was no major correlation between attitudes and the dates of publication for the above mentioned study, which indicates that teacher’s attitudes have not changed much over the years (Avarmidis & Norwich, 2002).

**Purpose of the Project**

The objective of this project was to provide support to general education teachers through a series of workshops that would provide them with the knowledge and skills that will help them feel more confident in working with this population. In a study by Borko (2004), it is shown that high quality professional development is linked to higher quality teaching which in turn is linked to higher quality student outcomes in the learning environment.

The desired outcome was that through the three different presentations information for general educators was provided including: (a) Diagnosis of Students
with EBD, (b) Overview and Description of the EBD Programs, and (c) Strategies to Use for Students with EBD. Through having exposure to information regarding students with EBD the goal is that teachers will be able to include these specific students in their learning environment and ensure that access to an appropriate education is being provided.

**Theoretical Framework**

It is important that as educators we continue to learn and implement new learning into our teaching environments. Professional development can advance careers and create new experiences for teachers and students alike (Toom, 2016). Professional development has generally been associated with simple in-services with someone talking at the group instead of actually being involved with the group, for example, an actual participating member of the school’s surrounding community. Often times the person presenting does not really know the school community or understand the school climate, they have not developed close relationships with staff, students, or parents. “Teachers, both experienced and novice, often complain that learning experiences outside the classroom are too removed from the day-to-day work of teaching to have a meaningful impact” (Putnam & Borko, 2000, p. 6). Although these types of trainings may seem mundane and may have a negative view among many educators, it is still necessary for teachers to continue their education and keep up with new research, techniques, and strategies.

Teachers can bring change to their schools by gaining knowledge, not only through professional development, but by completing projects, such as, classroom
action research. Classroom action research can demonstrate a specific need for a teacher by taking data and keeping track of data, implementing new strategies, and reflecting on teaching practices. It helps teachers find out what works best for the student’s learning. It is a systematic way for teachers to learn what is going on in their environment to make improvements (Clark & Rust, 2003). The focus of the learning becomes specific to their classroom. The problems or questions are about their own classroom and their specific students (Mettetal, 2001). For example, a student that is having emotional outbursts during class can be a problem for the learning environment, but documenting and taking data on the behavior could be helpful to determine the precursors to the behavior and the where and when of the specific behavior so that a viable solution may be implemented.

**Terminology**

Behavior Intervention Plan (BIP)

Once the function of the behavior has been determined, the IEP team will discuss and choose the intervention plan that may include positive behavior interventions to increase positive behavior or decrease unwanted behavior, the focus is on what the student needs and what they are motivated by (Public Schools of North Carolina, 2016).

Emotional Behavior Disorder (EBD)

IDEA defines emotional disturbance as follows: “...a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child’s educational performance:
(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.

(B) An inability to build or maintain satisfactory interpersonal relationships with peer and teachers.

(C) Inappropriate types of behaviors or feelings under normal circumstances.

(D) A general pervasive mood of unhappiness or depression.

(E) A tendency to develop physical symptoms or fears associated with personal or school problems (Council for Exceptional Children, 2016).”

Functional Behavior Assessment (FBA)

A problem solving process for addressing problematic student behavior, it identifies the purpose of the behavior through a variety of techniques and strategies to assist the IEP team to determine interventions to use to address the problem behavior (Center for Effective Collaboration and Practice, 2001).

Inclusion

The opportunity for students with disabilities to access and learn alongside their peers that are not disabled in general education classrooms (Inclusion, 2016).

Individualized Education Plan (IEP)

Written statement for a child with a disability that is developed, reviewed, and revised in accordance with (Center for Parent Education and Resources, 2016).

Professional Development
The process of improvement and increasing the capacity of staff through access to educational training in the workplace (Professional development, 2013).

Special Education

Programs that are designed for students who may be mentally, physically, socially and/or emotionally delayed which places them behind their peers (Teach.com, 2016).

Assumptions

There is an assumption that general education teachers have a lack of information about the diagnosis of students with EBD and the strategies to use with these students. The researcher is making the assumption that through specific trainings teachers will gain a better understanding of the EBD population. It is also assumed that this will prompt teachers to be advocates and seek out more information about supporting students with EBD.

Justification

All students deserve quality education regardless of disability. With the high percentage of students with EBD being taught and included in general education classes, in this specific school district it is important that teachers and administrators, not only know how and when to identify the students, what services are available, and best practices to work with them. The lack of understanding about this specific disability causes teachers to form negative views about children with emotional disabilities and how to support their classroom learning. With proper training teachers
can learn to understand and form a more accepting view of these types of disabilities and how to best provide a supportive learning environment.

**Limitations**

This project was conducted at one middle school in the Elk Grove Unified School District. The training was offered to all staff at the site, but was directed especially to general education teachers. This limited the sample of teachers to this specific school and this particular age group. The participating groups varied between 4-12 teachers. The staff development trainings were held afterschool on the teacher’s own time, making the samples smaller than if the trainings were mandated by administrators.
Chapter 2

REVIEW OF RELATED LITERATURE

Introduction

The student with EBD poses needs based on behavior and mental health supports. In order to best help a student with EBD teachers need to be aware of how a student with EBD is diagnosed, the different programs that are offered for a student with EBD, and some useful strategies in working with this population. This project concentrates on the three key aspects as it relates to successfully including students with EBD in the general education classroom. The diagnosis of students with EBD is not universal among districts or other educational programs, it does typically consist of a team decision and several different kinds of assessment tools used by the school psychologist in collaboration with teachers, parents, counselors, etc.

Defining the Student with EBD

Students with EBD demonstrate behaviors that are different than their typically developing peers. These behaviors can include verbal and physical aggression, opposition, hyperactivity, defiance, depression, and poor self-control (Kress & Frederiksen, 2010). Consequently, as mentioned by Heflin and Bullock (1999) and Scruggs and Mastropieri (1996), the attitudes about this disability may negatively affect the inclusion experience for the general education teacher due to their lack of knowledge of how to teach students with these types of behavior.

Students identified as EBD are required to be served in public schools under the Individuals with Disabilities Education Act (IDEA) (U.S. Department of
Inclusion for these students is increasing in our public schools simply because the number of students being identified is increasing. Teachers are in need of adequate training to provide an educational environment to students with EBD because of this growth. According to the Center for Public Education’s website (2006) in 1976, just 5% of all students received services in special education, by 2006 this number nearly doubled, this includes students with EBD. Considering other student populations, this is a huge growth. In order to seriously advocate for the concept of inclusion teachers must be open to learning and implementing supports for this population.

Our society must be one of including and accepting all people. Our communities manifest themselves with a variety of cultures, languages, ethnicities, disabilities, different kinds of sexual orientation, and different faith bases. In order to fully envelope this idea of inclusion, it becomes critical that we make our education system open to the idea of including all people. Inclusion is defined as a philosophy based on values meant to maximize participation of all citizens in society and in education by minimizing exclusionary and discriminatory practices (Booth, 2005).

These students can be considered one of the most difficult populations to work with in the classroom simply because of a students’ possible severe behavioral needs. Best practices to help these students in the general education classroom have been studied by Regan (2009), Boyer and Mainzer (2003), and Yell, Shriner, and Katsiyannis (2006). These researchers examined the most effective ways to help students with EBD by documenting and collecting teacher experiences and data on
how they felt about working with these students. The work of Regan (2009) identified that educators are often not trained or do not feel like they have enough training to work with students diagnosed as EBD in their general education classrooms.

According to a 2001 study done by the U.S. Department of Education, 96% of general education teachers said they have students with disabilities, but only a third of them felt they were prepared to teach them (as cited in Boyer & Mainzer, 2003). Negative views of working with students with EBD often leads to teachers not being willing to teach this population. According to Yell (1995), feeling unprepared with a lack of training, personal safety, and behavior challenges from students can cause general educators to feel inadequate in working with students with EBD. Yell goes on to state that, teacher attitudes can affect the quality of education being provided to the student with EBD, since they are often considered one of the most difficult groups to work with.

**Teacher Reluctance**

The concerns of general education teachers working with students with EBD are that students lack or are behind in both cognitive and academic functions and tend to have lower scores on normed tests than a typically developing student (Kutash & Duchnowski, 2004). These concerns in connection to teacher attitudes affect the success of actual instruction for students with EBD and the inclusionary process. They are often socially unaccepted by their non-disabled peers due to their outbursts and negative behaviors both inside and outside the classroom. As a result of these views from peers and teachers, academic and social failures produce low levels of
motivation and negative opinions about school for the student with EBD (Abrams, 2005). Teachers are forced to teach with these difficult academic and social aspects of students with EBD while at the same time trying to teach all other students in their general education classes. For teachers who are not fully prepared and who have not received any type of training, the task can be overwhelming.

