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Manifestation Determinations: An Interdisciplinary and User-Friendly Guide to Best Practices

An Honors Program Project Presented to
the Faculty of
James Madison University

by Molly E. Knudsen

May 2015

Accepted by the faculty of the Department of Educational Foundations and Exceptionalities (EFEX) & the Department of Psychology, James Madison University, in partial fulfillment of the requirements for the Honors Program.

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Manifestation Determinations: An Interdisciplinary and User-Friendly Guide to Best Practices

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Abstract

Rates of suspensions and expulsions are increasing in public schools in the United States, despite research stating that such exclusions have negative effects on students and are generally ineffective in addressing misbehavior. There is an overrepresentation of students with disabilities in the population of excluded students, which poses a threat to their right to a free and appropriate education (FAPE). When a student with a disability faces an exclusion, the Individuals with Disabilities Education Act (IDEA) requires a manifestation determination review (MDR) to be held by a committee of school personnel and the student's parent(s)/guardian(s) to determine the cause of the student's behavior. Challenges inherent to group decision-making as well as issues do to conflicting views, vague language, and the MDR process itself often arise during MDR meetings. The literature recommends best practices for interdisciplinary committees such as establishing a shared goal and utilizing a common language, as well as MDR-specific best practices such as better involving the parent(s)/guardian(s), improving MDR training for committee members, and employing evidence-based interventions in the aftermath of an MDR. The literature also maintains the importance of a school psychologist participating in an MDR meeting as a professional who is trained in the scientific study of behavior, can provide objective information on common manifestations of disabilities, and can explain the implications of evaluation results. The goal, format, content, and possible applications of the best-practice eBook created to assist the MDR committee members in their preparation are discussed.

Keywords: manifestation determination review (MDR), interdisciplinary, best practices, school psychologist

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CHAPTER 1: INTRODUCTION

The Individuals with Disabilities Education Act of 2004 (IDEA) provides a framework of policy and procedures for the inclusion of students with disabilities into public schools in the United States. This legislation guides the planning and implementation of education for students with disabilities, as well as the disciplinary actions for/of these students. One such procedural safeguard, in regards to discipline of students with disabilities, is the manifestation determination review (MDR; IDEA, 2004). When a student with a disability displays a behavior that would typically result in a change in placement (i.e., a suspension or expulsion from school), an MDR must take place to determine the relation between the student's disability and the behavior in question (IDEA, 2004).

The Office of Special Education Programs (OSEP) maintains that a 'change of placement' is an action that would substantially change a student's educational program, for example a suspension or expulsion (Washington Education Association, 2002). Overall, suspension and expulsion rates are increasing in the United States (Imich, 1994). Every year 1.5 million students miss at least one day of school due to a suspension or expulsion (Black, 1999). The National Center for Education Statistics reported that in 2006, one in every 14 students, or about 7% of all students, were suspended, and one in every 476 students, or 0.2%, were expelled from school (Planty, Hussar, & Snyder, 2009).

Though the number of changes in placement rises, research reveals that exclusions (i.e. suspensions and expulsions) are typically ineffective, counterproductive, and correlated with grade retentions, dropping out, academic failure, and delinquency (Zhang, Katsiyannis, & Herbst, 2004). Suspensions generally do not prevent future misconducts; Bock, Savner, and Taspocott (1998) noted that the rate of recidivism, or relapse into misbehavior, was around 50%.

Zero tolerance policies, or the automatic expulsion or suspension of a student who commits a serious act of misconduct, are on the rise but generally do not increase school safety (Cohn, & Canter, 2004).

Additionally, exclusions have negative effects on students and do not assist students or attend to the underlying causes of the undesirable behavior (Etscheidt, 2002). Dupper and Bosch (1996) noted that students who are suspended repeatedly suffer academically and are more likely than their peers to be retained or drop out of school. Nearly one million students drop out of school yearly and one of the contributing factors is suspension (Reed, 1996). Students who are suspended are likely to suffer academically, experience grade retention, and display behavior problems in the future (Oppenheimer & Ziegler, 1988). Additionally, suspension is correlated with depression, drug use and addiction, and home-life stresses, which may lead to isolation and suicidal inclinations (American Academy of Pediatrics, 2003).

Within the population of excluded students, there is an overrepresentation of students with disabilities (Evenson, Justinger, Pelischek, & Schultz, 2009; Krezmien, Leone, & Achilles, 2006). Compared to their general education peers, students with disabilities are more likely to receive discipline in the form of exclusion, such as suspensions and expulsion (Katsiyannis, Losinski, & Prince, 2012). In fact, individuals with disabilities are suspended or expelled about twice as often as general education students and are more likely to receive a change in placement for the same behavior as their general education peers (Skiba et al., 2008).

The Data Snapshot on school discipline from the U.S. Department of Education Office for Civil Rights (2014) states: (a) 13% of students with disabilities receive an out-of-school suspension compared to 6% percent of general education students, therefore, students with disabilities are more than twice as likely to receive punishment in the form of an out-of-school

suspension; (b) students with disabilities make up 25% of those who are referred to law enforcement or experience school-related arrests, while students with disabilities make up only 12% of the student population; (c) Florida (15%), Nevada (14%), District of Columbia (13%), Wisconsin (11%), and Louisiana (10%) and Washington D.C. noted a gap of 10 or more percentage points regarding out-of-school suspension rates between students with disabilities and general education students; and (d) in Virginia, 6% of students without disabilities are suspended and 14% of students with disabilities are suspended.

Rates of students with disabilities receiving changes in placement varied by disability category and race, but for most disability categories, students with disabilities had higher rates of suspension than general education students (Krezmien et al., 2006). Students with Attention Deficit Hyperactivity Disorder (ADHD) are 3.5 to 7 times more likely to be punished with expulsion compared to general education students (LeFever, Villers, Morrow, & Vaughn, 2002). Students with emotional and behavioral disorders (EBD), particularly African American students with EBD, had the highest rates of suspensions (Krezmien et al., 2006). The US Department of Education Office for Civil Rights' 2014 "Data Snapshot: School Discipline" revealed that African-American students were about three times more likely to be suspended and expelled compared to the rates of their White peers. In fact racial minorities in general are overrepresented in data on suspensions (Nichols, Ludwin, & Iadicola, 1996). The Dignity in Schools (2015) campaign also noted that students who identify as LGBTQ and students in foster care are more likely to be suspended or expelled.

Disproportionality is also apparent regarding regions of the US, particularly in the western United States, where students receive changes in placement more often than the rest of the country (Zhang et al., 2004). Suspension rates are highest in urban schools, compared to

suburban, town, and rural schools, where rates are significantly lower (Rausch & Skiba, 2004). Secondary school students experience disproportionately higher rates of suspension (Evenson et al., 2009). Surprisingly, Gulliam (2005) reported disproportionately high rates of expulsion for prekindergarten students as well.

The National Association of School Psychologists (NASP; 2001) wrote:

‘Zero Tolerance’ initially was defined as consistently enforced suspension and expulsion policies in response to weapons, drugs and violent acts in the school setting. Over time, however, zero tolerance has come to refer to school or district-wide policies that mandate predetermined, typically harsh consequences or punishments (such as suspension and expulsion) for a wide degree of rule violation (What is Zero Tolerance?, para. 1).

Generally, suspensions occur as a result of incidents of minor misbehaviors, and relatively few are due to more serious offenses such as drug or weapon possession (Rausch & Skiba, 2004; Evenson et al., 2009). In a study of Indiana public schools, Rauch and Skiba (2004) found that about 5% of suspensions were due to drug, tobacco, and weapon possession, 51% were due to “disruptive behavior,” and 41% labeled vaguely as “other.” Suspensions for all students are most frequently due to fighting or physical aggression, abusive language, skipping class or school and tardiness, disrespect, and disruptive behavior (Walker, 2013). Walker (2013) noted that the diagnostic criteria for certain disabilities, EBD for example, are also some of the most common reasons students are issued a change in placement. Students with EBD may display behavior or emotions under normal circumstances that are deemed inappropriate for the school setting, such as fighting, physical aggression, abusive language, and disrespect (Walker, 2013).

