EDUCATIONAL STRATEGIES FOR CHILDREN WITH EMOTIONAL AND BEHAVIORAL PROBLEMS

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Dear Educator:

I am pleased to endorse this handbook for working with students with emotional and behavioral difficulties. It represents a great deal of intense collaborative work by members and staff from both the AFT and the NEA, the Office of Special Education Programs and many others. Clearly, the decision of the Office of Special Education Programs to ask for the input and involvement of so many people in the trenches as they developed the handbook was well worth the effort.

We all know that students who have emotional and behavioral difficulties are capable of contributing in important ways to the community and the society. We also know that helping them reach the potential can be very difficult and frustrating. However, we now have available many strategies shown to be effective through rigorous research — that teachers, paraprofessionals, and other service providers can use to help these students learn new and positive ways to function in school and in the community.

You as educators — teachers, paraprofessionals, and service providers —are crucial in assisting these students so they can succeed. This handbook is intended to provide additional support to you as you provide support to students. It contains both general strategies and specialized approaches, and it answers questions often asked by classroom practitioners who deal every day with students' learning and behavioral needs. I hope that you will not only read this book, but keep it within reach where you work so that it can provide the help it is intended to provide.

I wish you growing success and satisfaction as you use the information in this handbook to enhance your work with students who have emotional and behavioral difficulties.

Sincerely,
Sandra Feldman, President

Dear Educator:

As public school teachers, it is our most fundamental belief — and primary motivation — that each and every child is capable of learning and deserves the very best education we can provide. But we also believe, deeply, that no one student, however troubled, has the right to disrupt the learning of other students.

A student with emotional and behavioral problems is one of the greatest challenges a teacher faces. Teachers who are ill prepared to teach the emotionally disturbed and disruptive child often find themselves befuddled. They either devote too much time and attention to that one student, at the expense of all the other students in their classroom — or they fail to prevent the troubled student from constantly disrupting their classroom. In either case, the education of all students suffers. We know that education can only flourish in an atmosphere of order and respect for all students.

We could of course turn back the clock and seek to banish every troubled student from the regular classroom. Such a swift and simple action would certainly be applauded by some. But under the law, public school educators do not have that option, nor do we want it.

Teachers and paraprofessionals want to make a difference in the lives of their students — indeed, that's why we went into education in the first place. Given adequate preparation and support, teachers can educate students with emotional and behavioral problems to high academic standards. The instances where our best efforts fall short are uncommon. And when our best efforts fail, the student who continues to cause disorder in a classroom must be removed and placed in an alternative educational setting. We see such an action as a last resort, however.

Designed to enable teachers and paraprofessionals to give their best effort, this handbook was a collaborative effort. Teachers and staff from NEA and the American Federation of Teachers worked with special education experts in the Department of Education assisted by the Center

for Effective Collaboration and Practice. Here you will find the common sense guidance and specific information needed both to access available resources and institute sound classroom management practices.

Since the mid-1970s when the Education of the Handicapped Act (now I.D.E.A.—the Individuals with Disabilities Education Act) was enacted, we have made extraordinary strides in the education of students with special needs, including those with emotional and behavioral problems. Millions of children are no longer excluded from our mainstream schools. They are no longer stigmatized or ostracized.

But we know we still have a long way to go — and we know teachers and paraprofessionals cannot do the job alone. We need the support of our school districts and other professionals. I see this publication as yet another enabling step toward our goal of every child becoming a productive and fully contributing adult in our society.

Sincerely,
Bob Chase, President
National Education Association

ACKNOWLEDGEMENTS

TABLE OF CONTENTS

CHAPTER 1

OVERVIEW

Clark is an 8-year-old student with learning disabilities and emotional and behavior disorders. This year, he has been included in a regular 3rd grade class of 30 students. The classroom is managed by one teacher, Ms. Cameron, who was not able to attend Clark's IEP meeting due to lack of coverage for her classroom. No paraprofessional is available to help Clark make the transition into the regular classroom or assist with his academic and behavioral needs.

Ms. Cameron reports that while Clark is a bright student, his learning difficulties and behavior problems have caused him to fall well behind in his studies, particularly in math. While most of his classmates were at grade level in math when they entered third grade, Clark was functioning at a first-grade level. Although Ms. Cameron has tried a number of strategies to assist Clark in making progress, he has not responded well to them. Further, for half the year Clark has been seriously disruptive during the math lesson. He refuses to do his work, calls out and makes loud noises, throws pencils across the room, and tears up his classmates' papers.

Repeated trips to the principal's office and calls home to Clark's parents have been of no consequence. Because he has an IEP, the principal believes that Clark cannot be disciplined. His parents are reluctant to allow him to be placed back in a special education classroom, even just part time for math class.

Ms. Cameron is particularly worried because Clark's disruptive behavior is causing her to fall behind in teaching the lessons. This means that the other students are also falling behind, as Clark fails to make progress. In addition, Clark's classmates are angry about his constant disruption. They are becoming less tolerant of his disabilities rather than more tolerant, refusing to sit next to him and avoiding him during recess. Ms. Cameron worries daily about how Clark's behavior is affecting learning in her classroom.

Most teachers can tell stories of their own "Clark." In fact, students like Clark challenge best practices, and contribute their own brand of worry and stress to adults and other students. Teachers care about such students, but care as well about others', and their own, peace of mind. Many teachers, administrators, school professionals, and parents are left wondering what to do.

PROVISIONS OF THE IDEA

Provisions of the IDEA include:

❑ increased involvement by general education teachers in planning educational programs;
❑ the use of a variety of services, supplemental aids and services, and other accommodations and modifications that must be in place for children with disabilities to succeed;
❑ the use of functional behavioral assessment to identify the appropriate positive behavioral supports and strategies; and
❑ provisions for training personnel (both special and general educators) to appropriately provide services to children with disabilities consistent with the requirements of the IDEA.

At a basic level, the good news is that the *1997 Reauthorization of the Individuals with Disabilities Education Act (IDEA)* has addressed many classroom concerns that have arisen over the years. The new statute, in fact, includes provisions designed to: (1) improve services for all students with disabilities, including those with emotional disturbance and behavioral problems, (2) address their problem behaviors, and (3) foster an effective learning environment for all students (see: *Provisions of the IDEA*).

These additions to the IDEA offer support to educators who see the value of taking a proactive and collaborative approach when designing successful learning experiences for students like Clark.

It goes without saying that there are no easy answers or "quick fixes" when working with students with emotional disturbance and behavioral problems. However, over the years, educators and families have accumulated a wealth of information about how to work with these students; while there is much that remains unknown, both practitioners and researchers have much to say about how to provide learning opportunities for just such students. For every "Clark," practitioners have found a way to reach a "Trisha" or a "Clyde" or a "Charles."

Perhaps it also goes without saying that teachers, paraprofessionals, and school psychologists (whom we sometimes refer to collectively as educators) are on the front lines when it comes to ensuring that students with emotional disturbance and behavioral problems are given every opportunity to learn. Hence, this booklet was designed to provide educators with a place to start—a base of practical ideas for helping students to build a successful education experience.

Many of the strategies educators find most successful do much to improve the classroom experience for all students. For that reason, this booklet contains general strategies, as well as specialized approaches, and it answers questions often asked by classroom practitioners who must address the learning and behavioral needs of all students.

Strategies and techniques used successfully in real classrooms are offered as examples for practitioners to consider. Also included are strategies and approaches that reflect the guidelines set out in the *National Agenda for Achieving Better Results for Children and Youth with Serious Emotional Disturbance,* developed by the, U.S. Department of Education's Office of Special Education Programs (OSEP), with assistance from the American Institutes for Research. Examples used throughout the booklet were gathered from schools across the country that embrace the spirit and intent of the principles espoused in the *National Agenda.*

> **This booklet is predicated on a strengths-based approach that considers the whole child.**

This booklet is predicated on a *strengths-based* approach that considers the *whole child.* The instructional practices presented herein reflect the understanding that all students have strengths that can provide a basis for curriculum planning, instructional programming, and classroom management. Effective teaching makes use of students' strengths and builds instructional programs that capitalize on what students are able to achieve, and help them to meet high academic standards and high standards of conduct.

Research funded by the U.S. Department of Education, Office of Special Education Programs suggests that schools consider a three-tiered prevention model for addressing the behavior of all students. This three-tiered prevention model includes:

- school-wide primary prevention efforts to teach expected behaviors to all students;

- early interventions directed at students who are at risk of developing emotional disturbance or behavioral problems; and

- more intensive services targeted at students with emotional disturbance or more serious behavioral problems.

Some characteristics of schools that successfully employ this model appear in the box below.

Classroom teachers, paraprofessionals, school psychologists, and other school personnel play important roles in developing and implementing strategies that embrace those characteristics.

> Schools that successfully employ primary prevention strategies display several characteristics, including:
> - expression of the value of all members of the school community,
> - school environments marked by high academic expectations and clear and positive behavioral expectations,
> - student-centered instruction,
> - positive and proactive approaches to school discipline,
> - collaboration with family, community, and other service providers, and
> - support for students, teachers, staff, and families that enables them to help students to meet expectations.

To ensure that this booklet addresses the information needs of educators who work with students with emotional disturbance or behavioral problems, we have consulted with and engaged teachers, paraprofessionals—both special and regular education—school psychologists, and other school personnel throughout the drafting and writing process. We are grateful for the willingness of practitioners to share their experiences of

"what works." The organization of this booklet is described below.

Based upon sound professional advice, we have organized the chapters as follows:

Chapter 2: Building A Knowledge Base. There are obvious advantages to sharing knowledge on issues related to educating students with emotional disturbance and behavioral problems. This chapter contains basic information to help build that knowledge base, and to help provide an enhanced understanding of the topic.

Chapter 3: Fostering Positive Learning Opportunities. This chapter contains strategies for structuring curriculum and instruction so that they have the most positive impact possible on student performance.

Chapter 4: Instituting a Sound Classroom-Management System. Students learn best when there is order in their learning environment and they feel at ease. This chapter offers tips and ideas for strengthening classroom-management practices. It also describes techniques to help educators interact with students in a manner that creates a positive classroom environment.

Chapter 5: Advocating for School-Based Supports. Because the success of instructional and classroom-management programs can be enhanced by colleagues, families, and others, this chapter describes promising practices that many schools and districts now use to support classroom teachers and other instructional staff.

Chapter 6: Support and Resources. For readers who want to know more about the topics covered in the booklet, this chapter lists additional sources of information and contact information for organizations that may be of assistance.

CHAPTER 2

BUILDING A KNOWLEDGE BASE

Understanding the nature of students' emotional and behavioral problems assists teachers and paraprofessionals in planning instructional programs that better meet students' needs. Working on teams and in collaborative partnerships means that all members must share a basic understanding of the characteristics and educational challenges confronting these students.

> **This chapter answers questions frequently asked by teachers and paraprofessionals about educating students with emotional and behavioral problems.**

CHILDREN WITH EMOTIONAL DISTURBANCE AND BEHAVIORAL PROBLEMS

Students with emotional disturbance and behavioral problems exhibit a wide range of characteristics. The intensity of the disorder varies, as does the manner in which a disability or problem presents itself. While some students have mood disorders, such as depression, others may experience intense feelings of anger or frustration. Further, individual students react to feelings of depression, anger or frustration in very different ways. For example, some students internalize these feelings, acting shy and withdrawn; others may externalize their feelings, becoming violent or aggressive toward others.

> *...the Federal definition targets students who exhibit behavior disorders over a long period of time, and to a marked degree, that adversely affect the ability to learn.*

School-based, multidisciplinary teams identify some students as having *emotional disturbance*—one of the disability classifications recognized under the IDEA. Although state definitions and terminology may vary, the Federal definition targets *students who exhibit behavior disorders over a long period of time, and to a marked degree, that adversely affect the ability to learn*. Factors that contribute to this definition appear below.

The term includes schizophrenia, but does not apply to students who are "socially maladjusted, unless it is determined that they have an emotional disturbance" (34CFR300.7 (c)(4)).

It is believed that students with emotional disturbance who are currently eligible to receive special education services represent only a small portion of the students with mental health needs. While most mental health experts estimate that 3 to 8 percent of all school-age children and youth have emotional or behavioral disorders severe enough to require treatment, less than 1 percent (only 0.74 percent of the school-age population in 1996 and 1997) are identified by schools as having *emotional disturbance*. By contacting the Center for Effective Collaboration and Practice, listed in Chapter 6, you can access more information on prevalence rates.

CAUSES OF EMOTIONAL DISTURBANCE AND BEHAVIORAL PROBLEMS

Professionals in the field of emotional disturbance use various approaches to explain the causes of what are often called "behavioral difficulties." Knowledge about factors associated with emotional disturbance and behavioral problems can assist schools, teachers, and paraprofessionals in understanding how such factors actually affect student performance.

Teachers and paraprofessionals can frequently use their knowledge of these factors to evaluate and improve a student's educational experience. If it is suspected that a child's problem behavior is related to a biological factor, for instance, the child should not be "penalized" for what he or she cannot control; or, if a student's hyperactivity and distractibility are related to a neurological condition, activities requiring sustained attention should be modified and attempts made to expand the child's capacity for concentration.

A brief description of contributing factors

Biological factors. Certain biological conditions have been associated with emotional disturbance and behavioral problems, as there appear to be genetic links to depression and schizophrenia, as well as to nutritional deficits, certain physical illnesses and injuries, and some neurological conditions.

Family factors. The environment in which children live can either help or hurt healthy development, just as a child's behavior may have both negative and positive influences upon other family members. Certain elements, too, within a child's family may increase his or her risk for developing emotional disturbance or behavioral problems. (Physical abuse, child neglect, sexual abuse, and emotional maltreatment have all been associated with "troubling behaviors" in children.)

School factors. Generally, students with emotional disturbance and behavioral problems tend to "underachieve," in school. Learning problems put them at a disadvantage in any school environment, particularly since many of these students have not developed adequate social skills by the time they enter school, and poor social skills may result in social rejection by both peers and teachers. This rejection leads to further disinterest in school and even greater underachievement and failure.

Community factors. Children are often exposed to stressors within their communities. Exposure to crime and gang violence has often been linked to a tendency to behave in ways associated with emotional disturbance and behavioral problems.

THE EDUCATOR'S ROLE IN IDENTIFYING AND REFERRING STUDENTS

School personnel, especially teachers and paraprofessionals, serve a critical role in referral, diagnosis, and program planning. In fact, it is often the classroom teacher, and sometimes the paraprofessional, who begins the process of getting help for a student.

IDENTIFYING BEHAVIOR THAT IS INTERFERING WITH LEARNING

Teachers and paraprofessionals often are the first to recognize a student's lack of success with assignments, and his or her continuous problems with peer or adult relationships. While this fact may eventually result in a formal referral, a teacher's primary goal is to *identify interfering behaviors and help students to overcome them.* Teachers and paraprofessionals begin this process by analyzing the kinds of behavior that put students at risk.

While some emotional and behavioral problems lend themselves to relatively simple classroom intervention, others may require an adjustment of the child's entire instructional program. When the latter is necessary, the first point of inquiry is with others who know the child well. It is a good idea to consult with administrators, school psychologists, social workers, school counselors, other staff, and family members whenever problems disrupt teaching and learning. In addition, a growing number of schools have formed *assistance teams* that offer help in validating observations and recommending interventions; however, these strategies cannot be used to delay appropriate referral to a child suspected of having a disability. Families can usually provide insight regarding their children's strengths, special needs, and stressful situations that may be occurring in their children's daily lives.

Over the last few decades, many districts have established *pre-referral systems*—the goal being to serve the student's and teacher's needs *before* a more formal approach is undertaken. Again, however, these systems cannot be used to delay appropriate referral of a child suspected of having a disability. In such systems, teachers seek help in working with a child who has presented significant and recurring problems. As part of the assistance process, teachers and paraprofessionals are frequently asked to document the *presenting problem*, along with the different strategies that have been used to ameliorate it. Colleagues can then review such information with the teacher, and make suggestions.

