Nurturing Potential: An Equity-Minded Approach to Functional Behavioral Assessment

NURTURING POTENTIAL: AN EQUITY-MINDED APPROACH TO FUNCTIONAL BEHAVIORAL ASSESSMENT

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CONTENTS

ABOUT THE BOOK

"Behavior is the mirror in which everyone shows their image." – Johann Wolfgang con Goethe

"Understanding **why** a kid is challenging is the first and **most important** part of helping them." – Dr. Ross Greene

Nurturing Potential: An Equity-Minded Approach to Functional Behavioral Assessment

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1.

UNDERSTANDING BEHAVIOR

Introduction

In this chapter, we will explore the essential principles of behavior and how they apply to better understand and address challenging behaviors in individuals. According to Wehman and Kregel (2020), all behavior serves a communicative function, and challenging behavior serves a specific purpose in a person's life. To effectively address challenging behaviors, we must assess the function of the behavior and replace it with a functional communication or social skill that will accomplish the same outcome for the individual.

To achieve this, we will delve into the fundamental principles of behavior through the lens of Applied Behavior Analysis (ABA). ABA is a scientific discipline that seeks to understand behavior and develop effective strategies to modify it. By understanding the basic principles of behavior, we can determine the function of behavior and develop function-based intervention plans to address the underlying causes of challenging behavior.

When discussing behavior, it is important to understand typical developmental milestones, as well as the impacts of factors such as culture and trauma. While this chapter does not cover typical developmental milestones, a useful resource for information in this area is Understood.org. This website provides tip sheets and resource pages on developmental milestones, which can be referred to as needed.

This chapter is a foundation for the rest of the book, focusing on using ABA principles to support individuals with social, emotional, and behavioral challenges. This chapter will provide the tools and knowledge necessary to understand challenging behavior better and develop effective intervention plans.

Applied Behavior Analysis (ABA)

According to the Child Mind Institute (2022), ABA is a therapy that helps students learn skills and lessen problematic behavior. There are several different forms of ABA. All are based on the idea that reinforcing certain behaviors will lead to individuals repeating those behaviors. The science of ABA has led to the development of evidence-based strategies derived from scientifically verified laws of behavior. ABA strategies provide systemic methods to identify the triggers (i.e., setting events and antecedents) of challenging behavior and the consequences that are making the behavior worthwhile to the individual and to aid the team in developing a meaningful intervention plan to reduce challenging behaviors while increasing more adaptive

behavior. Through ABA strategies, caregivers and educators are more likely to implement interventions that prompt, instruct, and reinforce socially appropriate behavior that serves the same function as the challenging behavior. This decreases the challenging behavior and eliminates the need for an individual to engage in this behavior.

Despite studies showing that ABA is effective, some families of students with autism, particularly their advocates, do not support its use. The ABA controversy involves three criticisms. One criticism of ABA is that the earliest version used punishments and rewards. Another criticism is that ABA focuses on eliminating behaviors instead of building skills. Finally, some advocates say that ABA tries to make those with autism fit neurotypical standards. Educators and practitioners who use the ABA approach share that they do not try to change how neurodiverse students think and feel. Instead, the goal is to help students build on their strengths, nurture independence, and participate in society as much as possible. In the remainder of this chapter, we use an ABA lens as the foundation for understanding behavior and supporting students in behavioral change (Child Mind Institute, 2024).

Pause & View 1

This video (0:42) provides information about the science behind ABA.

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://wisconsin.pressbooks.pub/nurturingpotential/?p=499#oembed-1

YouTube Video: "What is ABA? #Shorts" by @masterabatogether

Key Behavioral Principles

By analyzing the setting events, antecedents, and consequences associated with the challenging behavior, we can develop a testable hypothesis regarding the function of the behavior. This primary law of behavior is the core of FBA and the development of behavior intervention strategies used to teach new behaviors and decrease problem behaviors. It is also the foundation of ABA principles. ABA principles embedded within a PBIS approach ensure that an individual's behavioral goals and support plan will not only reduce the use of challenging behavior, but also lead to the development of a socially appropriate replacement behavior that will accomplish the same function the problem behavior served. To teach adaptive instead of challenging behavior, we must first understand the antecedents, setting events, and consequences that influence behavior. This is

often called the ABCs of behavior – antecedents, behaviors, and consequences (Child Mind Institute, 2024; Wehman & Kregel; 2020).

Antecedents & Setting Events

When examining the environmental variables that maintain behavior, it is necessary to look at what happens before the behavior occurs—the trigger. There are two types of triggers: antecedents and setting events. Both are important to consider when completing an FBA because they can give clues regarding the function of behavior. Antecedents and setting events are necessary when completing an FBA because they can give clues regarding the function of behavior. Antecedents act like a fast trigger, where problem behavior follows immediately after it occurs (Child Mind Institute, 2024; Wehman & Kregel, 2020).

Sometimes antecedents might be present, but the behavior does not always occur. Following the logic of applied behavior analysis, this sometimes can be caused by other conditions that are present and make the consequence desirable at one time or another. This is called a setting event. These act like slow triggers, where the problem behavior does not immediately occur, but the possibility for challenging behavior is heightened. Setting events temporarily alters the value of the consequence that follows the behavior. They may set the stage for an antecedent to elicit challenging behavior, or at the same time, the absence might lead to the challenging behavior not happening. Setting events include experiences like lack of sleep, sickness, changes in schedule, hunger, mood, trauma impacts, mental health, discrimination, microaggressions, or other similar temporary or long-term states (Child Mind Institute, 2024; Wehman & Kregel, 2020). We will cover setting events in more detail later in this chapter.

The following scenario illustrates the interplay of antecedents and setting events. Data about Thomas's behavior was collected because, on numerous occasions, he was reported hitting his peers. After observing Thomas on multiple occasions in his first-grade classroom, it was determined that the antecedent was Sarah taking a toy from Thomas immediately before Thomas hit Sarah. The antecedent, the fast trigger, is the toy being taken away. It was also noticed through systematic observation that Thomas only hits Sarah when she takes his toy from him on days he arrives late to school because he overslept, which also causes him to miss breakfast. So, perhaps a schedule change and hunger are slow triggers or setting events. The list below provides additional examples of setting events (e.g., slow trigger).

- Hungry
- Tired
- Family turmoil
- Homeless
- Grief
- Mental health
- Medication

- A bus ride to school
- Hygiene
- Socioeconomic concerns
- Family values
- Legal concerns
- Lack of support
- Microaggressions
- Friendship issues

Behavior

The definition of behavior, according to ABA, is "everything that people do." Further, this is technically interpreted as any movement that can be observed and changes the environment or person. According to ABA, behavior does not include intentions, labels, emotions, states, diagnoses, or thoughts. Therefore, the following are not, strictly speaking, behavior:

- Hurting others (implies an intention to harm)
- Being mean (is a label)
- Being angry (is an emotion)
- Being lazy (is a state of being)
- Being obsessive (is a diagnosis)
- Attention-seeking (is a supposition that behavior exists to address a person's thoughts)

Instead, in ABA, behaviors are described based solely on what others see and hear. ABA avoids using value statements about the impact of the behavior (Child Mind Institute, 2024; Wehman & Kregel, 2020). Refer to Table 1.1 for correct and incorrect examples of behavioral descriptions. Based on Table 1.1, Thomas' behavior could be categorized as aggression because he hit another individual's (Sarah's) body.

Table 1.1 "Behavioral Descriptions – Correct and Incorrect" by Wehman & Kregel (2020)

Name of Behavior	Incorrect Behavioral Definitions	Correct Behavioral Definitions
Tantrum	Flailing, screaming	Falls to the floor, kicks, cries, pounds the floor with fists
Elopement	Away from the work area	Exits assigned work area and attempts to leave the classroom by touching the door handle
Aggression	Hurts someone else	Attempts to or successfully slap, punch, or grab another individual's body
Self-injurious behavior	Hurts him or herself	Attempts to or successfully bites him- or herself on hand or arm, attempts to or successfully bangs head on another object in the classroom
Talking back	Mouths off, talks out	Calls teacher's name without raising a hand, yells, "No!" when asked to complete an undesired task, calls others by unacceptable names, tells other students what to do
Noncompliance	Does not follow directions, does not do what is asked	Puts head on the desk and sleeps instead of doing work, walks away when asked to help out

Consequences

The results of the display of behavior are referred to as consequences and either strengthen or weaken the preceding behavior. Consequences are essential in this discussion because they also indicate the possible function of behavior. The most important consequence that can indicate function is reinforcement.

Reinforcement is a type of consequence that strengthens behavior. Reinforcement, following behavior, can obtain social attention, a tangible object or activity, or a psychological experience or state. This is referred to as the "function of the behavior." Once we understand the function of a behavior, we can support students in changing the challenging behavior by replacing it with a different behavior that serves the same function. The selected replacement behavior should increase the individual's quality of life, be socially acceptable, practical to implement, lead to independence, and help the individual achieve his or her future goals. In this way, the process is student-centered.

Now, let's take what we've learned about behavior and consequences back to the scenario with Thomas and Sarah. The consequence for Thomas after hitting Sarah is she drops the toy he picks it up and begins playing with it again. The function is to obtain something. Yet, the function of a behavior is typically more nuanced. See Table 1.2 for a summary of Thomas' ABCs and two more examples – Jenny and Tasha.