There are specific themes that resonate in the literature regarding including all students in general education. General educators were somewhat divided about acknowledgement of the academic and social aspects of inclusion according to Hwang and Evans (2011). Over half of the 33 teachers in the above study said that their willingness to support teaching a student with a disability had to do with how they felt they had a lack of support and knowledge about working with these students. This shows that although some teachers may want to include all students they may become apprehensive because they do not feel confident in doing so.

In their research Lopes, Monteiro, and Sil (2004) found that the majority of teachers are not fully receptive to inclusion because they do not know how to provide support to students with disabilities or how to implement accommodations and modifications to differentiate instruction. Research has found that the type of disability a student has can affect a teacher’s attitude toward inclusion (Ryan, 2009). Likewise, Lopes et al. (2004) states that students with special needs “present serious challenges to teachers because they are difficult, time-consuming, and frustrating” (p. 413).
Professional Development

The National Staff Development Council (NSDC) in 2007 created a set of nine standards that all professional development should align with. Brown, Erickson, Voglewede, Wagner, and Weber (2009) present for the NSDC that these standards should include: content knowledge and quality teaching, research-basis, collaboration, diverse learning needs, student learning environments, family involvement, evaluation, data-driven design, and teacher learning. According to Glattenhorn (1987), by gaining increased experience in a teaching role one will systematically gain professional growth through examining their own teaching and ability.

Knowles (1980) believed that educators teaching adult learners are facilitators. The adult learner has a set goal and the educator is there to help guide them in achieving that goal. Not everyone agrees with Knowles’ theory and challenge that the assumptions he is making about adult education does not apply equally among the adult population or even to any one individual at different times. Critics say that some adults may not have their own sense of direction or even the self-motivation for learning. They say rather that the term andragogy should refer to all education and is a good foundation for education in general, not just for adults (Miroballi, 2010). Regardless, either side proves that using some of the key points of andragogy in a training for education adults will prove to be productive. The outcome will be a positive one in which learners feel accomplished and that the information is useful.

General education teachers begin their teaching careers with some behavior management strategies they may have learned in their teacher preparation programs or
they may have acquired other strategies from professional development trainings within their district. However, when these strategies fail for a student with EBD or any student, teachers may feel inadequate, incompetent, and helpless (Regan, 2009).

Professional development that is meaningful to teachers is a key component in general educators being able to positively work with students who are identified as EBD. Professional development alone can help a teacher increase their awareness and willingness in working with this population. This helps not only the teachers, but most importantly helps include all students regardless of disability. In general, educators have a credential that includes limited to no coursework regarding topics associated with special education and inclusion (Kamens, Loprete, & Slostad, 2003). In consequence, the lack of knowledge and training about legislation and practices in special education greatly affects perspectives and views about special education students. Research by Scruggs and Mastropieri (1996) show that researchers have identified teacher concerns regarding a lack of training to work with students that have special needs, including EBD. This shows that given the resources and opportunity to learn how to better work with students diagnosed as EBD, general education teachers may be more willing to fully support special education students in mainstream classrooms if they feel better prepared.

According to the Center for Teaching Quality adults learn vastly differently than do children and the concept of learning by lecture is not viable and actually works against the adult learning process (Prather, 2015). Knowles (1980) discussed and
studied adult learning, his theory is based on four differing aspects of adult learning including: adults as independent learners, adults having a lifetime of their own experiences, the application of learning, and that adults are driven by more internal factors than children. Dr. Malcom Knowles (1980) developed the theory of andragogy and made the term more popular in the 1980s. He uses it synonymously for the term adult education. It explains how adults learn differently than children. This is important because teachers are adult learners and in order to begin training for general educators one must consider the aspects to adult learning. The following must be considered: teachers being included in their own learning, experience being a learning basis for a learning activity, considering the relevance and the impact a teacher’s life has, and the learning being problem centered (Knowles, 1980).

The Virginia Department of Education (2004) developed a frame of reference to portray important aspects of a highly qualified professional development. The composition for the workshop presentations in this project were based on the criteria identified below.

Table 1

Criteria for Workshop Presentations

(A) improve and increase teachers’ knowledge of the academic subjects the teachers teach, and enable teachers to become highly qualified if they are
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<th>(B) be sustained, intensive, and classroom-focused in order to have a positive and lasting impact on classroom instruction and teachers’ performance in the classroom</th>
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<td>(C) be based on, aligned with, and directly related to [the states] Virginia’s Standards of Learning</td>
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<td>(D) be structured on scientifically-based research demonstrated to improve student academic achievement or substantially increase the knowledge and teaching skills of teachers</td>
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<td>(E) be sponsored by school divisions, colleges, universities, organizations, recommendations, associations, or other entities experienced in providing professional development activities to teachers and instructors</td>
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<td>(F) be delivered by individuals who have demonstrated qualifications and credentials in the focus area of the professional development</td>
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<td>(G) support the success of all learners including children with special needs and limited English proficiency</td>
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<td>(H) provide training for teachers in the use of technology so that technology and technology applications are effectively used in the classroom to</td>
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<tr>
<td>improve teaching and learning in the curricula and federal core academic subjects in which the teachers teach</td>
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<tr>
<td>(I) promote the use of data and assessments to improve instruction</td>
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<td>(J) be reviewed for high quality and evaluated after completion to determine if the intended results were achieved (p. 1)</td>
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The aspects of highly qualified professional development were aligned to the best practices identified by Knowles (1980) which include the adult learner having goals and the idea that the educator is simply a facilitator to help the adult learner obtain the goal. Another example was the connection between classroom action research, where the focus is the classroom’s need and that the positive and lasting impact on classroom instruction for professional development is, again, within the classroom and is focused on classroom instruction and the teacher’s performance. Professional development must also be scientifically research based to improve student academic achievement, for example, research according to Allday et al. (2012), points out that teachers need more training and support in how to work with students identified as EBD. Given this research information, trainings on this specific subject were implemented.
Collaboration

A pillar for teachers, according to educators themselves, is more time for collaboration, it is the most requested mode of support that teachers request. Collaboration is defined as a group of people, two or more, that create a product or some outcome for a student that no one of them could have created alone (Ferguson, Ralph, & Katul, 1996). Teachers may need time to plan and implement for students with EBD by collaborating with administrators or other personnel, such as, the special education teacher (Lohrmann, Boggs, & Bambara, 2006). Inclusion and collaboration work hand in hand to help general educators and special educators to reform their practice to work together and include all students despite their disability (Turnbull, Turnbull, & Wehmeyer, 2007). These are key elements in the reauthorization of Individuals with Disabilities Education Act (IDEA) (U.S. Department of Education, 2010). Additionally, inclusion ensures that students will have access to the general education curriculum and classroom environment with instruction from a highly qualified educator. According to Dettmer, Dyck, and Thurson (2005) this collaboration includes discussions of what the student needs in the classroom, problem solving when issues arise (both academic and behavioral), instructional strategies, participating and/or leading professional development, sharing valuable information and resources, and communicating with other professionals and outside agencies to meet the needs and goals of the student.

Given the opportunity for teachers to be involved in professional development specific to students with EBD, it is proposed by the researcher that teachers will make
an effort to make more accommodations and use strategies to better help this specific population. This can benefit all students. It provides for a working, safe, and effective environment.

Conclusion

Teachers who receive more instruction in the area of special education were more willing to work as a team with special educators and more willing to use instructional strategies and skills to benefit students with disabilities in the general education classrooms (deBetterncourt, 1999). Furthermore, teachers who received little to no instruction in collaboration with special educators were less willing to work as a team and use new or different strategies. For this reason, it is concluded that a teacher’s success in working with students with disabilities heavily relies on their knowledge about legislation, educational practices, and participation in professional development to help them gain information to become better educators.

According to Bender, Vail, and Scott (1995) an increase in training in special education concepts, such as, accommodations, behavior interventions, etc., resulted in more positive outlooks toward inclusion and using inclusive practices. This training gives opportunity to all students with disabilities, especially students with EBD to fully participate in mainstream classrooms by allowing general educators to expand their knowledge regarding this specific population.
Chapter 3

METHODOLOGY

Introduction

The EBD program in this district came into existence as a need was seen to serve students with emotional regulation problems. Private schools were being contracted to serve these types of student, but were charging the districts vast amounts of money to keep students with EBD in a self-contained setting outside of the general education classroom. The purpose for this specific program for students diagnosed as EBD was two-fold: to save money by serving their students at their own schools and two, to meet the needs of the diverse learners in special education by including them in with the general student body.