REFERRING STUDENTS

In the event that preventive interventions are not working, and collegial help has run its course, it may be necessary to initiate a *formal referral.* When school officials begin to suspect that a child has a disability, the child must be referred for appropriate evaluation. Keeping in mind that the purpose of such a referral is to determine *whether* a disability or condition is, in fact, linked to the observed problem behavior. A teacher's role at the referral stage is not to make a diagnosis, but to be a part of the team that develops and implements a formal evaluation. Teachers will likely be asked to present concrete information describing the student's behavior, the situations in which that behavior occurs, and any interventions that may have already been tried. Documentation that the teacher, paraprofessional, or other school staff may have made will be helpful in this process.

As part of the referral process, teachers are sometimes asked to provide additional documentation of the student's behavior, paying attention to particular details. Such a practice is helpful, as it reveals characteristics that ultimately may result in a more effective behavioral intervention plan. In considering a student's behavior, it is important to use a *strengths-based approach*, which means that in addition to identifying challenging behaviors, behaviors supporting learning and other student strengths also are identified.

It is valuable to *specify* strengths. That is, to identify instances when the child is engaged or well-behaved.

Questions that may help to guide a strengths-based assessment include:

❑ *Are there any recurrent behavior patterns?* For example, the teacher may note that the behavior does not occur all day, but only during activities in which the student must read and comprehend information.

❑ *Under what conditions is the student most successful?* For example, the student may do well in highly structured tasks in which the expectations and directions are clearly articulated.

❑ *What conditions tend to trigger the problem behavior?* For example, after recording outbursts for a week, the paraprofessional finds that most problem behavior occurs when the student is asked to work with other classmates.

❑ *What tends to hold the student's attention?* For example, a teacher may discover that a student *can* concentrate for more than 30 minutes when engaged in manipulative mathematics tasks.

DOCUMENTING BEHAVIORS

Generally, the first step in identifying behaviors is to define the behavior being measured in concrete and observable terms. Defining behavior as "disruptive" or "dangerous" does not specify the behavior, and therefore will not be helpful when planning interventions. A better definition might be "loud yelling in the classroom," "pushing a classmate" or "tapping a pencil continuously"—behaviors that can be objectively observed and measured.

Several observational strategies are typically used in school settings to document behavior. In some cases, multiple techniques are more helpful in understanding a student's behavior patterns. Keeping this in mind, the

most commonly used techniques are described in the box entitled *Common Observational Strategies.*

COMMON OBSERVATIONAL STRATEGIES

Identifying Patterns. This technique is used to identify possible patterns of behavior by pinpointing the specific events that precede (also called antecedents) or follow (also called consequences) the problem behavior that may serve to maintain it. Observers keep a written record of everything they see and hear, and note the entire context in which the target behavior occurs during those time periods. Observation narratives are most useful when they are completed in several settings over a period of time.

Measuring Frequency. This technique is used to measure the number of times a behavior occurs during a designated period. The teacher defines the behavior, observes the student at specified times, and notes how often the behavior occurs (e.g., the number of times a student uses profanity during a class lecture).

Measuring Duration. This technique is used to measure the length of time that a student engages in the particular behavior of interest (e.g., the amount of time a student engages in daydreaming behavior during math activities).

Although recording strategies are associated with referral, many teachers find that classroom-based observational data can uncover the source of many problems and lead to their correction. An educator may discover, for instance, that a student swears only when in the presence of *certain* peers. In some cases, too, the student's behavior may be shown to be a response—albeit, inappropriate—to the provocations of others. Data, in brief, provide educators with new avenues to explore in addressing students' behavioral needs.

Careful evaluation of a child suspected of being emotionally disturbed also involves an assessment of the student's behavior if his or

her behavior interferes with their learning, or the learning of others. Districts and states should have established procedures for student evaluation and assessment that ensure compliance with the 1997 Amendments to the IDEA and with Section 504 of the Rehabilitation Act of 1973. Once such procedures are established, the evaluation of students with emotional disturbance should be *multifaceted, culturally non-biased*, and include:

- classroom observations by evaluators,

- results of all interventions (e.g., teacher documentation and team information),

- interviews, checklists, and questionnaires completed by teachers, family members, and the child, as appropriate, including developmental, health, and sensory data,

- psychological or psychiatric evaluations,

- previous academic evaluations, including work samples, and

- a review of the child's school history.

Classroom teachers, because of their direct experience, often are called upon by the group of persons responsible for the evaluation of the student to complete assessment tasks, and to share what they know about a student. Information gained from experience, after all, is invaluable in interpreting student behavior, or in crafting a successful intervention.

A WORD ABOUT CULTURAL DIFFERENCES

It is important to remember that everyone's behavior is influenced by his or her culture and subcultures (e.g., geographical region, neighborhood, religious beliefs, age, or gender). When educators become concerned about a child's behavior they must make a determination as to whether the behavior may be the result of a cultural difference rather than a behavioral deficit. In some cases, behaviors are merely different from those of the educator's or school system's culture.

Educators should discuss with the student and his or her family members the possibility that behaviors may be influenced by culture (e.g., some Native American cultures frown on competition so children will not give answers in class that might make them look like they are smarter than their classmates) and how or if they should be addressed. The educators and family members together should decide whether a replacement behavior should be taught (e.g., teaching the child to be competitive), if the child should be taught to use different behaviors in different situations (e.g., teaching the child that competition is appropriate under certain circumstances), or if the school should make accommodations to respect the child's cultural differences (e.g., use cooperative learning rather than competitive techniques). In any case, educators need to be cognizant of how their cultural beliefs influence their own behavior and how they perceive the behavior of others.

WORKING WITH STUDENTS WHO HAVE BEEN IDENTIFIED AS NEEDING SUPPORT

A student will often arrive in school already identified as qualifying for specially designed instruction or services under the IDEA. Still, even though a student may already be receiving special education and related services, teachers and paraprofes-

sionals have major responsibility for educating the student.

There remain, even today, many questions about where students with emotional disturbance are to receive their education. Federal regulations, however, are clear, and specify that:

> *…to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are non-disabled (34 CFR §300.550 (b)(1)).*

This requirement does not mandate that students be served in regular school environments if such placements are inappropriate. In fact, Federal regulations mandate that each public agency ensure that:

> *…a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services (34 CFR §300.551 (a)), [and provide] …supplementary services (such as resource room or [aids]), to be provided in conjunction with regular class placement (34 CFR §300.551 (b)(2)).*

Nevertheless, removal of children with disabilities from the regular educational environment—including removal to special classes or separate schools—must occur only "*when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily*" (34 CFR §300.550 (b)(2)).

In addition, IDEA (1997) states that the Local Education Agency can place a child with a disability in an appropriate interim, alternative educational setting:

> *for the same amount of time that a child without a disability would be subject to discipline, but for not more than 45 days if—*
>
> *(I) the child carries a weapon to school or to a school function…; or*
>
> *(II) the child knowingly possesses or uses illegal drugs or sells or solicits the sale of a controlled substance while at school or a school function….(Sec. 615(k)(1)(A)(ii)).*

A Hearings Officer may also order a change in educational placement to an interim, alternative educational setting for not more than 45 days if *…[a child's behavior is] substantially likely to result in injury to the child or to others* (Sec. 615(k)(2)(A)).

(These and other relevant sections of the Individuals with Disabilities Education Act appear in Appendix A of this document.)

In general, when making placement decisions, school districts must give consideration to the full range of supplementary supports and services that could be provided to accommodate the needs of individual students with disabilities.

If it is decided that the least restrictive environment for a child is the regular classroom, the child's teacher has the right to be informed. Such information should include a description of the child's strengths and needs, as well as any information helpful in planning an instructional program. Similarly, because the student's regular classroom teacher will be responsible for implementing the student's IEP, IDEA regulations ensure that: *the child's IEP is accessible to each regular …[and] special education teacher, related service provider, and other service provider who is responsible for its implementation* (34 CFR §300.342

(b)(2)). As above, each teacher and provider must be informed of: *his or her specific responsibilities related to implementing the child's IEP; and the specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP* (34 CFR §300.342 (b)(3)).

If a child in a regular education class-room has an individualized education program (IEP), the classroom teacher becomes a partner in carrying out the IEP, and, under law, at least one of the child's teachers now becomes a member of the child's IEP team. In fact, once an IEP is completed, it is the classroom teacher who is often responsible for monitoring the student's achievement with the help of other members of the team. Classroom teachers and paraprofessionals may express concerns when necessary; and to be successful, teachers must have sufficient support to implement IEPs.

When a student exhibits behaviors that interfere with his or her learning or the learning of others, the IEP team must consider, when appropriate, strategies, including positive behavioral interventions, strategies, and supports to address that behavior. These strategies and supports should be based on a functional behavioral assessment, should establish clear expectations about appropriate behavior, and should be designed to help the student succeed. The team monitors the student's behavior regularly, and if it is not satisfactory, the team modifies the strategies and supports.

WHAT EDUCATORS NEED TO KNOW ABOUT STUDENTS TAKING MEDICATION

Because some students are on a regular regimen of authorized medication, teachers and paraprofessionals should acquire a working knowledge about *this type of treatment intervention.*

Qualified medical professionals prescribe medication, and qualified nursing professionals should help in administering and monitoring a student's medication. Educators, however, can and do have a valuable role and a vested interest in their students' medical treatment. Educators can:

- *Make certain that students receive medication on schedule.* Generally, this means reminding students to go to the nurse's office to take their medicine.

- *Observe the student's behavior and note instances that support the use of medication or suggest the presence of medication side effects.* If a possible side effect manifests itself, a teacher or other school staff should notify the school nurse or other appropriate school personnel and/or the family. If necessary, the teacher should seek help; appropriate personnel, for ex-ample a psychologist and/or nurse, should be available to assist with evaluating the effects of medication on a student's learning.

The use of a medication to address behavior assumes some behaviors that interfere with learning and classroom participation can be chemically controlled. Central nervous system stimulants, for example, are sometimes used to treat children with attention deficit hyperactivity disorder (AD/HD). When working properly, these stimulants can temporarily reduce the symptoms of hyperactivity and impulsivity, while increasing concentration. However, even when medication is working properly, other interventions, including sound educational instruction and positive

behavioral supports, are still needed to ensure success.

> Some drugs used in treatment plans for students with emotional disturbance include:
>
> ❑ *Stimulants*, such as Cylert, Dexedrine, Ritalin, and Benzedrine, all of which are clinically used to focus attention and energy while decreasing impulsive behaviors.
>
> ❑ *Tranquilizers*, such as Thorazine, Mellaril, and Haldol, which are used to suppress hyperactivity, aggressiveness, self-injurious behaviors, and hallucinations.
>
> ❑ *Antidepressants*, such as lithium, Tofranil, Prozac, and Elavil, which are clinically used to alter moods, reduce hyperactivity and aggression, and treat school phobias.
>
> ❑ *Anticonvulsants*, such as Phenobarbital, Mysoline, Dilantin, and Valium, which are clinically used to control seizures and convulsions.

Possible drug side effects represent major treatment drawbacks. When working with a student on medication, it is important to be aware of the side effects associated with the drug, as such awareness will aid the teacher in recognizing which behaviors the student cannot control. Furthermore, such knowledge will enable educators to alert other educators, school officials, and family members should the student demonstrate behaviors associated with recognizable side effects.

GETTING SUPPORT FROM OTHERS

Across the country, families, school psychologists, mental health specialists, and other special service providers are starting to work with teachers and paraprofessionals to foster cooperative and positive learning opportunities for students with emotional disturbance and behavioral problems. Building collaborative partnerships is, in fact, a key ingredient in supporting these students, both in regular education classrooms and in other environments.

Many schools already have *teacher support teams, prereferral teams*, or *child study teams* that can offer suggestions for remediating classroom dilemmas. Many special educators, behavior specialists, and school psychologists are well-versed in emotional and behavioral strategies and, thus, may be an invaluable source of ideas and information. Properly trained and supervised paraprofessionals can also be invaluable in implementing small-group and individual behavioral interventions. Administrators also can be consulted for recommendations and resources.

Other professionals might be available to assist the teacher or student, either on a permanent or an as-needed basis.

Special education teachers, paraprofessionals, school social workers, and school psychologists all have skills that can support students with emotional disturbance. In addition, these students might receive additional supports, described below, which are sometimes identified in the student's IEP, and which are often provided by a support specialist. Understanding the functions that different support service personnel perform can help teachers to take advantage of all available resources.

Educators also can learn about students with emotional disturbance and behavioral problems from their families. The family is, after all, the most obvious source of information about a student's behavior. As defined here, a *family* extends beyond the birth, adoptive, or foster parents; it includes all adults who influence the day-to-day care of the student, as well as other members of the family unit. In some families, grandparents or aunts and uncles may serve a primary care role in the child's life. Including families in the child's education program can enhance its relevance and chance for success.

Educators who have formed partnerships with other professionals and family members are discovering effective ways to serve the educational needs of students with emotional disturbance and behavioral problems, while expanding their repertoire of successful strategies appropriate for all students. However, given the scheduling constraints in many schools, collaboration may require creative juggling of time. Sometimes it is best to initiate a request for support (including the time necessary to get things done).

Some students have needs that transcend the classroom, as well as the time and capabilities of classroom teachers. In these cases, intensive services must be brought to bear to assist the student. The IEP team will probably want to consider the full continuum of services and placements as described in the IDEA regulations. See the sidebar on this page for the language of the IDEA regulations.

MOVING FORWARD

When teachers and paraprofessionals understand the nature of their students' emotional and behavioral problems, instructional programs have a much better chance of producing academic progress.

Basic knowledge concerning identification and diagnosis can go a long way in broadening perspective. Most teachers will seek to apply this knowledge directly to the classroom quite simply because teaching informed by the research on quality instruction is perhaps the best intervention. Some approaches are worth considering, however, as they have proven to enhance the classroom learning of students with emotional disturbance and behavioral problems. The next chapter describes some of those approaches.

§ 300.551 CONTINUUM OF ALTERNATIVE PLACEMENTS

(a) Each public agency shall ensure that a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services.

(b) The continuum required in paragraph (a) of this section must—

(1) Include the alternative placements listed in the definition of special education under § 300.26 (instruction in regular classes, special classes, special schools, home instruction, and instruction in hospitals and institutions); and

(2) Make provision for supplementary services (such as resource room or itinerant instruction) to be provided in conjunction with regular class placement.

(Authority: 20 U.S.C. 1412(a)(5))

CHAPTER 3

FOSTERING POSITIVE LEARNING OPPORTUNITIES

Ms. Dunlap, the special education teacher, and Mr. Frieze, the sixth grade teacher, decided to combine their classes for an interdisciplinary unit. They began by making a list of the basic academic skills their students needed; then they developed a list of social skills necessary to participate successfully in learning activities.

Realizing that some students had not mastered all the required social skills, the teachers divided the class period into segments. During the first segment, students received instruction in the social skills needed for the day's lesson. In the next segment, the students applied the skills in a hands-on, inquiry-based learning activity. During the final segment, students worked independently on their culminating projects, and, at the end of the period, students rated their own academic- and social-skills performance.

Effective instructional strategies assume that educators take into account the strengths and needs of their students when designing any lesson. Like their classmates, students with emotional disturbance and behavioral problems learn best in classrooms characterized by effective instruction and behavior-management routines. As educators know, students benefit most when academic tasks and instructional strategies are carefully designed to engage them and support their learning, and when expectations and rules are clearly communicated to them.

When working with students with emotional disturbance or behavioral problems in the classroom, it is important to remember that when the curriculum and instructional strategies do not capitalize on the child's strengths and address learning needs, frustration may result in acting-out or withdrawn behaviors. The challenge is to minimize such counterproductive experiences, while simultaneously providing positive learning opportunities.

> **…students with emotional disturbance and behavioral problems learn best in classrooms characterized by effective instruction and behavior-management routines.**

Designing successful opportunities for students with emotional disturbance and behavioral problems may require that educators change how they plan and organize their instruction, manage their classrooms, and arrange the physical layout of the classroom. These additional efforts will not only benefit students with emotional disturbance and behavior problems; they will likely help other students realize more success as well.