Table 1.2 "Examples of the ABCs of Behavior"

Example	Setting Event	Antecedent	Behavior	Consequence	Function
Thomas	Lack of sleep and hunger	Sarah takes a toy from Thomas	Thomas hits Sarah	Sarah drops the toy, and Thomas gets the toy back	Obtain something
Jenny	Lack of sleep	A parent tells Jenny to clean her room	Jenny starts to cry and lies on the floor	The parent puts her in time-out and begins to clean her room	Avoidance
Tasha	None/Unknown	A teacher is helping another student	Tasha starts to throw items across the room	The teacher approaches Tasha and tells her to stop	Adult attention

Pause & View 2

Here are two videos about ABA. The first video (10:42) provides an overview of ABA.

> *One or more interactive elements has been excluded from this version of the text. You can view them online here: https://wisconsin.pressbooks.pub/nurturingpotential/?p=499#oembed-2*

YouTube Video: "Applied Behavior Analysis: ABA" by Teachings in Education

The second video (1:17) shows a parent collecting ABA data about their child's behavior.

> *One or more interactive elements has been excluded from this version of the text. You can view them online here: https://wisconsin.pressbooks.pub/nurturingpotential/?p=499#oembed-3*

YouTube Video: "Example: Collecting ABC Data" by Master ABA

Often interconnected with a person's mental health are factors that may heighten or lower risk at various stages of development and contribute to challenging or more prosocial behavior. These factors that heighten risk in one's early years are often called trauma or Adverse Childhood Experiences (ACES). Additional factors that influence students' social and emotional well-being and behavior are culture and the impact of multiple identities, also known as intersectionality. As we learned earlier, these factors are often called setting events, precipitating factors, or slow triggers that impact one's behavior indirectly. This next section further illuminates these specific and impactful setting events and guides educators in supporting students to minimize impact.

Associated Mental Health Disorders

Mental illnesses can affect persons of any age, race, religion, or income. Many mental disorders begin in childhood or adolescence yet may go undiagnosed and untreated for years. It is important to note that mental illnesses do not result from personal weakness, lack of character, or poor upbringing. Moreover, mental illnesses are treatable (NIMH, n.d.). Sometimes mental illness causes learning difficulties, leading to identifying school-age children under the special education category of Emotional Behavioral Disability (EBD) (IDEA, n.d.). It is important to note that a single factor rarely leads to behavior that impacts learning. Instead, specific circumstances and conditions increase the chances of developing problematic behavior (Cook & Ruhaak, 2014). The six disorders most often present in students with EBD are highlighted in the remainder of this section.

Anxiety Disorders

We all experience anxiety occasionally, but for many people, including children, anxiety can be excessive, persistent, seemingly uncontrollable, and overwhelming. An irrational fear of everyday situations may be involved. This high level of anxiety is a definite warning sign that a person may have an anxiety disorder. The term "anxiety disorder" covers several different disabilities that share the core symptom of irrational fear. These include generalized anxiety disorder, panic disorder, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD), social anxiety disorder (also called social phobia), and specific phobias. According to the Anxiety and Depression Association of America (2022), anxiety disorders are the most common psychiatric illnesses affecting children and adults. They are also highly treatable. Unfortunately, only 36.9% of those affected receive treatment (CPIR, 2022).

Bipolar Disorder

Also known as manic-depressive illness, bipolar disorder is a severe medical condition that causes dramatic mood swings from overly "high" and irritable to sad and hopeless, and then back again, often with periods of

everyday mood in between.

Severe changes in energy and behavior go along with these mood changes. For most people with bipolar disorder, these mood swings and related symptoms can be stabilized over time using an approach that combines medication and psychosocial treatment (CPIR, 2022).

Conduct Disorder

Conduct disorder refers to a group of behavioral and emotional problems in youngsters. Children and adolescents with this disorder have great difficulty following rules and behaving in a socially acceptable way. This may include some of the following behaviors:

- Aggression to people and animals
- Destruction of property
- Deceitfulness, lying, or stealing
- Truancy or other severe violations of rules

Treatment will depend on the child's symptoms, age, and general health. It will also depend on how severe the condition is. Treatment may include:

- Cognitive-behavioral therapy (teaches the child better problem solving and communication skills, how to handle stress, and to control impulses and anger)
- Family therapy
- Peer group therapy (helps foster better social and interpersonal skills)
- Medications (these are not typically used to treat conduct disorder)
  (CPIR, 2022)

Eating Disorders

Extremes in eating behavior characterize eating disorders—either too much or too little—or feelings of extreme distress or concern about body weight or shape.

Females are significantly more likely than males to develop an eating disorder. Anorexia nervosa and bulimia nervosa are the two most common eating disorders. Anorexia nervosa is characterized by self-starvation and dramatic loss of weight. Bulimia nervosa involves a cycle of binge eating, then self-induced vomiting or purging. Both disorders are potentially life-threatening. Binge eating is also considered an eating disorder. It is characterized by excessive eating while not controlling how much or what is eaten. Unlike bulimia, people who binge eat usually do not purge afterward by vomiting or using laxatives. According to the National Eating Disorders Association (n.d.), treating an eating disorder generally involves a combination of psychological and

nutritional counseling and medical and psychiatric monitoring. Treatment must address the eating disorder symptoms, medical consequences, and psychological, biological, interpersonal, and cultural forces that contribute to or maintain the eating disorder. Many people utilize a treatment team to treat the multi-faceted aspects of an eating disorder (CPIR, 2020).

Obsessive-Compulsive Disorder

Often referred to as OCD, obsessive-compulsive disorder is considered an anxiety disorder (which was discussed earlier in this fact sheet). OCD is characterized by recurrent, unwanted thoughts (obsessions) and repetitive behaviors (compulsions). Repetitive behaviors (handwashing, counting, checking, or cleaning) are often performed to prevent obsessive thoughts or make them go away. Performing these so-called "rituals" provides only temporary relief, and not performing them increases anxiety. A large body of scientific evidence suggests that OCD results from a chemical imbalance in the brain. Treatment for most people with OCD should include one or more of the following:

- A therapist trained in behavior therapy
- Cognitive Behavior Therapy (CBT)
- Medication (usually an antidepressant) (CPIR, 2020)

Psychotic Disorders

"Psychotic disorders" is another umbrella term for severe mental disorders that cause abnormal thinking and perceptions. Two of the main symptoms are delusions and hallucinations. Delusions are false beliefs, such as thinking someone is plotting against you. Hallucinations are false perceptions, such as hearing, seeing, or feeling something not there. Schizophrenia is one type of psychotic disorder. There are others as well. Treatment for psychotic disorders will differ from person to person, depending on the specific disorder involved. Most are treated with medications and psychotherapy (a type of counseling) (CPIR, 2020).

The Impact of Trauma

There has been an explosion of knowledge regarding the detrimental impact of trauma on the developing child, particularly on the neurological development of infants, and the resulting impact on mental health. A working knowledge of this growing evidence base is critical to supporting students and families. The information about trauma shared in this section should not become judgments about the particular child or caregiver made in isolation from others who know the child and family well or from other sources of information. This section covers foundational information about trauma, its impact on health, and strategies educators can use to support students.

Foundations

The following essential points about trauma shared by De Thierry (2017) are useful to remember:

Children need stable, sensitive, loving, and stimulating relationships and environments to reach their potential. They are particularly vulnerable to witnessing and experiencing violence, abuse, and neglectful circumstances. Abuse and neglect at the hands of those meant to care are distressing and harmful for infants, children, and adolescents.

Given that the infant's primary drive is towards attachment to a parent or caregiver, not safety, they will accommodate the parenting style they experience. They have no choice, given their age and vulnerability, and in more chronic and extreme circumstances, they will show a complex trauma response. They can eventually make meaning of their circumstances by believing that the abuse is their fault and that they are inherently evil.

Infants, children, and adults will adapt to frightening and overwhelming circumstances through the body's survival response. The autonomic nervous system activates and switches to the freeze/fight/flight response. Immediately, the body is flooded with a biochemical response, including adrenalin and cortisol, and the child feels agitated and hypervigilant. Infants may show a 'frozen watchfulness.' The 'still face' experiment illustrates this impact. Older children and young people can dissociate and appear zoned out.

Prolonged exposure to these circumstances can lead to 'toxic stress for a child, changes the child's brain development, sensitizes the child to stress further, leads to heightened activity levels, and affects future learning and concentration. Most importantly, it impairs the child's ability to trust and relate to others. When traumatized, children find it difficult to regulate behavior and soothe or calm themselves. They often attract the description of being 'hyperactive.'

Babies are particularly attuned to their primary caregiver and will sense their fear and traumatic stress. This is particularly the case where family violence is present. They will become unsettled and, therefore, more demanding of an overwhelmed parent. The first task of any service is to support the non-offending parent and to engage the family in safety.

Traumatic memories are stored differently in the brain than everyday memories. They are encoded in vivid images and sensations and lack a verbal narrative and context. As unprocessed and more primitive, they will likely flood the child or adult when triggers like smells, sights, sounds, or internal or external reminders are present later.

These flashbacks can be intense feelings that are often unspeakable, or cognitive, vivid memories or parts of memories that seem to be occurring. Alcohol and drug abuse are the most common and usually the most destructive attempts to numb the pain and avoid these distressing and intrusive experiences.