Teachers at the designated school where the project was undertaken participated in the planning of staff development by taking a survey before the trainings to determine what their areas of needs were. For example, one of the survey questions asked how comfortable they were with certain aspects of teaching students with EBD (see Appendix A). Many of the teachers that participated had already experienced having students with EBD in their classes. According to the National Center for Education Statistics (NCES) (2014) EBD students make up about 6% of the nations enrolled students from ages 3-21 years old in the school year from 2012-2013. At the specific site where this project took place about 11 students are identified as EBD and 10 of the 11 are involved in a specified EBD program and receive services through special education. The relevance of professional training for a teacher is the
practicality and trusting that the knowledge from the training will be useful in maintaining a safe and productive environment.

As a result of this new practice, teachers within the district were going to need to be prepared to work with this specific population, something that they were not prepared for. As a means to support the teachers with these students, the author decided to conduct several workshops to help with the transition. The first step was to create a survey to check for what general educators felt they needed in working with and preparing to work with students with emotional regulation problems. The survey results indicated that teachers thought they needed to know more about how students are diagnosed with EBD, the different program options, and specific strategies and resources in working with students that are EBD.

This project was created for a program for students identified as EBD in a middle school in the Elk Grove Unified School District. The district utilizes a program specifically geared to students diagnosed as EBD, the training series included an overview and a description of these program possibilities and the process of serving a student involved. A key aspect of this project was to provide teachers with strategies that are useful in working with students with EBD. The goal of the project was to provide a system of support and a set of tools for useful resources and doable strategies to teachers working with EBD students.

As a special educator of students with EBD at the middle school, it became apparent that general education teachers were not prepared to include these students in their classrooms. My role as the teacher for students with EBD is to facilitate the
supports for these students in a general education classroom. By having the trainings for general education teachers to participate in it is expected that the collaboration and given information will benefit the students in a general education setting.

**The Middle School**

This project was completed in a local Middle School in the Elk Grove Unified School District. The middle school serves seventh and eighth graders with a total of about 1,200 students. The school was built in 1997 and operates on a traditional school schedule. It has the following demographics: 1% American Indian, 28% Asian, 1% Pacific Islander, 5% Filipino, 25% Hispanic, 14% African American, 19% White, and 7% 2 or more races. There are 136 English Language Learners and 21 languages spoken at the school. Of the approximately 1,200 students about 721 are considered to be students of poverty. About 70 students are a part of the Gifted and Talented Education (GATE). There is not a maximum number of students for class size, but administrators try to keep the number below 36 students per class. For Resource Specialist (RSP) and support classes there is not a cap for the amount of students that can be in a class, but the average size is 20-25. There are a total of 95 students that are identified through an IEP as having special education services, at least 11 of these students are diagnosed as students with Emotional Behavior Disorders (EBD) and 10 of them are in a specialized EBD program at the middle school.

The classroom is located in the science wing with the science classes and is not grouped with any other department, which reinforces the separation and isolation. The other departments are all grouped together, for example, all of the English Language
Arts classrooms and teachers are together, all of the Social Science classrooms and teachers are together, etc. The program utilizes a point system to monitor student behavior for all their classes, students earn points based on behavior, being on task, social skills, and compliance.

Teachers of all subject matters were invited to participate in the presentations including Math, Science, Social Science, Physical Education, Art, Theater, Woodshop, and the English Language Arts departments. Administrators and Instructional Aides were also invited to participate, but trainings were mostly directed at subject specific general educators.

**Program History**

Before programs specifically for students with EBD existed, the students were often sent to an alternative educational setting, such as, a non-public school (NPS), which is considered a more restrictive setting. These specialized schools are costly for the district and require a team decision with the parent’s involvement and consent to the more restrictive placement. The extreme cost for school districts to educate a student diagnosed as EBD in an NPS demonstrates how essential it is to provide adequate training for general education teachers to work with students in the general education classroom. In effect, to ensure that student’s rights are being granted for an inclusive education in the general classroom for the maximum amount of time in their school day, meaning that they also have equal access to the general education classroom activities and curriculum. Training general educators with strategies specific to students with EBD will effect cost because it will allow students to remain
on a public school campus and interact inclusively with their general education peers without the need to contract out and pay a separate, privately owned facility for their education.

Moreover, literature indicates that inclusive practices have a definite benefit to students. Teachers must be willing to add to their learning goals, strategies, and assessments to meet the needs of diverse students, including students diagnosed as EBD (Shapiro et al., 1999). In this project, general educators had the chance to participate in highly qualified professional development to establish their own learning goals and strategies to work more effectively with students diagnosed as EBD and to collaborate with the teacher of EBD students on this specific school site at the Elk Grove Unified School District. Schumm, Vaughn, Gordon, and Rothlein (1994) state that many teachers show that they actually support inclusion, but are not likely to make the necessary accommodations for students with disabilities based on their lack of knowledge, skills, and the confidence to be able to do so.

**Negative Perceptions of the EBD Classroom**

The fact that the classroom for this program is located in an extra science class already sets up a negative perception of students with EBD at the site. It makes the situation seem like there was not any other specific room for the class, so the extra space became a classroom for the EBD program, not specifically set up for the program or students. Also, being that there is only one teacher of students with EBD on site makes it difficult for general education teachers to find or get a hold of someone with expertise when they have questions or need support for students with
EBD. General education teachers may also not have the knowledge about utilizing a point system or any other system to monitor behavior and may not understand why they have to “fill out point sheets.”

The point sheets provide a way for students to monitor their own behavior, they gain or lose points based on whether they display appropriate ways of being in a classroom based on predetermined classroom expectations. For example, a student that is on time to class, meaning they are seated when the bell rings would get complete points for being on time or a student that has needed five reminders to get their pencil out for work would get points taken away for not following the directions and not being prepared. The points coincide with different levels in the student store, for example, the top level is the highest amount of points they can earn and includes highly desired items or privileges that they have had the chance to choose themselves. Students determine what they would like to see in the student store by communicating with the teacher either through a suggestion box or some kind of voting system for the class, each teacher runs this differently. For instance, the top level has whole sized candy bars, hostess cakes, and special privileges, such as, “front of the line” passes for students to cut in front of everyone at lunch. The next level down would have smaller items like bite size candy or smaller cookie packs, and the last level would have less desired things like school supplies or bottled water.

General educators may also find it unfair to shorten assignments or give students more time on assignments without understanding the need. These accommodations are sometimes necessary to help the students with EBD get back to
participating in the general educations classroom, we must, at least, provide the opportunity.

**Diagnosis of Students with EBD**

An explanation of what this type of student looks like, the main criteria to meet eligibility, who diagnoses this type of student and what types of assessments are used will be discussed. It will also show examples of grades and behavior write ups of students before they were placed in the proper program and how this plays into their placement and diagnosis in the team decision during an IEP.

**Strategies to Use in the Classroom for Students with EBD**

This workshop provided information about the use of Behavior Intervention Plans (BIPs), Positive Behavior Supports (PBS), such as the use of point sheets to monitor behavior and motivate students, and use of incentives for students using appropriate behavior and other accommodations/modifications. According to the web page for the Public Schools of North Carolina (2016) a BIP highlights the problem behavior and its function that the student is having and provides ways to address it, it lays out the reasons and precursors for the behavior while giving teachers ways to reinforce and reteach a replacement behavior. Reinforcement for positive behavior or for the diminishing of negative behavior is based upon preference of the student, so the student also has a say in what they would like to earn.

**Different Program Types**

There can be different programs for students with EBD depending on their need. A student can be in general education classes all of their day with some support
from a special education teacher where the teacher checks in occasionally. A student can also be involved in a Self-Contained Classroom (SCC) where interactions are mostly with a special educator and other peers that are in this smaller grouped environment. This type of classroom is for a student with more severe behavior, a student may also take general education classes depending on their progress, this is a team decision at the IEP.