This chapter explores how teachers can structure both curriculum and instruction to have a positive impact upon student performance. Chapter 4 addresses how teachers can strengthen their classroom-management practices to support students with emotional disturbance and behavioral problems.

PLANNING FOR ACADEMIC SUCCESS

Like all children and youth, students with emotional disturbance and behavioral problems vary in their characteristics and needs, in their likes and dislikes, and in their reactions to classroom events. A student's cultural background also may affect how he or she reacts to some academic situations. While there are many ways to modify a lesson in order to accommodate all students, a good place to start is with those aspects of the learning setting that pose the most challenges, such as:

- task difficulty,

- lesson presentation,

- motivation, and

- work assignments.

The following strategies are suggestions that can be used to benefit the learning of all students, not merely those with emotional disturbance and behavioral problems. Also, because no two classrooms are alike, it is assumed that teachers and other professionals will use their own expert judgment regarding whether a particular strategy may or may not be useful in their own settings.

TASK DIFFICULTY

Teachers usually review curriculum materials before planning instruction. They have discovered through experience that most students will avoid tasks *if* they believe they will fail. It is, therefore, important to ensure that students are not only challenged, but are capable of succeeding. *Fear of failure* is particularly relevant when dealing with students with emotional disturbance and behavioral problems, as so many have a history of failure. The problems that such students experience in school often lead to gaps in their skill levels, or "splinter skills," which makes schoolwork even more difficult for these students.

One strategy helpful in building opportunities for success is targeting the necessary skills the student may need to improve. For example, directions may be written at a sixth-grade level, but a student may have only third-grade reading skills. Vigorous attempts must be made to try to bring the student's reading skills up to grade level, and until that happens modifications could be introduced to prevent the student from experiencing difficulty in reading the assignment. The key is to predict, modify, or avoid situations in which the student may encounter problems to help the student meet the challenges and cope with the problems. This procedure is referred to as "pre-correction."

Predicting where students may have difficulty permits educators to *build in* instructional supports. One area in which students with emotional disturbance and behavioral problems continue to struggle is working in small groups. Social skills—listening, waiting one's turn, asking questions, taking responsibility, interrupting appropriately, dealing with mistakes—are skills that students need to be successful in group interactions. Because many students with emotional disturbance or behavioral problems have not mastered social skills such as these, and because students from diverse cultures may have learned different

skills for group interactions, they may require additional support or training *before* they are able to participate fully in group activities.

> Suggestions for maintaining student engagement in the lesson include:
>
> ❑ Keeping lesson objectives clear;
>
> ❑ Delivering lessons in a lively manner and making sure that students are engaged;
>
> ❑ Using concrete vocabulary and clear and succinct sentences;
>
> ❑ Modeling cognitive strategies, such as "thinking aloud," that encourage students to verbalize the thought processes required by the task;
>
> ❑ Giving all students immediate encouragement and specific feedback;
>
> ❑ Using meaningful materials and manipulatives, and providing *examples* that students can relate to;
>
> ❑ Having students recite in unison;
>
> ❑ Varying tone of voice and modeling enthusiasm;
>
> ❑ Prompting student answers, allowing an appropriate amount of "wait time" (i.e., to encourage participation, which may vary according to the cultural background of the child);
>
> ❑ Avoiding digressions as much as is possible; and
>
> ❑ Using interesting visual and auditory presentations to entice students to attend to tasks.

LESSON PRESENTATION

If students are actively engaged in learning, they are less likely to misbehave. Teachers and paraprofessionals can increase engagement by incorporating the principles of effective instruction into their lessons (e.g. efficient classroom management; students frequently given opportunities to respond; students challenged by work, but

not defeated by it; etc.). Specific suggestions for increasing student engagement appear in the box below.

Planning short review lessons or readiness activities can help orient the student to a particular learning task.

Whenever possible, it is also important to build on students' experiences in presenting new information. This helps everyone to see the value of learning new skills. Students who learn to share their experiences with their classmates are able to learn from and about one another. This, in turn, can enhance their ability to form positive peer relationships.

> Possible modifications that can be used to increase a student's academic engaged time:
>
> **Break long presentations into shorter segments.** At the end of each segment, have students respond in some way.
>
> **Extend the amount of time** that a student is given to complete a particular task.
>
> **Break down assignments into smaller ones.** As students finish each mini-assignment, build in reinforcement for task completion. Wait to distribute the next assignment until students have been successful with the current one.
>
> **Reduce the number of practice items** that a student must complete, once the student has demonstrated mastery.
>
> **When students make mistakes, help them to learn from those mistakes.** Be careful not to "overcorrect," or require compensation beyond the point where the student can demonstrate mastery, and praise any progress toward the desired behavior change.
>
> **Follow low-interest activities with high-interest activities** so that students get breaks from difficult or less interesting activities from time to time.

If students have difficulty staying engaged in the lesson, *modifications* can be

made. To accommodate the learning characteristics of a short attention span, for example, some teachers vary the *length* of the material presented.

Holding students' interest and attention can be challenging under the best conditions; therefore, it is desirable to experiment and ask colleagues for ideas and suggestions.

MOTIVATIONAL STRATEGIES

The linchpin to motivation is to increase student participation in learning activities. With the proper incentives, sometimes called *reinforcers*, even students who show little interest can be coaxed into performing. Incentives need not be restricted to tangible reinforcers (such as points that can be traded in for rewards, stickers, food, and so on.) Many teachers successfully rely more on social, intangible incentives/reinforcers such as highly relevant content, social praise, positive and corrective feedback, and his/her own enthusiasm, and an interesting presentation.

There are other strategies that teachers can employ to make their lessons interesting, relevant, and motivating, which have particular application to students with emotional disturbance and behavioral problems. These are listed below.

In addition to infusing motivational techniques into lessons, teachers can celebrate student progress by building a means to recognize and encourage not only participation, but intellectual accomplishments, as well. Some means of reaching that end appear below.

STRATEGIES FOR INCREASING STUDENT MOTIVATION

Build upon student interests. Students often learn by relating material to real-life situations that they find interesting. Building interest factors into projects, activities, and illustrative examples is important for increasing students' motivation.

Allow students to make choices. Let students decide between two tasks or select the order in which they complete assigned tasks.

Use age-appropriate materials and activities. Students often balk at performing tasks they perceive to be geared toward students younger than themselves.

Vary activities and the pace at which those activities are presented, so that students can maintain interest and focus. When working with students with language difficulties, for example, alternate activities that require writing skills (e.g., describing a single-celled organism) with those that require other modes of responding and learning (e.g., diagramming a single-celled organism), to help students sustain involvement.

Employ appropriate technology applications (e.g., computer-assisted instruction programs, CD-ROM demonstrations, videotape presentations) that can engage student interest and increase motivation.

Use hands-on, experiential learning activities to enable students to apply learning to the real world. This is one of a teacher's most powerful tools.

Whenever tangible forms of recognition are paired with *social reinforcement* such as social praise, and positive and corrective feedback, it is important to explain exactly what the student has accomplished and how that accomplishment will help achieve long-term goals in school and in the world outside school. At the same time, it must be kept in mind that some students (particularly shy students or some teenagers) prefer to keep their rewards private, especially when they are praised for their behavioral progress.

WORK ASSIGNMENTS

Many students with emotional disturbance and behavioral problems need special help learning "how to learn," as many lack study or organizational skills that would enable them to work independently at tasks over a sustained period of time. Strategies for fostering these skills in students appear below.

INVOLVING OTHERS

There is much that educators can do to foster positive learning experiences; and there is a great deal that other professionals and those knowledgeable about the student can contribute, as well. If the student, for instance, is receiving some form of therapeutic support, it is almost always a good idea for the therapist to solicit input from other service providers, such as the classroom teacher or the guidance counselor, on a regular basis.

When planning new lessons, teachers have found it productive to capitalize on the insights and support that family members can bring to the education of their children. Family input and support should be solicited and families should be informed of their children's progress on a regular basis. This point is emphasized, because, too often, families are asked to participate only when their children are having difficulties.

Sharing responsibility for the student's academic progress often results in a network of support. By sharing knowledge, expertise, and support, educators have a much better chance of reaching students with emotional disturbance and behavioral problems.

It is often helpful for teachers or paraprofessionals to:

❑ Teach students to keep track of assignments, grades, and targeted behaviors—with reminders such as assignment sheets, daily schedules, and to-do lists.

❑ Highlight behavioral and academic successes with some form of daily record of work assignments and accomplishments. When collected over time, such records document student progress and become motivators for more student effort.

❑ Have students take notes from both oral presentations and textbooks in order to give students a means for sorting out and reviewing what they are learning.

❑ Help students manage their time by establishing routines for making transitions between lessons, getting and putting away materials, and requesting assistance.

❑ Reduce the amount of materials that may cause distractions during work time by having students put away unnecessary items in a designated place for storing tools, materials, and books.

❑ Provide time-management reminders, such as 10-, 5-, or 2-minute warnings before clean-up time, to establish *time limitations* for completing work.

❑ Make sure that students actually understand all directions before they begin independent work.

MOVING FORWARD

The classroom practitioner's major responsibility is to provide a high-quality academic program for all students, including students with emotional disturbance and behavioral problems. Hand-in-hand with sound instructional planning is classroom management. The next chapter describes how teachers and other instructional personnel can strengthen their behavioral management and discipline systems to support all students, especially those with emotional disturbance and behavioral problems.

CHAPTER 4

INSTITUTING A SOUND CLASSROOM MANAGEMENT SYSTEM

At the beginning of the school year, teachers at Sherrill Street Elementary School agree on five basic rules applicable to all students, and during the first week of school, they devote time to teaching and reinforcing the five agreed-upon rules. Many teachers produce bulletin board displays in the hallways, which serve as reminders of those rules. The principal supports this effort by making statements concerning the five rules in all of her opening announcements. Special service personnel also contribute by making self-control cards on which the rules are written, and supplying those cards to students who need additional support in mastering the rules.

Cristina, a student at Sherrill Street Elementary, had difficulty stopping one activity and moving on to a new one. When told to stop what she was doing, Cristina usually ignored the command or began screaming "No." Rather than just assuming that Cristina had mastered the necessary transition skills, her paraprofessional, Ms. Avery, decided to teach a transition routine to her. Once Ms. Avery was convinced that Cristina had mastered that routine, she initiated a contingency system in which Cristina earned points for appropriate behavior during transitions.

In addition, to help Cristina prepare for an important, upcoming change, the paraprofessional now cues her five minutes in advance, a strategy that is helping Cristina make transitions with less resistance.

Although not panaceas for all behavioral problems, classroom management systems, including individual or group behavior plans that provide clear behavioral expectations and are taught and implemented on a school-wide basis do provide a supportive structure for students. At a minimum, educators, through concentrating on a limited number of rules, provide the essential foundation for improving student behavior and promoting student success. All students, especially students with emotional disturbance and behavioral problems, need to know what is expected of them.

Teachers can enhance education for all students by establishing a sound classroom-management system, and by clearly articulating expectations and goals. Students may also need to have positive *behavioral supports as part of their IEPs*—as Cristina did. Based upon a careful assessment of the conditions associated with the student's troublesome behavior (through tools such as a functional behavioral assessment), positive behavioral supports can prevent behavior problems by establishing clear expectations about appropriate behavior and providing the

supports necessary for the student to be successful.

> This chapter explores how teachers and paraprofessionals can strengthen their classroom-management systems to provide a positive environment and accommodate the special needs of students with emotional disturbance and behavioral problems.

MANAGING THE CLASSROOM

A sound classroom management system can provide exactly the structure students (especially those with emotional disturbance and behavioral problems) need for *managing their own behaviors*. All components of a management system are important, but the following are most important:

I.   Arranging the physical environment;

II. Setting rules and expectations;

III. Helping students comply with rules and expectations;

IV. Scheduling the day;

V.   Establishing routines and procedures; and

VI. Building a positive classroom climate that provides all students with a variety of opportunities for success.

I. ARRANGING THE PHYSICAL ENVIRONMENT

Educators can discourage challenging behavior by the way they manage space. A number of suggestions for arranging students' space include:

Delineating space. Some students intuitively read the subtle cues that define the purposes for different spaces and how they should behave in those spaces; however, others need to be taught how to navigate the classroom. It often helps these students to have the classroom space divided into places that have clear purposes.

Controlling the degree of stimulation. Teachers have significant influence over the amount of visual and auditory stimulation students receive within the classroom, and, therefore, they should be aware that students who are easily distracted may require less stimulation than is typical. Examples of relatively easy steps to accommodate such students include covering storage areas, removing unused equipment from sight, replacing a loud fish-tank motor with a quiet one, and keeping classroom displays organized.

Monitoring "high traffic areas." There tends to be a lot of movement in areas such as the pencil sharpener, water faucet, trashcan, and the teacher's desk. Students who are easily distracted should be seated away from such areas while still within the proximity or at least eyesight of the teacher or paraprofessional. In addition, procedures for using these areas should be developed and taught.

Establishing a quiet place. Some students may need a quiet, "safe" place to sit and work or to calm down after an emotional outburst. Study carrels, desk blinders (three-paneled cardboard pieces that students can use at their seats for privacy), or an area behind a bookcase are examples of such quiet places. It is important to note, however, that all students should remain in full view of the teacher or paraprofessional at all times. Also, students benefit from feeling ownership of their belongings, and thus benefit from having a personal space for storing them.

II. SETTING RULES AND EXPECTATIONS

At the beginning of the year, teachers typically establish rules for classroom

behavior. One technique that may increase compliance with such rules is to express them in positive, concrete terms that describe the behavior that is expected of them (e.g., "raise your hand to be called upon to talk"), rather than defining what behavior is not acceptable (e.g., "no talking"). Similarly, consequences for failing to meet expectations should be logical, fair, predictable, directed at the inappropriate behavior, and, of course, explained before an infraction occurs.

Once five or six rules have been stated clearly, it is important to teach students how to follow them.

III. HELPING STUDENTS COMPLY WITH RULES AND EXPECTATIONS

Educators sometimes assume that students know how to carry out directives, when, in fact, they cannot. Students with emotional disturbance and behavioral problems are especially prone to being punished for rule breaking, even though they sometimes lack the skills necessary to follow the rules. If, for example, the classroom rule is to "listen when others are talking," then some students will need to be taught the skills necessary for listening.

From the beginning of their educational experience, students should know the consequences of breaking rules; and the consequences must be fair and consistently enforced. Typically, students with emotional disturbance and behavioral problems have difficulty understanding the consequences of their behavior. If a student breaks a rule, then, it is wise to ask that student to explain the consequence of his or her actions.

The following points may be considered when developing classroom rules:

❑ Rules need to be stated in clear and explicit behavioral terms, as it is difficult to abide by rules that must be interpreted. For instance, what does it mean to be "responsible" or to be "nice"? Children, especially younger children, need concrete terms and examples they can understand, such as raising a hand to speak.

❑ Rules must be concise in order for students to remember them. Reminders also may be posted in the learning area; and

❑ Students, themselves, might be encouraged to suggest rules to help create a sense of ownership and accountability, although good research shows that this is not essential to good classroom management.

Although educators can prevent many minor behavioral infractions by ensuring that rules are clearly stated, fairly enforced, and completely understood, there are often additional issues posed by students with serious behavioral problems. These are students who, after all, may have difficulty following even the most clearly stated and fairly enforced rules. For a teacher or paraprofessional to be fair and consistent, then, he or she must know whether or not the student has the necessary skills to comply with the rules.

The next section of this chapter discusses ways educators can support students' appropriate behavior. When all good faith efforts and best-practice procedures do not produce desired results, however, it may be time to enlist the support of the school psychologist, behavior specialist, the IEP team, special educator, and/or other support personnel. It may be that the IEP team needs to be reconvened to modify the existing behavior intervention plan or academic objectives.

Depending on the effect of the behavior on the safety and learning opportunities for the student and for other students in the classroom, the IEP team should consider a change of placement if concerted, documented efforts to modify serious behavior problems prove to be unsuccessful.