The risk factors often associated with students receiving changes in placement may also coincide with diagnostic criteria. Skiba (2002) reported that the most common risk factors for

exclusions included poor academic achievement, early behavioral problems, frequent school moves, poor interpersonal relationships, attendance problems, low socioeconomic status, and family problems. Students with disabilities also display poor social skills, judgment, planning, and are less skilled in evading detection compared to their general education peers. Therefore, students with disabilities are more likely to be caught exhibiting behaviors that result in exclusion (Leone, Mayer, Malmgren, & Meisel, 2000). The ability to fully grasp the consequences of behavior and to control behavior is a sophisticated and internalized process that puts students with disabilities at a distinct disadvantage (Skiba, 2002). Bryant (1998) likened exclusions to a black hole that is “capable of sucking all misbehavior by disabled students into the protected class of conduct” (p. 527)

The IDEA disciplinary provisions (i.e., Functional Behavior Assessment [FBA], MDR, interim alternative education settings) are often considered to be controversial and overused (Katsiyannis & Smith, 2003). For example, Katsiyannis and Smith (2003) reported that, based on cases in the publication *Special Educator*, a total of 182 discipline-related cases occurred from January 1999 to November 2002. Thirty-nine of the cases involved an MDR review, and the schools “prevailed” in 74% of these MDR cases.

The increase in exclusions prevents students, particularly students with disabilities, from receiving a free and appropriate public education, or FAPE, particularly students with EBD (Evenson et al., 2009; Zhang et al., 2004). Parents maintain that such a violation of the right to FAPE harkens back to a time when students with disabilities were actively ignored by schools (Bryant, 1998). Zero tolerance policies severely limit a student’s access and right to a FAPE (Skiba, Cohn, & Canter, 2004). All students, whether they are students with disabilities or general education students, are denied important educational services needed for academic

success when expelled or suspended (Etscheidt, 2002; Leone et al., 2000). Issues typically intensify as a result of limited access to education and lead to dropout (Skiba, Rausch, & Ritter, 2004).

School administrators noted a tension between individual rights and the common good regarding the resolution of discipline issues (McCarthy & Soodak, 2007). Teachers also do not feel that they can maintain a safe classroom while also respecting a student with a disability's rights to a FAPE (Bon, Faircloth, & LeTendre, 2006). Unfortunately, as Frick and Faircloth wrote, the "best interest of *student*" is generally not the "best interest of *students*" (p. 21).

Questions of discipline and school safety are complicated and affect everyone in the school system and community. As multiple fields are impacted by disciplinary decisions, the opinions of representatives from these fields should be considered. Therefore, it is important that such issues are considered by an interdisciplinary committee. An interdisciplinary approach is characterized by professionals from different areas working together to integrate aspects of their fields, their methods, and their languages to create a solution to a specific problem (Bossio, Loch, Schier, & Mazzolini, 2014). This is not to be confused with multidisciplinary or transdisciplinary approaches, which do not feature the integration of skills and knowledge from various fields, but numerous fields working on one problem simultaneously (Bossio et al., 2014).

Research supports the importance of interdisciplinary work in education, but certain barriers exist (Kezar, 2005). Lack of time, monetary support, and other resources are some of the most significant problems faced by interdisciplinary professionals (Pharo et al., 2012). Conflict may also arise from differing research or philosophical paradigms (Gunawardena, Weber, & Agosto, 2010). Interdisciplinary research in education is particularly challenging as the theoretical suggestions on achieving interdisciplinary do not match the practical processes and

limitations of doing so (Bossio et al., 2014). Gunawardena et al. (2010) wrote that a way to overcome such barriers is for interdisciplinary groups to adopt a problem-based structure, not a discipline-based structure. In a discipline-based structure, the resources and methods of one field in isolation are employed; a problem-based structure, in contrast, incorporates the research methods and information from multiple disciplines in order to best deal with the task at hand.

Definitions

Antecedent. An event or setting that allows for or triggers a certain behavior. This is important to consider when conducting a functional behavioral assessment (Chandler & Dahlquist, 2006).

Attention deficit hyperactivity disorder (ADHD). “ADHD is one of the most common neurodevelopmental disorders of childhood...Children with ADHD may have trouble paying attention, controlling impulsive behaviors (may act without thinking about what the result will be), or be overly active” (Centers for Disease Control and Prevention, 2015, para. 1).

Behavioral intervention plan (BIP). Once the cause of the behavior has been determined by the functional behavioral assessment (FBA), this positive and support plan of action detailing what changes will be made to support a student’s behavioral change is written and implemented (Riffel, 2007).

Consequence. An event that reinforces or punishes a certain behavior and affects the probability of the behavior occurring again. This is important to consider when conducting a functional behavioral assessment (Chandler & Dahlquist, 2006).

Emotional and behavioral disorders (EBD). A collection of disorders that generally have negative consequences on a child’s academic success and social development (Pastor, Reuben, & Duran, 2012). Examples include, but are not limited to, major depressive disorder, conduct disorder, anxiety disorders, obsessive-compulsive disorder (OCD), etc. (Pacer Center, 2006).

Evidence-based interventions. Behavior management techniques that are grounded in best available research and expertise, are rigorously tested, and generally prove to be effective if applied appropriately (American Psychological Association, 2006; Knotek, 2003).

Free and appropriate education (FAPE). Students with disabilities are guaranteed to a free education relative their ability level under section 504 of The Rehabilitation Act of 1973.

Functional behavioral assessment (FBA). This takes place when a student with a disability displays an undesirable behavior that interferes with his or her learning and/or the learning of others (Special Needs Advocacy Network, 2010). An IEP team conducting an FBA strives to understand the driving force of a behavior and assist in a solution to deter, reduce, or redirect a problem behavior (New Mexico Public Education Department, 2010).

Individuals with Disabilities Education Act (IDEA). A federal law guaranteeing services, such as early intervention, special education, and related services, to students with disabilities (U.S. Department of Education, 2015).

Individualized education plan (IEP). A document detailing the educational services a student with a disability will receive. It is written by a school administrator, a special education teacher who has taught the child, a general education teacher who has taught the child, and the student's parent(s)/guardian(s) (U.S. Department of Education Office of Special Education Programs, 2015).

Interdisciplinary research. "...A mode of research by teams or individuals that integrates information, data, techniques, tools, perspectives, concepts, and/or theories from two or more disciplines or bodies of specialized knowledge to advance fundamental understanding or to solve problems whose solutions are beyond the scope of a single discipline or field of research practice." (Committee on Facilitating Interdisciplinary Research, Committee on Science, Engineering, and Public Policy of the National Academies, 2004, p. 26)

Interim alternative education setting (IAES). Certain behaviors (i.e. weapon possession, illegal drug-related behavior, or behavior likely to injure the student or others) may constitute

school personnel removing a student from their regular education setting for up to 45 days provided the student still receives education services and, when appropriate, a functional behavioral assessment (20 USC § 1415(k)).

Jargon. Terms or phrases specific to a profession that may hinder communication with those outside of the profession (Brannen & Doz, 2012).

Local education agency (LEA). The board of education for public schools, or some other public authority, with administrative control over a city, county, township, school district, or other political subdivision in a state (U.S. Department of Education, 2012).

Manifestation determination review (MDR). A review of a behavior of a student with a disability to determine if the behavior, which would typically result in a change in placement, was a result of or related to the student's disability (IDEA, 2004).

