

Running Head: IMPLICATIONS OF EBD

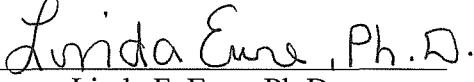
The Implications of Emotional/Behavioral Disorder in the Classroom

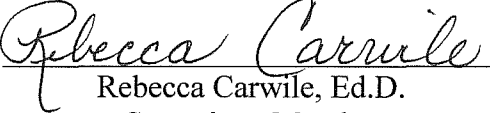
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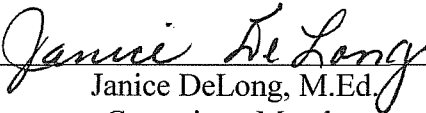
A Senior Thesis submitted in partial fulfillment  
of the requirements for graduation  
in the Honors Program  
Liberty University  
Spring 2003

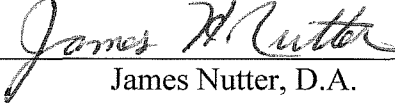
Acceptance of Senior Honors Thesis

This Senior Honors Thesis is accepted in partial fulfillment of the requirements for graduation in the Honors Program of Liberty University.

  
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Abstract

Strategies of classroom intervention for emotional/behavioral disordered (EBD) children were investigated. The definition of EBD is provided, in addition to background information concerning EBD, including manifestation of EBD, possible causes, racial and gender trends, and current levels of education achieved by EBD students. Through a review of literature, a number of intervention strategies were found to be effective, including behavior management systems, social skills instruction, modification of instruction and instructional materials, peer support, self-evaluation, and increased opportunity to respond. The collaborated information is intended to be used by educators in order to increase the EBD student's chance for academic success.

## The Implications of Emotional/Behavioral Disorder in the Classroom

### Background of Emotional/Behavioral Disorder

#### *Emotional/Behavioral Disorder Defined*

As with many disabilities, there is some level of ambiguity in the current definition of Emotional/Behavioral Disorder (EBD). There are other labels for the disorder, such as Behavioral Disordered, Emotionally & Behavioral Disordered, or Seriously Emotionally Disordered. The definition of SED (EBD) as proposed under the Individuals with Disabilities Education Act of 1997 includes five characteristics: an inability to learn which cannot be explained by intellectual, sensory, or health factors, an inability to build or sustain satisfactory relationships with peers and teachers, inappropriate types of behavior under normal circumstances, a general pervasive mood of unhappiness or depression, and a tendency to develop physical symptoms or fears associated with personal/school problems. According to the IDEA definition, in order to be classified as EBD, these characteristics need to be present over a “long period of time” and to a degree that markedly affects school performance. This definition excludes social maladjustment, but there are no specific criteria provided to define a socially maladjusted child (Lambros & Ward, 1998).

#### *Manifestation of EBD*

Emotional and behavioral disorders are manifested in the form of behavioral excesses or behavioral deficits. Behavioral excesses or externalizing behaviors are also referred to as undercontrolled behavior problems and are characterized by multiple instances of defiant, aggressive, disruptive, and noncompliant responses. Almost three-quarters of children with externalizing disorders pass through a predictable progression from less to more severe forms

of social maladjustment. These behaviors seem to be the focus of teachers, who view them as intolerable as a result of the challenging of their authority, the interference of instruction, disruption of classroom routines, and adverse affect on classmates (Masi & Favilla, 2000).

Behavioral deficits of EBD are referred to as internalizing behavior disorders or overcontrolled behaviors. These behaviors are characterized by inner-directed and covert actions. A child with an internalizing behavior disorder may be withdrawn, shy, depressed, and/or have dysthymia and other emotional or personality disorders. Just as externalizing disorders, these disorders are predictive of social adjustment difficulties and psychopathology (Masi & Favilla, 2000). Internalizing behaviors often occur concomitant to impaired cognitive functioning, a lack of social competence and acceptance, language deficits, limited problem-solving strategies, and eventually result in nonattendance at school (Quinn & McDougal, 1998). Due to the nature of internalizing behaviors, they do not often come to the attention of teachers or other authorities. In cases where the problems are identified, they are overlooked because they are not seen as difficulties. This mistake of nonintervention must be avoided. If internalizing behaviors are not treated, the consequences carry the same seriousness as untreated externalizing behavior disorders (Lambros & Ward, 1998).

