

EMERGING RESEARCH AND ISSUES IN BEHAVIORAL DISABILITIES

ADVANCES IN LEARNING AND BEHAVIORAL DISABILITIES

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ADVANCES IN LEARNING AND BEHAVIORAL
DISABILITIES VOLUME 30

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CONTENTS

<i>List of Contributors</i>	<i>vii</i>
Emerging Research and Issues in Behavioral Disabilities: Incremental Progress and Introduction to the Volume <i>Timothy J. Landrum, Bryan G. Cook and Melody Tankersley</i>	<i>1</i>
Developing Direct Observation Systems to Measure Classroom Behavior for Students with Behavioral Disabilities <i>Blair P. Lloyd and Joseph H. Wehby</i>	<i>9</i>
A Generalizability Study of a Direct Observation Screening Tool of Teachers' Classroom Management Skills <i>Nicholas A. Gage, HyunSuk Han, Ashley S. MacSuga-Gage, Debra Prykanowski and Alexandria Harvey</i>	<i>29</i>
Emerging Research and Development in Technology-based Self-monitoring <i>Allison Bruhn and Howard P. Wills</i>	<i>51</i>
Bullying and Students with Behavioral Disabilities: Examining the Intersection of Definition and Behaviors <i>Chad A. Rose, Taylor Webb and Gloria McGillen</i>	<i>69</i>
Behavioral, Academic, and Social Characteristics of Students with Behavioral Difficulties Served in a Residential Facility <i>Robin Parks Ennis, Lauren L. Evanchovich, Mickey Losinski, Kristine Jolivet and Kathleen Kimball-Greb</i>	<i>93</i>
Positive Behavioral Interventions and Supports in Alternative Educational Placements <i>Sara C. McDaniel, Sarah Wilkinson and Brandi Simonsen</i>	<i>113</i>
Sources of Evidence-based Practice in EBD: Issues and Challenges <i>Timothy J. Landrum and Lauren W. Collins</i>	<i>131</i>

**Incorporating Function-based Support into Social Skills
Interventions to Enhance Generalization**

Leslie D. MacKay, Kent McIntosh and Jacqueline A. Brown 145

Index 161

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EMERGING RESEARCH AND ISSUES IN BEHAVIORAL DISABILITIES: INCREMENTAL PROGRESS AND INTRODUCTION TO THE VOLUME

Timothy J. Landrum, Bryan G. Cook and
Melody Tankersley

ABSTRACT

Emotional and behavioral disorders (EBD) are complex and challenging, and the problems of children and youth with EBD have perplexed scholars and professionals for centuries. In this volume, authors of the chapter describe recent advances in research and current issues in the education and treatment of EBD in children and youth. Although progress in solving the problems of EBD has been slow, and many problems and issues have persisted for decades, the incremental progress offered by science, as reflected in the chapters contained herein, represents our best hope not for solving or curing EBD, but for moving the field forward in improving outcomes for children and youth with EBD and their families.

Keywords: Emotional and behavioral disorders; evidence-based practice; direct observation; bullying; self-management; PBIS

Emotional and behavioral disorders (EBD) are both complex and extremely challenging. Indeed, defining, identifying, and treating EBD have vexed physicians, psychiatrists, psychologists, and special educators for centuries (see [Kauffman & Landrum, 2006](#)). Moreover, beyond professionals' persistent struggles to clearly define, reliably identify, and successfully treat EBD, virtually every aspect of EBD carries with it some degree of controversy. [Landrum \(2017\)](#) argued that a

fundamental challenge lies in the very nature of EBD. Children and youth with EBD are often unwanted in social groups or unpopular among peers, and are most likely among the least welcome of all students in classrooms, given that disruption, defiance, and noncompliance are common behavioral characteristics. And despite the promise of applied behavior analysis and behavioral intervention approaches generally, interventions that truly eliminate these problems and teach prosocial replacement behaviors in students with EBD have proven elusive.

While there is general agreement about the basic behavioral characteristics associated with EBD, there is also controversy or disagreement about many issues around EBD. Consider prevalence, for example. How many students have EBD, and who should be identified as such? We know from federal data that less than 1% of students in US schools have historically been identified with EBD for special education purposes. But credible estimates suggest that at least 3–6% of the school population probably need services for emotional or behavioral disorders (e.g., [Kauffman & Landrum, 2018](#)), and many have argued that even this figure is highly conservative (e.g., [Forness, Freeman, Paparella, Kauffman, & Walker, 2012](#)). What this means for the students who are in need but are not identified, and for the teachers and professionals who serve them, remains unknown. It is possible that some students access mental health services outside of school, but data suggest that many disorders among children and youth go unidentified or unserved (e.g., [Simon, Pastor, Reuben, Huang, & Goldstrom, 2015](#)). From this, what seems clear is that special education is provided to only a fraction of those children and youth who probably have emotional, behavioral, or mental health needs. A separate question, and one deserving greater research attention, is whether and how special education services would improve the functioning or outcomes for students with widely varying mental health concerns.