Positive behavior support (PBS). A system that seeks to assess and understand the effects of the environment on a student's behavior, specifically, what triggers and maintains a problem behavior (Fox & Duda, 2011). PBS is a combination of behavioral science, the implementation of practical interventions, considering social values, and a taking a systems perspective (Sugai et al., 2000).

School psychologist. Professionals in the school setting who "...apply expertise in mental health, learning, and behavior, to help children and youth succeed academically, socially, behaviorally, and emotionally. School psychologists partner with families, teachers, school administrators, and other professionals to create safe, healthy, and supportive learning environments that strengthen connections between home, school, and the community" (National Association of School Psychologists, 2015, para. 1).

Zero tolerance. “Zero Tolerance’ initially was defined as consistently enforced suspension and expulsion policies in response to weapons, drugs and violent acts in the school setting. Over time, however, zero tolerance has come to refer to school or district-wide policies that mandate predetermined, typically harsh consequences or punishments (such as suspension and expulsion) for a wide degree of rule violation” (National Association of School Psychologists, 2001, What is Zero Tolerance?, para. 1).

CHAPTER 2: MANIFESTATION DETERMINATION REVIEWS

Current Requirements

IDEA states that a disability should not be a hindrance to full participation in society and that improvement in educational practices for individuals with disabilities will increase equal opportunity and full participation of this population in school settings (20 USC § 1400, Title I/Part A/Sec. 601(c)(1)). One of the ways in which IDEA ensures this is with a manifestation determination review (MDR). An MDR is a review of a behavior of a student with a disability to determine if the behavior, which would typically result in a change in placement, was a result of or related to the student's disability.

An MDR must be held within 10 school days of a change in placement decision due to a problematic behavior (34 CFR § 300.530(e)(1); 20 USC § 1415(k)(1)(E)(i)). A change in placement for a student with a disability includes removal for more than 10 consecutive school days, a series of removals have occurred that constitute a pattern, or if the student is placed in an interim alternative educational setting (IAES) (34 CFR § 300.536; 20 USC § 1415(k)). A representative of the local education agency (LEA) must notify the parent(s)/guardian(s) of the student on the same date the change in placement decision is made (34 CFR § 300.530(h); 20 USC § 1415(k)(1)(H)). Due to the "stay-put provision" the student stays in his or her original educational placement in the time between the change in placement decision is made and the date the MDR takes place and the appropriate follow-up action is enacted (34 CFR § 300.533; 20 USC § 1415(k)(4)(A)).

The MDR hearing is conducted by the parent(s)/guardian(s) of the student, an LEA representative, and relevant members of the individualized education plan (IEP) team, as determined by the LEA representative and the parent(s)/guardian(s) (34 CFR § 300.530(e)(1);

corresponding Virginia Regulations at 8 VAC 20-81-160D.2; 20 USC § 1415(k)(1)(E)(i)). An IEP team consists of a school administrator, a special education teacher who has taught the child, a general education teacher who has taught the child, and the student's parent(s)/guardian(s) (34 CFR § 300.321(a) and (b)(1); 20 USC § 1414(d)(1)(B)). Additionally, an individual who can "interpret the instructional implications of evaluation results" must be present (34 CFR § 300.321(a) and (b)(1); 20 USC § 1414(d)(1)(B)).

The members of the committee decide if additional participants need to be present. IDEA requires certain participants to be in attendance, such as the educators and the parent(s)/guardian(s). There is more leeway with who fills the roles of LEA representative and interpreter of the evaluation results. The LEA representative decides which school personnel are relevant and the parent(s)/guardian(s) decide upon any additional members who "have knowledge or special expertise regarding the child" (34 CFR § 300.321(c); corresponding Virginia Regulations at 8 VAC 20-81-110 C.1.f.; 20 USC § 1414(d)(1)(B)). While the parent(s)/guardian(s) and the school can provide their own additional participants, they cannot veto the others' choices (*Fitzgerald v. Fairfax County Sch. Bd.*, 2008).

The committee must review information and documentation relevant to the MDR (i.e., IEP), consider teacher observations, and gather information from the parent(s)/guardian(s) in order to decide whether or not the behavior was a result of a disability, and if so, was there a failure to implement the student's IEP (34 CFR §300.530(e)(1); 20 USC § 1415(k)(1)(E)(i)). If it is decided that the behavior was not a manifestation of a disability, the student is disciplined according to school policy; however, the parent(s)/guardian(s) can appeal this decision ((34 CFR §300.532(a); 20 USC § 1415(k)(3)). During such an appeal, the student must remain in the

interim alternative educational setting (IAES) until the decision is made or the allotted time period ends (34 CFR §300.533; 20 USC § 1415(k)(4)(A)).

If the committee decides the behavior was a manifestation of a disability or has a significant relation to the disability, the IEP team must conduct a functional behavioral assessment (FBA) and implement a behavioral intervention plan (BIP), or review and revise an existing BIP (34 CFR §300.530(f)(1); 20 USC § 1415 (k)(1)(F)). The student returns to the original educational placement unless the LEA representative and the parent(s)/guardian(s) decide that a change in placement is necessary as a result of the changes to the BIP (34 CFR §300.530(f)(2); 20 USC § 1415 (k)(1)(F)(iii)). Additionally, there are certain caveats to the student returning to the original placement regarding drug and weapon possession and serious bodily injury (34 CFR §300.530(g); 20 USC § 1415 (k)(1)(G)). As mentioned, an important possible step in the aftermath of the determination is the creation or revision of the student's functional behavior analysis and implementation of a positive behavior support plan.

Current Practices

PBS & FBA. Positive behavior support (PBS) is a system that seeks to assess and understand the effects of the environment on a student's behavior, specifically, what triggers and maintains a problem behavior (Fox & Duda, 2011). PBS is a combination of behavioral science, the implementation of practical interventions, considering social values, and a taking a systems perspective (Sugai et al., 2000). One of the steps in the process of PBS is to conduct a functional behavioral assessment (FBA). An FBA takes place when a student with a disability displays an undesirable behavior that interferes with his or her learning and/or the learning of others (Special Needs Advocacy Network, 2010). The ABC assessment is commonly used to detail the antecedent, behavior, and consequence of a specific behavior (Chandler & Dahlquist, 2006).

When the three components are discerned, the antecedent, which allows for or triggers a behavior, and consequence, which reinforces a behavior, can be adjusted or removed in order to modify the behavior. Such assessments are conducted with a variety of strategies (i.e., data collection and observations of the student) and are typically reactive responses to a student's misbehavior that has become a hindrance to the learning environment (Etscheidt, 2002).

All behavior serves a purpose and a team conducting an FBA strives to understand the driving force of a behavior and assist in a solution to deter, reduce, or redirect a problem behavior (New Mexico Public Education Department, 2010). An FBA can aid in examining a behavior as well as guide program and intervention planning. Sugai et al. (2000) noted that FBAs have led to successful interventions in environmental redesign, curriculum redesign, and removal of reinforcements that inadvertently strengthen an undesirable behavior. For example, each time a student hits a peer, the teacher makes the student sit in the hall. The teacher notices that the undesirable behavior of hitting does not decrease despite her disciplinary measures. With the use of an FBA, it may be revealed that sitting in the hall is actually a reward for the student because he or she gets to take a break from schoolwork. With a clear understanding of the causes of a behavior, an IEP team can create the most effective intervention possible, avoid unnecessary and harsh disciplinary action, and give the student the opportunity to learn appropriate alternative responses and remain in the school system (Etscheidt, 2002). The IEP team plays a vital role not only in PBS planning, but also in the MDR process, as the IEP team are required members of MDR committees.