### *Causes*

Research does not indicate a single cause of EBD but a number of theories and conceptual models have been established in an attempt to explain the problems of EBD children. These possible causes can be categorized as either biological or environmental.

The biological category includes brain disorders, genetics, and temperament.

Individuals suffering from brain disorders generally have emotional or behavioral problems, although not many children with EBD are actually suffering from a brain disorder or injury (Heward, 2003).

Some forms of EBD have links to genetics, with the greatest amount of research and support for a genetic link factor between schizophrenia and EBD. A study conducted by Gottesman (1991) as cited by Heward (2003) indicates that the closer the familial relation to an individual suffering from schizophrenia, the greater the probability of displaying characteristics of EBD that cannot be explained solely by environmental factors.

A person's temperament is the way in which he generally responds to situations and can be classified as either easygoing or difficult. Children who display an easygoing temperament may be less likely to have behavior problems in adolescence and beyond (Caspi, Henry, McGee, Moffitt, & Silva, 1995). However, not all research supports the theory that temperament is innate.

Environmental factors believed to influence the likelihood of developing EBD include "(1) an adverse early rearing environment, (2) an aggressive pattern of behavior displayed when entering school, and (3) social rejection by peers" (Heward, 2003, p. 294). The home, the community, and the school are the three settings in which the undesirable events occur. Much research has indicated that the parent-child relationship is critical in determining the way that a child learns to behave. Children with EBD most often come from homes in which parents are harsh and inconsistent disciplinarians, manage behavior with excessive punishment, do not spend much prosocial time with their children, do not monitor

children's whereabouts or activities, and do not show much affection (McEvoy & Welker, 2000).

The community has a further negative effect on EBD children due to the reinforcement of antisocial behavior through association with peers. The activities of peers that contribute to antisocial behavior include gang relations, drug/alcohol abuse, and deviant sexual behavior (Biglan, 1995).

Because of the amount of time that children spend in the classroom school is also an influential factor to EBD children. Specific schooling practices that are suspected of contributing to EBD include "ineffective instruction, unclear rules and expectations for appropriate behavior, inconsistent and punitive discipline practices, infrequent teacher praise and approval for academic and social behavior, and failure to individualize instruction to accommodate diverse learners" (Heward, 2003, p. 296). Teachers, peers, and the lack of support and discipline are all possible environmental causes.

### *Race and Gender*

Although EBD affects both male and females of all races, those more often labeled and served as EBD are either male and/or African American. Hendrickson, Smith, and Frank (1998) found that there are a significantly greater number of males than females in restrictive programs for students with severe behavioral disorders. Sutherland, Wehby, and Yoder (2002) found only thirty-three female students as opposed to 183 male students in 20 participating self-contained classrooms. African-Americans made up the majority of students in both studies.

*Education Levels of EBD Students*

Emotional and Behavioral Disorders strongly affect the academic performance of children who suffer from the disorders. Gunter, Countinho, and Cade (2002) suggest that: Children with EBD are often regarded as more difficult to teach than students with other kinds of problems and are more likely to be (a) mis- or underidentified, (b) recommended for exclusion from general education settings and (c) found to attain marginal or unsatisfactory educational outcomes. (p. 126)

Students with EBD have the lowest grade-point averages of students in all disability categories. Almost one-half of students characterized as EBD have GPA's below 1.75 and have failed at least one course in the most recent school year. A majority of EBD students fail their yearly grade-level competency examinations. Perhaps contributing to the low achievement level is the rate of absenteeism, which is higher than students of any other disability, at an average of 18 days (yearly). Students with EBD also have lower rates of graduation than students in any other disability category. The dropout rate is almost double that of general education students (Quinn & McDougal, 1998; Sutherland, 2001).

*Life Beyond School*

The problems of students with EBD continue in life beyond school and graduation. Not many of the EBD students who graduate from high school attend any form of post-secondary education. Rates of unemployment for EBD graduates range from 25% to 52%. A significant number of students with EBD have been arrested at least once within two years of graduation (Sutherland, 2001).