IV. SCHEDULING THE DAY

For students with emotional disturbance or behavioral problems, several considerations might be useful when scheduling activities throughout the day. For instance, a time for students to get calmed down while in a state of transition to a more structured activity can be built into the day's schedule. Also, since many students who have behavioral challenges find it difficult to maintain attention for long periods of physically inactive work time, it can be helpful to break large tasks into several smaller tasks with short breaks between them.

V. ESTABLISHING ROUTINES AND PROCEDURES

Establishing routines for *how* things are done and teaching those routines can help students stay on target in a classroom. For example, it is important to implement consistent routines for those times when students have to make a transition from one lesson to another, or for times when they have to get and put away materials, and so on. Routines can, of course, be taught, and students can be rewarded for following them.

Educators may want to support students in accomplishing routine tasks by using the following simple tactics:

Student cue cards. Small, wallet-sized cards on which transition steps are written can serve as visual cues, which can be taped to the student's desk, written in a notebook, or carried in a pocket. The teacher or paraprofessional may, in practice, direct students' attention to the card before moving on to a transition period.

Reflection time. Many educators find that having students stop all activity for a moment and reflect upon what they are going to do next goes a long way in preparing them for an actual transition.

Advance notice. Because some students find it difficult to cognitively or emotionally disengage from an activity in which they are immersed, advance notice (such as a five-minute warning prior to the activity's end) prepares them for disengagement and movement toward the next activity.

Peer support. When a student is learning a new routine or is having difficulty following a procedure, many teachers assign a peer buddy to reinforce and guide the student through the required steps of transition.

Subtle prompts. Pointing to a clock or putting away materials can cue students that it is time for a change. Praise or encouragement also can be used effectively to prepare for a transition. For example, saying "Ginny, you have really worked hard on your paper," or, "Look how much you have written today," helps to focus the student's attention on "wrapping up" the activity.

VI. BUILDING A POSITIVE CLASSROOM CLIMATE

Allison rarely spoke in class, and when she did, it was in a whisper. Concerned, Ms. Davis, the language arts teacher, built a positive rapport with her silent student. Each day, Ms. Davis initiated a conversation with Allison (as did Ms. Peters, the paraprofessional). Patient efforts paid off, and Allison

gradually began giving more than one-word answers.

Techniques teachers have used, and recommended, to communicate respect during nonacademic discussions:

Actively listen. Teachers need to let students know that they are being listened to. Eye contact and paraphrasing what the student says are two simple ways to demonstrate that the teacher is, indeed, listening. However, it is important to understand that in many cultures, it is considered rude for children to make eye contact with adults.

Use non-threatening questions. When students have misbehaved, questions that focus on "what" (e.g., "What went through your mind just before you kicked your shoes into the hallway?") and "how" (e.g., "How did your math book end up in the trash?") are easier to answer than those that focus on "why" (e.g., "Why did you throw your book in the trash?"). Moreover, students with a history of behavioral difficulties have learned that "why questions" often accompany disciplinary interventions and, as a result, often react to any such questions as if they are being put on the spot. Tone of voice is also important. Questions should be asked as a genuine effort to help the student understand the behavior.

Use open-ended questions. For students with a history of failure, questions that have, what they perceive as, a "right" or "wrong" answer make them feel uncomfortable (e.g., "Did you follow all the directions during the science lab today?"). Open-ended questions can be used, instead, especially when engaging the student in conversation (e.g., "What did you do in science class today?").

Show personal interest in the student. It is important for students to talk about themselves. Sharing details about likes and dislikes can open the door to broader achievements in the classroom.

Communicating respect, in addition to setting high but attainable expectations for academic performance, is central to supporting growth in the classroom. For students with emotional disturbance and behavioral problems, building a positive rapport through mutual respect and acceptance is, in fact, the first step toward establishing trust.

Once established, it is vital to work toward maintaining rapport. Oftentimes; rapport breaks down when teachers need to discipline students; therefore, a teacher should let a student know that it is *his or her behavior* that is problematic, not the student as an individual. Some teachers have found that "I-messages" allow them to maintain rapport while addressing behavior. An I-message is a statement of the behavior, followed by the *effect* that it had, and concludes with the direct, tangible consequences of the behavior. For example, "When you get out of your seat while I am giving directions (the behavior), you distract me and other students (the effect), which means we all have to stop what we are doing until I can get back everyone's attention (the consequence)."

SUMMARY

Knowing how to prevent behavior problems enables educators to move away from a reactive, punitive environment toward a more proactive environment. There is much that teachers and paraprofessionals can do to establish a classroom environment that allows all students to maximize their learning potential. At a minimum, educators can provide a foundation for improving student behavior, and for promoting student success, by maintaining an orderly, predictable classroom.

Preventing disturbing behavior through predictable means is clearly a major ingredient in fostering any kind of success in the classroom. There are times, however, when more corrective approaches are called for.

Students in the best of classrooms will lose control of their actions on occasion, some acting out and others withdrawing. Knowing how to help students manage these challenging behaviors gives teachers additional techniques for helping students with emotional disturbance and behavioral problems.

HELPING TO MANAGE BEHAVIOR

Kevin, a new student in Mr. Blanchard's fifth grade class, was constantly out of his seat and completed very few assignments. During one half-hour period, Mr. Blanchard noted that Kevin sharpened his pencil five times, got three drinks of water, and went to the materials table four times. Determined to decrease Kevin's "roaming," Mr. Blanchard reviewed all assignments, to ensure that Kevin was capable of completing them. Equipped with the information he needed, the teacher met with the special education teacher to explore what might be done to help Kevin succeed in the classroom.

The special education teacher observed Kevin in the classroom, and interviewed him, to determine whether or not he knew and understood classroom rules. Convinced that Kevin did, indeed, understand, the school psychologist and Mr. Blanchard developed a contract with Kevin: If he stayed in his seat, Kevin earned points toward a reward of his own choosing (fifteen minutes of computer time).

Within a few weeks, Kevin had increased staying in his seat by about 20 percent, and he was completing 50 percent of his work.

If students with emotional disturbance and behavioral problems are to reach their full academic potential, reducing incidences of problematic behavior is essential. For years, teachers and paraprofessionals have successfully applied behavioral management techniques to increase positive behaviors and to decrease inappropriate ones. As they have learned, the key to success is not to try to control behavior reactively, *per se*, but to *proactively manage it consistently and productively.*

INCREASING APPROPRIATE BEHAVIORS

It is important to respond to student behavior in positive ways; and it is important to resist any temptation to focus only (or even predominantly) on the inappropriate behavior. The first step in modifying behavior is to identify the behavior that should occur, instead of merely focusing on the inappropriate behavior. Once desirable behaviors are selected for reinforcement, the following strategies can be used to increase the likelihood that the student will use them.

Positive reinforcement. Point systems, stickers, smiles, and public recognition for a job well done are all examples of positive reinforcement. When a desired behavior is followed by something that the student finds rewarding, the likelihood that the desired behavior will occur more often increases. Educators find that setting up positive consequences for some students helps them learn to use new behaviors. Consequences that are dependent upon the performance of appropriate behaviors (also known as response contingencies) help students improve their behaviors, particularly when the student is not intrinsically motivated to change.

Some tips for accomplishing the transition from tangible reinforcers to social reinforcers:

❑ Reinforce immediately, (especially when working with new behaviors or young or immature students) as any delay may result in ambiguity over what behavior is being reinforced;

❑ If immediate reinforcement is not possible, acknowledge the behavior and remind the student that the reinforcement will be coming;

❑ Give a verbal description of the behavior being reinforced so that the student knows exactly which behaviors have led to the reward;

❑ Use social (e.g., praise or recognition) and activity reinforcers (e.g., time on a computer) in conjunction with tangible ones;

❑ Phase out tangible and contrived reinforcers as soon as possible;

❑ Gradually increase the time between the behavior and the reinforcer; and

❑ Be sensitive to peer pressure, and be careful not to embarrass a student when presenting reinforcement.

While many students are intrinsically rewarded by social recognition (e.g., adult or peer praise) for their appropriate behavior, other students will initially need tangible reinforcers, such as those described on <mark>page 67</mark>. It is important, though, to pair these rewards with social reinforcement so that the social reinforcement, itself, will ultimately become rewarding and the tangible reinforcer can gradually be removed.

A behavioral contract is a good example of making a reward depend upon a desired response. Most effective contracts usually contain the following:

- Concrete definitions of expected behavior;

- Positive consequences for demonstrating expected behavior;

- A statement of everyone's roles (e.g., "Mr. Jameson will monitor the rate of homework completion during the duration of the contract"); and

- A statement of commitment from everyone involved.

Token economies (point systems) are other examples of response contingencies. Within these systems, students are asked to perform appropriate behaviors for which they receive tokens (or points), to be exchanged later for a reward. As students become proficient in demonstrating acceptable behavior, points are given less frequently. When using point systems it is sometimes useful for the student to see a visual chart that represents progress toward reaching a goal.

Negative reinforcement. Negative reinforcement theory says that a student will perform appropriate behaviors to avoid or escape negative consequences. For example, students complete their homework to avoid failing, or students sit appropriately in order to stop a teacher from "nagging" them. Such strategies should be used sparingly, because they focus attention on inappropriate behaviors. When they are used, however, they should always be paired with the reinforcement of an appropriate, alternative behavior (e.g. occasionally rewarding the student for sitting appropriately or for completing his or her homework). Students need to know what they should be doing, not just what will not be tolerated.

DECREASING INAPPROPRIATE BEHAVIORS

For most students, an increase in appropriate behaviors will replace the need for interventions that focus on decreasing

inappropriate behaviors. However, some inappropriate behaviors may necessitate the use of "behavior-decreasing consequences," as follows.

Planned Ignoring. The use of planned ignoring (extinction) is based upon the theory that, if the inappropriate behavior is used to gain attention, ignoring the behavior will result in its becoming "extinct." Three points should be stressed when using extinction:

- The use of extinction is not recommended for behaviors that are unsafe or harmful;

- If the student is gaining desired attention from his or her peers, the behavior will not decrease unless peers also ignore it;

- Usually, a short-term consequence of extinction is that the targeted behavior *initially* tends to become worse before it becomes better.

Punishment. Punishment receives a great deal of attention. While occasionally it may be necessary to use punishment as a consequence for inappropriate behavior (see sidebar: *Using Punishment*), it should be only a small part of a behavioral management plan. The theory behind punishment is that the behavior will decrease, if it is followed by something the student perceives as negative. "Response cost" (e.g., losing points in a token economy) is an example of punishment.

There are three correlates to punishment. First, punishment focuses on what the student should *not be doing* rather than on what he or she should be doing. Second, punishment often causes emotional reactions, not only from the student whose behavior is being punished, but from other students. Finally, many student behaviors

that result in punishment are highly frustrating to educators. It is important to react to frustrating behaviors in a calm and rational manner, so as not to increase the student's negative behavior.

USING PUNISHMENT

Punishment should only be considered under certain circumstances:

- ❑ When the behavior is dangerous to the student or others,

- ❑ When every other intervention has been appropriately implemented and failed; or

- ❑ When the student's behavior is so noxious that it prevents them from learning or forming meaningful social relationships.

Time-Out. Time-out is an often misunderstood punishment technique that actually refers to "time-out *from positive reinforcement.*" With time-out, all reinforcement ceases and the student is essentially removed from a reinforcing situation. It is especially effective for behaviors that are used to seek attention. For example, if a student makes inappropriate comments during small group activities to get the other students to laugh, removing the student from the others in his or her group might be a good intervention.

Effective use of time-out requires discussing with the student in advance those behaviors that may lead to a time-out, as well as the proper procedures for going to, being in, and returning from time-out. Time-out, then, should be clearly differentiated from other removal techniques, such as planning rooms or places to cool-down," which students *voluntarily* go to when they feel they need time to gain control over themselves or their situation.

Effective time-out strategies incorporate a multilevel system of increasing seclusion.

For example, a student may be asked to put his or her head down. At the next level, the student might turn away from or leave the group; and finally, a separate location, or "seclusionary time-out," may be used when the intensity of the behavior warrants such removal.

The use of seclusionary time-out has caused some controversy. Critics allege it denies students their right to education, while serving as nothing more than a form of "imprisonment." As a result of such claims, some school districts have banned the use of seclusionary time-out. It is, therefore, best to consult school policies *before* implementing seclusionary time-out in the classroom; it is also a good idea to discuss the procedure with the child's IEP team before implementing such a technique. If school board policy allows seclusionary time-out, the facilities should be adequate, and the time-outs well-monitored, short in duration, and used judiciously. The question should be asked each time a student is sent to time-out, "Is this student being denied an opportunity to learn while in seclusionary time-out?"

Table 1 contains guidelines for implementation of time-out procedures.

TABLE 1

TIME-OUT: GUIDELINES FOR IMPLEMENTATION

- ❑ Consult school administration for district time-out policies.
- ❑ Discuss the use of time-out options and procedures with students' parents.
- ❑ Define which behaviors will earn time-out.
- ❑ Decide how long the time-out should last.
- ❑ Thoroughly discuss the time-out procedure with the students:
- ❑ Specify the behaviors.
- ❑ Specify the warnings to be given.
- ❑ Teach directions for going to time-out.
- ❑ Teach proper time-out behavior.
- ❑ Teach procedures for returning from time-out.
- ❑ Post time-out rules in the classroom.
- ❑ Warn students when their behavior may lead to time-out.
- ❑ Implement time-out without emotion or discussion.
- ❑ Begin timing the time-out only when the student begins to exhibit appropriate behavior.
- ❑ Discuss appropriate alternative behaviors in private upon student's return from time-out.
- ❑ Specify time-out procedures in the student's IEP.

LOGGING THE TIME-OUT

Keep a time-out log for each incidence of seclusionary time-out that includes:

- Child's name

- Description of behavior or incident that resulted in time-out

- Time of incident

- Duration of time-out

- Behavior during time-out.

Review the time-out log regularly to evaluate the effectiveness of the time-out procedures.

TEACHING NEW BEHAVIORS

Some students with learning difficulties do not learn appropriate behaviors by observation alone. Sometimes, a student may not be performing a particular behavior simply because he or she has not been taught it. In these cases, the behavior may not indicate defiance on the student's part, but simply the inability to behave in an appropriate manner.

Such a situation may arise if certain social skills are required for the performance of a specific task (e.g., sharing or taking turns as lab partners in a science experiment). Many students with emotional disturbance and behavioral problems have never been taught *correct* social skills, and, as a result, are at a distinct disadvantage in situations requiring any social interaction.

Once the students have performed the new behavior with frequent success, a self-monitoring strategy may be introduced where students keep a count of how often they use the new behavior. Such strategies are used to help students manage and evaluate their own behavior. For example, a student may keep track of the frequency (or duration) with which he or she demonstrates the new behavior.

The following combination of instructional strategies may help when teaching students new behaviors:

❑ Modeling—showing the student the appropriate use of the behavior.

❑ Rehearsing appropriate behavior—providing opportunities for the student to practice the behavior.

❑ Role-playing—providing the student the opportunity to practice the behavior in the context of a situation in which the behavior might be needed.

❑ Continuous reinforcement—providing reinforcement to the student as he or she practices the new behaviors.

❑ Prompting—giving the student cues to help him or her remember how and when to use the new behaviors.

TEACHING SOCIAL SKILLS

A growing trend in elementary schools is to teach social skills as part of regular classroom lessons. Teachers first identify necessary classroom social skills (such as waiting one's turn, sharing materials, saying "excuse me," listening, and following directions), then they select a particular skill and break it down into observable steps. They teach those steps, while modeling the behaviors themselves, and while asking students to do the same. Students also role-play the skill, and receive positive feedback from the teacher, paraprofessional, and other students. Throughout the rest of the day, adults target naturally occurring opportunities to reinforce the students when they demonstrate newly learned social skills.

STRATEGIES TO SUPPORT APPROPRIATE BEHAVIOR

Proximity control. The educator uses his or her physical presence to reduce inappropriate behaviors and to increase appropriate ones. For example, if a student is staring out of a window, the teacher can continue lecturing, but move toward the student in a non-threatening way. The teacher's presence serves as a reminder to the student that he or she should be paying attention. The use of direct eye contact can be used to enhance this technique. It is important to remember that in emotionally charged situations it is not good to get too close or make the student feel cornered.