Committee members. In the case *S-I v. Turlington* (1981), the court handed down the decision that MDRs must be decided upon by a trained and knowledgeable committee. The case of *Fitzgerald v. Fairfax County School Board* (2008), which decided that committee members do

not need to have a personal familiarity with the student so long as the individual meets the requirements of an IEP team member, stated that each individual serves a purpose on the committee; the parent(s)/guardian(s), special educator, and general educators know the student personally and can report on his or her typical behaviors. Additionally, the educators can provide information regarding if/how the disability manifests in the classroom setting. The LEA representative and the “individual qualified to ‘interpret the instructional implications of evaluation results’” can provide information relevant to the MDR (34 CFR § 300.321(a) and (b)(1); 20 USC § 1414(d)(1)(B)). The LEA representatives in the *Fitzgerald v. Fairfax County School Board* (2008) case were an administrator and the Special Education Department Chair, both of whom were familiar with the school’s special and general education programs. *Fitzgerald v. Fairfax County School Board* (2008) noted that the role of “interpreter” can be filled by any of the required committee members, but can also be filled by a school psychologist or other professional with special education training. The interpreter in the *Fitzgerald v. Fairfax County School Board* (2008) case was a school psychologist who was regarded as having knowledge of the disabilities and could explain to the rest of the committee the reasons for the student’s disability classification and how it is typically manifested in children.

The LEA representative must be able to (a) supervise the specialized instruction for students with disabilities, (b) have a working knowledge of the curriculum, and (c) have a working knowledge of the resources available to the school division (*School Board of the City of Virginia Beach*, 2006). It noted that the principal, assistant principal, or administrative principal may serve in this position. The “interpreter” of evaluation results may be one of the other members of the team, such as the assistant principal, general education teacher, or special education teacher, but not the student or parent(s)/guardian(s). These regulations also note that a

psychologist, social worker, or visiting teacher, may act in this role. However, challenges are bound to arise with such differing committee members, as with any group decision-making process.

Common Challenges

Issues inherent to group decision-making. In-group decision-making, initial preferences and time pressure greatly affect the outcome of group discussions (Kelly & Karau, 1999). Biases may affect discussions in student study teams, particularly when the subject is of a low socioeconomic status or when behavioral problems are seemingly present, making problem-solving more subjective and biased (Knotek, 2003). The personal positions and personal preferences theory maintains that individuals will enter group meetings with an outcome or decision in mind and only present and support information that supports this outcome (Brodbeck, Kerschreiter, Mojzisch, Frey, & Schulz-Hardt, 2002).

Larson, Christensen, Abbot, and Franz (1996) noted that, according to the balance of status and power theory, group members who are lower in status share unique information less frequently than those of a higher status. Thus, information or knowledge that is shared by the group is discussed more frequently than information that is uniquely held, which often results in inaccurate discussions and decisions made by the group (Walker, 2013). The information asymmetries model maintains that if differing views and opinions are shared during a discussion, the group will reach the best decision outcome (Brodbeck et al., 2002).

The group member(s) who hold the most power and highest status also affect the language used and the approach taken by the group in reviewing the issue at hand (Knotek, 2003). Knotek (2003) reported that those with a graduate degree and those in specialized roles hold the most sway over how issues are conceptualized in multidisciplinary teams in a school

setting. The unspoken hierarchal statuses and their effects on the participation of group members greatly hinder the productivity of the group (Holen, 2000).

During group student study committees, the parent(s)/guardian(s) seemingly receive the least amount of respect. Their opinions receive less attention and research despite the fact that the parent(s)/guardian(s) are considered to be invaluable informants when determining a student's behavior in the classroom (Taylor, 2004). Taylor (2004) wrote that in order to educate students with disabilities, the support and collaboration of the parent(s)/guardian(s) is a necessity. Despite this, only a slight effort is being made by schools to actively engage the parent(s)/guardian(s) (Seligman, 2000). In addition to these general issues that arise from group decision-making, there are a myriad of difficulties that are MDR-specific.

Challenges presented by the MDR process. In her study on school team decision-making regarding MDRs, Walker (2013) reported that many participants struggled with the MDR process itself and had great difficulty claiming causation of the behavior. They felt that there was missing or incomplete information that lacked detail. McCarthy and Soodak (2007) also noted that the process of the MDR is a main contributing factor to the tension experienced by administrators in particular.

MDRs prove to be difficult as behavior and its relation to disabilities may seem nebulous. Katsiyannis and Maag (2001) stated, "there are no empirically validated methods to make a determination as to whether or not misbehavior was related to a disability- especially EBD" (p. 91). They went on to write that MDRs are based on a medical model but are being treated with social solutions such as labels and interventions that are not empirically supported. Knotek (2003) also wrote that interventions are built around socially constructed definitions.

The language of the IDEA and of MDR literature is often vague. As noted, various individuals can fill some of the required membership rolls of an MDR committee (i.e., an individual who can interpret evaluation results), and the duties of the committee typically leave its members in the dark. Educators reported struggling with understanding the guidelines regarding disciplining students with disabilities, particularly regarding the arbitrary language, and had to define the vague terms for themselves (Bon, et al., 2006). Participants may also have trouble defining what is “normal” behavior for a student, especially a student with EBD (Walker, 2013).

There is controversy surrounding the current application of MDRs within schools. Katsiyannis and Maag (2001) maintained that schools rely on political financial support and need to return impressive reports in order to please the public and ensure financial support. However, plans such as zero tolerance policies may initially gain favor with the general public by highlighting the school’s stance on misbehavior, but ultimately do more harm than good for students (NASP, 2001). Changes in placement also remove the students who are troubled and mar the academic reports, as students with disabilities score poorly on the state assessments under No Child Left Behind (NCLB) and prevent the school from meeting yearly progress levels (Katsiyannis et al., 2012).

MDRs may also be misused as a way to avoid the school receiving blame for the misbehavior of students with disabilities; the public would likely not blame the school if it is decided that a dangerous behavior was a result of a disability and not the improper implementation of services and strategies (Katsiyannis & Maag, 2001). Engel (1991) noted that in moving students to alternative placements, schools not only avoid dealing with the problem but also maintain a culture of “otherness” often experienced by students with disabilities. Aside

from the student under review, those most affected by the politics and numerous issues presented by the MDR process are the members of the committee, who also present their own challenges.

Committee members' views on MDRs. The views of the committee members on the MDR process may influence their decisions and hinder effective communication and objective decision-making. As teachers will be judged most harshly if the problem behavior is determined not to be a manifestation of the disability, teachers provide negative reports on the student most frequently (Knotek, 2003). Teachers are in a difficult position because the blame for the problem behavior will be placed on either the teachers themselves or on the actions of the student who they could not efficiently control or assist. Therefore, educators enter these meetings with a defensive attitude and an external locus of control. Knotek (2003) also noted a correlation between teachers' initial views on the students and the final decision of the committee, which may be representative of a confirmation bias, or seeking out and presenting only the information that supports one's views.

The parent(s)/guardian(s) and school officials have seemingly adopted the mindset that they are pitted against one another and will never see eye to eye regarding how best to educate children (Boaz, 2015). The parent(s)/guardian(s) tend to have negative views toward school-setting professionals and consider them opponents (Seligman, 2000). Administrators experience varying levels of tension depending on the school's MDR procedures and the availability, or lack thereof, of resources (McCarthy & Soodak, 2007). Administrators report experiencing less tension when a committee makes a decision collectively at the local level of a school district and when the people creating the decision trust one another (McCarthy & Soodak, 2007).