**Overview and Description of the EBD Program**

**Tier 1**

The different programs in the Elk Grove Unified School District include Tier 1-Self Contained Classroom (SCC), this is the least restrictive EBD program in the Elk Grove Unified School district. Students may have some or most general education classes including electives or core academic classes (Math or English Language Arts) with support from a special education teacher. Group counseling and guidance are also provided once a week from a school psychologist. Other staff besides the special education teacher include two paraprofessionals, one that is there for six hours and one that comes in the morning for three hours. The paraprofessional’s job is to assist the students and teacher with daily behavior and academic goals. Paraprofessionals may push into general education classes with students and assist teachers in that setting as well. For example, in a general education class for English Language Arts (ELA) a paraprofessional would make sure students are on task by checking work such as writing an agenda and warm up at the beginning of that class. They may also collect
any make up work to give the student extra time to work on it during a study skills class.

**Tier 2**

In a Tier 2-Self Contained Classroom (SCC) EBD program students are mainly with the special education teacher (next highest level of support for the EBD programs), but may be allowed to participate in some general education classes including electives or core academic classes (Math or English Language Arts), full-time counseling and guidance services are available to all students in the program everyday provided by a school psychologist. Students may be, but typically are not a regular part of the general population at the school. This is because students have demonstrated behavior that is a safety concern or have become a disruption to other students’ learning environment. For example, even lunches are taken with the teacher and other staff in the classroom, this, of course, may vary. This type of setting has two paraprofessionals for the full six hours daily. Paraprofessionals assist students in a variety of ways including academic help, such as, reading text out loud or making copies of notes for students, and more emotional support like helping students take breaks as needed and listening to students when they need to talk. This type of program may also include students returning to the public schools after having been at a non-public school.

**Study Design and Data Collection**

To begin this project a survey was given to general education teachers regarding their needs for working with students diagnosed as EBD (see Appendix A).
The survey asked questions such as how comfortable they felt in implementing behavior strategies for their students, if they knew the process of how a student is diagnosed, if they understood the different program options, etc. The results showed that general educators felt they needed more support in three key aspects of working with students with EBD which include the basis for the three training provided through professional development for general educators.

The design of this study included creating professional development trainings for general education teachers in regards to teaching students with EBD and understanding the EBD program at the middle school more clearly. Professional development is important because it gives teachers the opportunity not only to learn about specified topics, but to ask questions and practice implementing strategies to help all students, it also provides resources and tools to further support a teacher’s knowledge of this specific population. There were three consecutive trainings held for three months in February, March, and April of 2016. Topics covered include Diagnosis of Students with EBD, Overview and Description of the EBD Programs, and Strategies to Use with Students that have EBD.

**Research Instruments**

To complete this project, the researcher used a variety of methods to create and present the information. A paid Survey Monkey account was used to distribute and collect survey answers to the pre and post questions for general education teachers and staff to answer before and after each training. The site allowed participants to scroll through 10 questions and choose from answers on a scale from 1-5 to determine how
comfortable they felt working with students diagnosed as EBD (Appendix A). The results determined the topics for the presentations. The program was set up to collect answers anonymously. Participants were invited via email through Outlook Microsoft, the email included a link to the survey on the Survey Monkey Website and a description and explanation of the trainings of what would be presented.

Invitations were sent out to all staff at the middle school for this project. A link for the survey was also included in the email in which staff were able to follow the link to Survey Monkey and complete the 10 question survey that took less than 15 minutes. Results of the survey were automatically and anonymously recorded through the website. Since this was an optional training after their contracted hours, the teachers that attended chose to take their own time to come to this training. There were between 4-12 staff members at each session, mostly general education teachers in core subject matters, such as, English Language Arts, Math, and Physical Education. A few participants were other members of the school staff including Instructional Aides and Administration (Vice Principal and Program Specialist).

During each session participating teachers took notes on related presentations and necessary items. Time was provided for teachers to ask questions and interact with other teachers and the presenter. Group work for the teachers was also included in the presentation time to review and digest the information with another opportunity to interact with the researcher and other teachers for more information. The group work consisted of discussions, planning of how to implement this information, and question answer type participation.
Program Details

The program at this middle school is considered a Tier 1 EBD program which currently consists of ten students all with a primary diagnosis of EBD. It is the only EBD program at the site with one teacher and two instructional aides, one aide comes in the morning for three hours and the other aide is full time for six hours. The program utilizes a positive behavior system in which the students earn points based on desired behavior. The more points the student earns during the school day, the more items or privileges they earn from the staff. Items might include things like different types of edibles or snacks and privileges might include being able to cut in front of everyone in the lunch line or having a special chair to sit in during class, for example.

The program also provides students with different times to be able to take breaks away from the classroom in a quiet area, a school psychologist and counselors are also available to speak with students as needed. Several issues present themselves in this type of setting, being the only program on campus that utilizes specific behavior reinforcement and frequent breaks is that many other teachers are not receptive to this type of support. Having students in their general education classrooms with these needs seems to pose a problem for some general educators. In turn, students feel like they do not belong and may begin to feel isolated and separated or like no one understands them.

Students are provided with support depending on their Individualized Education Plan (IEP). Supports may include providing extra time on assignments, speaking to counselors about their feelings, taking personal space if they feel they are
in a bad mood, and/or shortened assignments. For example, a student that did not sleep well and did not get breakfast because their parent works late night and they stayed up worrying about them may come to school the next day in a generally bad mood, feeling hungry and frustrated and tired. This student is going to need some supports to get through the day. They may first need a snack and water, a visual schedule of what the day is going to look like, including breaks, a goal to complete assignments, and something to work toward, like a 20-minute movie time at the end of class when they can rest and relax. The EBD program is able to provide each student with support for these needs.

**Formal Presentation/Process**

The trainings were presented in three sessions, each 50 to 60 minutes on the topics. In the pre surveys teachers shared their answers to several survey questions and rated their knowledge and comfortability on a scale from one to five with one being they didn’t know anything and five being they were completely comfortable. In the post surveys, it was clear that the presentations helped teachers become more familiar with the topics surrounding student with EBD.

This project took place in one of the special education classrooms that is located in the Science wing of the school. Chairs and desks were provided for participants and all necessary material were also set out and ready before the trainings began. This included poster paper, note paper, pens, and copies of the presentations. The environment was made to be welcoming by providing participants with beverages and other refreshments to enjoy during the presentation. Participating members were
encouraged to collaborate and complete tasks as partners or in small groups and to share notes and questions before the end of each training. A projector, ELMO (Electronic Visual Evidence Presenter), and desktop computer were used to present visual information. The groups were small, so the setting felt very intimate and teachers felt comfortable asking and answering questions during the presentation.

**Presentation 1: Diagnosis of Students with EBD**

Teachers were asked to complete pre and post surveys asking for their feedback before and after each presentation (see Appendix A). This was used to first determine the teacher’s needs and was also considered in the review and evaluation to determine if the intended results of the training were achieved. These procedures align with the criteria for best practices of professional development according to the Virginia Department of Education (2004). The presentation had a classroom focus in order to have an impact on the provided instruction and teacher’s performance. It was also delivered by an individual who demonstrated the qualifications and had the credentials in the focus area.

In order to present “Diagnosis of Students with EBD” a Microsoft Power Point was used to organize information for the first training (see Appendix B). Various video links were included in the power point in order to show examples of what student behavior could look like.

Teachers were presented with a clear definition of what EBD is and how it is defined in the literature. Likewise, teachers watched a short video on what some of the challenging behaviors can look like in a classroom and had a discussion around the
topic. Many teachers were able to relate to some of the behaviors they had just watched and shared examples of similar situations or times they had a challenging student behavior. This relates to the Virginia Department of Education’s (2004) standard regarding keeping professional development a classroom focus and supporting the success of all learning including those with special needs. They shared what happened and what they did, their ability to relate and share details about the situations showed that they were engaged and willing to learn.

The assessments that were presented included the BASC-2, RADS-2, and the RCMAS-2. The school psychologist typically completes the assessment based on several pieces of information so that the testing is fair and equitable. These tests are also often normed on other students at the same age or grade levels. The school psychologist chooses assessments based on need. For example, the BASC-2 is a questionnaire given to the parents and other staff members working with the student. It is important to get feedback from a variety of sources who work with the student in a variety of settings. The RADS-2 is for the student to fill out and rates themselves on different statements. It is crucial to get the student’s input on how they view themselves, this provides an in depth analysis of what the student sees and feels, this can be compared to results from the other assessments. It is also specifically geared toward finding if the student is depressed and how moderate or severe the depression is or whether the problem even exists. The RCMAS-2 is specifically used to measure anxiety. It consists of 49 yes and no questions and is also a self-report where the student is giving his/her input and feedback about themselves and how they feel.
To provide a review of information for the teachers participating in this presentation, an account was created with the Kahoot website (see Appendix C). This website helped the user create an interactive game with specified information that was inputted through the website. It allowed the presenter to quiz teachers about information presented, for example, a student with EBD might exhibit which of the following symptoms? The website allows questions to be asked and participants to answer by logging onto the website and choosing the correct answer. The information is displayed on a main screen and the entire group can see the questions, answers, and scores for the game and scores for each individual. This method of review reinforces best practices for students as well. This supports and promotes the use of data and assessments to improve instruction (Virginia Department of Education, 2004).