*The Challenge of Educating Emotional/Behavioral Disordered Children*

Children with EBD exhibit behaviors that make the process of education quite difficult. The majority of these children enter schools devoid of the skills, interpersonal behavior, and attitudes necessary to satisfactorily participate in the classroom process (Sutherland, 2001). Social skill deficits include peer relationship problems, aggression, and oppositionality (Sutherland et al., 2002). Other social problems, which are often associated with language problems, include withdrawal, depression, and antisocial behavior (Hendrickson et al., 1998). The combination of social and academic difficulty (noted earlier) results in classroom problems such as disruptive and off-task behavior, which affect not only the EBD student, but other students and the teacher as well (Sutherland et al., 2002; Gunter et al., 2002; Kern, Delaney, Clarke, Dunlap & Childs, 2001).

Rationale

Emotional and behavioral disorder is a disorder that can severely affect the daily processes of a child and has serious long-term effects. Each teacher in the school system should have enough knowledge of the disorder and how to work with the disorder to give children who suffer from EBD the same chance for success that other students have. Students with EBD can be taught effectively, even in the general education setting. Research is beginning to provide possible methods of prevention and intervention for these children. With the proper application of these methods, children with EBD have a greater possibility of successfully completing high school and participating in a successful life beyond high school (Lane, Gresham, & O'Shaughnessy, 2002; Sutherland, 2001). It is the responsibility of

educators to make sure they are prepared to deal with the implications of EBD for the processes of the classroom.

### Suggestions Concerning Classroom Intervention

#### *IDEA 97*

Although provided with federal guidelines for educating students with EBD, many, and possibly the majority, of educational institutions do not follow the guidelines for legally suggested intervention methods. Since the early 1970s there has been a push towards educating all students, especially students with disabilities, in the least restrictive environment (LRE). This push was federally mandated and has since been supported by case law such as *Oberti v. Clemons* (1992) and *Sacramento City Unified School District v. Rachel Holland* (1994) (Hendrickson et al., 1998). The least restrictive environment is defined as the setting in which a student can receive an appropriate education (equal to that of the peer age group). In most cases, the LRE is intended to be the general education classroom, where efforts should be made to provide supplementary aides and services before removing the disabled student (Heward, 2003). The reauthorization of the Individuals with Disabilities Education Act Amendments of 1997 (P.L. 105-17) (IDEA 97) made some reformations to and expanded upon previous IDEA concepts, including LRE. For all legal purposes, IDEA 97 took effect in July 1998. However, it failed to take full effect in many school districts. IDEA 97 raised the bar as to the level of training of educators and subsequent teacher competency/qualification expectations. Unfortunately, these training and competency expectations often are not met. The shortage of teachers in the United States has carried over into the field of special education as well and is even more concentrated in populations of

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teachers willing to educate students with EBD. Gunter et al. (2002) reports, “approximately 57% of teachers of students with EBD are not certified” (p. 133). Obviously this shortage of qualified teachers is not conducive to the educating of students with EBD and does not allow for proper implementation of LRE. Without properly prepared teachers, teachers with the knowledge and skills to effectively teach EBD students, these students will not be included in the general education classroom. The alternative education settings provided for by IDEA 97 are more restrictive classrooms or segregated schools which are intended for students who commit serious transgressions and, who, if left in their current education placement would be substantially likely to injure themselves or others (Hendrickson et al., 1998). Students who do not fit these criteria are placed in these segregated settings due to the lack of properly trained general or special education teachers.

According to IDEA 97, as reported by Heward (2003) any alternative education placements are to be determined by staffing teams and should be selected to allow for the LRE. Placements should also allow students to receive services and modifications described in the students current Individualized Education Program (IEP). Members of the staffing team could also be referred to as members of the IEP team. IDEA 97 specifically states who must be included on the team: the parents of the child, at least one general education teacher, at least one special education teacher, a representative of the local education agency, and an individual who can interpret the instructional implications of the evaluation results. Also, at the discretion of the parents or the school, other individuals who have knowledge or expertise regarding the child can be included. An important member, often overlooked, is the student himself (if over 14 years of age, or if invited). IDEA 97 also provides seven components that

must be included in the student's IEP: "a statement of the child's present levels of educational performance...measurable annual goals including benchmarks or short-term objectives...special education and related services and supplementary aids and services to be provided to the child..." (p. 60) an explanation of the extent to which the child will not participate with nondisabled children in regular classes and activities, individual modifications in assessments of students achievement (state and local-wide assessment); the projected date for the beginning of the services, as well as the anticipated frequency, location, and duration of services; and finally, how the child's progress toward annual goals will be measured and reported to parents regularly.