Children are particularly vulnerable to flashbacks at quiet times or bedtimes and will often avoid both by acting out at school and bedtimes. They can experience severe sleep disruption and intrusive nightmares, which add to their 'dysregulated' behavior and limit their capacity at school the next day. Adolescents will often stay up all night to avoid nightmares and sleep in the safety of the daylight.

Impacts on Health

Children who have experienced trauma may experience physical and emotional distress, such as;

- Physical symptoms like headaches and stomach aches
- Poor control of emotions
- Inconsistent academic performance
- Unpredictable and impulsive behavior
- Over or under-reacting to bells, physical contact, doors slamming, sirens, lighting, sudden movements
- Intense reactions to reminders of their traumatic event
- Thinking others are violating their personal space, i.e., "What are you looking at?"
- Blowing up when being corrected or told what to do by an authority figure
- Fighting when criticized or teased by others
- Resisting transition and change

Impacts on Learning

Children who have experienced trauma may also have struggles in school. As students get older, the impact of unchecked trauma can increase the risk of EBD, as negative experiences at one developmental level may lead to adverse outcomes at the next level, and so on. For instance, a student who experiences neglect and inconsistent discipline during preschool may show defiance and aggression in their early elementary years. This may manifest in truancy by middle school, and they eventually drop out of high school. Once teachers understand the educational impacts of trauma, they can nurture safe and supportive environments. For example, teachers can support students in making positive connections with adults and peers they might otherwise push away, calm their emotions so they can focus and behave appropriately, and feel confident enough to advance their learning. Trauma can impact school performance, as evidenced by:

- Lower academic achievement and grades
- Inconsistent academic performance
- Higher rate of school absences
- Increased drop-out
- More suspensions and expulsions
- Decreased reading ability
- A single exposure to traumatic events may cause jumpiness, intrusive thoughts, and interrupted sleep and nightmares, anger and moodiness, and social withdrawal—any of which can interfere with concentration and memory.
- Chronic exposure to traumatic events, especially during a child's early years, can adversely affect

attention, memory, and cognition, reduce a child's ability to focus, organize, and process information, and interfere with effective problem-solving and planning. This may result in overwhelming feelings of frustration and anxiety.

Pause & View 3

In this TED talk, Dr. Burke discusses the impact of trauma on brain development.

> 📰 *One or more interactive elements has been excluded from this version of the text. You can view them online here: https://wisconsin.pressbooks.pub/nurturingpotential/?p=499#oembed-4*

YouTube Video: "How Childhood Trauma affects Health Across a Lifetime" by TEDMED

A Way Forward

Table 1.3 illustrates the connections between factors that heighten the risk for behavioral challenges and those that lower risk and may lead to more prosocial behavior. It is also essential for educators to know that various forms of systemic oppression lead to or heighten the impact of trauma (e.g., racialized, gender-based, the trauma of poverty, etc.) for both caregivers and children. Here are some examples: anti-trans/homophobic attacks/laws in the media, regular school shootings, ongoing state/police violence against Black, Indigenous, Latinx, Asian & Pacific Islander community members, etc. To counter these factors, teachers should expose students to as many lowering risk factors as early as possible to counter any heightening factors. This will increase the chances of prosocial behavior and prevent a student from developing behavioral challenges.

Table 1.3 "Trauma and the Impact on Behavior" adapted from Hallahan et al. (2018)

Heightening risk – may lead to behavioral challenges	Lowering risk – may foster prosocial behavior
Preschool	
Poverty, abuse, neglect Inconsistent discipline Caregiver substance abuse Observing violence Family disruption (divorce/separation)	Nurturing caregivers Exposure to prosocial behavior Family stability Consistent discipline
Early Elementary	
Defiance Aggression Difficulty problem solving Frustrated teachers	Positive interactions with others Skilled at problem-solving Supporting teachers Effective Instruction
Late Elementary / Middle School	
Truancy Difficulty making and maintaining friendships Trouble at school or community (suspension) Drug use (including alcohol)	Regular attendance School success – academically and socially Able to form and sustain friendships Involvement in extracurriculars
High School / Adult	
Failing classes Dropping out Violence or delinquency Substance abuse Adult criminality	Graduation Contributions to community Healthy relationships Avoidance of substance abuse

Intersectionality

Another factor that impacts students' social and emotional well-being and behavior is their multiple and intersecting identities. Culture is often a word we associate with identity. We often use it to describe beliefs, norms, and practices characteristic of a particular society, group, or place. However, it is essential to note that a given culture is not monolithic. This is because there is diversity of beliefs, norms, and practices within a culture. Although there are many different cultures within the United States, the education system's definition of "appropriate behavior" typically reflects white, middle-class cultural norms and values. These norms are reflected in broader school district practices, policies, and classroom expectations around behavior, communication, classroom dynamics, and family engagement. This can result in a cultural gap. Cultural gaps can cause teachers to misinterpret students' behavior, leading to bias and conflict (IRIS Center, 2024).

Effects of Systematic Inequities

These conflicts can have various effects, including students feeling misunderstood or marginalized, higher rates of discipline referrals, and students leaving school. Left unchecked, systemic inequities develop, leading to both an overrepresentation and underrepresentation of students from certain cultures in each disability category. This is evident if you dive deep into the EBD category. Schiltz and Young (2022) share that the EBD category disproportionately over-representing students who are Black or American Indian is a national problem that has been widely noted and debated for decades. In contrast, Latino students are at heightened risk for social and emotional problems (Castro-Olivo et al., 2011) yet are perhaps underrepresented in the EBD category due to screening assessments not being in their native language and may not capturing student needs (Lambert et al., 2018). This is problematic for several reasons. First, much of the research on behavior and the development of behavior rating scales often used for special education evaluations has been shaped by studies conducted in the United States. As a result, it represents one cultural lens of Western culture and may not represent global populations and the complexity of diverse students' identities.

According to a report by the Federal Reserve Bank of Minnesota (Grunewald et al., 2021), teachers and school staff sometimes treat students of color differently than white students. Black and American Indian students comprise about one-third of Minnesota's overall student population but receive two-thirds of all suspensions and expulsions. Thus, it is unsurprising that Black and American Indian students receiving special education services in Minnesota are significantly more likely to be labeled as having EBD than other students while being underrepresented in the category of specific learning disability (SLD). These two groups of students are nearly ten times more likely to be suspended or expelled than their white peers (Minnesota Department of Human Rights, 2018). The ramifications of suspensions and expulsions extend beyond a student's immediate punishment. Disciplinary actions are associated with higher dropout rates and a higher likelihood of juvenile justice system involvement (Fabelo et al., 2011).

The term "school-to-prison pipeline" ("Pipeline") connotes the intersection of the K–12 public education system and law enforcement and the trend of referring students directly to law enforcement for committing offenses at school or creating conditions that increase the probability of students becoming incarcerated later in life, such as suspending or expelling them. Schools even have police officers stationed on campus. Although some may believe that arresting or incarcerating students for violating school rules may "scare them straight," involving youth in the justice system typically does not achieve the desired reformative effect. Instead, the negative consequences that often occur are severe. Arresting a student substantially reduces the odds that the student will graduate from high school, especially if that student appears in court. It also decreases the odds that a student will succeed academically or have future stable employment opportunities. Worse, it increases the likelihood of that student's future involvement in the criminal justice system. Furthermore, these negative trends do not impact all racial groups equally. Abundant evidence demonstrates that students of color are disproportionately represented throughout every stage of the pipeline. For example, school administrators and

teachers discipline minority students more often and more severely than white students for committing similar offenses (Nance, 2016).

Moreover, the subjective nature of three specific special education eligibility criteria contributes to the over and underrepresentation of groups in special education categories and feeding the school-to-prison pipeline. Namely, the criteria for eligibility for EBD, SLD, and Other Health Impairments (OHI), where students with ADHD are often served, are based on subjective interpretations. The subjective nature creates space for the observations and interpretations being shaped by implicit biases and is of great concern. The EBD label often leads to segregation in special EBD classrooms or even more restrictive settings, with lower chances of high school graduation and a greater possibility of entry into the juvenile justice system. Educators in such settings often focus on modifying behavior rather than addressing learning or dealing with undiagnosed, underlying disabilities or mental health needs. This focus emphasizes short-term goals of preparing students to enter society or act appropriately in the segregated school setting rather than longer-term goals of social, emotional, and academic learning, which is the focus of general education.

We also need to consider that not everyone with social, emotional, and behavioral needs experiences challenges in the same way. There are obvious ways this manifests for people, as illuminated in the previous section, but there are others. Crenshaw (1989) coined the term intersectionality to describe the experience of Black womanhood. Being Black and female are different aspects of identity. Neither can be considered in isolation. Said another way, every person's identity intersects to make them who they are and how they experience the world. These other identities, in addition to their disability, impact how a person experiences their disability and how people perceive and treat them. Said another way, mental health does not exist separately from identity markers. Thus, the symptoms, presentation, attitudes, beliefs, and understandings of EBD, SLD, and ADHD are impacted by the identities that individuals adopt or are assigned and the unique life experiences that accompany them (TheMindClan.com, 2020).