Signal interference. Rather than use a direct warning to stop an inappropriate behavior and encourage a positive one, educators can signal or prompt a student by using a previously agreed upon sign. (This can be a private signal known only by the student and educator.) For example, teachers commonly put their index finger over their lips to indicate that it is time to be quiet; or they tap a chime to alert students to stop what they are doing and face the teacher.

Redirection. Teachers and paraprofessionals use redirection, when necessary, to verbally remind a student of the task at hand. For example, if a student is wandering out of his seat, the paraprofessional might redirect the behavior by saying: "John, show me how many answers you've completed in your workbook." The redirective statement positively reminds John of what he *should* be doing, and it allows him to re-engage in the learning activity without punishment.

Relaxation. When students are agitated (e.g., after a heated argument during recess), teachers can have them relax quietly by putting their heads on their desks. Similarly, when students feel upset, they can be taught to count backwards or breathe deeply before reacting. It is best, however, to teach students such techniques when they are calm. Educators also may enhance the success of these techniques by teaching students to recognize *triggers* of stress and anger.

Talking the student down. If a student has become agitated, but has not lost control, it may be useful to "talk the student down" to a more relaxed state. This technique has the teacher or paraprofessional talk very calmly, slowly, and quietly to a student, leading him or her to a positive solution.

Humor. Sometimes potentially volatile behavior can be diffused by gently drawing attention to something funny about the situation provoking the behavior. Educators are cautioned, however, against using sarcasm or trivializing a deeply-felt emotion. It is important to maintain a mutually respectful relationship with the student.

SUPPORTING APPROPRIATE BEHAVIOR

Sometimes, educators find that students need extra support to behave appropriately. The following are "tricks of the trade" that might be used to support appropriate behaviors.

SUMMARY

A key to increasing appropriate behaviors and decreasing inappropriate ones is motivation. Through careful application of behavior management strategies, teachers and paraprofessionals can actually teach motivation, and, hence, improve classroom behavior.

Strategies designed to manage behavior may be quite effective in the short run, but, by themselves, they are not sufficient to bring about long-term behavior change. Teachers and paraprofessionals that also build a positive relationship with students have, however, the greatest chance of succeeding over time. Basic skills must be delivered within a *compassionate context*—and that context is a humane and safe environment filled with caring relationships. All students benefit from having caring adult educators in their lives. Both students and educators contend that such a person can be, in fact, the single most important component in helping anyone with emotional disturbance or behavioral problems take the first step toward adjustment. The power of caring is impossible to overemphasize.

MANAGING AGGRESSIVE BEHAVIORS

Back early from lunch, Terrance storms into the classroom, knocking over desks and chairs. He swings at a stack of books sitting on the counter, sending them sailing across the room. The few students who also are back early begin moving quickly away from

Terrance, hovering close to the teacher's desk and along the room's perimeter. Screaming, "I hate you," he lunges toward Bryan, who is racing toward the door.

Even when lessons are delivered effectively, with a management system in place and rapport established, it is still possible for aggressive acts to occur. When a student loses control in the classroom, it is the educator's primary responsibility to protect the safety of everyone involved.

Usually, a student does not lose control without "giving notice." We understand from research that when students act out, their behavior follows a predictable pattern. In fact, one of the best lines of defense for classroom teachers and paraprofessionals is to understand the nature of this *acting-out behavior* pattern, and to use that knowledge to support the student.

A student's sense of calm can become disrupted by certain environmental "triggers," such as changes in routine, too many errors or corrections on assignments, or peer provocation. Triggers also may be outside the classroom, and might include gang pressure, substance abuse, lack of sleep, or peer or family conflicts. There are some triggers that educators can control (e.g., preparing students for transition, ensuring a student takes his or her medication as scheduled, teaching anger management skills), and others that are beyond their control (e.g., an upheaval in the family, conflicts with friends, etc.). Providing a structured, supportive environment and teaching the student the skills needed to control anger and to problem-solve will reduce the impact of triggers on a student's behavior.

If a student is triggered, he or she usually becomes confused or defiant. The student may ask lots of questions and begin arguing. Sometimes just showing interest in him or her, or giving the student a chance to talk about what is bothering him or her, can help the student regain self-control or enable the educator to provide appropriate support. Provide the student with time and space at this point. Allow him to work independently and prompt him to use relaxation skills and problem-solving skills to work through his anger. It is important to remain calm and to continue to treat the student with respect. If you become upset or rude it will only escalate the student's behavior.

If the student's behavior continues to escalate remind him or her in a respectful way of the consequences of the behavior. Give the student the opportunity to choose the appropriate behavior.

Should a student loose control, however, the educator's priority is safety. This includes the safety of the others in the room, as well as that of the student who is out of control. If the student's behavior in endangering others in the classroom, ask the student to leave the room. If he or she will not leave, have the other students leave the room and send one student for help. In either case, tell the student(s) exactly where they should go and whom they should talk to. Again, remain calm and respectful so as not to escalate the behavior.

Following a loss of control, the teacher or paraprofessional should debrief with the student and help him or her identify appropriate alternatives to his or her behavior. This should be done when the student has calmed down and is receptive to working with an adult to improve his or her behavior. This debriefing should be approached as an opportunity for the student to learn. The issues of discipline and

consequences for the disruptive behavior should be broached separately.

Schools should take the time to develop emergency procedures in the event that a student loses control and threatens the safety of other students. This plan should be taught and practiced before an incident occurs.

ENLISTING HELP AT SCHOOL

Some students demand more attention and understanding than any one teacher or paraprofessional can give. It is rare that these students have problems with their behavior in only one setting (e.g., classroom, lunchroom, playground, or hallways). In such cases, colleagues work together to help support the student's behavioral growth. A behavior management plan, for instance, is more powerful if it is applied in more than one setting, and by more than one adult. Essentially, school-wide approaches are good ideas, as such approaches can minimize environmental triggers, provide structure and consistency, and are more effective in addressing behavioral needs over the long run.

To be most effective, the entire school community and family must address violent and aggressive behavior; therefore, it is imperative that the support and resources of all concerned be enlisted. In response to this growing need, many schools are providing students with conflict-resolution and peer-mediation skills. Some schools are even adopting school-wide social skills and discipline programs. Procedures should be in place for dealing with violent behavior and criminal actions in the school because educators should not be left on their own to deal with such situations. In general, to adopt a school-wide plan, the following criteria are suggested.

CRITERIA OF A SCHOOL-WIDE BEHAVIOR MANAGEMENT PLAN

❑ Explain the purpose of the plan;

❑ State behavioral expectations;

❑ Explain strategies for teaching behavioral expectations to students;

❑ Include structures for reinforcing students who demonstrate desired behaviors;

❑ Agree in advance on strategies for managing students who demonstrate problem behaviors;

❑ Include a continuum of *back-up consequences* for students who resist efforts to change inappropriate behaviors;

❑ Outline a referral system (complete with strategies that educators should use to document students who repeatedly demonstrate problem behavior). Also include a system for explaining *how* officials are to share information gathered via the plan with families, district officials, and, if appropriate, law enforcement officials;

❑ Include a step-by-step procedure for communicating the purpose of the school-wide plan and the ways it will be used to address violence and criminal actions to parents and others.

Policies must be written down stating what is and is not allowable in a plan in order to avoid misconceptions. Once a plan is developed, staff must receive training about how to put the plan into effect, and review its implementation after a practice run to evaluate its effectiveness.

WORKING TOGETHER WITH FAMILIES

Emotional disturbance and behavioral problems affect children in all life situations—home, community, school, church, etc. In addition, families experience significant stress when a child has emotional and behavioral problems and they need to work with the schools to address the student's

needs. Communication with the student's family should, therefore, be one of the most important components of any school program. Because a family unit may be configured in many ways, it frequently helps to know and refer to the significant members of a child's family (e.g., mother, father, grandparent, aunt, older sibling, other adult.) and the part they play in a student's life, in all plans concerning the education of a student with emotional or behavioral problems. The core members of the family should be included in all significant deliberations about the student's education.

The IEP team offers opportunities to meet with the child's family. Collaboration can extend throughout the year, as family members are made to feel at home with teachers and other professionals charged with instructing their children. Meetings can be scheduled to facilitate family involvement, and conducted in a manner that demonstrates respect for the student's family, their culture, and their knowledge and concerns. Empathy, respect, and sincerity are key factors in establishing and maintaining a positive relationship with families.

Because families like to hear good news, it is suggested that teachers and others share reports on student progress with families, either through notes, reward charts, completed contracts, phone calls, or record cards. When meeting with families, in order to build trust and good support, it may be helpful to begin with positive examples of their child's performance or behavior before addressing inappropriate behaviors.

When talking to a family about their child's behavior in school, the following approaches may enlist their support:

❑ Refer to behavioral difficulties within the context of mastering academic goals;

❑ Be concrete and specific about behavior problems. Expressions that exaggerate the frequency of problem behaviors, such as "he **always** looks away when I smile at him," or "she talks back **all** of the time," serve only to make family members defensive;

❑ Actively listen to family members, empathize with their concerns, and learn from their knowledge and experience;

❑ Share positive examples of the student's performance, and reaffirm a commitment to helping the student become successful in school; and

❑ Solicit the family's suggestions concerning how to reduce inappropriate behaviors.

MOVING FORWARD

While the characteristics presented by children with emotional disturbance and behavioral problems may sometimes seem daunting, the bottom line is never to give up on *any* student. Because children with emotional disturbance and behavioral problems may challenge a teacher's patience and cause momentary despair, teachers should not be alone in helping students succeed.

The school is a learning community. While it is important to build a positive climate in the classroom, such work does not stop at the classroom door. The success of a classroom behavior management program can be enhanced by other colleagues as well as by the student's family. In that spirit, the next chapter presents some promising practices that schools and districts are using to support classroom teachers and paraprofessionals.

CHAPTER 5

SCHOOL-BASED SUPPORTS

Both the middle schools and the high school in a Northeast school district employ collaborative teaching techniques among teams of regular and special educators. Co-teaching teams modify instruction for individual students, while the school implements alternative disciplinary plans and establishes academic support centers that students throughout the school can utilize. These interventions have enhanced engagement and learning for all students—including those with emotional disturbance or behavioral problems.

The district has supported these efforts by staffing the support centers with trained paraprofessionals; providing regular release time for collaborative teams of regular and special educators to meet and plan; and scheduling classes so that teaching teams share the same students.

In a Southwest school district, the school-based teacher assistance team has taken on a new role of coordinating professional development. Teachers, paraprofessionals, support service personnel, and administrators may request different staff development topics. The team analyzes these needs to design staff development opportunities that address both the topic in general and the particular needs of school personnel.

There is much that can be done in the classroom to provide high-quality educational programs to students with emotional disturbance and behavioral problems. The school and district, however, must support such efforts. From this system-wide perspective, the goal is to build the school and district capacity to undertake the strategies and approaches that sustain and support positive results for all students, including students with emotional disturbance and behavioral problems.

When teachers and paraprofessionals serve as team members, and are provided with adequate time to meet with the team, they are in an excellent position to solve problems or identify resource needs. They can develop a rich understanding of their students' needs and share a stake in designing effective collaborative interventions that can help improve student learning and behavior. Teachers and paraprofessionals can play key roles in recommending the support services and resources that facilitate success in school.

RECONFIGURING SERVICES

Across the country, special services are being reconfigured to support students and educators. In some cases, social services are being brought to schools. In other cases, new concepts are being developed, as well,

to address the emotional and behavioral needs of students. Three examples of redesigned service delivery models follow.

This chapter describes some promising practices and approaches that are having a positive impact on students and classroom environments, such as:

❑ Reconfiguring services within and outside of the classroom and school;

❑ Developing effective collaborative teams; and

❑ Offering professional development to all staff.

An understanding of how these approaches can support student progress enables teachers and paraprofessionals to seek out the approaches and advocate for their establishment in practice.

To support high school students with emotional disturbance and behavioral problems, educators in a district in Rhode Island have established a "planning room" wherein all students may find emotional support or extra help with schoolwork, do their homework in a quiet setting, or perform social problem-solving activities. A special education teacher, skilled in behavior management, supervises the planning room and tutors students in academic subjects, and, when necessary, helps them solve problems in socially appropriate ways. When a student needs additional help, such as community mental health services, the supervising teacher assists students in obtaining that help.

Educators in an Ohio district have designed a plan that assigns special education paraprofessionals to regular education elementary classrooms where they work to provide academic and behavioral support directly to students. At the end of the day, the teacher, the paraprofessional, and individual students go over the progress

made that day, and the student is invited to make suggestions on how he or she can improve the next day.

Social workers in a Michigan district are assigned to classrooms that include children with emotional disturbance. As needed, those social workers provide positive support to children in following the classroom rules, solving problems, and developing positive attitudes.

Behavior specialists in Toledo, Ohio work with teachers who have students with behavior problems that exceed the teachers' skills for dealing with them. A behavior specialist will consult with the teacher; observe the student; talk with the counselor and the parents; consult with the family physician, if necessary; and then develop a behavior management plan. The specialist works with the teacher to put the plan into place and is on call to help if the plan is not working.

These are just a few options schools have found to support the needs of both students and educators. In other cases, services that were once the sole province of "pull-out" settings are now being brought into the classroom. Teachers are becoming part of *co-teaching partnerships,* and some teachers have developed meaningful and productive new ways to include various service providers in the classroom program. For example, a behavior specialist may spend some time each day assisting a student in the regular classroom; or, the teacher of students with learning disabilities might co-teach a lesson with the regular teacher at various levels to ensure that all students are challenged and no one is frustrated with the material.

Some school structures currently in place also are being revamped, with a special focus on supporting students with emotional

disturbance and behavioral problems. School-wide behavioral management systems, for instance, are being designed and implemented by entire school staffs, and are being geared to offer a consistent approach to supporting all students and to defining and communicating rules, expectations, and consequences.

Often, instructional components are built into such school-wide behavior management systems to actually teach children self-control and social-skills strategies. Individualized instructional support programs are sometimes offered that address the behavioral needs or skill deficits of children with emotional disturbance. In addition, school districts are starting to implement early intervention and prevention services for young children at risk of developing emotional disorders or behavioral problems, as well as transition services for older youth. Research suggests that all these services can enhance a student's intellectual and social development and allow successful adjustment into the world of work or further study.

It is helpful to find out about programs like these in your district, or, when appropriate, employ or work with others to implement them. Educators can play a critical role in offering ideas for how new services can be developed or used in their particular classrooms and schools.

ALTERNATIVE SETTINGS

Whenever possible, it is expected that students will participate in the general curriculum with appropriate aids and supports. Sometimes, however, students require more than reconfiguration of services in their current setting to achieve success in controlling or improving their behavior. In such cases, educators may make

the decision that a student could be better served in an alternative setting. An alternative setting could be a "school within a school" or it could be a separate school facility. The configuration of an alternative setting depends on what each community can provide, but it is best to keep students as close to the mainstream setting as is appropriate, because the goal of effective alternative programs should be to enable the students to get back to their original settings as soon as possible.

SELECTED COMPONENTS OF EFFECTIVE ALTERNATIVE PROGRAMS

1. A Qualified Staff—The staff of alternative programs should be qualified, well-trained, and experienced to teach students with emotional and behavior problems. They should choose to teach in these settings and be present in sufficient numbers to guarantee a strong, positive adult presence. This ensures that students are getting effective instruction and also are being understood by people who want to see them succeed.

2. Functional Assessment of Student's Skills—An assessment should be performed to determine what each student needs, both academically and behaviorally, rather than what a particular curriculum says should be taught. Each assessment should be tailored to each individual child, rather than using a packaged assessment program. This kind of assessment aligns with that required when preparing an individualized program of instruction for each student.

3. Functional Curriculum—based on the results of the individualized assessment, each student should have a functional curriculum that addresses his or her particular needs. In addition to appropriate academic instruction, the curriculum should be individualized to include instruction in whatever vocational, social, and life training skills a student might need in order to function in the classroom. This curriculum should be written into a student's individualized plan of instruction.