In the face of what may seem to be overwhelming complexities in the nature and course of emotional and behavioral disabilities, coupled with resistance to effective treatment — problems that have persisted for decades or longer — where might scholars, professionals, and families look for hope or reasons for optimism? [Kauffman and Landrum \(2018\)](#) highlighted a number of issues in EBD that have been chronic and unsolvable, but also pointed to areas of progress or promise in EBD. They suggested that despite a variable history of advances in the education and treatment of children and youth with EBD, continued emphasis on a few fundamentals may hold promise for ultimately improving outcomes. We note that none of these are revolutionary ideas likely to alter the landscape of treatment for EBD; they might even be seen as mundane, workman-like approaches to progress. Nonetheless, we argue that for the field of EBD to advance, it is likely that sustained commitment to some scientifically grounded basics offer the best starting point. Among the ideas Kauffman and Landrum described are (1) a renewed focus on academic skills, (2) continued work on the development and application of a technology of functional behavioral assessment (FBA), and (3) an emphasis on maintaining the individuals with disabilities education act (IDEA) required continuum of alternative placements (CAP). A full elaboration of each is beyond the scope of this chapter, but we highlight each briefly to suggest again that slow, measured progress is likely the proper target.

FOCUS ON ACADEMIC SKILLS

Historically, a misguided notion with regard to students with EBD was that teachers needed to gain control of classroom behavior above all else, and that effective instruction could not occur until and unless behavior was under control. In truth, this equation may be exactly backwards; delivering effective instruction may in fact be the first and most important step in appropriately engaging students with EBD and preventing behavioral problems from occurring. There are two reasons effective instruction may be a critical element of appropriate intervention. First, the characteristics of effective academic instruction (e.g., structure, routine, successful responding) are known to reduce the occurrence of behavior problems, not to mention that effective instruction provides a foundation for later academic success. Second, we know that systematic or direct instruction, known to be highly effective in teaching basic academic skills, can also be effective in teaching positive, prosocial behaviors (Scott, 2016).

FUNCTIONAL BEHAVIORAL ASSESSMENT

The emergence of a technology of FBA is among the more important developments in the treatment of EBD in recent decades. FBAs provide a systematic way for professionals to determine the function a behavior serves, to form hypotheses about what is maintaining a given behavior, and to design interventions that alter setting events, antecedents, and consequences in ways that are predicted to reduce the occurrence of problem behavior and increase the occurrence of alternative, prosocial, functionally equivalent behaviors. While the origins of FBA trace to at least the early 1980s (e.g., Iwata, Dorsey, Slifer, Bauman, & Richman, 1982), it was the requirement in the IDEA amendments of 1997 that an FBA be conducted for students with disabilities who display problem behavior that brought FBA to the fore in the special education community. While much is written about school discipline in the popular press, efforts toward stricter rules and punitive approaches are probably misguided in the absence of applying a science of behavior to how teachers and administrators approach challenging behavior in schools, especially in such basic processes as the active teaching and planful reinforcement of prosocial behavior.

CONTINUUM OF ALTERNATIVE PLACEMENTS

It could be argued that *inclusion*, and especially full inclusion (the placement of all students with disabilities in general education classrooms), is the single most controversial issue in special education. The problem may be even more challenging with regard to students with EBD, who are typically served in more restrictive settings than students with other disabilities. Some have suggested that full inclusion for all students with disabilities may in fact violate a basic tenet of IDEA in that the law requires that a CAP be available. That is, a full range of placement options should be available, ranging from full-time placement in the general education classroom, to part-time resource room help, to self-contained classrooms, etc. Placement decisions are to be made by an

individualized education program (IEP) team, which first determines a student's-specific needs and then determines which setting along the continuum represents the least restrict environment (LRE) in which those needs can be met appropriately. In practice, however, it appears that many educators rely only on a small number of placement options, or only options that are consistent with a particular philosophy.