To illustrate, queer students of color may have unique stressors (e.g., systemic marginalization and oppression) related to their racial and sexual identities that white heterosexual students may not experience. Students of color who are also LGBTQI+ often have significantly worse outcomes, such as depression, anxiety, and compromised educational functioning than students in only one minority identity group (Borgogna et al., 2019). It is important to understand that our identities are not the issue; the problem lies within power systems that cause discrimination and oppression. These power systems can impact mental health outcomes (TheMindClan.com, 2020) and school success. Once again, if left unchecked or not fully appreciated, it could lead to well-meaning educators misidentifying or over-identifying students with diverse multiple intersecting identities with EBD.

A Way Forward

To fully support all students with social, emotional, and behavioral needs safely and appropriately, caregivers, educators, and professionals must understand the intersection of neurodiversity and students'

multiple identities. Adopting a humanizing approach to learning – considering how human interaction, identities, emotion, cognition, and pedagogical design intertwine to shape learning – positions students at the center of their learning by valuing prior knowledge, resources, and diverse identities (Freire, 2000; Fataar, 2016). Doing so can help protect students from negative mental health consequences, get appropriate learning support, and strengthen their support systems.

For example, restorative practices address harm or conflict in a way that focuses on repairing relationships, understanding the root causes of the problem, and making things suitable for everyone involved. Restorative practices aim to create a sense of community and responsibility for the actions that have taken place rather than simply punishing the wrongdoer.

Restorative practices can be used in various settings, including schools, workplaces, and the criminal justice system. For example, in schools, restorative practices might involve bringing together the person who caused harm, the person who was harmed, and others who were affected by the incident to talk about what happened, how it impacted everyone involved, and what steps can be taken to make things right. This can help build a sense of accountability and empathy among all parties and lead to stronger relationships and a more positive school climate overall. Thus, it is likely that fewer students will need social, emotional, and behavioral support due to improvements in systems that address their intersecting identities.

Functional Behavioral Assessment

Regardless of the close attention educators pay to systems and processes along with each student's assets and needs, there will be students with social, emotional, and behavioral difficulties. And to support students like this, those developing the child's IEP must consider strategies to address that behavior, including positive behavioral interventions, strategies, and supports. This is accomplished by using ABA principles and considering a variety of the previously discussed special considerations to create a Functional Behavioral Assessment (FBA) and Behavior Intervention Plan (BIP). Much like how an IEP team uses reading data from various sources to design a reading goal and intervention, the FBA serves a similar purpose for students with behavior that impedes learning.

FBA Initial Worksheet Example

The FBA helps teachers understand the reason(s) (i.e., the function or functions) for a student's behavior. In many cases, challenging behaviors are inappropriate for students to obtain something desired (e.g., attention or a tangible item) or avoid something not preferred (e.g., a task or activity). After identifying the specific variables associated with the behaviors of concerns and the functions, the IEP team can craft the BIP. The BIP contains the positive and proactive intervention(s) that will help the student learn new, more acceptable methods of getting what they want/need. It is essential that the BIP contains an appropriate replacement behavior that addresses the same function as the problem behavior and other supports to teach and reinforce the desired behavior. This also often involves adapting the environment to avoid triggers, if possible, or

teaching the student alternative but specific ways of responding to the triggering circumstance in a culturally responsive manner (IRIS Center, 2024). Research into function-based intervention demonstrates effectiveness for students with severe disabilities, multiple disabilities, ADHD, and learning disabilities, and those with or at risk for EBD (IRIS Center, 2024).

Let's bring in Gunter (they/them), a high school junior identifying as LGBTQ+, to see the FBA/BIP process in action. Gunter was identified with EBD as their primary disability and a speech-language disorder as their secondary disability. Their largest challenges are behavioral. They talk excessively in class and do not listen to the point of view of other students or the teacher. They have difficulty communicating with their peers and sometimes sit alone in the cafeteria or other common spaces. Gunter sometimes may refuse to participate in classroom activities. They receive most of their instruction in the general education classroom with a small amount of time in a resource room if they become disruptive. The speech pathologist works with them on using social language, taking others' perspectives, and developing more complex language skills (e.g., making inferences). In the general education classroom, Gunter carries a behavior plan with an agreed-upon set of rules. Their teachers sign the checklist in the plan daily if Gunter has followed the rules and participated in class without disruption. They have difficulty comprehending grade-level text and composing/writing. Gunter's teachers and caregivers are at a loss, so they meet to create an FBA/BIP.

The IEP team determines through the FBA process that the function of Gunter's behavior is to avoid class work and get attention. The teacher negatively reinforces Gunter's behavior by sending them out of the classroom. The behavior is observed to occur more often during literature class. Since Gunter engages in problem behavior to get out of doing an academic task, discipline that involves removing the student from the situation provides the result that the student anticipated (e.g., not having to complete the academic task). Although the intention is not to reinforce or strengthen the problem behavior, using a reactive and punitive discipline model can produce these unfortunate results. Instead, a function-based intervention (contained in the BIP) that Gunter's IEP team might design could include teacher prompts to begin work, completing chunks of assignments, and then requesting teacher feedback. Further, the team should consider support for reading and writing skill deficits.

The school psychologist reports that when she interviewed Gunter, he identified stressors at school related to them identifying as LGBTQ+ that seems to be bordering on harassment. As a result, a referral was made to a school social worker to investigate the harassment, and the school-based mental health provider will do a mental health screening. Additionally, based on the screener's results, the team may consider adding mental health support.

Pause & View 4

This video briefly overviews the FBA/BIP process.

> One or more interactive elements has been excluded from this version of the text. You can view them online here: https://wisconsin.pressbooks.pub/nurturingpotential/?p=499#oembed-5

YouTube Video: "The Functioning Behavioral Assessment: The FBA" by Teachings in Education

Throughout this textbook, we will use the IRIS Center Module: Functional Behavioral Assessment: Identifying the Reasons for Problem Behavior and Developing a Behavior Plan (2024) to reinforce learning. This module explores the basic principles of behavior and the importance of discovering why students engage in problem behavior. The steps to conducting a functional behavioral assessment and developing a behavior plan are also described. **Complete pages 1-3, practice what we are learning through the application activities, and keep track of any questions, ideas, etc.**

In later chapters, we will look at problem behavior (Note: the preferred term in this text is target behavior), determine the function of behavior, and craft replacement behaviors that meet a similar need.

Summary

In conclusion, understanding the principles of behavior is essential in addressing challenging behaviors in individuals. As Wehman and Kregel (2020) noted, all behavior serves a communicative function, and challenging behavior serves a specific purpose in a person's life. By assessing the function of the behavior and replacing it with a functional communication or social skill, we can develop effective intervention plans to address the underlying causes of challenging behavior.

Applied Behavior Analysis (ABA) provides a scientific framework for understanding behavior and developing effective strategies to modify it. By utilizing the principles of behavior, we can identify the function of challenging behavior and develop function-based intervention plans to promote positive behavioral change.

Overall, this chapter has highlighted the importance of understanding the principles of behavior and their application in addressing challenging behaviors in individuals. By utilizing this knowledge and adopting a function-based approach to intervention, we can promote positive behavioral outcomes and improve the quality of life for individuals with challenging behaviors.

Reflect, Apply, & Connect

- Jot down some of your identities. How have they impacted you (e.g., school, community, family)?
- List some identities you notice Gunter holding. How might these identities impact (positively and

negatively) them in school and be reflected in their FBA?

- What assets could Gunter's teachers include in their BIP to support their success?
- Take a look at the Deeper Dive section or do research. What is something you learned that you could share with Gunter's teachers to support their success?

Deeper Dive

ABA

If you are interested in learning more about the downsides of ABA, here is an article that critiques Applied Behavior Analysis (ABA) and offers recommendations.

Also, the implications of ABA-type interventions on students who have experienced trauma are essential to consider. This article provides recommendations for making ABA a more trauma-informed/aware practice.

Identity/Intersectionality

Ending Student Criminalization and the School-to-Prison Pipeline (2022). Black students are pushed out of school, arrested, and funneled into the justice system at alarmingly disproportionate rates, despite research confirming that Black students do not misbehave at higher rates than their white peers. This piece looks at the causes and offers solutions.

Why Black girls are targeted for punishment at school — and how to change that (2018). Around the world, Black girls are being pushed out of schools because of policies that target them for punishment, says author and social justice scholar Monique W. Morris. The result: countless girls are forced into unsafe futures with restricted opportunities. How can we put an end to this crisis? In an impassioned talk, Morris uncovers the causes of "pushout" and shows how we can work to turn all schools into spaces where Black girls can heal and thrive.

What should teachers understand about effective classroom behavior management – Cultural Influences (2024). Classroom Behavior Management (Part 1) Multimodal IRIS Center Module, page. 3.

Cultural Influences on Behavior (2021). Lori Delale-O'Connor, Assistant Professor of Education at the University of Pittsburgh School of Education, discusses cultural influences on behavior and explains the importance of re-examining classroom practices and perceptions of acceptable student behavior. She also discusses how demographic differences can lead to cultural gaps that negatively impact students. She also offers examples of how teachers can implement culturally sustaining practices to create inclusive classrooms where all students feel supported.

Cultural Considerations for Developing a Behavior Management Plan (2021). Lori Delale O'Connor, Assistant Professor of Education at the University of Pittsburgh School of Education, discusses why it is important for teachers to consider students' cultures when developing a behavior management plan. She

also explains how a thoughtful approach to student culture can help teachers create culturally responsive statements of purpose, develop unbiased rules, and deliver fair consequences.