4. Effective and Efficient Instructional Techniques—The instructional strategies chosen to implement the student's curriculum should take into account how each child learns, such as considering a student's attention span or learning style. For example, a student may learn better when a direct instruction approach is used, than he or she does in cooperative learning groups.

5. Transition Program—alternative programs should have a process in place to transition a student back to his or her regular program. Each student should begin this process as soon as he or she enters the alternative program. Transition programs should address the skills that each student needs to be successful in his or her regular setting or in a job, when appropriate.

6. Comprehensive Systems—Alternative programs should work with community agencies that may also provide services to students in a coordinated manner. Such agencies may include: social services, foster care, juvenile justice, child protective services, and children's mental health. Working together to meet each student's spectrum of needs may improve student outcomes both in and beyond school.

7. Availability of Resources for Students with Disabilities. Alternative programs should have small class sizes; an emphasis on intensive instruction; effective and frequent communication among students, families, teachers and other school staff; and sufficient social work, psychological, and counseling resources so that all students receive effective services.

EXHIBIT 1
COMPONENTS OF A SYSTEM OF CARE

A glossary appears as in Appendix B to offer definitions or descriptions of these components.

1. **Mental Health Services**
   Prevention
   Early identification and intervention
   Assessment
   Outpatient treatment
   Home-based services
   Day treatment
   Emergency services
   Therapeutic foster care
   Therapeutic group care
   Therapeutic camp services
   Residential treatment services
   Crisis residential services
   Inpatient hospitalization

2. **Social Services**
   Protective services
   Financial assistance
   Home aid services
   Respite services
   Foster care
   Adoption

3. **Educational Services**
   Assessment and planning
   Resource rooms
   Self-contained special education
   Special schools
   Homebound instruction
   Residential schools
   Alternative programs

4. **Health Services**
   Health education and prevention
   Screening and assessment
   Primary care
   Acute care
   Long-term care

5. **Vocational Services**
   Career education
   Vocational assessment
   Job survival skills training
   Vocational skills training
   Work experiences
   Job finding, placement, and retention services
   Supported employment

6. **Recreational Services**
   Relationships with significant others
   After-school programs
   Summer camps
   Special recreation projects

7. **Operational Services**
   Case management
   Self-help and support groups
   Advocacy
   Transportation
   Legal services
   Volunteer programs

Source: From *A System of Care for Severely Emotionally Disturbed Children and Youth* by B. A. Stroul & R. M. Friedman, 1986, rev. 1994. Washington, DC: CASSP Technical Assistance Center, Georgetown University Child Development Center.

In the past, many alternative settings were thought of as custodial programs that served to *keep* students more than to educate them. Effective alternative programs now are more nurturing environments where trained personnel offer coordinated services that support students' return to their original settings. See *Selected Components of Effective Alternative Programs* for a detailed description of services that alternative programs should provide for students.

DEVELOPING EFFECTIVE COLLABORATIVE TEAMS

Involving family members, other professionals, and the community in improvement efforts is the cornerstone of long-term change. Learning from colleagues and others is a tried and true way to discover new ideas and approaches. Strategies for addressing the needs and strengths of students with emotional disturbance and behavioral problems can be identified through school-based student assistance teams; special and general education teacher partnerships; and school, family, and community teams that include other service providers. With the new amendments to the IDEA, general and special education teachers are now partners in developing the IEP for all students educated partly or wholly in a regular education setting—This allows for enhanced collaboration among all parties.

Because the needs of students with emotional disturbance and behavioral problems often transcend what schools are able to provide, community agencies are increasingly playing an important role in students' lives, making linkages between schools and the community especially valuable to all involved.

Linkages also can be developed where previously none existed. Teachers in one school were surprised to learn about the behavior specialist's availability to work with them inside their classrooms. After a planning day with the behavior specialist, during which teachers learned about what her services included, teachers scheduled her to conduct social skills activities in their classrooms. They also drew upon her expertise in including families in cooperative planning. In other situations, a school or community social worker, or the school psychologist may be able to provide similar services.

Teachers and paraprofessionals often report satisfaction with collaborative models, primarily citing the opportunity they provide to share knowledge, expand skills, and develop creative solutions to problems. At the same time, teachers stress that *time* has to be made available on a regular basis for such collaborations to become effective. Districts, too, need to reduce barriers to collaboration and introduce opportunities for professionals and families to meet or to integrate community service providers into the school setting to create a "system of care." (For information on specific resources, contact the Center for Effective Collaboration and Practice or the Center on Positive Behavioral Interventions and Support.) The following exhibit details the components of a system of care and the services each component can provide to meet such needs collaboratively.

PROVIDING OPPORTUNITIES FOR PROFESSIONAL DEVELOPMENT

Educators and related service providers alike want to ensure that students with emotional disturbance and behavioral problems receive the best education

possible. School districts are discovering that effective professional development for educators can improve the education of these students. Teachers, paraprofessionals, parents, community members, administrators, and support staff—including bus drivers and cafeteria and playground monitors—should work together. All can benefit from improving their understanding of students with emotional disturbance and behavioral problems. Research has shown that professional development activities must have certain characteristics to be maximally effective (see sidebar: *Selected Characteristics of Effective Professional Development*).

SELECTED CHARACTERISTICS OF EFFECTIVE PROFESSIONAL DEVELOPMENT

❏ Supplies educators with research-based content knowledge about the subject.

❏ Gives educators not only ideas for what to do, but provides them with information about why interventions work.

❏ Is intensive (i.e., time and training) and inclusive (i.e., support and resources) enough to produce a measurable change in students.

❏ Engages educators and gives them skills to fine-tune what they have learned to fit their particular setting.

❏ Is sensitive to the unique needs of the school community and addresses the concerns of educators.

❏ Is conducted in a variety of formats to address learning styles.

MOVING FORWARD

Many students at some time or another present challenging behaviors. Classroom teachers and paraprofessionals are, therefore, always on the front lines, as they work to prevent inappropriate behaviors from interfering with students' academic progress. Clearly, helping students manage

their behaviors is a vital part of ensuring that they will not miss out on learning that will improve the quality of their lives. As the examples in this booklet suggest:

- comprehensive programs of school-wide discipline expectations,

- improved classroom management—using rules and procedures, teaching replacement behaviors, strategies that enhance acceptable behavior and reduced unacceptable behavior—

- collaborative teaming to address the needs of students with low-level challenging behaviors,

- emergency planning, and

- high quality alternative settings for students whose needs cannot be met in the regular classroom or neighborhood school can ensure that student learning and development continue to move forward.

CHAPTER 6

SUPPORT AND RESOURCES

There is now much that teachers and paraprofessionals can do to support the educational development of students with emotional disturbance and behavioral problems, particularly since many of the techniques that work with these students can work to improve results for all students.

This chapter suggests additional organizations and resources that educators and school districts can use to assist them in improving the education of all students.

ORGANIZATIONS

THE CENTER FOR EFFECTIVE COLLABORATION AND PRACTICE (CECP).

The Center is working to improve results for children and youth with, or at risk of developing, emotional disturbance and behavioral problems and their families. Its main goals are to identify effective practices and to disseminate this information to teachers, mental health professionals, Head Start personnel, juvenile justice personnel, child welfare professionals, family members, and others. To do this, the Center has put together a network of individuals and information sources that can help teachers locate a variety of resources, and it constantly updates its own records to include many of those on the list that follows. In addition, the Center: (1) maintains E-mail-based listservs for teachers, school psychologists, emotional and behavioral disorder specialists, and

those interested in issues of implementing the IDEA; (2) offers Author Online discussions through its website; (3) maintains a database of relevant meetings and conferences on the website; and (4) helps to link individuals to services providers through its network of Nursery and Greenhouse sites. The Center's website also provides access to free publications produced by the Center on many of the topics addressed in this document.

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Fax: 202-944-5454
E-mail: center@air.org
Internet: www.air.org/cecp/cecp.html

THE CENTER FOR THE STUDY AND PREVENTION OF VIOLENCE (CSPV)

CSPV was established in 1992 to provide assistance toward understanding and preventing violence, particularly among adolescents. Since that time, CSPV has expanded its focus to violence prevention throughout the course of life. CSPV's research-to-practice efforts have resulted in the following services: (1) a collection of research literature and resources relating to the study and prevention of violence; (2) technical assistance for the development and evaluation of violence prevention and intervention programs; and (3) research

analyses that focus on the causes of violence and the search for best practices to prevent against violence.

Center for the Study and Prevention of Violence
Institute of Behavioral Science
University of Colorado at Boulder
Campus Box 442
Boulder, CO 80309-0442
Phone: 303-492-8465
Fax: 303-443-3297
Internet: www.colorado.edu

BLUEPRINTS FOR VIOLENCE PREVENTION

Blueprints for Violence Prevention is a collection of ten violence prevention programs, which, the Center for the Study and Prevention of Violence (CSPV) determined, have high scientific standards of program effectiveness. "Blueprints" includes a description of each of the selected violence prevention programs, including the theoretical rationale for the program, the program's core components for implementation, evaluation design and results, and practical experiences encountered during the program's implementation.

Blueprints for Violence Prevention
Center for the Study and Prevention of Violence
Institute of Behavioral Science
University of Colorado at Boulder
900 28th Street, Suite 107
Campus Box 442
Boulder, CO 80309
Phone: 303-492-1032
Fax: 303-443-3297
E-mail: blueprints@colorado.edu
Internet: www.colorado.edu.cspv/blueprints

CENTER ON POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORT

The Center on Positive Behavioral Interventions and Support was created through the U.S. Department of Education's Office on Special Education Programs to give schools capacity-building information and technical assistance for identifying, adapting, and sustaining effective school-wide disciplinary practices. The Center aims to meet two goals: (1) to widely disseminate information concerning school-wide positive behavioral interventions and supports to schools, families, and communities; and (2) to demonstrate to concerned parties at all levels (students, schools, districts, and states) that school-wide positive behavioral interventions and supports are feasible and effective.

Center on Positive Behavioral Interventions and Support
5262 University of Oregon
Eugene, OR 97403-5262
Phone: 541-346-2505
Fax: 541-346-5689
E-mail: pbis@oregon.uoregon.edu
Internet: www.pbis.org

THE COUNCIL FOR EXCEPTIONAL CHILDREN (CEC)

CEC is the largest international organization dedicated to improving educational outcomes for students with disabilities. The CEC holds international, state, and local conferences through its various chapters, and produces a catalog of publications, available by calling 1-800-232-7323. It also maintains several ERIC Clearinghouses of information and research on education issues, accessible though the Internet. The Council can be contacted at:

The Council for Exceptional Children
1920 Association Drive
Reston, VA 20191-1589
Voice phone: 703-620-3660
TTY: 703-264-9446
FAX: 703-264-9494
E-mail: cec@cec.sped.org
Internet: www.cec.sped.org

THE COUNCIL FOR CHILDREN WITH BEHAVIORAL DISORDERS (CCBD)

The CCBD, a division of the Council for Exceptional Children, is committed to promoting and facilitating the education and general welfare of children and youth with behavioral and emotional disorders. The CCBD publishes the research journal *Behavioral Disorders*, a newsletter, and a practitioner-oriented magazine, *Beyond Behavior*, which are distributed to its members several times a year. The Council for Exceptional Children may be contacted for information regarding the CCBD's other publications, as well as membership opportunities and regional and national conferences.

THE FEDERATION OF FAMILIES FOR CHILDREN'S MENTAL HEALTH (FFCMH)

The FFCMH is a national, parent-run organization focused on the needs of children and youth with emotional, behavioral, or mental disorders, and their families. The Federation has chapters in every state, offers regional and national meeting and events, provides technical assistance and materials, and publishes a newsletter, *Claiming Children*. The national office can be contacted at:

The Federation of Families for Children's Mental Health
1021 Prince Street
Alexandria, VA 22314-2971

Phone: 703-684-7710
Fax: 703-836-1040
E-mail: ffcmh@crosslink.net
Internet: www.ffcmh.org

THE INSTITUTE ON VIOLENCE AND DESTRUCTIVE BEHAVIOR

The Institute on Violence and Destructive Behavior (IVDB) at the University of Oregon is an institute made up of University of Oregon faculty representing schools of Education, Psychology, Sociology, Law, Architecture, and Public Policy and Planning. IVDB was created to address social problems of public concern; to focus, make accessible, and deliver expertise related to violence and destructive behavior; and to integrate the Institute's research, training, and service activities in this context. Its activities focus on research, instruction, and public service. One school-wide violence prevention curriculum that IVDB has implemented is Effective Behavior Support (EBS), which is described in further detail below.

Institute on Violence and Destructive Behavior
1265 University of Oregon
Eugene, OR 97403-1265
Phone: 541-346-3592
E-mail: ivdb@darkwing.uoregon.edu
Internet:
http://interact.uoregon.edu/ivdb/ivdb.html

EFFECTIVE BEHAVIOR SUPPORT (EBS)

The Institute on Violence and Destructive Behavior at the University of Oregon implemented Effective Behavior Support (EBS), a school-wide violence prevention program. EBS provides behavioral support for students, including students who exhibit chronic behavior problems. EBS schools clarify expectations for student behavior and

give students reminders when needed. These schools simplify rules students are expected to follow, teach children appropriate, pro-social behaviors, and reward students when they have been "caught doing something good." Consequences for inappropriate behaviors are understood and are quickly acted upon when warranted. In EBS schools, classrooms and special settings within the school (e.g. the cafeteria or playground) have procedures that are consistent with the school-wide expectations for students and staff. For students whose behavior needs are beyond the reach of the EBS features, a behavior support team addresses their special needs by establishing individual action teams and plans for each student.

Jeff Sprague & Hill Walker
Co-Directors
Institute on Violence and Destructive Behavior
1265 University of Oregon
Eugene, OR 97403
Phone: 541-346-3591

NATIONAL INFORMATION CENTER FOR CHILDREN AND YOUTH WITH DISABILITIES (NICHCY)

NICHCY is an information clearing-house funded by the Department of Education, and provides information on disabilities and disability-related issues for children and youth (birth to age 22). Many of its documents are provided free of charge. NICHCY can be contacted at:

National Information Center for Children and Youth with Disabilities
P.O. Box 1492
Washington, DC 20013-1492
Phone: 1-800-695-0285
Fax: 202-884-8441
E-mail: nichcy@aed.org
Website: www.NICHCY.org

NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS (NASP)

NASP has more members than any association of school psychologists in the world. Their goal is to promote effective research-validated programs that facilitate the creation of healthy school environments, support independence, and maximize learning. Professional, but caring service, reliable research, advocacy, and constant program evaluation are emphasized. NASP publishes a newspaper eight times a year, as well as a quarterly journal. In addition to these, NASP publishes books, monographs, pamphlets, videos, papers, and fact sheets.

National Association of School Psychologists
4340 East West Highway, Suite 401
Bethesda, MD 20814-9457
Phone: 301/657-0270
FAX: 301/657-0275
TDD: 301/657-4155
Internet: www.naspweb.org

NATIONAL INSTITUTE OF MENTAL HEALTH (NIMH)

The National Institute of Mental Health (NIMH)'s mission is to diminish the burden of mental illness through research. NIMH is a branch of the National Institutes of Health (NIH), the primary federal agency for biomedical and behavioral research. NIMH and NIH serve under the U.S. Department of Health and Human Services.

NIMH Headquarters
Neuroscience Center Building
6001 Executive Blvd.
Bethesda, MD 20892
E-mail: nimhinfo@nih.gov
Internet:
http://www.nimh.nih.gov/home.htm

OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION (OJJDP)

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) is one of several bureaus that serve under the U.S. Department of Justice's Office of Justice Programs (OJP). OJP was established in 1984 to develop the nation's capacity to prevent and control crime, improve the criminal and juvenile justice systems, increase knowledge about crime and related issues, and assist crime victims. OJJDP creates and funds programs that target such issues as gang violence and juvenile crime. With OJP, OJJDP forms partnerships among federal, state, and local governments to address these and other problems relating to youth violence in the U.S.