Contrary to these guidelines, neither parents nor students are usually involved (Lane et al., 2002). For any intervention methods to be effective, they should first and foremost follow these legal guidelines and rights for students with EBD. The following interventions should be used concurrently with legal guidelines and with each other.

### *Behavioral Management*

One of the most important intervention strategies for students with EBD is a behavior management system. Various systems have been shown to work; many of these share similar components. Individual students should have behavioral (and social) goals specified in their IEPs, but classroom teachers should have a class-wide system in place as well. Effective behavior management principles are linked to academic and behavioral gains. Behavior management procedures, routines for classroom procedures, effective instructional delivery, and structures for a variety of instructional activities all affect the behavior of the class (Gunter et al., 2002). Therefore, to the benefit of the teacher and the students, a consistent

system assists in the effective management of the class. To provide consistency, a behavioral management system should consist of multiple components. First, there should be a list of four or five positively stated rules. The rules need to be stated in terms of observable behavior, and should be posted where all class members can see them.

Secondly, there should be a hierarchal reprimand/consequence system. This system can be integrated into the statement of the rules, but to do so makes it more difficult to state the rules positively. Even if not posted with the rules, it is helpful to post the levels of consequence for inappropriate behaviors for easy reference and reminder. An example hierarchy is: nonverbal warning, verbal warning, loss of recess/center time, referral, call-home, and parent conference.

Thirdly, a points or token system can be implemented. This positively reinforces individual students for natural appropriate interactions of instruction, such as task completion. Tokens can be any items, such as tickets, plastic chips, or play money. The items can be exchanged for tangible items such as food, markers, play jewelry, or books. However, it can be very easy to use token systems ineffectively; thereby disrupting an otherwise carefully put together management system. It is important to exercise consistency and to follow the stated rule hierarchy. Also helpful is recording in point form any tokens awarded and exchanged, as well as informing students that the teacher knows how many tokens each student should have (to discourage negative behaviors, such as stealing). Class-wide reinforcement systems similar to the token system may be used in conjunction with the token system, such as marble jars or desk charts, where a class or group accumulation results in an award. The teacher may choose the award, or allow students to vote on the award.

Example class awards include free days or class parties (Gunter et al., 2002; Kamps, Kravits, Stolze, & Swaggart, 1999).

A fourth behavioral management system component is consistent communication with parents or guardians. Such communication can be attempted through a daily or weekly folder in which notes and student work are sent home for parental review and returned to teacher with comments and/or a signature. Teachers can also send home rewards or notices to inform parents of the achievements or problems of the child (Kamps et al., 1999). Teachers should incorporate these components of behavioral management systems in order to clearly inform students of what behaviors are expected and accepted in the classroom.

Classrooms are often hard to manage during transitional periods or times that require students to be out of their seats. Students with Emotional/Behavioral Disorder find it difficult to focus at these times and may respond in a disruptive or inappropriate manner. The classroom teacher should have a set procedure for everything that is done in the classroom, and should provide a copy of these procedures for guests to the classroom, including substitute teachers. The consistency of set procedures helps the EBD child know what to do and what is acceptable to do in various situations or times of need. Times of need for a student can include needing to ask the teacher a question when she is busy with another student or needing to sharpen a pencil. A study by Brophy (1993) (as cited by Gunter et al., 2002) showed that students were more likely to be involved in lessons and academic tasks in classrooms in which teachers told students of procedures, modeled the procedures, and answered questions the students had concerning the procedures.