Circle of Courage (2013). This article highlights the value of creating an educational climate that fosters resilience, motivation, and capacity building among learners who have been marginalized. Drawing on First Nations' teachings that encourage a holistic and affirming perspective of culturally diverse learners, the Circle of Courage model details how the four foundations of self-esteem (significance, competence, power, and virtue) can be applied in different contexts. Connecting with troubled youth positively to help them build emotional and social efficacy and strategies to improve teacher-student relationships are presented. The authors of this article have also published a book.

Mental Health

Free mental health facts sheets are free for non-commercial use. The fact sheets include information on the most common mental health disorders in youth, classroom strategies, and additional resources. Note: You will be asked to accept a usage agreement before you can download them in PDF form.

Wisconsin's Comprehensive School Mental Health vision is outlined in the Wisconsin School Mental Health Framework: Building and Sustaining a Comprehensive System. The framework includes six components of a CSMHS and guides on implementing them from a trauma-sensitive lens. For additional resources, browse the WI DPI webpage devoted to mental health.

Trauma

Childhood Trauma and Its Effect on Health (2012). This National Center for Safe Schools Healthy Students Report defines trauma, discusses trauma from a developmental perspective, and shares information related to risk, resilience, and protective factors related to trauma.

Responding to Trauma and Tragedy (2022). Minnesota Department of Education resource page includes educator tip sheets and contacts that can support those in a mental health crisis.

2.

GATHERING DATA

Introduction

When a student engages in problem behavior, it is crucial to understand the underlying reason behind it. The Functional Behavior Assessment (FBA)/Behavior Intervention Plan (BIP) process is a systematic approach to understanding the function of behavior and developing effective interventions. In this chapter, we will delve deeper into the FBA/BIP process, focusing on identifying the target behavior, collaboration, data collection, ethical considerations, and types of assessments.

We will follow the story of Ed, a middle school student, and examine how the FBA/BIP process was implemented to address his problem behavior. Doing so will help us better understand how this process can be applied in real-world scenarios. So, let's dive in and explore the FBA/BIP process!

Meet Ed

Ed (he/him) is a white 13-year-old 7th grader whose preferred pronouns are he/him. His primary disability is Other Health Impairment (OHD) per his Individualized Education Plan (IEP) and due to a medical diagnosis of Attention-Deficit/Hyperactivity Disorder (ADHD). He receives services specifically related to his behaviors, organization, and math. He lives in a suburb of Madison, WI., with his biological mother, stepfather, and two high school-age siblings. His biological father is in and out of prison, yet he spends time with Ed when he can. Ed enjoys playing on his computer, watching tv, and spending time with his family-specifically his cousins, as they are closer to his age. Ed often talks about his desire to attend college and be a police officer or doctor.

In school, Ed's teachers report he has strengths in his comprehension of material and ability to provide insights in class discussions. But Ed's math ability is much lower than his reading ability, likely impacted by his medical conditions. These medical needs manifest in an unwillingness to complete undesirable activities and a consistent level of distractibility likely caused by deficits in social and executive functioning skills. Further, Ed struggles with friendships as he can be irritable and argumentative. His teachers shared that he completes only about 50% of his homework. To support these needs, he has received special education support since preschool. First as a student with a Developmental Delay, then as a student with OHI due to his diagnoses of ADHD

– combined type, anxiety disorder, depression, and oppositional defiant disorder. Despite his struggles, Ed spends most of his day in the general education classroom. Below are highlights of Ed's IEP:

Areas of Need:

1. Ed needs to increase his social skills.
2. Ed needs to increase his executive functioning skills, such as regulating attention and emotions and organizing and completing assignments.
3. Ed needs to increase his math calculation and problem-solving skills.

Special Education Supports:

1. Resource math with Mary (she/her) working on math calculation and organization.
2. Social skills classes with Annette (she/her) to work on self-regulation and problem-solving
3. One-to-one meetings with Annette (she/her), the school social worker, four times a month.

Accommodations/Modifications:

1. Ed can take a break to regulate his emotions or talk with a trusted adult.
2. Ed will have access to repeated and visual directions.
3. Ed will have access to preferential and alternative seating.
4. Ed will be given subtle redirection if he is observed to be off-task.
5. Ed will have access to fidgets.
6. Ed will be given extended time to finish assignments or tests.

Think, Write, Share 1

Using information from this chapter, previous chapters, and your research, respond to the following prompts about Ed:

- What are his strengths and interests? Area(s) of need?
- What school, community, and cultural factors might be impacting him?
- How does Ed's behavior differ from typical development regarding the following aspects: (1) Cognitive, (2) Social-emotional, (3) Communication, (4) Motivation, and (5) Learning? Provide a rationale for your assertions.
- Critique the supports that are in place for him. Provide a rationale.

- What are your initial thoughts about how the existing support might be improved, and what additional supports should be added? Provide a rationale for your recommendations.
- What questions do you have?

FBA/BIP Process

It's important to note that the FBA process is ongoing and may need to be revisited periodically to ensure that the interventions are effective and the student's needs are met. Collaboration and communication among the FBA team members, parents, and other stakeholders are crucial for the success of the FBA process and the implementation of effective interventions. Table 2.1 provides an overview of the five steps. The steps involved in the FBA/BIP process are:

1. Prioritize the problem and define the challenging (target) behavior based on its severity and impact on the student's educational and social experiences.
2. Convene the FBA team, which should include individuals who know the student with challenging behavior well and have expertise in FBA and function-based intervention strategies.
3. Collect FBA data, which systematically gathers information about the problem behavior, its antecedents, and its consequences to develop a hypothesis statement about the environmental contingencies likely maintaining the behavior.
4. Form a hypothesis statement that summarizes the information gathered from the FBA process and identifies the function or purpose of the problem behavior. This helps in developing function-based interventions that modify the challenging behavior.
5. Develop function-based interventions that reduce or prevent the problem behaviors, aiming to improve the individual's quality of life and remove barriers to success in home, school, and community settings. Check to ensure the interventions you selected will provide an alternative way to access the need defined in the function.
6. Regularly reviewing and updating plans is crucial to ensure strategies remain effective and relevant. If a student's environment changes, it's important to gather new information to determine how the behavior may have changed and what new strategies may be necessary. It's also better to implement a few carefully selected interventions with fidelity than to try many strategies inconsistently.

Table 2.1 "FBA /BIP Process"

Action	Document	Description
1. Identify the target behavior	FBA	-Determine whether an FBA is needed -Understand and follow legal mandates and procedural guidelines for FBA -Prioritize and define challenging behaviors
2. Convene the IEP team	FBA	-Gather the student/s critical stakeholders -Secure expert team members, as appropriate -Meet to discuss initial thoughts about target behavior -Plan data collection
3. Collect data	FBA	-Collect data on the problem behavior, its antecedents, and its consequences -Direct & Indirect sources
4. Form hypothesis statements	FBA	-Develop concise statements about environmental contingencies for each behavior based on the data
5. Develop function-based interventions	BIP	-Develop strategies to modify motivations, stimuli, and consequences. -Check to ensure the interventions you selected will provide an alternative way to access the need defined in the function.
6. Implement & Monitor	BIP	-Plans should be reviewed and updated regularly (approximately every 6 weeks). -If a student changes environments, new information should be gathered to determine if & how the behavior has changed and, thus, what new strategies could be considered. -It is better to implement 1-2 carefully selected interventions with great fidelity than it is to implement many strategies inconsistently.

Step One – Identify the target behavior

In this first step, we prioritize and define the challenging (target) behavior based on its severity and impact on the student's educational and social experiences. To learn more about this crucial step, revisit the IRIS Center

Module: Functional Behavioral Assessment: Identifying the Reasons for Problem Behavior and Developing a Behavior Plan (2024). Complete the readings, viewings, and other activities on page 5. Add to your notes.

Think, Write, Share 2

Using information from this chapter, previous chapters, and your research, respond to the following prompts about Ed:

- Create at least one target behavior. Share three non-examples that can be included in the definition of his target behavior.
- Write a definition of a possible replacement behavior for Ed. Be sure to include at least one example and one non-example.
- What questions do you have?

Step Two – Convene the FBA Team

Ed's teachers have been unsuccessful in supporting him with his challenging behavior. So, they set up an IEP team meeting to include Ed (who attended for a few minutes in the beginning), caregivers, a special education teacher, a math teacher, a science teacher, a school psychologist, and an assistant principal. Ed's teachers explain the various behavior management techniques they have implemented so far, and his special education teacher reviews the behavioral data she has collected. The special education teacher suggests that—when basic classroom management techniques and behavioral interventions are ineffective at addressing challenging behaviors—it is often helpful to take a closer look at a student's behavior. The IEP team discusses whether conducting a functional behavioral assessment (FBA) would be appropriate and decides unanimously to proceed to the data collection phase. During Step Three, data will be collected to determine the function of the target behavior and used to design supports for Ed.

Step Three – Collect FBA Data

There are two primary strategies for collecting FBA data: indirect and direct. Indirect data collection involves interviewing people who know the student with challenging behavior to generate hypotheses about the behavior's possible reinforcers. Direct data collection involves observing and recording the behavior in the natural environment to identify environmental contingencies that may maintain the behavior.