School psychologists report average levels of satisfaction with team functioning regarding multidisciplinary teams (Huebner & Gould, 1991). In Huebner and Gould's (1991)

study on school psychologists serving on multidisciplinary teams, school psychologists reported that too little time was devoted to discussing and designing interventions during meetings, which then compromised the implementation of the IEP. Additionally, they reported that the parent(s)/guardian(s) and regular education teachers did not participate enough and that the team's follow-up on the interventions was inadequate (Huebner & Gould, 1991). In addition to the participants' varying views on the MDR process, their views of the student may also greatly differ.

Committee members' views on the student. A committee member may enter an MDR meeting with a bias toward the students whose behavior is in question. By the time an MDR occurs, much time and effort has been afforded to the child and the employees of the school system may want to be rid of the child. Bon et al. (2006) reported that people, including professionals, may hold negative views toward students with disabilities. This is compounded by the fact that negative views are also typically held toward students of a lower socioeconomic status (Knotek, 2003). Committee members' views on the student may also be impacted by their various levels of knowledge or training.

Committee members' varying levels of knowledge/training. The individual decisions of MDR committee members regarding a student's behavior are greatly affected by their own interpretations (Walker, 2013). Committee members may possess different information on the student and hold varying views on how to regulate behavior (Walker, 2013). Members may conceptualize the issue differently. As mentioned, social influence holds sway over how the team approaches the problem. Therefore, the review may be very different depending on the make-up of the committee, who controls the conversation, and the flow of the meeting. (Knotek, 2003).

Walker (2013) found that special education teachers contributed the most amount of unique information and shared more frequently than general education teachers in MDR meetings. However, Walker warned that special education teachers should not be viewed as the only experts on the committee; though MDRs are based on special education law, special education teachers may not possess enough knowledge of a student's disability diagnosis.

Walker (2013) also reported that general education teachers had little knowledge of the MDR process and contributed the least during the meetings. General education teachers reported knowing less about the process than the other members, and both general and special education teachers reported that the general education teachers were silent during the meeting or could not provide relevant information. Finally, special education teachers claimed that general education teachers were hindrances to the discussion and did not treat special education students fairly (Walker, 2013).

There is a severe absence of training for both educators and administrators regarding the needs and rights of students with disabilities and a startling lack of knowledge of special education law (Bon et al., 2006). There is also a lack of leadership and communication training in committee members. Heubner and Gould (1991) found that although 39% of school psychologists reported to have served as leaders of a multidisciplinary team, 29% of the same population purported to have not received any pre-service or in-service training in multidisciplinary team leadership.

Finally, the use of jargon, or terms and phrases specific to a profession that often prove to be confusing to those outside of the profession, can cause substantial problems in interdisciplinary meetings. If an MDR committee member's field operates with a language that is highly contextually specific, he or she may not be able to effectively communicate his or her

ideas and concerns with the group (Brannen & Doz, 2012). For example, many educational terms can be shortened into acronyms, which may confuse parents and other professionals present. Thomas, Hariharan, Rana, Swain, and Andrew (2014) wrote that the use of jargon is counterproductive, particularly in professions that interact with diverse populations, such as medicine, and that miscommunication and confusion ensue. This is particularly disconcerting regarding MDRs, because the professionals on the committee may use different jargon, which will hinder their chances of communicating effectively and reaching a decision.

Lack of a required consensus decision. The IDEA (2004) does not require a consensus decision of the MDR committee. The committee should try to reach a consensus, but if this is not possible, the IDEA (2004) states that school personnel must reach a consensus that the parent(s)/guardian(s) can later appeal if unsatisfied. The decision does not become a majority vote, but a consensus of the school staff only (Fitzgerald v. Fairfax County Sch. Bd., 2008).

This may add to the substantial tension between committee members. Again, the committee members cannot veto the others' choices of participants (Fitzgerald v. Fairfax County Sch. Bd., 2008). Members may be inclined to include individuals likely to support their opinions of the behavior of the student in question. Such action may greatly affect the MDR discussion and decision and poses a substantial threat to the student's right to FAPE.

Safety and FAPE seem mutually exclusive. As stated in the introduction, educators do not always feel they can successfully maintain classroom safety while also respecting a student with a disability's right to a FAPE (Bon et al., 2006). Bon et al. (2006) noted that the strain between collective and individual rights is quite pronounced when it comes to discipline. School officials in particular feel the tension between striving for the common good and the need to respect individual rights (McCarthy & Soodak, 2007).

CHAPTER 3: RECOMMENDATIONS FOR BEST PRACTICE

The Interdisciplinary Committee

The nature of a manifestation determination review (MDR) calls for an interdisciplinary approach. A committee is made of individuals with unique information and training who share the goal of reaching a unified decision that best serves the student. This project also took an interdisciplinary approach in order to effectively study interdisciplinarity and what representatives of various fields could contribute during an MDR committee meeting.

The Committee on Facilitating Interdisciplinary Research, Committee on Science, Engineering, and Public Policy of the National Academies (2004) defined interdisciplinary research as:

...A mode of research by teams or individuals that integrates information, data, techniques, tools, perspectives, concepts, and/or theories from two or more disciplines or bodies of specialized knowledge to advance fundamental understanding or to solve problems whose solutions are beyond the scope of a single discipline or field of research practice (p. 26).

Interdisciplinary work is not synonymous with multidisciplinary or transdisciplinary work, because interdisciplinary research specifically includes the *integration* of, not simply the use of, methods and knowledge from multiple fields (Bossio et al., 2014; Hattery, 1986; Lattuca, 2001). Interdisciplinary research is on the rise because it is a novel approach to problems that cannot be solved by any one discipline or expert alone (Hattery, 1986). Additionally, problems rarely fall within the confines of a single discipline because this is an interdisciplinary world (Lattuca, 2001).

Interdisciplinarity is a relatively new concept in education research. Studies generally center around effectively defining interdisciplinarity, the uses of interdisciplinary research in problem-based research, and the positive effects on the curriculum when interdisciplinary research is employed (Bossio et al., 2014). In regards to psychology in interdisciplinary research, Kahneman (2003), who successfully married the disciplines of psychology and economics to study behavioral economics and heuristics, wrote that psychological concepts can be integrated and generalized to help explain phenomena of other fields.

Benefits of Interdisciplinary Teams. Angner and Loewenstein (2012) noted that there are significant benefits to interdisciplinary committees employing multiple methods and types of data to study an issue. Studies on research processes maintained that interdisciplinary collaboration is the best method for addressing challenging research issues (Chubin, Porter, & Rossini, 1986). Participants felt empowered and appreciated when others listen to their contributions and the participants learned how to be interdisciplinary during first-hand collaborative experiences (Bossio et al., 2014). Practitioners are the most valuable assets to interdisciplinary research at this time; interdisciplinarity needs to be practiced regularly in all disciplines so that the methods can be refined and more professionals can develop the skills to participate in interdisciplinary work (Chubin et al., 1986).

An additional benefit of interdisciplinary work is that successful interdisciplinary collaboration fosters more interdisciplinary collaboration; if participants are satisfied with the outcome of the experience there is a high likelihood of collaboration in the future (Bossio et al., 2014). The end result of an interdisciplinary collaboration was the primary motivating factor for continued collaboration and was also an indication of the success of the group (Bossio et al., 2014). Unfortunately, there are hindrances to interdisciplinarity that deny access to such benefits.

Challenges of interdisciplinary teams. It is difficult to transfer interdisciplinary theory into practice (Lattuca, 2001). Differing social expectations for the other participants may lead to a lack of motivation from the group, failure to meet, competitiveness, unequal contributions to the final solution (Bossio et al., 2014). Conflicting disciplinary expectations, or the culture within each discipline, may affect interdisciplinarity, particularly how each field uses language and approaches research (Bossio et al., 2014). Bossio et al. (2014) noted that the biggest challenge to achieving interdisciplinary was the barriers the disciplines created with their cultures and languages in an effort to differentiate themselves. Bossio et al. (2014) found that when participants disagreed over what constituted research, members became closed-off instead of striving to be open and learn about others' approaches and teach about their own.