**Presentation 2: Overview and Description of the EBD Programs**

Another tool that was used in the workshop was Pow Toons which is a video making website that was used to create the presentation for the second training. The researcher recorded her voice to match the visuals created throughout the short video. This software allowed for the researcher to display the information in a 5-minute audio/visual product (see Appendix D). Presented in this format the information and animations are lively and colorful to create a more interesting presentation for teachers that was different than the first presentation. The outline of the information is included in Appendix E. The tools used for this presentation support the use of technology and its applications within the classroom and highlights one of the criteria from the Virginia Department of Education (2004).
After the presentation of this information teachers were asked as small groups to read several case studies and match them to what they thought the corresponding program would be based on student needs. Teachers were able to discuss the various situations and give reason as to why they thought they matched and why they chose the answer they did if they disagreed amongst each other. Teachers were very open to debating and discussing placements for these simulation situations. For example, there was discussion about a scenario that was provided to them about a student that had symptoms of depression and was currently in an RSP setting with general education classes. The discussion took place based on the fact that the student was not outwardly violent. It was argued that this student did not need the “full on Tier 1 EBD program because they were not being violent or disrupting the learning environment,” said one teacher. Some of the other group members disagreed saying that it wasn’t about being violent or not, but about providing a level of support as a team to discuss the student as a whole, from medication to emotional well-being to educational progress. The small group discussions seemed to help teachers talk through and reason with the different scenarios to help strengthen the idea that each student has different needs and may not always fit into one mold, we, as educators do what we need to do based on what the student’s needs are.

**Presentation 3: Strategies to Use for Students with EBD**

The third presentation was given by power point and supplemented by an interactive video website. Teachers were asked to log onto a computer after the completion of the power point presentation (see Appendix F) to watch a video on The
IRIS Center website (2005). The Iris Center provides modules about special education for teachers to learn a variety of information and strategies pertaining specifically to special education. This is an example of using and applying technology in the classroom which supports the criteria from the Virginia Department of Education (2004) for the important aspects of professional development. The Iris Center provides teachers with resources and uses evidence based practice to do so. It is funded by the U.S. Department of Education’s Office of Special Education Programs (OSEP). The information from The Iris Center is structured around scientifically-based research. It helps to increase the knowledge and teaching skills of teachers which is why it was used for this professional development (Virginia Department of Education, 2004). For this session teachers watched a video about managing student behavior and saw examples of possible behavior of students with EBD. Teachers reacted positively because they were able to relate to some of the displayed student behaviors. Many had comments such as or similar to, “that’s exactly what happens in the classroom with a student with EBD when they’re upset.” After the video, teachers were shown the Iris Center’s “roller coaster” (Figure 1). This visual was important for teachers to understand because once they could relate the “roller coaster” with a student’s behavior they will be assured that there is a down slope after a behavior occurs and that there is always a reason. This may help a teacher remain calm and evoke an air of possible understanding. A discussion was lead using the behavior from the video to discuss which part of the “roller coaster” the student’s behavior was on and what some of the strategies were that they could use if they were the teacher.
The teachers were able to distinguish the trigger of the student’s behavior, the peak, and the recovery as identified in the “roller coaster.” For the purpose of time the other intensity stages were displayed, but only the above mentioned 3 were the ones discussed and analyzed when comparing the behavior examples from the video. One teacher said that she was able to think of a situation from that day in relation to the beginning of the behavior to the end, and at the time would have otherwise not thought of the cause of the student’s behavior. She explained that with this visual in mind it was helpful to understand where the student was coming from for next time. The dynamics of a simple chart helped teachers visualize the trigger, peak, and recovery of a student presenting with certain behaviors within the classroom, so that they would be able to help the student further.

*Figure 1. Behavior “Roller Coaster”.*

Conclusion

Teaching students with EBD can be challenging for many teachers because they lack the proper training to work with students and do not feel comfortable in providing services to this population. This project was created to help general education teacher understand and become more comfortable in working with students that have been identified as EBD. Through a series of professional development trainings general education teachers had the opportunity to participate in presentations on topics about EBD including diagnosis, overview of the EBD programs, and strategies to use for these types of students.

The diagnosis of students with EBD was discussed using a power point presentation. The term EBD was first defined and explained referencing IDEA (2004) to provide a more detailed description. Examples and pictures were shown so participants would be able to visualize what a student with EBD looks like. A video was shown to teachers demonstrating possible behaviors and exemplifying what they may have already experienced in the classroom. A review of the criteria to meet eligibility under the category of EBD was further discussed. A list of possible team members was discussed and how each plays a role in the supports for students with EBD, the list included a school psychologist, teachers, parents, and counselors. Examples of the assessments used in the diagnosis were also displayed for teachers to see.

The overview of the EBD programs in the second training was presented using a video of information made by recording the author’s voice which coincided with
visuals which created a short 5-minute animation. This presentation focused on highlighting the main programs used for students with EBD in the EGUSD. It was important that teachers learn that each student is very different and may have very unique needs. It covered the least restrictive environment to the most restrictive and programs in between.

The final presentation was on the topic of strategies for teachers to use in the classroom for students with EBD. Included was the discussion of how important it is to document and collect data to be presented to the team in charge of a student’s supports, the Behavior Intervention Plan (BIP), positive reinforcement, and being willing to accommodate students’ needs and what those accommodations look like.

Several different designs were used to present the information, which included visual, audio, and group collaboration methods. Teachers had the opportunity to ask questions pertaining to their specific classroom during the trainings and were given a review of the information during the presentation. Information was also sent out via email to ensure that teachers had the opportunity to look at the information that was displayed during the presentations again. It is important that all students are included in the general education classroom, therefore it is necessary to train general education teachers to work with all students including those diagnosed as EBD.
Chapter 4

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

The purpose of this project was to assist general education teachers at a middle school in understanding students with EBD and how to work with this specific population. The presentations included: (a) the diagnosis of students with EBD, (b) the overview and descriptions of the different EBD programs, and (c) various strategies to use in classrooms for students with EBD. The initial survey given to teachers before the trainings indicated that they were not completely comfortable in knowing about and working with students diagnosed as EBD. The survey indicated that teachers at the middle school where the author teaches were reluctant to have the students in their classes. In spite of this reluctance, many implied that they thought they would benefit from more trainings specific to this population.

It was apparent to the presenter that the teachers who attended the trainings were open and willing to positively participate in each of the sessions, they each actively engaged in the information being presented and showed this by asking questions, completing group work, and participating in discussions. Many of the participants shared experiences of challenging behavior from students in the classroom and specific examples of difficult situations, which, in the presenter’s opinion, made the information more valuable because the group as a whole were able to relate to one another. The post surveys indicated, each teacher was able to benefit from the information presented. This was evidenced by their responses in the post survey in comparison to their answers in the pre survey before the presentations. In the post
survey teachers indicated that they were more comfortable in seeking out support for a
student with EBD in their classrooms. Responses from teachers before the
presentations implied that they were less comfortable with inquiring information about
this specific population.

One of the main foundations for this research was the work of the Virginia
Department of Education (2004). The Virginia Department of Education’s framework
highlights quality professional development as, but not limited to: keeping a classroom
focus, being research based and increasing the knowledge and teaching skills of
teachers, being sponsored and supported by various school entities, being delivered by
experts in the field, supporting all learning including those with special needs, and
including an evaluation to assess if the professional development was deemed
successful. These important criteria for professional development were included in
the creation of this project’s professional development trainings. The above identified
use of criteria made the presentations in this project worthwhile and meaningful for
teachers, according to the post surveys teacher took after each of the trainings. The
trainings were delivered by a person with the qualifications, experience, and
credentials in the focus area. Also, the professional development had a positive
classroom impact on the instruction and teacher performance based on the responses
from the teacher’s surveys.