Again, we offer these notions as examples only for areas of promise, and would highlight the first two, a focus on instruction and the evolution of function-based interventions, as specific examples of our science chipping away at complex problems, incrementally adding to our knowledge base in ways that inch us closer to better, more efficient, more effective interventions. We think this is a critical perspective to bring to all of educational research, but especially to that focused on a set of problems as thorny as how to effectively educate and treat children and youth with EBD. No single study, any one intervention, or a particular placement option will turn the tide or revolutionize how we approach the problems of EBD. Rather, we offer the chapters here as incremental steps toward the goal of simply moving forward in our efforts to improve services for children and youth with EBD.

INTRODUCTION TO THE VOLUME

The reliable measurement of behavior surely underlies any attempt to understand it, or to conduct trustworthy research on how behavior may vary in relation to a host of variables in the environment. In Chapter 2, Lloyd and Wehby describe a process for developing systematic direct observation protocols that are appropriately suited to specific research questions. In their framework, researchers are encouraged to address a number of essential questions at key decision points as they determine what to measure and how to measure it, and to take a number of steps in order to prevent breakdowns in their observation system. Deciding what to measure, for example, includes consideration of both target behaviors and objects of measurement. Lloyd and Wehby use the example of aggression; researchers may decide to measure hitting on the playground (a target behavior), but they may do this within the larger context of wishing to study generalized aggressive behavior (the object of measurement). Clarifying the targets and objects of measurement will guide researchers toward specific measurement protocols, as well as contexts within which measurements should occur.

In Chapter 3, Gage and his colleagues focus on a different element of classroom observation: assessing teacher behavior, and more specifically teacher's implementation of explicit classroom management skills. The skills targeted were opportunities to respond, general praise statements, behavior-specific praise, and prompting for expectations. Using an observation tool designed to assess teachers' use of these four research-based classroom management skills, Gage et al. conducted a series of generalizability studies and a decision study to determine the number and length of classroom observations that were needed to establish a generalizable estimate of teachers' use of these critical classroom management skills. The authors argue that a reliable screening tool such as this

can be useful both for targeting professional development toward individual teachers and specific areas of need in terms of classroom management skills, as well as for assessing the impact of training and professional development on teachers' actual use of the skills taught. In the study reported here, findings suggested that four 30-min observations were necessary to reach a reliable estimate of teachers' use of these four classroom management skills.

Bruhn and Wills turn their attention to students' assessment of their own behavior in Chapter 4. The logic underlying self-monitoring is simple: the act of observing and recording one's own behavior, even in the absence of specific contingencies associated with that behavior, often produces therapeutic reactive effects. Building on a rich literature base supporting the positive effects of self-monitoring interventions on both academic and behavioral outcomes for students with learning and behavioral disabilities, Bruhn and Wills describe particular advances in the development and use of applications of technology-based self-monitoring (TBSM). They note that medicine has made tremendous strides in technology-based applications that allow patients to self-monitor various aspects of their own health care and suggest that this gives educational researchers much to draw from and build upon. Chapter 4 includes (1) an overview of research on traditional forms of self-monitoring, (2) a review of lessons that can be drawn from work in medicine in terms of TBSM, (3) an overview of the most recent applications of TBSM for students with or at risk for EBD, and (4) suggestions for further research and development in TBSM.

It is a fairly recent phenomenon that scholars have begun to understand the weight and complexity of issues around bullying in schools. That is, while bullying *behaviors* have been observed among children and youth with EBD for perhaps centuries, we are only beginning to develop a full understanding of the short- and long-term adverse effects of bullying, and the complexity of this phenomenon, which Rose and colleagues describe in Chapter 5 as "grounded in the intricate interactions between an individual and the social and environmental systems the surround the individual" (p. 69). Moreover, research increasingly suggests that students with disabilities are at increased risk for involvement in bullying, and that they struggle with managing the effects of long-term exposure to bullying. From an emerging understanding of the phenomenon of bullying, Rose et al. offer suggestions to help schools and teachers (1) recognize risk and profiles of students who may be vulnerable to bullying involvement and (2) develop preventive programming that focuses both on enhancing academic and behavioral functioning, as well as decreasing bullying involvement.