Several methods for conducting direct data include scatterplot, A-B-C recording, functional assessment observation, and conditional probability analysis. Using indirect and direct data collection tools is essential

to identify variables that maintain the target behavior. Finally, specific behavior intervention strategies can be developed based on data analysis.

Let's revisit the IRIS Center Module: Functional Behavioral Assessment: Identifying the Reasons for Problem Behavior and Developing a Behavior Plan (2024). Complete the readings, viewings, and other activities on pages. 6-7. Add to your notes.

Think, Write, Share 3

Using information from this chapter, previous chapters, and your research, respond to the following prompts about Ed:

- Create a data collection plan. Include both indirect and direct data collection types/tools.
- List the names of people you would collect indirect data from and the environments where you would like to collect direct data.
- Based on a target behavior you created for him, which direct data collection method could you use for his problem behaviors?
- Based on the replacement behavior you created for Ed, which direct data collection method could you use for his replacement behaviors?
- How have you addressed cultural and contextual factors that might impact his behavior or others' perceptions?
- What questions do you have?

Ethical Considerations

Gathering assessment data is a critical piece of a larger process that, if implemented correctly, will reduce the student's challenging behavior and improve his or her quality of life. And with that data collection and analysis, there are also specific ethical considerations educators need to keep in mind. Ethical considerations are crucial throughout the process, including informed consent, confidentiality, and minimizing potential harm to the student. Educators should explain the FBA process and potential outcomes, keep data confidential, and avoid physical or emotional harm.

Informed consent means that educators must explain the FBA process, the data that will be collected, and the potential outcomes of the intervention to the student and their parents. Educators must ensure that the student and their parents understand the process thoroughly and have the right to refuse to participate in the FBA.

Confidentiality is also a crucial ethical consideration in the FBA process. All data collected during the FBA

should be kept confidential and only shared with individuals with a legitimate need to know. Educators should also ensure that the data is securely stored and disposed of properly when no longer needed.

Finally, educators must minimize potential harm to the student during the FBA process. This means avoiding any physical or emotional harm that could result from the data collection or the intervention itself.

It is also important to note that under certain circumstances, school professionals are required by law to conduct a Functional Behavior Assessment (FBA) for students with disabilities who engage in challenging behavior that interferes with their learning or the learning of others. This is mandated by the Individuals with Disabilities Education Act (IDEA) and may vary based on state or local regulations. The FBA is used to identify the function of the behavior and develop a behavior intervention plan for the student.

In the next chapter, we will continue through the FBA/BIP process as we learn about analyzing the data collected and determining the function of behavior.

Summary

In conclusion, the Functional Behavior Assessment (FBA)/Behavior Intervention Plan (BIP) process is a valuable tool for educators, parents, and professionals to understand the function of behavior and develop effective interventions. Through the story of Ed, we have seen how the FBA/BIP process can be applied in real-world scenarios to address challenging behavior. The process involves identifying the target behavior, collaboration, data collection, ethical considerations, and types of assessments. By implementing the FBA/BIP process, we can better understand the underlying reasons behind problem behavior and develop effective interventions that can lead to positive behavioral change in students. As we continue to prioritize the social-emotional well-being of our students, the FBA/BIP process will continue to be an essential tool in promoting positive behavior and academic success.

Reflect, Apply, & Connect

Find out more about policies and procedures in your district related to ethics and functional behavioral assessment. Ask questions of leadership in your district as needed. This will prepare you to work with a student in this course as you practice FBA/BIP and provide you with knowledge for future use.

Deeper Dive

FBA/BIP Supplementary Data Collection Tools:
   Direct
   Indirect

Early Childhood

3.

BEHAVIOR SERVES A PURPOSE

Introduction

Understanding the function of a behavior is essential for developing effective interventions to address challenging behaviors in students. By determining the purpose or function of a problem behavior, educators and behavior specialists can develop strategies that modify the environmental contingencies that maintain the behavior. This fourth step of the Functional Behavior Assessment (FBA) process involves forming a hypothesis statement that summarizes the data collected in the previous step and identifies the function of the behavior. This hypothesis statement is the foundation for developing function-based interventions that can address the underlying cause of the behavior and promote more positive and socially appropriate behavior. In this chapter, we will explore the importance of understanding the function of behavior and discuss how to develop effective interventions based on the hypothesis statement derived from the FBA process.

Step Four – Form Hypothesis Statements

Identifying a student's behavior's function is crucial in understanding why it occurs and developing effective interventions and strategies to support their learning and well-being. Whether a student is irritable, argumentative, or refusing to complete tasks, nearly all behavior occurs to obtain or avoid something, such as attention, a tangible item, an activity, or a sensory condition.

For instance, attention-seeking behavior is a common function when someone desires feedback or a response from another person. This behavior can be observed in children who cry or throw tantrums to get attention. Discouraging attention-seeking behavior by ignoring negative behaviors is essential, as this demonstrates that negative behaviors will not be rewarded.

Escape behavior occurs when someone wants to avoid or "escape" doing something. This can be seen in children who do not want to complete an activity or task. Token systems can effectively treat escape behaviors by providing a structure for the designated play and instruction time.

Access to tangibles is a function of behavior that occurs when someone wants access to something. Children may engage in certain behaviors, such as screaming or throwing tantrums, to get a tangible reward, such as a cookie. While it is acceptable to reinforce positive behavior with tangibles, it is essential to remember that access-related behaviors surround items the child can't access independently.

Sensory stimulation occurs when individuals seek out a pleasant sensation or replace discomfort. This can manifest in behaviors such as jumping or hand-flapping and can be a means of self-regulation for individuals with sensory processing difficulties. Understanding and accommodating sensory needs can help individuals feel more comfortable and engaged in their environment.

It is important to note that a single behavior may serve multiple functions, and interventions should be tailored to address all relevant functions. Therefore, identifying the function of a student's behavior is a crucial step in developing effective interventions that support their learning and well-being. See the text box below for more details about each of the four functions.

THE FOUR FUNCTIONS OF BEHAVIOR

1. **ATTENTION**
   Attention-seeking behavior occurs when a child wants feedback from another person. Examples include crying and throwing tantrums.

2. **ESCAPE**
   Escape behavior occurs when a child wants to avoid a task. Hiding and running away are examples of escape behavior.

3. **ACCESS TO TANGIBLES**
   Children will engage in interfering behaviors when trying to access something they want. Begging, hitting, and grabbing are common when seeking access.

4. **SENSORY STIMULATION**
   Sensory stimulation occurs when children want to replace discomfort or experience a pleasant sensation. This can manifest with hand flapping, tapping feet, rocking, and more.

"Four Functions of Behavior" by David DeFranco

To learn more about identifying the function of behavior, revisit the IRIS Center Module: Functional Behavioral Assessment: Identifying the Reasons for Problem Behavior and Developing a Behavior Plan (2024). Complete the readings, viewings, and other activities on page 8. Add to your notes.

Pause & View

This video demonstrates the functions of behavior in real life through Jayden and his caregivers. Use your learning so far about identifying functions. As you view, do an ABC Chart for Jayden and consider the following:

1. What is the target behavior(s)?
2. What is the function(s) of his behavior?
3. What is he trying to communicate in different scenarios?
4. What are possible replacement behaviors?

> *One or more interactive elements has been excluded from this version of the text. You can view them online here: https://wisconsin.pressbooks.pub/nurturingpotential/?p=517#oembed-1*

YouTube Video: "Functions of Behavior" by Tara R.

Common Questions & Criticisms

"This seems like an oversimplification…"

Functions are the building blocks of human behavior, and each behavior has its own antecedents and consequences. Describing a single behavior with a single function only accounts for a small part of a person's experience. However, looking at each behavior and its function individually can develop interventions that produce effective change. Research suggests that function-based interventions are more ethical, efficient, and effective than non-functional ones.

"Why describe with a function instead of what the behavior looks like (e.g., hitting or scratching)?"

Describing behavior by its form, or what it looks like, can be challenging because the same behavior can have different functions depending on the context in which it is used. For example, pointing can mean "Give me food" or "I want a hug," depending on the context. Function-based descriptions consider the antecedents and consequences that give rise to the behavior and provide a more accurate understanding of the purpose behind the behavior.

"Why don't we just say, 'Faduma wants to get out of work' rather than saying the function of his behavior is escape?"

The context of our behavior and learning histories, or the sum of our past consequences, are more accurate

predictors of behavior than our intent. For instance, when someone engages in behavior that is not good for them, such as staying up late before an important day at work, there is a reason behind it, but it may not be immediately apparent. Understanding the function of the behavior can lead to more effective interventions to change it.

"Can a single behavior have more than one function at once?"

A single behavior can have more than one function. Behavior can serve all four functions, mainly when it produces multiple consequences in quick succession or different consequences from different people. Addressing multiple functions of behavior may require interventions that target each function separately or that address multiple functions at once.

Summary

In conclusion, understanding the function of behavior is a critical step in addressing challenging behaviors in students. By identifying the underlying cause of a problem behavior, educators and behavior specialists can develop interventions that effectively modify environmental contingencies and promote positive and socially appropriate behavior. The hypothesis statement developed through the Functional Behavior Assessment process serves as the foundation for these interventions, guiding educators and behavior specialists in developing strategies that address the root cause of the behavior. By utilizing function-based interventions, we can create an environment that supports the individual needs of our students and fosters their academic and social success. Through this chapter, we hope to have provided insight into the importance of understanding behavior function and practical strategies for developing effective interventions based on this understanding.