The project presentations for general education teachers regarding working
with students diagnosed as EBD proved to be successful in providing information.
According to the post surveys given to teachers after each presentation session,
teachers felt that they had gained valuable information that was helpful and useful in and out of their classrooms. One teacher said that they thought all teachers should attend future presentation about student’s with EBD, she said that she would visualize the “roller coaster” the next time she was trying to help a student work through a behavior situation. The format of the presentations also proved to be beneficial to teachers. During each session there was time built in for teachers to discuss and ask questions regarding their specific needs in working with students who are EBD. The presentations were not only informative, but were interactive by utilizing group work and discussions. They provided a comfortable environment for teachers to learn and ask questions.

The benefits stemming from teachers being able to participate in these trainings were based on the post surveys given to teachers, they were very productive and constructive. This was also demonstrated by the discussions during the presentations when teachers were able to voice their needs and express their own experiences and examples of working with students that are EBD. As discussed earlier the cost of educating a student with EBD is higher than that of a typical general education student. Keeping students with EBD in the regular public school in a general education classroom or providing a specialized program within the public school is more cost effective than sending a student to a privately owned and more specialized school outside of the district. Given this information, it makes sense not only for the educators to learn to work with all students, but for districts to provide training in order to keep students with EBD on a public campus. Students identified
as EBD will greatly benefit from staying at their home schools on the public school campus with general education students as role models of behavior. The Individuals with Disabilities Education Act (IDEA) of 2004 explicitly indicates that all students should have equal access to a general education and that this is the least restrictive environment for any student (U.S. Department of Education, 2010). It was the goal of the author that these training sessions assisted teachers to understand and build the skills necessary to work with students identified as EBD.

Expansion of the project for future reference could include a model of 1-1 support for individual teachers to work with a curriculum/behaviorist coach on how to make curriculum accessible and how to manage difficult behavior within the general education classroom. Ideally, training would be more intensively provided to new teachers and continuing education to experienced teachers. The training would involve other schools in the Elk Grove Unified School District, including county schools, charter schools, or privately owned schools and would incorporate more locations for all types of teachers.

Recommendations for future research or projects include more intense mental health interventions for all students and to teach students about other difficult issues, such as, suicide prevention, depression, and anxiety just to name a few. It would also be recommended that within higher education more opportunity be provided to take more of a variety of classes on these topics for college students and/or aspiring educators. Educating all sides will provide a hopeful outlook that emotional problems
and mental health are important and will be put on the forefront of trainings for teachers.
APPENDIX A

Questions for Online Survey
Appendix A
Questions for Online Survey

On a scale from 1-5, please answer the following questions with 1 being you do not know anything at all to 5 being you are completely comfortable.

1. How confident do you feel in working with students diagnosed as EBD?
   1 2 3 4 5

2. I know the process and how a student is diagnosed as EBD.
   1 2 3 4 5

3. I know how to teach with students diagnosed as EBD.
   1 2 3 4 5

4. I understand that a student with EBD has different program options depending on need.
   1 2 3 4 5

5. I understand and can implement a Behavior Intervention Plan (BIP)
   1 2 3 4 5

6. How comfortable do you feel in implementing modifications and accommodations from a student’s IEP?
   1 2 3 4 5

7. How comfortable do you feel in reading a student’s Individualized Education Plan (IEP)?
   1 2 3 4 5

8. How comfortable do you feel in addressing behavior from a student with EBD in your general education class?
   1 2 3 4 5

9. I understand and can implement an Adaptation Plan (Grids of 9).
   1 2 3 4 5

10. How comfortable are you in seeking out support for a student with EBD in your classroom?
    1 2 3 4 5
APPENDIX B

First Training Power Point
Appendix B

First Training Power Point

Supporting General Education Teachers in Understanding Students with Emotional Behavior Disorder (EBD)

By Doris Tirado
A CSUS Project

Emotional Behavior Disorder (EBD) Defined

- IDEA defines emotional disturbance as follows: "...a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:
  - (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
  - (B) An inability to build or maintain satisfactory interpersonal relationships with peer and teachers.
  - (C) Inappropriate types of behaviors or feelings under normal circumstances.
  - (D) A general pervasive mood of unhappiness or depression.
  - (E) A tendency to develop physical symptoms or fears associated with personal or school problems (Council for Exceptional Children, 2015)."
Diagnosis of Students with EBD

- What this type of student might look like
- Main criteria to meet eligibility
- Who diagnoses this type of student and how

What a student with Emotional Behavior Disorder (EBD) might look like

- Depressed or withdrawn
- Fearful
- Violent/aggressive and loud
- Hyperactive and talkative
- Inappropriate social skills
- Poor self control
- They typically have not done well in school
Student Characteristics con’t...

- Students may exhibit other disorder, such as, mood disorders, anxiety disorders, ADHD, conduct disorder, specific learning disabilities, speech disorders or any other mental health disability
- Student may also be an English Language Learner
- Greater risk for substance abuse
- Negative encounters with the juvenile justice system
- Sometimes have experienced some kind of traumatic event
A Little More about students with EBD

- Compared to other students with and without disabilities, they are more likely to be boys, African American, and somehow economically disadvantaged.
- Some may be in foster care or with a single parent or some other living arrangement like living with grandparents, aunts/uncles, etc.
- Any kind of change or transition may be difficult for a student with EBD

Video

Examples of possible behavior

(38-1:42)
Main Criteria to Meet Eligibility

- **Student exhibits one or more of the following:**
  - (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
  - (B) An inability to build or maintain satisfactory interpersonal relationships with peer and teachers.
  - (C) Inappropriate types of behaviors or feelings under normal circumstances.
  - (D) A general pervasive mood of unhappiness or depression.
  - (E) A tendency to develop physical symptoms or fears associated with personal or school problems (Council for Exceptional Children, 2015).

Criteria for eligibility con’t…

- Has the students’ behavior adversely affected his or her educational progress?
- Which sections are scored high on the assessments?
- School Psychologist will typically write a report that he/she reviews and gives recommendations
- Students may have more than one diagnoses, the primary diagnosis does not have to be EBD to be placed in a program
- Criteria can vary by district, county, or state
Quick Review of IDEIA 2004 (Individuals with Disabilities Education Improvement Act)

- Federal law that says it will provide partial funding to states to educate students receiving special education services
- FAPE-Free and Appropriate Education
- LRE-Least Restrictive Environment
- What does this mean for students with EBD and you?
- They must be served and we must serve them appropriately by following their service page in an IEP (Individual Education Plan)

Who diagnoses this type of student and how

- School Psychologist along with a team that might include teachers, parents, and/or counselors
- Questionnaires and surveys about students behavior (usually filled out by teachers, parents, the students themselves, and/or counselors)
- Observations
- What are the student’s current grades?
- Review of recent behavior write ups, suspensions, etc.
- Review of other supports the school or school staff have used
- Review of the cum file and overall history including medical and psychiatric
- Any hospitalizations and mental health issues
BASC-2

• The BASC-2 provides information into areas of clinical maladjustment and adaptive behavior. The clinical scales are used to measure a variety of emotional and behavioral disorders of children. Scores on the BASC-2 are presented in ranges, with the At-Risk range indicating an area of elevated concern that has potential for developing into a significant problem for which intervention may be necessary; and with the Clinically Significant range indicating serious social or emotional difficulties.

Scale Descriptions

• Adaptability – The ability to adapt readily to changes in the environment.
• Aggression – The tendency to act in a hostile manner (either verbal or physical) that is threatening to others.
• Anxiety – The tendency to be nervous, fearful, or worried about real or imagined problems.
• Attention Problems – The tendency to be easily distracted and unable to concentrate more than momentarily.
• Arrogance – The tendency to behave in ways that are immature, considered “odd” or commonly associated with psychosis.
• Conduct Problems – The tendency to engage in antisocial and rule-breaking behavior, including destroying property.
• Depression – Feelings of unhappiness, sadness, and stress that may result in an inability to carry out everyday activities.
Scale Descriptions Continued

- **Functional Communication** – The ability to express ideas and communicate in a way others can easily understand.
- **Hypersensitivity** – The tendency to be overly active, rush through work or activities, and act without thinking.
- **Leadership** – The skills associated with accomplishing academic, social, or community goals, including the ability to work with others.
- **Learning Problem** – The presence of academic difficulties, particularly understanding or completing home/classwork.
- **Social Skills** – The skills necessary for interacting successfully with peers and adults in home, school, and community settings.
- **Somatization** – The tendency to be overly sensitive to and complain about relatively minor physical problems and discomforts.
- **Study Skills** – The skills that are conducive to strong academic performance, including organizational skills and good study habits.
- **Withdrawal** – The tendency to evade others to avoid social contact.
BASC-Behavior Assessment System for Children

- there are different versions for teachers, parents, and self-report
- there are 139 items on the teacher version
- you decide what description fits the student, whether they Never, Sometimes, Often, or Almost Always act on what the phrase is describing
- other forms for the different age groups
RADS-2

- The Reynolds Adolescent Depression Scale (RADS-2) is a self-report measure designed to assess depressive symptomatology in adolescents ages 11-20. T scores of 61 and above are indicative of a clinical level of depression, with mild (T-Scores 61-64), moderate (T-Scores 65-69), and severe (T-Scores 70 and above) clinical levels of depression associated with increasing scores. The scale also consists of critical items that indicate a possible need for serious attention.