Regarding interdisciplinary collaborations in the school setting, Huebner and Gould (1991) noted that the most significant problems were less participation by parent(s)/guardian(s) and regular education teachers, inadequate time spent discussing interventions, vague team goals, making changes in a nonsystematic way, diminished trust and collaboration between disciplines, as well as a lack of a climate in which all participants, particularly parent(s)/guardian(s), felt they can communicate openly. Parent(s)/guardian(s) generally do not comment or ask questions during professional-parent meetings (Silverstein, 1989). Even when the parent(s)/guardian(s) reported feelings of confusion or concern, they did not express as much to the interdisciplinary committee for several reasons; parents considered the professionals to be strangers, they wished to avoid coming across as ignorant or troublesome, and they feared offending the professionals and that their child might be targeted by professionals as a result of angering them (Silverstein, 1989). Interdisciplinary literature highlights the benefits and challenges of this method of

collaboration and research, but does not provide practical recommendations for the facilitation of interdisciplinarity, particularly in educational research (Bossio et al., 2014).

An additional hindrance to the practical application of interdisciplinary committees in the school setting is disagreement over what constitutes interdisciplinarity (Lattuca, 2001). For example, although most MDR literature highlights integration as the defining feature of interdisciplinary work (Bossio et al., 2014; Hattery, 1986; Lattuca, 2001), Heward (2009) attributed this feature to transdisciplinary work. These terms need to be clearly defined and correctly applied in order to educate and encourage professionals to practice interdisciplinarity. These challenges experienced in interdisciplinary work can be remedied by keeping a few recommendations in mind.

Best Practices in an Interdisciplinary Committee

Common goal. An important motivator for an interdisciplinary committee is investment in a common goal (Bossio et al., 2014). A clear and shared goal is a key to a successful meeting (Seligman, 2000). Time will be lost and frustrations will result unless all members of the committee are seeking an answer to a question they all share (Bossio et al., 2014). If a well-defined goal is established at the beginning of the proceedings, the committee can refer back to the goal if they experience confusion or dissention during discussions (Bossio et al., 2014).

Common language. In order to have a shared goal, the committee needs a common language (Bossio et al., 2014). Professionals are advised to avoid jargon, or discipline-specific words or phrases, as it may lead to confusion or misinterpretation (Chandler & Dahlquist, 2006). For example, the parent(s)/guardian(s) may have negative emotional reactions to words such as ‘deviant’ or ‘atypical’ despite the fact that they are common technical terms in certain disciplines that do not carry the negative connotations often attributed to them in common usage (Chandler

& Dahlquist, 2006). Chandler and Dahlquist (2006) recommend either replacing such misleading terms with more neutral words that all participants would understand or pairing technical terms with more common words and phrases to facilitate communication.

Strategic and holistic approach. Such a combination of terms from numerous fields supports the suggestion of interdisciplinary committees adopting strategic and holistic approaches to research. Bossio et al. (2014) defined strategic and holistic approaches as, “a sense of integration between the personal research objective based on individual disciplines and the group solution to a central problem through which the collaboration occurs” (p. 208). This highlights the defining aspect of interdisciplinarity—the *integration*, not simply the addition, of knowledge and perspectives.

Respect. A strategic and holistic approach extends beyond the integration of research methods; it includes an amalgamation of the participants’ social and disciplinary expectations held for each other. As mentioned barriers erected between the disciplines by the disciplines themselves are the biggest threat to interdisciplinary research (Bossio et al., 2014). A respect for others’ opinions and approaches must be present in order to conduct effective interdisciplinary work. All members of an interdisciplinary committee should accept that their fellow committee members have different backgrounds and training and each should be actively trying to learn about other’s approaches to the topic or question at hand (Bossio et al., 2014). This will lead to a more holistic approach and a more rewarding and successful collaboration.

Openness. Although integration of information and methods is the cornerstone of interdisciplinarity, this is not to say that committee members should abandon their fields and their training. Representatives of the various fields need to employ their own knowledge and indigenous resources in order to create an integrated approach with representatives of other fields

(Olds, 2010). The literature maintains that committee members need to be open to professional growth during interdisciplinary collaborations (Bossio et al., 2014). Members should be receptive of new terms, opinions, and methods and willing to learn from their colleagues. The best way to ensure an unimpeded exchange of information within interdisciplinary committees is through open and active communication (Chandler & Dahlquist, 2006).

Open communication. Open communication is a necessity for a successful interdisciplinary meeting. Committee members should avoid lecturing or moralizing to their fellow members (Seligman, 2000). Participants should not criticize, blame, or command others in order to encourage active participation from all members (Chandler & Dahlquist, 2006). Open communication can be facilitated, again, by using common terms and avoiding jargon (Chandler & Dahlquist, 2006).

In an interdisciplinary team in the education setting, Chandler and Dahlquist (2006) recommended encouraging open communication by acknowledging what has been done well for the student and building on these points. Communication between school personnel and parent(s)/guardian(s), particularly parent(s)/guardian(s) of students with disabilities, is typically considered strained and difficult (Seligman, 2000). Sontag and Schacht (1994) noted that school personnel who encourage dialogues between the school and families enable an arrangement conducive to the sharing of opinions and concerns openly.

Cultural misunderstandings can be a hindrance to open and easy communication in interdisciplinary committees. We live in a multicultural society and open communication is impossible without respecting the effects of culture on communication. Parent(s)/guardian(s) in school-based interdisciplinary teams are particularly affected by this (Seligman, 2000; Sontag & Schacht, 1994; Taylor, 2004). Failure to consider the influence of the family members' language

and culture on their opinions and decisions can negatively affect the productivity of the interdisciplinary meeting (Taylor, 2004).

Best Practices in an MDR Committee

Involve parent(s)/guardian(s) and general education teachers. Every member has an important part to play in a manifestation determination review. Two of the most overlooked roles in MDR literature are those of the parent(s)/guardian(s) and the general education teacher. Parent(s)/guardian(s) of students with disabilities are often cast in a negative light (Seligman, 2000; Taylor, 2004). However, studies have revealed the many benefits of the inclusion of parent(s)/guardian(s) in their child's education, particularly regarding the continuation of interventions at home and in the community (Chandler & Dahlquist, 2006; Kaiser, Hancock, & Nietfeld, 2000; Ozonoff & Cathcart, 1998). Families are very important to the maintenance of interventions implemented in the classroom (Huebner & Gould, 1991; Sigafos, Arthur, & O'Reilly, 2003). Parent(s)/guardian(s) often possess information that is relevant to the committee's understanding of a student's behavior in school (Sontag & Schacht, 1994; Taylor, 2004). They can provide information on antecedents preceding a problem behavior and consequences following the behavior, and can play an important role in the implementation of an intervention by continuing it at home (Chandler & Dahlquist, 2006).

As the inclusion of the parent(s)/guardian(s) in individualized education plan (IEP) and MDR committees is a requirement under IDEA (2004), school professionals should not view parent(s)/guardian(s) as nuisances, but rather respect that they likely have a thorough understanding of their child's strengths and weaknesses (Silverstein, 1989; Taylor, 2004). The school is encouraged to build a relationship with the parent(s)/guardian(s), encourage parental involvement, and help educate the parent(s)/guardian(s) on their rights under IDEA (Sontag &

Schacht, 1994). During interdisciplinary committee meetings, school personnel can encourage the parent(s)/guardian(s) to participate by asking them specific questions, discussing matters in nontechnical terms, and by reinforcing parental participation (Turnbull & Leonard, 1981).