Reflect, Apply, & Connect

- Review your notes about "Ed."
  ◦ What are some possible functions of his behavior?
  ◦ What cultural and contextual factors might impact his behavior or others' perceptions?
  ◦ What makes you think the way you do?
  ◦ Support your assertions concerning course materials and your

Deeper Dive

Simply Special Ed. How to Determine the Function of a Behavior

Autism Classroom. Determining the Function of Challenging Behaviors: Step 3 of 5 Steps to Meaningful Behavioral Support

Insights to Behavior. How to Better Understand the Four Functions of Behavior

4.

PROACTIVE AND POSITIVE APPROACHES TO SUPPORTING STUDENTS WITH SOCIAL, EMOTIONAL, AND BEHAVIORAL CHALLENGES

Introduction

Supporting students and their families can be challenging, particularly when students face social, emotional, and behavioral obstacles that require tailored interventions. The Individualized Education Program (IEP) team typically considers several factors while developing a suitable program that encompasses support for social and emotional areas, communication, and motivation, all of which affect learning. However, there are more effective strategies than responding to challenging behavior in a reactive and punitive manner, such as removal from the environment or providing severe consequences. This traditional approach assumes that students should know how to behave appropriately and that external controls are necessary to prevent problem behavior. Such models fail to teach students acceptable, expected, and appropriate behaviors and do not consider the impacts of trauma and cultural differences between students' homes and educational environments. Additionally, relying on a reactive and punitive model can exacerbate challenging behavior in many students, particularly those with disabilities who require special consideration.

This chapter explores proactive and positive approaches to supporting students with social, emotional, and behavioral challenges that focus on teaching and reinforcing desirable behaviors and promoting a positive learning environment. This is accomplished by creating culturally and contextually relevant interventions that provide an alternative way to access the need defined in the function. This proactive and positive approach aims to create a safe, supportive, and inclusive learning environment that addresses the root causes of social, emotional, and behavioral challenges and promotes all students' healthy development and academic success.

At the core of this approach is a grounding in Culturally Responsive PBIS. In short, students need to be supported in learning behavioral expectations in a way that values their culture and assets. You should not proceed with an intervention without this first step, sometimes called Tier 1. Much like Response to Intervention for reading and math. If a student has not received instruction in "addition," you won't jump to an intervention for "addition." If you are unfamiliar with school and classroom-level supports around

Culturally Responsive PBIS or would like a refresher, look at this document: PBIS Culturally Responsive Field Guide.

Before you get started, pause and go to the IRIS Center Module: Functional Behavioral Assessment: Identifying the Reasons for Problem Behavior and Developing a Behavior Plan (2024). **Complete page 9, practice what we are learning through the application activities, and keep track of any questions, ideas, etc.**

Step 5- Develop function-based interventions

Using FBA data, educators can teach replacement behaviors that provide alternative ways for student needs to be met using strategies such as training shaping social skills, targeted academic support, and school-based mental health service and other supports; educators can empower students to succeed academically and socially. These supports are documented in the BIP.

Social Skills

Teaching social and emotional skills is critical to the success and well-being of students, both in and outside of the classroom. These skills involve helping children develop effective communication, empathy, problem-solving, and relationship-building skills. It is crucial to start teaching social and emotional skills at a young age and continue building on them throughout the school years, with opportunities for practice and application.

In addition to teaching specific social skills, teaching different social relationships is equally important. How social interactions and relationships are identified directly impacts how a person engages with others. For example, a person would not tell a stranger where they live. Social interactions are different among strangers, acquaintances, friends, close/best friends, crushes, potential dating partners, dating partners, lovers, and intimate partners. Students can develop appropriate social skills and boundaries for each context by understanding these different types of relationships.

Unfortunately, youth with disabilities often have fewer opportunities for social interactions than their typically developing peers. Teachers play a vital role in shaping all aspects of development, including social skills. They must provide direct instruction in social skills to prepare students for the world of work and create opportunities for social activities in the classroom, school, and community. By increasing active participation in all aspects of a student's life, teachers can help promote social development and positive student outcomes.

One way to provide opportunities for social skills practice is through interactive and engaging activities. For example, teachers can incorporate video modeling, where students watch videos of social interactions and practice appropriate responses or role-playing exercises, where students act out social scenarios and practice effective communication and problem-solving skills. Teachers can also organize cooperative learning activities and partner work, allowing students to work with peer mentors and models.

Additionally, reading and discussing books or stories that model good social skills, using reader's theater, and linking older students or adults from the community as partners to at-risk students are all effective ways to teach social skills. By using a variety of approaches, teachers can ensure that students have ample opportunities to practice and apply social skills in different contexts, preparing them for success both in and outside of the classroom.

These resources, along with the social skills resources shared in Table 4.1, will help you create social skills lessons:

- Social Skills Instruction
- Teaching Social Skills
- Teaching Social Skills to Students with Learning and Behavior Problems
- Social Skills – Laying the Foundation for Success
- Teaching Respect in the Classroom *-This article discusses the Cool Tool lesson plan.*
- Eight-Step Social Skills Lesson Plan – *This is a lesson plan format from p. 29, Otten, K., & Tuttle, J. (2010). How to reach and teach children with challenging behavior (K-8): Practical, ready-to-use interventions that work (Vol. 7). John Wiley & Sons. I shared this text earlier in my week #1 instructor insights video.*
- Social Skills Lesson Template

Table 4.1 "Social Skills Resources" – adapted from Functional Curriculum: for Elementary and Secondary Students with Special Needs

Title	K-5	6-8	7-12+
Navigating the Social World	X	X	X
The Ziggurat Model	X	X	X
The Eclipse Model	X	X	X
Social Skills Training		X	X
Do Watch, Listen, and Say	X	X	X
Skillstreaming (elementary version)	X		
Skillstreaming		X	X
Social Skills for Teenagers with Developmental and Autism Disorders		X	X
Autism-A Social Skills Approach for Children and Adolescents	X	X	X
Knowing Yourself and Knowing Others: A Workbook for Children with Asperger's Disorders, Nonverbal Learning Disorder and Other Social Skills Problems	X		
Comic-Strip Conversations	X	X	X
Super Skills: A Social Skills Group Program for Children With AS, HFA, and ASD-Related Challenges	X		
What Did You Say? What Do You Mean?	X	X	X
Getting Along with Others	X	X	X
Social Skills Lessons and Activities: For Grades 1-3	X		
Life Skills Activities for Secondary Students with Special Needs			X
Taming the Recess Jungle	X		
Social Skills Groups for Children and Adolescents with AS: A Step-by-Step Program	X	X	X
Asperger's What Does it Mean to Me?	X	X	
Asperger Syndrome: An Owner's Manual		X	
Asperger's Syndrome: An Owner's Manual 2: For Older Adolescents and Adults			X
The Hidden Curriculum: Practical Solutions for Understanding Unstated Rules in Social Situations	X	X	X

Incredible 5-Point Scale Assisting Students with Autism Spectrum Disorders in Understanding Social Interactions and Controlling Their Emotional Responses	X	X	X
The PEERS Curriculum for School-Based Professionals		X	X
A Quest for Social Skills for Students with Autism or Asperger's: Ready-to-Use Lessons with Games, Role-Play Activities, and More!	X (upper)	X	
A 5 Is Against the Law: Social Boundaries Straight Up! An Honest Guide for Teens and Young Adults		X	X

Shaping

"Keeping your cool" can be a practical approach when dealing with disruptive or annoying student behavior. Behaviorist strategies, based on shaping, can be beneficial in such situations and are often used in tandem with social skills instruction. These strategies are often included in students' functional behavioral assessments and

behavior intervention plans, as they are precise and clear, leaving little room for misunderstanding expectations. This clarity decreases the likelihood of projecting negative emotions onto students, which can exacerbate the situation.

Behaviorist techniques include positive reinforcement, negative reinforcement, extinction, and generalization. Positive reinforcement involves providing a reward or something pleasant to increase the probability of a behavior occurring. Negative reinforcement involves removing something unpleasant to increase the likelihood of a behavior happening. Extinction refers to withholding something pleasant to decrease the likelihood of a behavior occurring in the future. For example, a teacher might ignore a student who tells inappropriate jokes instead of laughing or commenting.

Generalization means a student can transfer learned skills to new settings, with different people, and in varying contexts. Training should be provided in various locations, with multiple people and contexts using the same antecedents and consequences to promote generalization. This helps to reinforce the desired behavior and make it more likely to occur in different situations. Behaviorist strategies are particularly effective for students who need to practice social skills they have recently learned and may feel self-conscious about using. By providing clear and consistent expectations and consequences, teachers can help students develop positive behaviors and habits that will serve them well in various settings (IRIS Center, 2024).

To learn more about designing and using shaping with students, check out these resources:

- Positive Reinforcement in Psychology (Definitions & Examples)
- Shaping Behavior using ABA
- How to use Chaining with Task Analysis
- Classroom Reinforcement Systems that Work

School-Based Mental Health Support

Schools must provide appropriate mental health services to students with behavioral challenges as part of their Individualized Education Program (IEP). These services, which include psychological and counseling services, are considered essential related services under IDEA and must be provided by qualified personnel such as social workers, psychologists, or guidance counselors. The services are tailored to individual needs, and coordination between home, school, and community is crucial.