Scale Descriptions

- **Depression Total** – Global assessment of the severity of depression symptomology
- **Dysphoric Mood** – Dysphoric mood and related symptomology including sadness, crying behavior, loneliness, irritability, worry and self pity.
- **Anhedonia/Negative Affect** – Disinterest in pleasurable activities (i.e. disinterest in having fun, engaging in pleasant activities, talking with others, eating meals, negative affect)
- **Negative Self Evaluation** – Negative feelings about oneself (i.e. thoughts of low self worth, self denigration, self harm).
- **Somatic Complaints** – Somatic complaints (fatigue, stomachaches, feeling ill, sleep disturbance, boredom, dissatisfaction with life)
Assessments used as needed for specific student needs

School Psychologist will determine which to use and why

For depression:

RADS-2 (Reynolds Adolescent Depressions Scale)

- 30 items scored by 1—about never, 2—hardly ever, 3—sometimes, 4—most of the time
  - self-rated
RCMAS-2

- The Revised Children's Manifest Anxiety Scale, Second Edition (RCMAS—2) is a brief self-report measure designed to be useful in the understanding and treatment of anxiety problems. Four scales of the RCMAS are reported here including: Total Anxiety, Physiological Anxiety, Worry, and Social Anxiety. Scores of 71 or higher are considered extremely problematic, 61-70 are moderately problematic, 40-60 no more problematic than for most students, and 39 and lower less problematic than for most students.
Scale Description

- **Total Anxiety**: Score is based on all the items pertaining to the Physiological Anxiety, Worry, and Social Anxiety scales.

- **Physiological Anxiety**: Somatic concerns including nausea, sleep difficulties, head aches, and fatigue.

- **Worry**: Addresses obsessive concerns, fearfulness, nervousness, and hypersensitivity to environmental pressures.

- **Social Anxiety**: Anxiety in social performance situations; indicates a concern about self vs a’-vis other people.

This student came to me in January, these were the grades on her transcript:

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Examples of grades before the correct support for a student diagnosed as EBD
1/20: Yesterday at the end of 4th period, several students saw (student) with his head down and possibly crying. A female student asked him what was wrong, and he replied that he was going to kill everyone in the class. This was heard by at least 3 other students. (student) admitted to saying he wanted to kill the whole class. On Friday during 4th period, a student reported to his teacher that (student) had threatened to stab him with scissors. When the teacher asked (student) about the scissors, he pulled them out of his jacket and showed them to the teacher. When questioned by administration, the victim denied being threatened. Administration questioned the victim a second time after the teacher reported seeing the scissors. The victim admitted to being afraid of (student) and didn't want to say anything the first time. The victim reported that (student) pulled out scissors from his jacket and told him he was going to stab him. (student) admitted to this as well. (student) was informed he would be suspended for 5 days because of the two incidents. **A Deputy was called for a threat assessment. He contacted parents and transported the student to Kaiser.

11/17: Student has been refusing to work on assignments nearly daily. Today, she began making requests immediately upon entering the class late, and when asked repeatedly to take out her assignment, she refused. After the teacher addressed another student, the student called out, “some teacher you are.” The para-educator attempted to speak with her outside, but student was rude to her. Student’s attitude and behavior is disrupting other students and deterring from the learning environment nearly everyday.

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**Example of some write-ups and the amount of write-ups before the student received services in the EBD classroom**

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**Let's Review**

- Log onto Kahoot.it
- Type in the pin
- Choose a user name
- Let's get started
- Game Login
Post Survey

- Please follow the link I will be sending through email to complete the post survey for this training.
- Thank you for your time here today and I look forward to seeing you for the next two trainings in March and April.
- **Topics will cover:**
  - *March*: overview and description of the EBD programs-tier 1 through tier 2 SCC (Self Contained Classroom) and Non Public Schools
  - *April*: strategies to use in the classroom for students with EBD-other accommodations/modifications

References

- [http://cecp.air.org/resources/20th/eligchar.asp](http://cecp.air.org/resources/20th/eligchar.asp)
APPENDIX C

Review Questions from Kahoot.com
Appendix C

Review Questions from Kahoot.com

1. According to IDEA 2004, what is one way a student can be diagnosed as EBD? (inappropriate feelings under normal circumstances)

2. A student with EBD might exhibit (hyperactivity, depression, yelling)

3. Students with EBD may be more likely to have an alternative living situation (ie, a foster home). (true)

4. A student MUST have a diagnosis of EBD to participate in the EBD program. (false)

5. What does FAPE stand for? (Free and Appropriate Education)

6. Which of the following is an assessment to help diagnose EBD? (BASC-2)
APPENDIX D

Pow Toons Presentation
Appendix D

Pow Toons Presentation

Overview and Descriptions of the EBD Programs

It depends on each student’s needs, but here are some examples of what the EBD programs can look like:

- Please keep in mind that although I am giving you this information it is not set in stone and not every school or program does things in one way.

- Each site is different and each program within a site may have other descriptions of how they run their program.
Tier 1 SCC-EBD (Self Contained Classroom)

Special Ed or General Ed Classes

All students take ELA with a different teacher, which can be general ed, RSP, or any other support class.

Every other term students have a general education PE class. Most students are not allowed to dress in locker rooms.

Ms Tirado teaches:
- EBD Math
- EBD Science
- EBD Social Science
- EBD Study Skills
- Students receive behavior and academic support from a teacher that has a Mild/Moderate Special Education Credential
- 2 paraeducators work in the Tier 1 program: one 3 hour and one 6 hour
- School psychologist comes once a week for guided/group counseling
- Students are able to gain support through these services by making use of modifications and accommodations within the program

- IEPs are individual, so a student's needs in an EBD classroom will be varied
- Students use point sheets to monitor behavior
- There is a level system within the classroom that coincides with the amount of points they have earned
- Depending on the level, students may or may not participate in student store by earning “Tirado Bucks”
Tier 2 SCC-EBD Program

A Little More Support
- students receive support from a special education teacher with a mild/moderate credential
- may or may not have general education classes
- MFT (Marriage and Family Therapist) twice a week
- school psychologist comes once a week for social development lessons
• student's lunch time may be taken in the classroom, or a paraeducator may go with a group to lunch

• 2 full time paraeducators for the whole 6 hours

• one middle school program at Pinkerton

• at least two at the high school level at Cosumnes Oaks and Pleasant Grove

Positive Reinforcement

As in the Tier 1 program, students make use of a point sheet to monitor behavior, which coincide with a level system and student store.
A Tier 2 EBD program provides more behavior support.