In addition to the low parental involvement in such committees, there is inadequate participation from the general education teacher (Huebner & Gould, 1991). There is little discussion or research on the role of the general education teacher on the MDR committee other than to point out their unpreparedness and difficulties experienced within the MDR process (Walker, 2013). This is troubling because these professionals, along with the special education teacher and parent(s)/guardian(s), play an integral role in the implementation of the IEP and behavioral interventions. In order to encourage participation from and respect for all committee members, Bossio et al. (2014) recommended having everyone at the start of the meeting acknowledge what they can contribute to the discussion so as to dispel any incorrect or overgeneralized social or disciplinary expectations.

Specific, uniform questions. There is a great deal of confusion regarding the review and decision-making processes of an MDR meeting (Zilz, 2006). The IDEA (2004) states that committee members should review the student's file, discuss teacher observations, and consider relevant information from the parent(s)/guardian(s). This approach to considering the cause of a behavior is neither objective nor uniform (Katsiyannis & Maag, 2001). With no clearly defined method to determining the manifestation of a behavior in relation to a disability, the committee members must arbitrarily define the language of the law for themselves (Walker, 2013).

Huebner and Gould (1991) noted the benefits of utilizing a set and specific format for interdisciplinary meetings. For example, Katsiyannis and Maag (2001), who, again, maintained that there are no methods for making a manifestation determination that are empirically valid,

proposed an approach to the MDR decision-making process. This approach was based on social skills assessment and provided clear and concise questions that the committee can answer to guide their discussion-making process.

1. Does the student possess the requisite skills to engage in an appropriate alternative behavior?
2. Is the student able to analyze the problem, generate solutions, evaluate their effectiveness, and select one?
3. Does the student interpret the situation factually or distort it to fit some existing bias?
4. Can the student monitor his behavior? (p. 93)

No approach or set of questions can ensure that the committee will be able to claim causation with absolute certainty. However, the more methods the committee uses in considering the cause of a behavior, and the more objective and empirical the methods are, the more likely the committee will make an objective and evidence-based decision (Angner & Loewenstein, 2012; Zilz, 2006). Providing the committee with objective questions will save them time, keep the committee on task, and protect the student from biased determinations based on little evidence. We need consistent and objective standards in order to protect students with disabilities from disciplinary discrimination as well as more research to develop these criteria (Zilz, 2006).

Improve training. The confusion surrounding MDRs that Zilz (2006) noted may not be the result of the vague language and lack of criteria alone. There is little literature on the training of MDR committee members. All members, from the parent(s)/guardian(s) to the LEA representative, could benefit from preparation courses or literature on the legality and process of the MDR. In Walker's (2013) study, the participants, and general education teachers in particular, reported low levels of preparedness for the MDR meeting. If all members came to the meeting with an understanding of what was expected of them, efficiency would likely increase.

In addition to increased and improved resources on the MDR process itself, additional skill training may enhance the productivity of such meetings. Members should receive facilitative communication skills training, particularly teachers as they are generally considered the facilitators between the parent(s)/guardian(s) and the school (Seligman, 2000). Additionally, parent(s)/guardian(s) may benefit from receiving training on continuing any interventions implemented by the committee at home or in the community (Sigafoos et al., 2003). The training for all members may also include information on the importance of evidence-based interventions.

Evidence-based interventions. Behavioral interventions revised or implemented as a result of an MDR should be evidence-based (Katsiyannis et al., 2012). Evidence-based interventions are grounded in best available research and expertise, are rigorously tested, and generally prove to be effective if applied appropriately (APA Presidential Task Force on Evidence-Based Practice, 2006; Knotek, 2003). Evidence-based interventions such as differential reinforcement, behavior contracts, and token economies are often used for behavior management in the classroom as well as tools such as the aforementioned functional behavioral assessment (FBA) and positive behavior support (PBS) (Simonson, Fairbanks, Briesch, Myers, & Sugai, 2008). School-based interdisciplinary committees are advised to dedicate ample time to establishing evidence-based interventions for the student because this will directly affect the proper implementation of the IEP (Huebner & Gould, 1991).

School psychologist. Voices from numerous fields are relevant when it comes to disciplinary action, particularly the discipline of students with disabilities. Areas such as child development, education, guidance and counseling, etc. affect disciplinary law and practice (Bear, 2008). The field of psychology has played a significant role in all of these areas and a school

psychologist could prove to be invaluable to an MDR committee. As Bear (2008) wrote, school psychologists are trained in “...personality assessment, consultation, intervention techniques, intervention acceptability. In addition to keeping abreast of recent developments in theory, research, and practice in these areas, school psychologists need to remain aware of current legal, ethical, and political issues” (p. 431).

A manifestation determination is fundamentally a question of a cause of a behavior. Psychology is the scientific study of behavior, cognition, and emotion (Breckler, 2012). School psychologists, specifically, are defined by the National Association of School Psychologists (NASP, 2015) to be professionals who:

...Apply expertise in mental health, learning, and behavior, to help children and youth succeed academically, socially, behaviorally, and emotionally. School psychologists partner with families, teachers, school administrators, and other professionals to create safe, healthy, and supportive learning environments that strengthen connections between home, school, and the community (para. 1).

School psychologists are trained in a number of areas and skills, including, but not limited to, data collection and analysis, consultation and collaboration, behavioral interventions, special education services, family-school-community collaboration, and professional ethics, school law, and systems (NASP, 2015).

MDR literature maintains that there are no valid methods to determine the causation of a behavior of a student with a disability (Katsiyannia & Maag, 2001). School psychologists can play an integral part in determining these methods, as professionals who are trained in the study of behavior and the experimental method. Bill Brownley (2014), an attorney who wrote “Handling a Manifestation Determination Review (MDR): A “How To” for Attorneys” wrote

candidly of the process and his recommendations, stating, “Determine who the psychologist is. Schools consider this person the expert on behavior. If you can win the psychologist over, you will win. If the psychologist sides with you, so will everyone else.”

School psychologists possess a working knowledge of the characteristics of disabilities and the usage of the Diagnostic and Statistical Manual of Disorders (DSM-5) and can clarify any confusion committee members may have regarding the disability itself. The MDR committee considers the relation between misconduct and mental condition, thus it is critical that a psychologist, who is trained in the attributes of such conditions, is involved in the discussion. (Cafferky & Reichhardt, 2012) For example, in the case of *Fitzgerald v. Fairfax County School Board* (2008) the school psychologist, Ms. Hamilton,

...although not familiar with [the student] personally, brought specific, relevant areas of expertise to bear on the MDR process... Ms. Hamilton, as the school psychologist, was familiar with emotional disabilities and explained to the other members of the team the basis for Kevin’s classification as a child with an emotional disability and how such disabilities typically manifest themselves in children (B., para. 3).

Additionally, school psychologists are familiar with the most common evaluations administered to students with disabilities and can interpret and report on results for the committee, as evidenced by the *Fitzgerald v. Fairfax County School Board* (2008) case.

The “individual who can interpret the instructional implications of evaluation results,” as required by the IDEA (2004), can be filled by a psychologist (VA Beach, 2006). The case of *S-I v. Turlington* (1981) decided that and MDR must be conducted by a trained and knowledgeable group, in other words the student’s IEP team and additional qualified personnel (Taylor, 2004). A psychologist can fill all of these roles. In Albemarle County (2012), for example, the school

psychologist not only attends interdisciplinary meetings but often facilitates them. Additionally, members of an MDR committee do not have to know the student personally and do not have to have served on the IEP committee (Fitzgerald v. Fairfax County Sch. Bd., 2008).