*Social Skills Instruction*

A portion of the curriculum for students with EBD should include training in learning to control antisocial behavior. It is important that social skill interventions not outweigh academic instruction, because that puts EBD students at an even larger disadvantage for academic achievement and can cause them to fall even further behind peers, exacerbating antisocial behavior (Lane et al, 2002; Hendrickson et al., 1998). In order to avoid overcompensating for social skill deficits at the cost of academic gains, the types of social skill deficit should be considered in planning and implementing social skill training for individual students (Quinn, Kavale, Mathur, Rutherford, & Forness, 1999). Key skills selected for intervention are usually those identified as classroom survival skills, skills that promote positive peer interactions, and those that provide problem-solving strategies. Classroom survival skills include following directions, task completion, making choices, and accepting consequences. Peer skills include joining a group, giving compliments, and appropriate play. Problem-solving strategies include negotiation, ignoring inappropriate behaviors of peers, and anger management (Kamps et al., 1999). Quinn et al. (1999) report that steps of social skill training often include:

Selecting or prioritizing critical social skills that need to be improved; demonstrating, explaining, or modeling these skills; having the child practice these skills while being coached; providing feedback and reinforcement during practice; [and] identifying a variety of social situations in which the skill might be useful. (p. 55)

These steps can be effective, but not all students need to spend precious school time working through each step. For example, a student who has acquired the skill already but has

difficulty implementing the skill does not need to begin a lesson with an explanation of the skill or even a demonstration of the skill. Instead, instruction for this student should focus on guided practice (Quinn et al., 1999). Examples of social skills curricula for elementary students include *Taking Part: Introducing Social Skills to Children* published by the American Guidance Service, *ACCEPTS: A Curriculum for Children's Effective Peer and Teacher Skills* developed by Walker et al. in 1983, and *Working Together* also developed by the American Guidance Service (Heward, 2003, p. 303).

#### *Functional Behavioral Assessment*

One method of discerning which levels and areas of social skills instruction are appropriate for individuals is termed functional behavioral assessment (FBA). FBA is “a systematic process of gathering information to help IEP teams understand why a student may be engaging in a challenging behavior” (Heward, 2003, p. 301). FBA helps IEP teams through the process of assessing and linking the environmental conditions to behaviors that students display in order to predict and thereby control the problem behavior. Either direct or indirect methods of assessments can be used. Indirect assessment does not take place at the time and place of the actual occurrence of the behavior whereas direct assessment does. Examples of indirect assessment are school records, interviews with school staff and parents, and ratings of behavior. Direct assessment methods take place in natural settings such as the classroom, the home, and the playground (Lane et al. 2002). Once assessments are completed, the gathered information is used to create hypotheses as to what functions particular actions of the student serves. That is, the information allows for a little insight into why students act as they do, or what the student is intending to accomplish through certain



behaviors. Main behavioral functions of students are to receive a desired outcome, such as teacher attention, and to avoid something unwanted, such as schoolwork. The hypotheses of FBAs serve as the basis for intervention plans to reduce the negative behaviors and to increase positive behaviors (Heward, 2003; Lane et al., 2002).

A sub-practice of functional behavioral assessment is functional analysis. Functional analysis takes a step beyond observation of a child in his natural environment to manipulating antecedent or consequent events surrounding the child's target behavior in order to provoke the problem behavior. The purpose of functional analysis is to provide a verification process. Functional analysis should not be performed by the classroom teacher, especially without consent of the parents or guardians of the child (Heward, 2003; Gibb & Wilder, 2002).

Functional behavioral assessment does not need to focus only on social skill or behavioral intervention for students. FBA can also provide identification of preferences for specific types of academic activities and tasks, improving the academic performance of students (Gibb & Wilder, 2002).

#### *Modifications / Strengths-Based Instruction*

Information gained from performing functional behavioral assessments should be implemented into the curriculum, in the form of modifications of instruction and/or material adaptations. As cited in Gunter, Denny and Venn (2000), Deschenes, Ebeling, and Sprague (1994) identified nine types of adaptations that can be effective in improving academic performance of EBD students. Those modification suggestions are: "size, time, level of

support, input, difficulty, output, participation, alternative curricular goals, and substitute curriculum” (p. 118).

Size adaptations could be reductions in the number of items that a student is required to learn or complete in a given work period or could mean dividing worksheets into smaller, more manageable strips of problems. A strategy discovered by Dunlap et al. (1993) (as cited in Gunter et al., 2002) supports this suggestion. Dunlap et al. found that providing students with one work sheet at a time was more effective than distributing packets of worksheets.

Deschenes et al. suggests that time adaptations can take two forms. They propose that an individual pace may need to be set for the EBD student as a result of the normal lesson moving to quickly or slowly. They also suggest that time adaptations can take the form of allowing students more time for task completion. However, there is substantial research to suggest that too slow of a pace or too much time provided to complete tasks may be more harmful to a student’s academic and behavioral performance (Shores & Wehby, 1999; Sutherland et al., 2000; Sutherland et al., 2002).