Students with EBD on consult.
- this type of student may have all general education classes
- may have a “check in” class (for example, Advisory)-with the EBD teacher
- the EBD teacher continues to be the case manager for IEPs
- the EBD teacher also checks in with general education teachers that have the student in their classes

Non-Public Schools (NPS)
• district contracts out to this privately owned school
• specializes in severe behaviors and thorough review of medications
• very small class size, typically less than 12 students
• entire school is Special Ed and there is a designated area for students to take space away from the classroom

• Special Ed teachers with M/M credential and all staff are required to be CPI (Crisis Prevention Intervention) trained
• full time therapist on campus
• principal (usually the owner or co-owner)
• several paraeducators—at least one full time in each classroom
NPS cont...
- all aspects of the school day are closely supervised
- get paid per student that attends daily
- provides transportation to and from the student’s home
- PBIS is implemented school-wide
- some NPS’ have Independent Living Skills (ILS) programs for student’s with a lower academic skill set or provide support for students with ASD (Autism Spectrum Disorder)

The End. Thank you.
APPENDIX E

Outline and Handout for Information on Pow Toons Presentation
Appendix E
Outline and Handout for Information on Pow Toons Presentation

Overview and Description of the EBD Programs

TIER 1:
- SCC-Self Contained Classroom
- All students have ELA with a different teacher other than the EBD teacher
- All students have general education PE
- EBD classes include Math, Science, Social Science, and Study Skills
- 2 para-educators (one 3 hour and one 6 hour)
- School Psychologist comes once a week
- Use of PBIS
- Student store and levels system

TIER 2:
- May have general education classes, but typically do not
- Full time MFT (Marriage and Family Therapist)
- School Psychologist comes twice per week
- Lunches in the classroom or supervised in the cafeteria
- 2 full time para-educators
- Use of PBIS

CONSULT:
- May have all general education classes
- “check in” with EBD teacher for Advisory
- case manager is EBD teacher
- general educators and special education teacher must collaborate

Example: any Tier 1 EBD program

(NPS) NON-PUBLIC SCHOOL:
- District contract out to a privately owned school
- School specializes in severe behavior
- Entire school is special education
- Smaller class sizes, typically less than 12
- Full time MFT
- Principal, typically the owner of the school
- At least one full time para-educator in each classroom
- School provides transportation
- Implement PBIS
- Sometimes have ILS (Independent Living Skills) program
APPENDIX F

Power Point for Training on Strategies
Appendix F
Power Point for Training on Strategies

Strategies to use for Students with EBD

A Third Training
By Doris Tirado

Documentation and data

- Behavior Intervention Plans (BIPs)
- Point Sheets
- SIS Web
- IEPs
- Adaptation Plans (Grids of 9)
- The Iris Center
BIPs (Behavior Intervention Plans)

CONFIDENTIAL – DO NOT DISPLAY

BEHAVIOR INTERVENTION PLAN
For Behavior Interfering with Student’s Learning or the Learning of His/Her Peers

Student Name: Dawn Trumpely  Today’s Date: 06/08/15  Next Review Date: 09/14/15

The Behavior Interfering with Student’s Learning (describe what it looks like): Negative interaction with peers (exhibited by Dawn calling others names, interrupting comments about another student’s poor behavior choices, and/or leaving) and staff (exhibited by Dawn arguing, interrupting, talking back, and not taking responsibility for actions).

The need for a Behavior Intervention Plan: [ ] early stage intervention  [ ] moderate  [ ] serious  [ ] extreme

Frequency or intensity or duration of behavior: approximately 2 to 3 times per week, and lasts from intensity of 1 to 3 minutes.

Supported by: [ ](os) observed by

PART I: ENVIRONMENTAL FACTORS AND NECESSARY CHANGES

What are the predictions for the behavior(s)? (Situations in which the behavior is likely to occur: people, time, place, subject, etc.)

Behavior is more likely to occur during unstructured settings (such as multipurpose room or playground), during transitions, and during independent seat work.

What supports the student using the problem behavior(s)? (What is missing in the environment/curriculum or what is in the environment that needs changing?)

Through Dawn’s prior experiences with students who show inappropriate behaviors, she may need reminders of what behaviors are expected and appropriate.

- Overcomes peer status and attention for misbehavior.
- Dawn will be re-taught conflict resolution and proper social behavior through social skills group.

Remove student’s need to see the problem behavior

What environmental changes, structure, and supports are needed to remove the student’s need to see this behavior?

1. Staff member will act as referee or resource for Dawn to go to if dispute arises and cannot be solved independently.
2. Staff member will try to be in closer proximity to Dawn (as situation allows).
3. Give Dawn a choice between two work places during independent seat work. This will allow her to feel a sense of empowerment and to change environmental triggers, such as certain peers who may escalate target behaviors.
4. Provide a break after a set amount of time Dawn has worked. Work time should start at a 1 minute increment, allowing for time for Dawn to take personal space as needed.
5. Give “walking away” power.

Who will require? [ ] staff  [ ] monitor? [ ] staff  [ ] frequency: daily
# Daily Tracking Form

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Goal: ___________________  Total Pts: __________

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### Point Breakdown

#### Arrival
1. Sitting in seat, ready to learn, before bell rings
2. In the classroom, but before the bell rings
3. Entering the classroom, after the bell rings
4. Not coming to class, or extremely tardy

#### On-Task
1. Refusing to be on-task for more than half the period
2. Refusing to be on-task for the whole period
3. Giving your best effort to be on-task
4. Paying attention to your work
5. Listening to the teacher during group
6. Participating appropriately

#### Compliance
1. Following instructions the first or second time asked
2. Following instructions the third or fourth time asked
3. Five or more instructions required
4. Did not follow the instruction

#### Social
1. Continuing to act socially inappropriate despite staff redirection
2. Needing more than 2 reminders from staff to behave socially appropriate
3. Using appropriate, positive language
4. Listening when others are speaking
5. Keeping hands, feet, & objects to self

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Date: __________ / __________ / __________
Point Sheets Continued

(pass around student example)

- notice the comments section
- each student writes a daily goal
- points coincide with the level system and student store:
  - Ivy League (114-126)
  - Cal State (98-113)
  - Junior College (83-97)
- “Stop it up” (means OCS, suspension, out of class, etc.-no store)
- students earn “Tirado bucks” to purchase items from student store
- students earn “Tirado bucks” by being on task, helping each other, saying kind comments, running an errand, etc.

Friday Notes

Each Friday students take home Friday Notes which is a summary of their points for the week.

If students have turned in all homework and have not been sent out all week they earn a Front of the Line Pass

When students bring their note back signed the following week, they receive $1000 “Tirado Bucks”
SISweb as a behavior tool for documentation

- SISweb can be used to document for several different reasons
- when attending an IEP for a student that has severe disciplinary issues, records can be pulled up and can be used as data for a meeting
- an administrator will need to generate the report for you
- an arguing student can be shown recent behavior write ups and the amount of chances staff actually gave (you can’t argue with facts)

The IEP Meeting

Point Sheets
- shows daily progress or lack thereof
- shows comments and notes as to why points weren’t earned

Parent Contact
- parent concerns
- parent as part of the meeting and team decisions
- Friday notes are sent home weekly
- parents and students know that “THE MEETING” is coming up

SISweb
- documentation of parent contact
- share information from generated reports
- can also see write ups from other teachers/classes
Adaptation plans/
Grids of 9

- Used to communicate needs to general educators or other teachers that work with the student
- Categories for specific strategies
- Must coincide with the IEP and IEP goals

Guided Meditation

- Self help
- Breathing
- "Safe place"
- Take space

Support from other staff and parents

- Radio for assistance
- Plan for sub days
- IA assistance
- Calling home
- Taking space in a separate location (e.g., counselor’s hall)
Communication and Being Proactive vs. Being Reactive

Provide reassurance
- Ask questions about how they are feeling
- Find the reason and then maybe they can talk through it, or you may be able to assist
- Why is this important to them in this particular moment?
- What can you do to help them

Warnings
- Students with EBD may need more warnings than the average student
- If there is something they want to call home, grab the radio check marks or chances

If, then statements
- If you change for PE, then I can call home and tell your parents how well you did.
- If you do your math, then you will not have to stay in at lunch.
- If you are able to help me by sitting and being quiet for 10 more minutes (set a timer), then you may have a break on the computer at the end of the period.

“Other” Categories

- Ask yourself what the student is doing? Are they being a typical middle schooler or is the behavior different from being a general education student? (address the student, not the label) visuals of label
- Reinforce anything positive, you may need to look for small things
- Establish task difficulty, let them choose between an easy or harder task
- Define the behavior you want to see
- Anytime you can provide an opportunity for creativity, DO IT! (multiple intelligences)
- Assign positive roles to students and be a good role model yourself
Example of Defining Behavior

Contracts
How to Come Into a Classroom Appropriately
1. Walk calmly to my desk
2. Sit in my chair and face the correct direction based on where my desk is
3. Feet belong under the desk
4. Hands belong on top of the desk
5. My comments are minimal and I am ready to listen

X________________________

I know and understand the expectations of how to come into a classroom appropriately.

U.S. Department of Education’s Office of Special Education Programs

Provides resources for evidence-based practices for use in special education programs

http://iris.peabody.vanderbilt.edu/module/b11/challenge/#content
References


integration of handicapped and nonhandicapped children (pp. 3-26).

Baltimore: University Park Press.