Including a professional psychologist on the committee who can consider the behavior objectively can serve many purposes. A school psychologist's presence and objectivity can help to quell the aforementioned fears parent(s)/guardian(s) often have toward school personnel who they typically view as opponents. An objective voice will aid in combating any attempts by committee members to include participants who will unquestionably agree with their decisions. Finally, the consensus decision required in a manifestation determination by the IDEA (2004) should be administered by a skilled and objective leader (Fink, Kosecoff, Chassin, & Brook, 1984).

CHAPTER 4: eBOOK

The eBook, entitled “Manifestation Determinations: An Interdisciplinary and User-Friendly Guide to Best-Practices” is intended to assist the members of a manifestation determination review (MDR) committee in preparing for the review. There is a great deal of information to consider when discussing the cause of a behavior, particularly the behavior of a student with a disability, and this eBook strives to organize the information and make resources easily accessible. Current guidance documents are vague and few in number. Based on the information gathered from the literature review, I have created a product that is practical, user-friendly, and interdisciplinary.

The intended audience is future and current MDR committee members. I have written the information at a level that all of the participants could understand with ease. I avoided jargon and clearly defined technical terms or paired them with non-technical terms.

Format

The eBook format allows for a more organized and user-friendly approach to the information covered. The format organizes the information into manageable blocks, but provides resources for further reading. It highlights the key points of each topic discussed, which can act as a springboard to continued learning beyond the eBook.

This eBook encourages readers to be self-sufficient learners and determine the topics they feel they should review. The hope is that the readers will read the six topics listed on the home page and navigate their way through the document from there. If a reader does not feel well-versed in a certain area, he or she can click the title on the main page and be taken to that section of the eBook. Each of the six sections has a one-page summary of the topic’s main points

followed by a page of embedded hyperlinks to websites and articles with more detailed information and/or information from the source.

Seeing as the intended audience is made up of busy parent(s)/guardian(s) and professionals, I made the eBook as time-efficient as possible. The summaries are brief but comprehensive and the resources I have gathered cover a wide range of subjects for further reading. Readers can briefly review the main points once as a means to prepare for an MDR or revisit the document frequently and read the information in detail until they feel competent. Seeing as the document allows for skipping around between the different sections, I included a glossary of terms and restated the full names of acronyms in each section.

Content

The goal of this eBook is to provide MDR committee members with all of the information and resources they will need in order to feel competent and confident in their contributions during the meeting. It can serve as a comprehensive checklist to guide their preparations for the MDR. I discussed an interdisciplinary mix of topics including the process of an MDR, MDR law, the nature of disabilities often encountered in an MDR, the most common evaluations used with students with disabilities, information on evidence-based practices, and tips on interdisciplinary communication.

A professional reading the eBook will likely be knowledgeable in some of the topics and feel the need to learn more about others. For example, a special education teacher may feel competent in the nature of disabilities and evidence-based practices, but take the time to read about the MDR process. A school psychologist may not need to review common evaluations given, and instead educate him/herself on interdisciplinary communication and MDR law. If all MDR committee members adequately prepare for the meeting using similar materials, all

members will enter on a more level playing field and have a better appreciation for what they can contribute.

Application

The information is based on federal regulations and practices, not on Virginia law specifically, as there is little variability between states regarding MDRs. The document is accessible electronically. The eBook can be used in a variety of educational settings, from undergraduate courses to continuing education or recertification classes, with audiences from a number of different fields.

CHAPTER 5: CONCLUSION

The purpose of this project was to create a product on best practices and the benefits of an interdisciplinary approach to manifestation determination reviews, or parent-professional meetings that take place to determine the cause of a behavior of a student with a disability that would usually result in suspension or expulsion. After a thorough literature review, it was revealed that rates of suspensions and expulsions are increasing in the public school system (Imich, 1994). Such disciplinary measures result in negative effects on the students and are generally ineffective in curbing an undesirable behavior (Zhang, Katsiyannia, & Herbst, 2004). Within this population of students experiencing changes in placement do to misbehavior, there is an overrepresentation of individuals with disabilities (Evenson, Justinger, Pelischek, Schultz, 2009; Krezmien, Leone, & Achilles, 2006). These rates suggest a prevention of the students' right to a free and appropriate education (Evenson et al., 2009; Zhang et al., 2004).

Manifestation determination reviews are a required safeguard under the Individuals with Disabilities Education Act (IDEA, 2004). The law provides clear guidelines regarding the timing and aftermath of the meetings, but vague information on the make-up of the committee and their duties during the review. Literature on current practices highlights the use of functional behavioral analysis (FBA) and positive behavior support (PBS) systems in the MDR process. Beyond challenges inherent to group decision-making, such as personal biases and balance of status and power theory, MDR-specific problems are often present in such meetings (Brodbeck, Kerschreiter, Mojzisch, Frey, & Schulz-Hardt, 2002; Knotek, 2013). The literature noted that committee members struggled with determining the cause of a difficult behavior and felt that they did not have enough information to do so (Walker, 2013). The vague language in MDR

guidelines, unequal participation by committee members, participants' varying views and expertise, and lack of a required consensus decision also hindered the MDR process.

The nature of MDR meetings lends itself to a more interdisciplinary approach, which may help combat the aforementioned challenges. Although interdisciplinarity has its equal share of benefits and challenges, the literature maintains that interdisciplinary committees are more effective when they have a shared goal, use a common language, employ strategic and holistic approaches, show respect and openness, and allow for open communication. The literature specifically recommends that MDR committee members encourage the involvement of the parent(s)/guardian(s) and general education teachers, ask specific and uniform questions when considering the behavior, improve MDR training for committee members, and employ evidence-based interventions. Finally, an MDR committee would do well to include a school psychologist in the meeting as a professional who is trained in the science of behavior, data analysis, behavioral interventions, school law, and family collaboration (NASP, 2015). School psychologists can also provide information on the nature of disabilities, the implications of evaluation results, and serve as an objective voice on the committee.

The final product of this project supports such an interdisciplinary approach to MDRs. The eBook entitled, "Manifestation Determinations: An Interdisciplinary and User-Friendly Guide to Best Practices" can serve as a preparation checklist for future and current MDR committee members. It allows for self-guided and timely learning by providing short passages on a variety of topics as well as many resources for further reading. The comprehensive topics and interactive format provide the readers with important information that will bolster their knowledge and prepare them to make meaningful contributions during an MDR meeting.

The eBook is applicable in a variety of educational settings and fields. Undergraduates, parents, and professionals alike would benefit from the information and resources provided in preparation for an MDR. It is written at a level at which a person from any discipline could understand and is based on federal, not state, regulations, so as to make the information more generalizable.

It is my hope that this interdisciplinary project and product support the bridging of the gap between education and psychology. As a student of both disciplines, I have often learned of information or methods from one discipline that would be applicable or easily integrated into existing knowledge or practices in the other. Research and techniques in both areas support the common goal of serving humanity. Establishing a feedback loop of dialogue and information sharing may serve to bridge the gap between these two disciplines that have a great deal to offer and learn from one another.

The techniques used to establish successful communication between the disciplines with regards to the narrow topic of MDRs can be generalized to other areas of education and psychology that would benefit from a more symbiotic relationship. If open communication is established, educators can learn more about the complexities of behavior management practices and evidence-based interventions. In turn, psychologists can more easily gather information regarding the generalizability and practical application of interventions in the classroom.

Additionally, this project can serve as a testament to interdisciplinary research and cross-professional dialogue beyond the fields of psychology and education. The distinctions between disciplines often found in the university setting are arbitrary outside of the campus. As Gass (1970) wrote, “The impact of knowledge on action...forces interaction between the disciplines and even generates new disciplines. The ‘inter-discipline’ of today is the ‘discipline’ of

tomorrow” (p. 9). The world is interdisciplinary, and all professionals should integrate practices and findings from other relevant areas in order to be as effective in their work as possible.

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