In Chapter 6, Ennis and her colleagues consider the characteristics and functioning of students with EBD who may have among the most severe needs. They note that residential treatment settings are among the most restrictive settings along a CAP, but nonetheless may be an appropriate and LRE for some students with EBD. It is most likely that students deemed to need residential treatment require 24-h support and specialized care and supervision from professionals in multiple disciplines (e.g., education, psychiatry, counseling). Ennis et al. note that some general demographic characteristics are observed in the population of youth typically served in residential facilities (i.e., they tend to be

male, aged 15 years or older, and of mixed ethnicity or African-American). But they also note that there is relatively little research describing the academic and social functioning of this population, which they suggest is necessary to better understand the pathways that lead to residential placement in the first place, and to better plan treatment and services that might lead to improved outcomes for this very challenging population of youth. In their chapter, Ennis et al. provide a descriptive study of one sample of such students. Not surprisingly, students in their residential sample showed evidence of excesses of behavioral problems, and deficits in both academic and social skills compared to national norms. Interestingly, 44% of youth in their sample scored in the clinical range on internalizing behavior problems; Ennis et al. speculate that residential treatment options may be more often utilized for students with internalizing behavioral problems (i.e., youth whose disorders may be more associated with psychiatric or mental health issues), whereas less restrictive placements may have a more overt behavioral intervention focus, and thus might be more often used for students whose behavioral concerns are primarily externalizing in nature.

McDaniel and colleagues also consider placements outside of regular schools in Chapter 7, but their focus differs from that of Ennis et al., who examined residential treatment facilities specifically. In contrast, McDaniel et al. describe Alternate Education Placements (AEPs), which are a broader category of options that may include residential schools, but may also include a variety of other options, including self-contained schools, juvenile justice facilities, and a variety of specialized programs (e.g., diversion programs, programs for teen mothers). They describe this broad array of options as including placements that might be appropriate for students whose needs are not met, or for whom traditional schools are simply a mismatch. While such varied options present an array of potentially positive choices for placements for youth with diverse and challenging needs, their variability may also carry challenges in terms of providing consistent, evidence-based interventions for students who undoubtedly have significant behavioral concerns. McDaniel et al. specifically consider whether and how the principles and practices of positive behavioral intervention and supports (PBIS) might be applied in AEP settings, including an overview of emerging research on applications of PBIS in AEPs.

In Chapter 8, Landrum and Collins describe the challenges practitioners have in locating evidence-based practices (EBP) for students with EBD, and the particular challenge of distinguishing credible evidence and promising practices from baseless claims and ineffective practices. The issues here are complex and varied. For example, Landrum and Collins note that (1) standards for EBP are emerging, but not yet settled; (2) EBPs for students with EBD may be a particular challenge given the diversity of needs in this ill-defined population; (3) there is a perhaps overwhelming volume of sources of information available to practitioners, including most obviously a vast Internet; and (4) practitioners, who are those most in need of EBPs, may have little time to search and sort through this volume of information. Landrum and Collins conclude with a number of suggestions for practitioners to guide their search for trustworthy evidence and note

that teacher educators may ultimately be the key conduits of EBPs as translators of research into practice for teachers in training.

Finally, in Chapter 9, MacKay and colleagues offer an example of a specific approach to intervention, with an eye toward enhancing generalization. Addressing social skills intervention in particular, Mackay et al. note that while interventions have been developed that show positive effects in teaching social skills, the true measure of success — the use of generalized social skills in untrained settings — has proven largely elusive. The authors draw upon the function-based intervention literature to describe a model for embedding function-based support into social skills intervention. They conclude with a case study demonstrating the potential and promise of this approach.

In conclusion, we believe that students with EBD are among the most difficult to teach of all students that teachers may encounter in schools. We believe our history bears this out. Over decades and indeed centuries, students with or at risk for EBD, regardless of what they have been called, whether they were labeled as having disabilities or disorders, or the extent to which they were included in or excluded from schools and communities, have largely proven resistant to our best and best-intended efforts to ameliorate their social and behavioral challenges. In 1987, Wolf, Braukmann, and Ramp described serious delinquent behavior as a “significantly handicapping condition” (p. 347), one not likely amenable to short-term cure, and one that is potentially a life-long condition requiring long-term supports. Despite these enduring challenges, and recognition that in many cases long-term and even life-long supports will be required, there is reason for optimism. We see hopefulness in the incremental nature of science, and the measured successes we have seen in recent decades in developing, refining, and bringing to bear interventions that do produce positive outcomes. We believe the chapters in this volume both highlight and directly contribute to that slow but steady progress. We need not search for miracle cures or the eradication of disorders, especially in relation to EBD. Rather, we think it wiser to seek improvements to our interventions and our evidence, and to our ability to bring these to bear on the extraordinary challenges that children and youth with EBD present. We hope the chapters here help move the needle ever so slightly toward those goals.

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