OJJDP
810 Seventh Street, NW
Washington, DC 20531
Phone: 202-307-5911
Fax: 202-307-2093
E-mail: askjj@ojp.usdoj.gov
Internet: http://ojjdp.ncjrs.org/

Juvenile Justice Clearinghouse
P.O. Box 6000
Rockville, MD 20849-6000
Toll-Free: 800-638-8736
Fax: 301-519-5212
E-mail: askncjrs@ncjrs.org

PARENT ADVOCACY COALITION FOR EDUCATIONAL RIGHTS (PACER) CENTER

PACER is a non-profit statewide organization created to improve and expand opportunities that enhance the quality of life for children and young adults with disabilities and their families. PACER offers a variety of programs that provide assistance for children with disabilities from birth to adulthood, and for students and schools. PACER also offers technical assistance to parent centers locally and nationwide. PACER's goal is to make parents informed consumers for the welfare of their children by providing them with knowledge of their rights and responsibilities as parents, and about laws and other resources pertaining to their special needs children and their roles as parents.

PACER Center
4826 Chicago Avenue South
Minneapolis, MN 55417-1098
Phone: 612-827-2966
TDD: 612-827-7770
Toll-Free (in MN): 800-53-PACER
Internet: http://www.pacer.org/

THE ASSOCIATIONS OF SERVICE PROVIDERS IMPLEMENTING IDEA REFORMS IN EDUCATION (ASPIIRE) PARTNERSHIP, AND THE IDEA LOCAL IMPLEMENTATION BY LOCAL ADMINISTRATORS (ILIAD) PARTNERSHIP

The Associations of Service Providers Implementing IDEA Reforms in Education (ASPIIRE) Partnership and The IDEA Local Implementation by Local Administrators (ILIAD) Partnership are made up of over 15 educational organizations and related services associations. As a group, the members of ASPIIRE and ILIAD pull together the strength of their individual organizations to provide ideas, technical assistance, and other information to implement IDEA '97.

ASPIIRE and ILIAD Projects
Council for Exceptional Children
1920 Association Drive
Reston, VA 20191-1589
Phone (Toll-Free): 1-877-CEC-IDEA
TDD: 703-264-9480

Fax: 703-264-1637
E-mail: Ideapractices@cec.sped.org
Internet: www.ideapractices.org
http://www.ideapractices.org/aspiire.htm
http://www.ideapractices.org/iliad.htm

STATE CONSULTANTS

Most state education departments have consultants for emotional and behavioral disorders who may be contacted for further information. In addition, most state Departments of Mental Health have officers who are responsible for children's mental health. Both professionals can provide you with information about resources in your state. Their names and telephone numbers follow.

Alabama:	334-242-8114
Alaska:	907-465-8702
Arizona:	602-542-3084
Arkansas:	501-354-2269
California:	916-327-3530
Colorado:	303-866-6707
Connecticut:	860-638-4230
Delaware:	302-739-4667
District of Columbia:	202-724-4797
Florida:	904-488-1106
Georgia:	404-657-9965
Hawaii:	808-733-4837
Idaho:	208-332-6917
Illinois:	217-782-3810
Indiana:	317-232-0570

Iowa:	515-281-7145
Kansas:	913-296-2515
Kentucky:	502-564-4970
Louisiana:	504-763-3589
Maine:	207-287-5950
Maryland:	410-767-0238
Massachusetts:	617-388-3300 Ext. 439
Michigan:	517-335-0445
Minnesota:	612-282-6249
Mississippi:	601-359-3498
Missouri:	573-751-0993
Montana:	406-444-2046
Nebraska:	402-471-2471
Nevada:	702-687-9171
New Hampshire:	603-271-2776
New Jersey:	609-633-6430
New Mexico:	505-827-6553
New York:	518-473-2878
North Carolina:	919-715-2005
North Dakota:	701-537-5351
Ohio:	614-466-2650
Oklahoma:	405-521-3351
Oregon:	503-378-3598 Ext. 649
Pennsylvania:	717-783-2311
Rhode Island:	401-277-4600 Ext. 2408
South Carolina:	803-734-8342
South Dakota:	605-773-4689

Tennessee:	615-741-7790	Iowa:	515-281-6873
Texas:	512-463-9414	Kansas:	913-296-6634
Utah:	801-538-7709	Kentucky:	502-564-7610
Vermont:	802-828-5125	Louisiana:	504-342-2548
Virginia:	804-225-2709	Maine:	207-287-4250
Washington:	360-753-6733	Maryland:	410-267-6649
West Virginia:	304-558-2696	Massachusetts:	617-727-5600, Ext. 543
Wisconsin:	608-266-1218	Michigan:	517-373-1839
Wyoming:	307-777-3549	Minnesota:	612-215-1382
		Mississippi:	601-359-1288

STATE CHILDREN'S MENTAL HEALTH CONTACTS

		Missouri:	573-751-9482
		Montana:	406-444-1290
Alabama:	334-242-3218	Nebraska:	402-471-2851
Alaska:	907-561-4247	Nevada:	702-486-6190
American Samoa:	684-663-4485 Ext. 49 or 684-633-1130	New Hampshire:	603-271-5095
		New Jersey:	609-777-0707
Arizona:	602-381-8999	New Mexico:	505-827-5882
Arkansas:	501-686-9175	New York:	518-473-6902
California:	916-654-3479	North Carolina:	919-733-0598
Colorado:	303-762-4076	North Dakota:	701-224-2766
Connecticut:	860-550-6528	Ohio:	614-466-1984
Delaware:	404-657-2157	Oklahoma:	405-271-8653
Guam:	617-647-5445	Oregon:	503-378-8406
Hawaii:	808-733-9339	Pennsylvania:	717-772-2764
Idaho:	208-334-5525	Puerto Rico:	809-765-6833
Illinois:	217-782-7555	Rhode Island:	401-457-4514
Indiana:	317-232-7934	South Carolina:	803-734-7859

South Dakota: 605-668-3548

Tennessee: 615-532-6767

Texas: 512-206-4722

Utah: 801-538-4270 or 4275

Vermont: 802-241-2650

Virginia: 804-371-2185

Virgin Islands: 809 773-1311
                     Ext. 3013

Washington: 206-753-4421

West Virginia: 304-558-0627

Wisconsin: 608-266-6838

Wyoming: 307-777-5637

MATERIALS FOR FURTHER STUDY

A number of publications specifically address practitioners' questions about educating students with emotional disturbance and behavioral problems. A few are listed below:

Periodicals:

The Journal of Emotional and Behavioral Problems: Reclaiming Children and Youth and *The Journal of Emotional and Behavioral Disorders* are both published quarterly by:

ProEd
8700 Shoal Creek Blvd.
Austin, TX 78757
Phone: (512)451-3246; or Toll-Free at: (800) 897-3202

Preventing School Failure is published quarterly by:

Heldref Publications
1319 Eighteenth Street, NW,
Washington, DC 20036-1802
Phone: (202) 296-6267, or Toll-Free at: (800) 365-9753
Fax: (202) 269-5149

Reaching Today's Youth: The Community Circle of Caring Journal, published quarterly by:

National Educational Service
1252 Loesch Road
P.O. Box 8 Station Z1
Bloomington, IN 47402-0008
Phone: (812) 336-7700, or Toll-Free at: (800) 733-6786
Fax: (812) 336-7790

Local colleges and universities are another resource. Many college and university libraries subscribe to research and practitioner journals that publish updated information on strategies for working with students with emotional disturbance and behavioral problems and their families. Also, education or school psychology departments often are aware of upcoming conferences and workshops.

Publications

Finally, the Center for Effective Collaboration and Practice has produced a variety of products that may be of interest to teachers, paraprofessionals, administrators and others on educational strategies for children and youth with emotional and behavioral problems. These are listed and described below, and most can be acquired free of charge. To obtain any of these

materials (and unless otherwise indicated), please contact the Center for Effective Collaboration and Practice using the information provided at the beginning of this chapter.

Early Warning, Timely Response: A Guide to Safe Schools. This document was produced in collaboration with the National Association of School Psychologists in response to the President's call for the development of an early warning guide to help "adults reach out to troubled children quickly and effectively." This guide has been distributed to every district in the nation to help them identify children in need of intervention into potentially violent emotions and behaviors. It can be acquired through the U.S. Department of Education by calling Toll-Free 1-877-4ED-PUBS or via the Center's website.

Safe, Drug-Free, and Effective Schools for ALL Students: What Works! This report came out of a collaborative effort between the Office of Special Education Programs and the Safe and Drug-Free Schools Program, both of the U.S. Department of Education. It profiles six different approaches in three different communities or districts to addressing schoolwide prevention and reduction of violent and aggressive behavior by all students. The report is the result of a literature review and focus groups with students, families, administrators, teachers, and community change agents from local agencies.

The Role of Education in a System of Care: Effectively Serving Children with Emotional and Behavioral Disorders. This is one of seven monographs prepared for the Center for Mental Health Services (CMHS) of the U.S. Department for Health and Human Services. It profiles effective school-based mental health systems of care in three of CMHS's Comprehensive Community Mental Health Services for Children and Families program urban grantees. The information in this report was gathered through a series of site visits and focus groups, interviews, and a review of the literature. Seven additional monographs in this series on *Promising Practices in a System of Care* are also available by contacting the Center for Effective Collaboration and Practice.

Addressing Student Problem Behavior: An IEP Team's Introduction to Functional Behavioral Assessment and Behavior Intervention Plans. Written with some of the country's leading experts, this document serves as a useful tool for educators to understand the requirements of IDEA '97 with regard to addressing behavior problems and implementing the fundamental principals and techniques of functional behavioral assessment and positive behavioral supports for students with behavior problems.

Addressing Student Problem Behavior—Part II: Conducting A Functional Assessment. The second document in the *Addressing Student Problem Behavior* series, this monograph provides an in-depth discussion of the rationale for functional behavioral assessment and instructions for how to conduct the process. Sample forms are provided.

The third document in this series on creating and implementing positive behavioral interventions and supports is forthcoming by the end of 1999. The fourth document will be a trainers' manual on the techniques outlined in the series.

Functional Assessment and Behavioral Intervention Plans: Part 1 is a two-hour video workshop on functional behavioral assessment. Produced as a cooperative effort between the Center for Effective Collaboration and Practice and Old Dominion University (as part of the University's

state-funded technical assistance project), it covers (1) the definitions and origins of functional behavioral assessment, (2) what is involved in conducting a functional behavioral assessment and the criteria for determining when one is needed, and (3) other relevant issues surrounding this technique. It is available from the Training and Technical Assistance Center, Old Dominion University, 1401 West 49th Street, Norfolk, VA 23529-0146.

Functional Assessment and Behavioral Intervention Plans: Part II is a two-hour video workshop that builds on Part I to provide in-depth discussion of and instruction on how to conduct a functional behavioral assessment. It will be available in the coming months and can be obtained by contacting Old Dominion University at the address above.

APPENDIX A

THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (P.L. 105-17):

Sections of the Law that Pertain Specifically to Students with Emotional and Behavioral Problems

Readers may find the complete text of the Individuals with Disabilities Education Act statute and regulations in a variety of places, including on the websites of the U.S. Department of Education (http://www.ed.gov/offices/OSERS/IDEA/) and the Center for Effective Collaboration and Practice (http://www.air.org/cecp/).

Sec. 612(a)(22) SUSPENSION AND EXPULSION RATES-

(A) IN GENERAL- The State educational agency examines data to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with disabilities—

(i) among local educational agencies in the State; or

(ii) compared to such rates for nondisabled children within such agencies.

(B) REVIEW AND REVISION OF POLICIES- If such discrepancies are occurring, the State educational agency reviews and, if appropriate, revises (or requires the affected State or local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of behavioral interventions, and procedural safeguards, to ensure that such policies, procedures, and practices comply with this Act.

Sec.613(j) DISCIPLINARY INFORMATION- The State may require that a local educational agency include in the records of a child with a disability a statement of any current or previous disciplinary action that has been taken against the child and transmit such statement to the same extent that such disciplinary information is included in, and transmitted with, the student records of nondisabled children. The statement may include a description of any behavior engaged in by the child that required disciplinary action, a description of the disciplinary action taken, and any other information that is relevant to the safety of the child and other individuals involved with the child. If the State adopts such a policy, and the child transfers from one school to another, the transmission of any of the child's records must include both the child's current individualized education program and any such statement of current or previous disciplinary action that has been taken against the child.

Sec. 614(d)(3) DEVELOPMENT OF IEP

(B) CONSIDERATION OF SPECIAL FACTORS- The IEP Team shall—

(i) in the case of a child whose behavior impedes his or her learning or that of others, consider, when appropriate, strategies, including positive behavioral interventions, strategies, and supports to address that behavior;…

(C) REQUIREMENT WITH RESPECT TO REGULAR EDUCATION TEACHER- The regular education teacher of the child, as a member of the IEP Team, shall, to the extent appropriate, participate in the development of the IEP of the child, including the determination of appropriate positive behavioral interventions and strategies and the determination of supplementary aids and services, program modifications, and support for school personnel consistent with paragraph (1)(A)(iii).

Sec. 615(j) MAINTENANCE OF CURRENT EDUCATIONAL PLACEMENT- Except as provided in subsection (k)(7), during the pendency of any proceedings conducted pursuant to this section, unless the State or local educational agency and the parents otherwise agree, the child shall remain in the then-current educational placement of such child, or, if applying for initial admission to a public school, shall, with the consent of the parents, be placed in the public school program until all such proceedings have been completed.

Sec. 615(k) PLACEMENT IN ALTERNATIVE EDUCATIONAL SETTING-

(1) AUTHORITY OF SCHOOL PERSONNEL-

(A) School personnel under this section may order a change in the placement of a child with a disability—

(i) to an appropriate interim alternative educational setting, another setting, or suspension, for not more than 10 school days (to the extent such alternatives would be applied to children without disabilities); and

(ii) to an appropriate interim alternative educational setting for the same amount of time that a child without a disability would be subject to discipline, but for not more than 45 days if—

(I) the child carries a weapon to school or to a school function under the jurisdiction of a State or a local educational agency; or

(II) the child knowingly possesses or uses illegal drugs or sells or solicits the sale of a controlled substance while at school or a school function under the jurisdiction of a State or local educational agency.

(B) Either before or not later than 10 days after taking a disciplinary action described in subparagraph (A)—

(i) if the local educational agency did not conduct a functional behavioral assessment and implement a behavioral intervention plan for such child before the behavior that resulted in the suspension described in subparagraph (A), the agency shall convene an IEP meeting to develop an assessment plan to address that behavior; or

(ii) if the child already has a behavioral intervention plan, the IEP Team shall review the plan and modify it, as necessary, to address the behavior.

(2) AUTHORITY OF HEARING OFFICER- A hearing officer under this section may order a change in the placement of a child with a disability to an appropriate interim alternative educational setting for not more than 45 days if the hearing officer—

(A) determines that the public agency has demonstrated by substantial evidence that maintaining the current placement of such child is substantially likely to result in injury to the child or to others;

(B) considers the appropriateness of the child's current placement;

(C) considers whether the public agency has made reasonable efforts to minimize the risk of harm in the child's current placement, including the use of supplementary aids and services; and

(D) determines that the interim alternative educational setting meets the requirements of paragraph (3)(B).

(3) DETERMINATION OF SETTING-

(A) IN GENERAL- The alternative educational setting described in paragraph (1)(A)(ii) shall be determined by the IEP Team.

(B) ADDITIONAL REQUIREMENTS- Any interim alternative educational setting in which a child is placed under paragraph (1) or (2) shall—

(i) be selected so as to enable the child to continue to participate in the general curriculum, although in another setting, and to continue to receive those services and modifications, including those described in the child's current IEP, that will enable the child to meet the goals set out in that IEP; and

(ii) include services and modifications designed to address the behavior described in paragraph (1) or paragraph (2) so that it does not recur.