Levels of support modifications include some of the components of education for children with EBD that have already been discussed or will be discussed shortly. Those components include the social and personal assistance techniques such as peer tutoring and co-operative learning activities. Other support modifications include graphic organizers or guided notes or physical supports such as private study carrels, assigned seating placements, transition procedures, and posted rules (Gunter et al., 2000). In a particular study conducted by Gunter et al. (2002) it was found that work not requiring guided practice was 100% correct when completed in a partitioned study area.

Modifications concerning the vehicle of instruction are known as input modifications. An important aspect of input (and output) modification is providing the student with choices. Input modifications can include computer-assisted instruction, strategy training, or may concern the stimuli used in instruction such as the examples used by teachers. A teacher may choose to use examples concerning things of interest to the students such as video games or other hobbies.

Research on output modification has indicated that students display more on-task and less disruptive behavior when given a choice for an assignment or how to respond to instruction (Gunter et al., 2000; Kern et al., 2001). For example, many EBD students demonstrate problem behaviors when asked to complete paper and pencil tasks. One easy way to avoid the problem behavior, but still meet learning objectives, is to allow the student to use a computer or typewriter for the task. Other successful modifications that don't interfere with original objectives include substituting oral for written responses (or vice versa), or using response cards. Another goal of output modification is to increase the number of responses that a student makes during a lesson (Gunter et al., 2000). A study by Gardner, Heward, and Grossi (1994) (as cited in Heward, 2003) found three important results. They observed that each student responded to teacher-posed questions an average of 20.3 more times during a thirty-minute lesson using response cards (as opposed to responses based on the teacher calling on individuals). Gardner et al. calculated that each student would make an additional 3,700 academic responses during the school year if some form of response card were used for thirty minutes of instruction per day. This insight is significant for EBD students who may often be the students in the class who avoid raising their hands to

answer questions or who are ignored by teachers because their responses are frequently incorrect. It also provides the active student participation that many students with EBD need but do not normally receive during group instruction. The second significant finding is that all students who were members of the class scored better on quizzes and tests over the two-week period using response cards than over a two-week period utilizing the traditional hand-raising techniques. The third finding of interest was that all but one student preferred response cards to raising their hands to be called on. Response cards can be preprinted or write-on versions (Heward, 2003).

Difficulty of a task, alternative curricular goals, and substitute curriculum should not be altered unless addressed by the IEP. Altering any of these things can unnecessarily hold students behind academically.

Strongly related to functional behavioral assessment and subsequent curricular modifications is the concept of strengths-based practice. This is the practice of focusing on strengths to shift attention to child proficiencies and assets. Some strengths-based practices have centered on family strengths but it is only recently that research has been conducted on individual child strengths and the use of assessment on the child-strengths in treatment planning and level of care decision-making for EBD children (Oswald, Cohen, Best, Jenson, & Lyons, 2001).

#### *Opportunity to Respond / Teacher Praise*

Negative reinforcement is a practice that has long been used in the classroom, especially classrooms containing EBD students. A cycle can be formed to further complicate the practice, which follows the pattern of (a) student disruptive behavior (b) negative

reinforcement for student through removal of the academic task demand (c) removal of disruptive behavior and (d) negative reinforcement for the teacher. This cycle contributes to the deficit in academics of EBD students. More effective behavior practices can keep this cycle from occurring. Research indicates that increasing the rate at which students are given the opportunity to respond to academic requests also increases their on-task behavior and decreases disruptive behavior. As cited by Sutherland (2001) the Council for Exceptional Children provides guidelines for teachers of students with high-incidence disabilities regarding opportunities to respond (OTR) to academic requests. According to the Council, teachers should elicit 4 to 6 responses per minute from students during instruction from new material and should elicit 8-12 responses per minute during practice or drill work. Following this response pattern makes the teacher more effective by allowing him to adjust the lesson based on student feedback, to increase the quality of instruction, and to increase the attentiveness of students. In a study by Carnine (1976) (as cited in Sutherland 2001) faster presentation rates resulted in higher percentages of correct responses than a slow-presentation rate. This study also showed that increased OTR resulted in lower rates of off-task behavior and higher rates of participation. In fact, percentages of off-task behaviors were significantly higher during slower presentation (62% as compared to 7% during faster presentation).