(4) MANIFESTATION DETERMINATION REVIEW-

(A) IN GENERAL- If a disciplinary action is contemplated as described in paragraph (1) or paragraph (2) for a behavior of a child with a disability described in either of those paragraphs, or if a disciplinary action involving a change of placement for more than 10 days is contemplated for a child with a disability who has engaged in other behavior that violated any rule or code of conduct of the local educational agency that applies to all children—

(i) not later than the date on which the decision to take that action is made, the parents shall be notified of that decision and of all procedural safeguards accorded under this section; and

(ii) immediately, if possible, but in no case later than 10 school days after the date on which the decision to take that action is made, a review shall be conducted of the relationship between the child's disability and the behavior subject to the disciplinary action.

(B) INDIVIDUALS TO CARRY OUT REVIEW- A review described in subparagraph (A) shall be conducted by the IEP Team and other qualified personnel.

(C) CONDUCT OF REVIEW- In carrying out a review described in subparagraph (A), the IEP Team may determine that the behavior of the child was not a manifestation of such child's disability only if the IEP Team—

(i) first considers, in terms of the behavior subject to disciplinary action, all relevant information, including—

(I) evaluation and diagnostic results, including such results or other relevant information supplied by the parents of the child;

(II) observations of the child; and

(III) the child's IEP and placement; and

(ii) then determines that—

(I) in relationship to the behavior subject to disciplinary action, the child's IEP and placement were appropriate and the special education services, supplementary aids and services, and behavior intervention strategies were provided consistent with the child's IEP and placement;

(II) the child's disability did not impair the ability of the child to understand the impact and consequences of the behavior subject to disciplinary action; and

(III) the child's disability did not impair the ability of the child to control the behavior subject to disciplinary action.

(5) DETERMINATION THAT BEHAVIOR WAS NOT MANIFESTATION OF DISABILITY-

(A) IN GENERAL- If the result of the review described in paragraph (4) is a determination, consistent with paragraph (4)(C), that the behavior of the child with a disability was not a manifestation of the child's disability, the relevant disciplinary procedures applicable to children without disabilities may be applied to the child in the same manner in which they would be applied to children without disabilities, except as provided in section 612(a)(1).

(B) ADDITIONAL REQUIREMENT- If the public agency initiates disciplinary procedures applicable to all children, the agency shall ensure that the special education and disciplinary records of the child with a disability are transmitted for consideration by the person or persons making the final determination regarding the disciplinary action.

(6) PARENT APPEAL-

(A) IN GENERAL-

(i) If the child's parent disagrees with a determination that the child's behavior was not a manifestation of the child's disability or with any decision regarding placement, the parent may request a hearing.

(ii) The State or local educational agency shall arrange for an expedited hearing in any case described in this subsection when requested by a parent.

(B) REVIEW OF DECISION-

(i) In reviewing a decision with respect to the manifestation determination, the hearing officer shall determine whether the public agency has demonstrated that the child's behavior was not a manifestation of such child's disability consistent with the requirements of paragraph (4)(C).

(ii) In reviewing a decision under paragraph (1)(A)(ii) to place the child in an interim alternative educational setting, the hearing officer shall apply the standards set out in paragraph (2).

(7) PLACEMENT DURING APPEALS-

(A) IN GENERAL- When a parent requests a hearing regarding a disciplinary action described in paragraph (1)(A)(ii) or paragraph (2) to challenge the interim alternative educational setting or the manifestation determination, the child shall remain in the interim alternative educational setting pending the decision of the hearing officer or until the expiration of the time period provided for in paragraph (1)(A)(ii) or paragraph (2), whichever occurs first, unless the parent and the State or local educational agency agree otherwise.

(B) CURRENT PLACEMENT- If a child is placed in an interim alternative educational setting pursuant to paragraph (1)(A)(ii) or paragraph (2) and school personnel propose to change the child's placement after expiration of the interim alternative placement, during the pendency of any proceeding to challenge the proposed change in placement, the child shall remain in the current placement (the child's placement prior to the interim alternative educational setting), except as provided in subparagraph (C).

(C) EXPEDITED HEARING-

(i) If school personnel maintain that it is dangerous for the child to be in the current placement (placement prior to removal to the interim alternative education setting) during the pendency of the due process proceedings, the local educational agency may request an expedited hearing.

(ii) In determining whether the child may be placed in the alternative educational setting or in another appropriate placement ordered by the hearing officer, the hearing officer shall apply the standards set out in paragraph (2).

(8) PROTECTIONS FOR CHILDREN NOT YET ELIGIBLE FOR SPECIAL EDUCATION AND RELATED SERVICES-

(A) IN GENERAL- A child who has not been determined to be eligible for special education and related services under this part and who has engaged in behavior that violated any rule or code of conduct of the local educational agency, including any behavior described in paragraph (1), may assert any of the protections provided for in this part if the local educational agency had knowledge (as determined in accordance with this paragraph) that the child was a child with a disability before the behavior that precipitated the disciplinary action occurred.

(B) BASIS OF KNOWLEDGE- A local educational agency shall be deemed to have knowledge that a child is a child with a disability if—

(i) the parent of the child has expressed concern in writing (unless the parent is illiterate or has a disability that prevents compliance with the requirements contained in this clause) to personnel of the appropriate educational agency that the child is in need of special education and related services;

(ii) the behavior or performance of the child demonstrates the need for such services;

(iii) the parent of the child has requested an evaluation of the child pursuant to section 614; or (iv) the teacher of the child, or other personnel of the local educational agency, has expressed concern about the behavior or performance of the child to the director of special education of such agency or to other personnel of the agency.

(C) CONDITIONS THAT APPLY IF NO BASIS OF KNOWLEDGE-

(i) IN GENERAL- If a local educational agency does not have knowledge that a child is a child with a disability (in accordance with subparagraph (B)) prior to taking disciplinary measures against the child, the child may be subjected to the same disciplinary measures as measures applied to children without disabilities who engaged in comparable behaviors consistent with clause (ii).

(ii) LIMITATIONS- If a request is made for an evaluation of a child during the time period in which the child is subjected to disciplinary measures under paragraph (1) or (2), the evaluation shall be conducted in an expedited manner. If the child is determined to be a child with a disability, taking into consideration information from the evaluation conducted by the agency and information provided by the parents, the agency shall provide special education and related services in accordance with the provisions of this part, except that, pending the results of the evaluation, the child shall remain in the educational placement determined by school authorities.

(9) REFERRAL TO AND ACTION BY LAW ENFORCEMENT AND JUDICIAL AUTHORITIES-

(A) Nothing in this part shall be construed to prohibit an agency from reporting a crime committed by a child with a disability to appropriate authorities or to prevent State law

enforcement and judicial authorities from exercising their responsibilities with regard to the application of Federal and State law to crimes committed by a child with a disability.

(B) An agency reporting a crime committed by a child with a disability shall ensure that copies of the special education and disciplinary records of the child are transmitted for consideration by the appropriate authorities to whom it reports the crime.

(10) DEFINITIONS- For purposes of this subsection, the following definitions apply:

(A) CONTROLLED SUBSTANCE- The term 'controlled substance' means a drug or other substance identified under schedules I, II, III, IV, or V in section 202(c) of the Controlled Substances Act (21 U.S.C. 812(c)).

(B) ILLEGAL DRUG- The term 'illegal drug'—

(i) means a controlled substance; but

(ii) does not include such a substance that is legally possessed or used under the supervision of a licensed health-care professional or that is legally possessed or used under any other authority under that Act or under any other provision of Federal law.

(C) SUBSTANTIAL EVIDENCE- The term 'substantial evidence' means beyond a preponderance of the evidence.

(D) WEAPON- The term 'weapon' has the meaning given the term 'dangerous weapon' under paragraph (2) of the first subsection (g) of section 930 of title 18, United States Code.

APPENDIX B

GLOSSARY OF TERMS USED IN EXHIBIT I: COMPONENTS OF A SYSTEM OF CARE

The following definitions were gathered from six sources:

Bruns, B.J., & Goldman, S. K. (Eds.). (1999). Promising practices in wraparound for children with serious emotional disturbance and their families. *Systems of Care: Promising Practices in Children's Mental Health, 1998 Series, Volume IV.* Washington, DC: Center for Effective Collaboration and Practice, American Institutes for Research.

Butts, J.A., Snyder, H.N., Finnegan, T.A., Aughenbaugh, A.L., and Poole, R.S. (1996). *Juvenile Court Statistics, 1993.* Washington, DC: Office of Juvenile Justice and Delinquency Prevention. (Available online at http://www.rtc.pdx.edu/resource/terms.htm)

Center for Substance Abuse Treatment. (1994). *Juvenile Justice Treatment Planning Chart.* Rockville, MD: Department of Health and Human Services.

Education Week on the Web. *Glossary.* (Available online at http://www.edweek.org/context/glossary/glossary.htm)

Research and Training Center on Family Support and Children's Mental Health. (1994). *Glossary of Children's Mental Health Terms.* Portland, OR: Author, Portland State University. (Available online at http://www.rtc.pdx.edu/resource/terms.htm)

Stroul, B.A., & Friedman, R.M. (1986, rev. 1994). *A system of care for severely emotionally disturbed children and youth.* Washington, DC: CASSP Technical Assistance Center, Georgetown University Child Development Center.

1. MENTAL HEALTH SERVICES

Prevention. The goal of prevention is to reduce the occurrence of emotional problems in children and youth and their families who have not yet been identified as having emotional problems, particularly those who may be at risk.

Early identification and intervention. Treatment for emotional and behavioral problems that begins early in the course of the problem with the goal of lessening the duration and severity of the problem.

Assessment. A process that results in an opinion about a child's mental or emotional capacity, and may include recommendations about treatment or placement.

Outpatient treatment. Outpatient treatment includes mental health services available in non-residential settings, such as mental health clinics, hospital outpatient departments, or community health centers.

Home-based services. Home-based services are delivered to children and youth and their families in a family's home. One goal is to emphasize the needs of the whole family, not just an individual within the family.

Day treatment. Day treatment programs provide education, counseling, and family interventions during the entire day to a child or youth who then returns to his or her caregiver in the evening.

Emergency services. Emergency services range from prevention efforts through crisis stabilization provided by a variety of agencies. Examples include hotlines and shelters for those in need of crisis intervention or emergency care.

Therapeutic foster care. Treatment and care for children and youth by trained families in their private homes.

Therapeutic group care. Treatment for children and youth provided in homes with other children or youth, and which provides an variety of interventions.

Therapeutic camp services. Children and youth and staff in therapeutic camp programs live together in a rustic situation, which places more expectations for responsible and independent behavior on the campers than might more traditional residential settings.

Residential treatment services. Residential treatment service are delivered in a facility that offers 24-hour residential care, as well as treatment and rehabilitation, or short-term crisis intervention.

Crisis residential services. Residential treatment services that aim to intervene in the crisis at hand and transition the child or youth back into his or her home and community.

Inpatient hospitalization. Inpatient services that provide medical intervention for a child or youth's emotional or behavioral problem.

2. SOCIAL SERVICES

Protective services. Protective services are intended to prevent and protect children and youth from neglect, abuse, and exploitation by offering social services to identified or at-risk children and youth and their families.

Financial assistance. Financial assistance from sources including local and federal government to help families pay for necessities, such as food, clothing, and shelter.

Home-aid services. Services provided in the home, usually by nonprofessionals.

Respite services. Temporary care given to an individual for the purpose of providing a period of relief to the primary caregivers. Respite is used to decrease stress in the homes of persons with disabilities or handicaps, thereby increasing caregivers' overall effectiveness.

Foster care. Foster care includes the placement of children in foster family homes, group homes, group child care facilities, and residential treatment centers because of abuse, neglect, or abandonment.

Adoption. In contrast to temporary care, adoption is intended to be a permanent placement. It is designed for those situations in which return to the biological parents is unlikely for a child or youth.

3. EDUCATIONAL SERVICES

Assessment and planning. Techniques used to identify and determine placement of children in special education programs. Assessment is done using a variety of methods and measures. Planning for a student assessed and identified with a disability includes the development of an individual educational program (IEP).

Resource rooms. A setting within the regular school where students with disabilities may receive educational services from a special education teacher (and teachers' aids, when available) for one or two instructional periods each day.

Self-contained special education. Full-time placement in a special education classroom, in which a special educator (and teachers' aids, when available) provides intensive, structured academic and behavioral support and supervision.

Special schools. Nonresidential programs that provide a full-day educational program for children within a setting that is separate from the regular school.

Homebound instruction. Using this option, the school district arranges for the child to receive instruction at home.

Residential schools. Often located outside a child's home community, residential schools stress educational achievement for students with emotional and behavioral problems.

Alternative programs. Alternative programs include a wide range of settings, and are thus difficult to define. Not all children served in these programs are formally identified as having a disability. The advantage offered by alternative education programs is flexibility for students who have difficulty functioning in the regular classroom setting and/or are at risk for dropping out.

4. HEALTH SERVICES

Health education and prevention. Educational programs aimed at promoting both physical and mental health, as well as educating students about public health issues, such as sex education or substance abuse.

Screening and assessment. Evaluation to identify potential health problems early, and to determine an appropriate course of treatment of service delivery.

Primary care. Complete health examinations and follow-up care by physicians during a child's growth and development.

Acute care. Care for children who are injured or become ill. Services are usually provided on an outpatient basis.

Long-term care. Services for children with chronic illnesses and their families. Children and youth receiving long-term care for their health problems also may require services from schools.

5. VOCATIONAL SERVICES

Career education. Designed to prepare students to enter the working world, career education programs teach students about types of careers, how to choose a career, skills and approches that may be useful, and what to expect in working with an employer and other employees.

Vocational assessment. An evaluation process for determining an youth's ability, career interests, and readiness for employment.

Job survival skills training. Programs that teach youth how to maintain and succeed at their job. The skills covered often include training in: social skills for appropriate interaction with others, taking criticism from employers, managing frustration, and meeting deadlines and staying on schedule.

Vocational skills training. Training in more technical vocational skills includes instruction in fields such as technology or industries such as auto maintenance, childcare, or hospitality.

Work experiences. Some programs organize vocational training and work experience opportunities for older youth to build their skill sets as well as their confidence.

Job finding, placement, and retention services. Provides services such as interviewing skills or services listed above to help youth find job opportunities, apply for jobs, and maintain their employment over time.

Supported employment. An alternative to traditional full or part-time employment, for youth who need assistance making the transition to these kinds of jobs. Through supported employment programs, a youth has a paying job and the support of an adult to help him or her acquire and use the skills he or she needs to maintain the position.

6. RECREATIONAL SERVICES

Relationships with significant others. Recreational programs, such as Big Brothers/Big Sisters, that match a child or youth that could benefit from adult companionship and an adult volunteer.

After-school programs. Programs that typically offer students a place to do their homework with the support of program staff, as well as opportunities to participate in extracurricular activities such as art, music, or sports in a supervised setting between the close of the school day and the evening.

Summer camps. Held during the summer for a limited number of days or weeks, summer camps provide children and youth with the opportunity to learn new skills, enjoy recreational activities, and interact with adults and peers outside the school setting. Summer camps may operate as a day camp program or as an overnight, residential program.

Special recreation projects. Projects designed to help children and youth with emotional and behavioral problems learn and enjoy a new activity.

7. OPERATIONAL SERVICES

Case management. A service that helps clients obtain and coordinate community resources such as income assistance, education, housing, medical care, treatment, vocational preparation, and recreation.

Self-help and support groups. Groups that provide emotional support and help for dealing with a problem that members or their family members share, such as alcoholism, substance abuse, or extreme anxiety or anger.

Advocacy. The process of actively supporting the cause of an individual (case advocacy) or group (class advocacy), or speaking or writing in favor of—or on behalf of—an individual or group.

Transportation. Many children and their families have difficulty accessing programs and services because they lack transportation to and from the locations where they are offered.

Legal services. Legal assistance is given in situations that cannot be settled through alternative resolution methods. Legal services are commonly retained in such cases as when a child might be removed from his or her home, or when a youth becomes involved in the juvenile justice system.

Volunteer programs. Volunteers organized to serve in a variety of roles, such as acting as a big brother/big sister or tutor, helping a youth find a job, or assisting in a classroom as a teacher's aide.