This data has two implications concerning the cycle of negative response patterns. One is that the need for terminating unwanted behavior is almost eliminated. Therefore, there will no longer be negative reinforcement for the students in avoiding classroom tasks.

Two, the teacher-student relationship and subsequent rate of future task engagement are positively increased. These increased OTR allow more of an opportunity for praise.

Despite this possibility for positive instead of negative teacher-student relationships, teachers continue to use low rates of praise in their classrooms. This is found to be especially true in classrooms only for students with EBD. Praise rates in EBD classrooms have been found to be as low as one praise statement per hour. Also, few statements are behavior specific. Behavior specific praises allow the teacher to reinforce a particular behavior of the student. A study conducted by Sutherland et al. (2000) indicates that percentages of on-task intervals increased when the rate of behavior specific praise was increased and decreased when the rate was decreased. An example of a behavior specific praise directed toward a child who has just appropriately raised his hand to answer the teacher's question: "Marcus, I really like the way that you are quietly raising your hand."

It is suggested that teachers monitor their rates of praise and their use of OTR. This can easily be done through feedback from peers or through self-evaluation. Video-taped instruction is a very effective way for teachers to monitor their use of effective teaching strategies. It is important to the education of students with EBD that teachers be willing to evaluate themselves and to receive feedback from colleagues. Obviously, this will require extra effort on the part of the classroom teacher (Sutherland et al., 2001).

### *Peer Support*

The use of the peer group is an important concept when providing intervention for students with EBD. A specific strategy for using the peer group should be designed. The majority of children with EBD have not been a part of a properly functioning social group

and will not necessarily pick up on the characteristics of a new, properly functioning group. Some strategies for utilizing the peer group to decrease inappropriate behavior include peer monitoring, positive peer reporting, peer tutoring, and peer confrontation. In peer monitoring, one student is taught to observe and record the behavior of a specific peer and provide feedback to that student. Peer reporting is a way of discouraging negative comments made about other students. Instead of reinforcing students for making negative comments, such as comments known as “tattling,” students are taught, encouraged, and reinforced for reporting each others’ positive behaviors. Peer tutoring can take the form of academic or social skill tutoring between students. The intent is to improve both academic and social skills no matter which of the two is the subject of the tutoring. Teachers should provide students with specific tasks for each tutoring session and should allow the students to exchange teacher and learner roles (Shapiro, Miller, Sawka, Gardill, & Handler, 1999). In peer confrontation, students are trained to confront one another when they feel an inappropriate behavior has occurred or may occur. The confrontation includes identifying the behavior, explaining why it is a problem, and suggesting or even modeling appropriate alternative responses (Heward, 2003).

A method of creating group cohesiveness in a class for children with EBD is called group process. The group process can take many forms but most of the different forms include group meetings and group-oriented contingencies. The group meetings are held twice a day. The teacher and students meet in the morning to review the daily schedule, to state specific and individual behavioral goals for the day, to provide support and suggestions to one another for meeting those goals, and to establish a daily group goal. Another meeting

is held at the end of the day to discuss how well the goals of the day were met and to once again give the students opportunity to give and receive positive peer comments. Group-oriented contingencies are the rewards or privileges awarded to the group for meeting certain requirements (Heward, 2003).

### *Self-Management / Self-Evaluation*

Self-management and self-evaluation can be extremely powerful tools to the student with EBD. It can provide them with the opportunity to learn responsibility and help them to realize the importance of attitude and determination. Students can conduct self-management through self-monitoring. This is a simple process of observing and recording the occurrence or nonoccurrence of one's own behavior. Self-evaluation consists of comparing one's own behavior against a standard or a goal. An impressively effective technique of self-management was developed by Rhode, Morgan, and Young (1983) (as cited by Heward, 2003). In this technique, the teacher begins by rating the students for classroom behavior and academic work on a scale from 5 to 0. At some teacher designated point, the students begin to evaluate their own behavior using the same scale. Students then compare their ratings to that of the teacher. If the students rating is within one point of the teacher's the student earns the number of points he has given himself. If the ratings are the same, the student gets the points plus a bonus point. Students are encouraged to continue rating themselves, but the teacher gradually stops rating the students. Standards concerning accumulation of points are set at the beginning stages of implementation. Students exchange points at pre-set time periods for a reward. Analyses or self-management interventions conducted by Shapiro et al. (1999) indicate that the method is effective based on feedback and attention given to students



by people who are genuinely concerned with the children's success. The same study also concluded that this method will not be effective if students do not perceive reinforcers to be motivating or if students do not accept responsibility for their behavior.

### *Continuing Problems with Intervention*

A number of factors continue to present a challenge to the successful implementation of intervention strategies. Probably the biggest challenge is the lack of properly trained teachers or teachers who have been trained who fail to properly implement the strategies. Shapiro et al. (1999) conducted a study in which they provided an intensive inservice program with the goal of teaching school personnel how to design and then implement specific intervention strategies. Interestingly, the majority of personnel teams did not put their selected intervention strategies into place effectively. The teams gave a variety of reasons as to why they did not implement the programs, some of those reasons being attributed to uncertainty or lack of communication among personnel.

Heward (2003) cites one of the greatest challenges of intervention to be creating an environment in which students learn both academic and social skills at acceptable rates. There is a lot of debate about whether or not this environment could be a general education classroom for every student with EBD, with an equal frequency in research supporting each side of the debate. However, it may be that educators are not putting forth enough effort to include EBD students in the general education classroom. A study done by Hendrickson et al. (1998) indicates that 49% of schools did not provide supplementary services for EBD students and only 4% of regular school programs provided an explanation as to why

supplementary services could not be provided in the LRE. Regardless of the location, students with EBD should receive instruction in both social and academic areas.

One other concern related to Heward's environmental concern is the issue of curricular modification. Many educators are concerned that altering the curriculum of EBD students in order to retain their attention, increase student response, or to focus on social skills in reality creates a "curriculum of noninstruction." They believe that although important, there is too much emphasis placed on socio-behavioral matters and not enough of the core curriculum of reading, mathematics, social studies, and science. They feel that this emphasis may harm the student socially, creating yet another barrier between the EBD students and the average general education student (Lane et al., 2002).

Teachers may also avoid curricular modification based on their values. For instance, although a given curricular modification has been proven to improve Johnny's behavior and successful completion of tasks, Mrs. Gray feels that it undermines the importance of handwriting and she therefore chooses not to implement the modification. In light of this information, it may be helpful if the teacher were to be given a number of modification possibilities to choose from (Kern et al., 2001).

Other challenges to educating EBD students that have yet to be accommodated for include high rates of absenteeism or illness, the disadvantage that low socio-economic students face (Sutherland et al., 2001), proper prevention techniques (Lane et al., 2002), and communication between educators (Gunter et al., 2002).

### Conclusion

There is a great deal of current research providing support for the benefits of intervention strategies, but no progress can be made with EBD children if teachers do not utilize the research. All teachers, of general education as well as special education, can modify behavior management systems to include more positive and observable components, including positive reinforcement. Consistent application of such a system provides the strong base necessary in the classroom containing EBD students. Communication with parents or guardians is also integral to the education of an EBD student due to the influence of home life on the behavior of an EBD child. After a behavior management system is in place, the focus can shift to instruction. Academic and social skills instruction are of equal importance for the EBD student. Students need the social skills instruction to teach and reemphasize the prosocial behavior necessary for inclusion in the classroom. Academic instruction is important to keep EBD students from falling further behind peers. A functional behavioral assessment is not necessary in order to teach EBD children, but may help the student achieve overall by identifying the particular needs of individuals, thus making instruction more efficient and causing the EBD child to be more "on task." Including students in the decision making process for possible modifications is also beneficial to the student, resulting in more on-task behavior and less disruptive or other antisocial behavior. If the EBD student functions acceptably under these intervention strategies, another strategy to incorporate is the use of the peer group for support. This can strengthen general social ties by inclusion into a properly functioning social group as well as provide healthy academic ties among the EBD student and the rest of the class. One method that has been effective in

helping teachers implement these strategies consistently is self-evaluation. With self-evaluation, teachers can hold themselves accountable for what goes wrong in the classroom. If teachers are merely willing to implement these strategies, they can greatly help a child with EBD succeed.

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