Communication channels should be kept open between all parties involved in the student's education or care. For example, a special educator may provide social skills intervention to a small group of students. In contrast, a licensed mental health professional in the school may provide individual skills or psychotherapy to the student. School-based mental health services aim to strengthen students and their families through prevention and intervention within the school setting. Eligible students undergo a diagnostic assessment with a mental health professional, and goals are formulated based on feedback from school professionals. Students may receive individual, family, and group skills training and psychotherapy to reduce symptoms of mental health conditions and improve their functioning at home, school, and the community (CPIR, 2020).

Day Treatment is an intensive and comprehensive program designed to provide therapeutic services to children and families struggling with significant emotional, behavioral, and learning difficulties. Community-based mental health providers offer day treatment programs with local school districts. Day Treatment provides an alternative, therapeutic school environment for children with limited success in their previous academic settings due to their emotional, behavioral, and learning challenges. The program is designed to strengthen individual and family functioning by providing a range of therapeutic services tailored to meet the unique needs of each child and family.

Targeted Academic Support

Students with social, emotional, and behavioral needs often struggle academically across content areas. This is due to missing class for disciplinary consequences, appointments, choosing not to come to school, and being present but not in a place to learn (e.g., zoned out or otherwise distracted). This group tends to struggle more with mathematics than other subjects because it requires persistence, concentration, and the ability to work organizationally. All of which also have implications for writing, reading, and study skills. Academic interventions like those provided by a special educator to students with SLD can also benefit students with behavioral challenges. Further, inclusive teaching arrangements, such as co-teaching, support students academically and behaviorally, where special educators and general educators work together in the general education setting (Vaughn & Bos, 2021).

A Few More Thoughts

Still, students with challenging behaviors may sometimes make it tempting to use more substantial or sweeping punishments rather than follow the FBA/BIP. This is especially true in school environments with the regular presence of law enforcement, as students with IEPs are more likely to receive harsher discipline in schools with police presence than those without. As I have shared throughout this text, this tightly intersects with race and the school-to-prison pipeline, as police presence in schools impacts students of color the most negatively. Instead, remember that every IEP guarantees the student and the student's family due process before an IEP can be changed.

In practice, this means consulting with everyone involved in the case—especially parents, other specialists, and the student—and reaching an agreement before adopting new strategies that differ significantly from the past. Instead of punishment, a better approach is to keep careful records of the student's behavior and your responses to it, documenting the effectiveness of the function-based intervention, and the student's responses to any significant disruptions. By having the records, collaboration with caregivers and other professionals can be more productive and objective and increase others' confidence in your judgments about what the student needs to succeed. In the long term, more effective collaboration leads to better support and more learning for the student (as well as better support for educators).

Summary

In conclusion, supporting students and their families with social, emotional, and behavioral challenges requires a proactive and positive approach that promotes a safe, supportive, and inclusive learning environment. It is essential to move away from traditional models of behavior management that focus on punishment and instead prioritize teaching and reinforcing appropriate behaviors. This is accomplished by creating culturally and contextually relevant interventions that provide an alternative way to access the need defined in the function. By incorporating strategies such as social skills training, shaping, and targeted academic support, along with school-based mental health services and other supports, educators can empower students to succeed academically and socially. Through a collaborative effort between educators, families, and community resources, we can provide the individualized support and interventions necessary to ensure all students thrive in their academic pursuits and beyond.

Reflect, Apply, & Connect

- What support did Ed receive?
- How were his strengths/interests used to support him? Explain.
- Based on the information in this section, how might the existing supports be improved, and what

additional supports should be added? Provide a rationale for your recommendations.

- What cultural and contextual assets could be leveraged to support Ed?
- What other questions or concerns do you have?

Deeper Dive

Below are additional positive behavioral interventions/supports beyond what was shared in this chapter that could be used with all students who might have social, emotional, and behavioral challenges.

Note: The need/appropriateness of the intervention should be based on FBA data with a specific focus on matching the function of the target behavior with a replacement behavior that serves a similar function/need for a student.

- Check-in/Check-out
- Check and Connect
- Behavior Specific Praise
- Group Contingencies
- Peer-Mediated Interventions
- Self-Management
- Teacher Directed Opportunities to Respond (OTR)
- Video Modeling

5.

IMPLEMENT THE INTERVENTION

Introduction

Educators must use a systematic and data-driven approach to support challenging behaviors effectively. One such approach is Functional Behavior Assessment (FBA), which involves identifying a behavior's underlying function or purpose and designing interventions based on that understanding. This chapter will focus on the next step in the FBA process: implementing and monitoring the intervention plan. We will discuss essential considerations teachers should consider as they implement the plan and collect ongoing student behavior data. Additionally, we will explore strategies for withdrawing the intervention, generalization, and maintenance once the behavior reaches the desired level. By following these guidelines, educators can effectively address problem behaviors and promote positive student outcomes.

Before you get started, pause and go to the IRIS Center Module: Functional Behavioral Assessment: Identifying the Reasons for Problem Behavior and Developing a Behavior Plan (2024). **Complete pages 10-12, practice what we are learning through the application activities, and keep track of any questions, ideas, etc.**

Step 6 – Implement & Monitor

Regularly reviewing (every 4-6 weeks) and updating plans is important because it allows adjustments to be made by considering changes in the student's behavior or environment. For example, if a student moves to a new classroom or school, the previous plan may no longer be effective, and new strategies may need to be implemented. It is also important to gather new information in these cases to identify any changes in behavior and adjust strategies accordingly to include supporting generalization. Implementing a few carefully selected interventions with excellent fidelity is more effective than implementing many strategies inconsistently because it allows for more focused and consistent efforts. This approach also allows for a more thorough evaluation of the effectiveness of each intervention, which can lead to better decision-making when selecting future strategies. Additionally, educators and support staff can more easily identify any necessary adjustments or modifications to ensure success by focusing on a few critical interventions. These progress updates and potential revisions are documented in the BIP or other places within a student's IEP. Check with your district about their process.

Reinforcement

In the implementation and monitoring stage, reinforcement shapes behavior and promotes student independence. When using reinforcement, it is important to consider several key components, such as immediacy, contingency, variability, and uniqueness to the child. Reinforcement should be provided promptly after the desired behavior and only when it occurs. Using various preferred items as reinforcers is essential to prevent boredom or satiation. These reinforcers should be tailored to the child's preferences to ensure effectiveness.

Identifying Reinforcers. During the FBA, the team can determine reinforcers that can be used to motivate the student to engage in the alternative replacement behavior and other appropriate behaviors. One place this data can be collected is from direct observation. It is the most effective way to identify potential reinforcers for a child. Observing the child can determine what activities they prefer and what items they enjoy. It is essential to consider what is age-appropriate and natural to the situation, as the best reinforcers are those that are least artificial but still effective. For example, if jumping on a trampoline and drawing pictures are both reinforcing for a child, drawing pictures may be a more appropriate reinforcer for completing handwriting homework. Also, reinforcement surveys are a tool educators can use to gather information about potential reinforcers.

Using Reinforcers. Once a potential reinforcer is identified, it may be necessary to make that item or activity unavailable except when the child exhibits the target behavior. This makes the reinforcer more valuable and motivating to work for. When giving a child a reinforcer, only limited access should be allowed. A few minutes with a favorite toy or a small bite of a favorite snack will ensure that the child does not become bored with the item or activity and will be ready to earn it again with more work. It is also important to note that a child's preferences may change often, and the selection of reinforcers should change accordingly.

Fading Reinforcement. Ultimately, the goal of using reinforcement is for the child to respond without artificial motivators. Once the child responds reliably, it is important to slowly reduce the use of artificial motivators and establish more naturally occurring consequences as reinforcers. These consequences may include things children can easily access in their environment when they exhibit desirable behaviors, such as adult praise or attention from peers.

Cautions. However, there are some cautions to keep in mind when using reinforcement. Reinforcement should not be introduced as a bribe when a child refuses to do something. Positive reinforcers should not be used to entice children to stop engaging in challenging behaviors. Reinforcers should be large enough to increase behavior but as small as practical. For example, cookies are unnecessary if a child works for verbal praise. Finally, it is essential to refrain from promising or offering reinforcers that cannot or will not be delivered.

Overall, effective reinforcement can be a powerful tool in increasing desired behaviors in children. Direct observation is the most effective way to identify potential reinforcers, and it is vital to consider age-appropriate and natural reinforcers unique to each child. Once a potential reinforcer is identified, limited access should be

allowed to maintain its effectiveness, and reinforcers should be changed as a child's preferences change. As the child begins to respond reliably, the use of artificial motivators should be thinned and replaced with naturally occurring consequences. Finally, caution should be kept in mind when using reinforcement, such as not using it as a bribe or for challenging behaviors and ensuring that reinforcers are practical and deliverable.

Summary

In conclusion, educators play a critical role in supporting students with challenging behaviors. A systematic and data-driven approach is essential for effective intervention. Functional Behavior Assessment provides a valuable framework for identifying the underlying function of behavior and designing appropriate interventions. However, implementing and monitoring the intervention plan is equally important. Teachers must consider essential factors such as consistency, fidelity, and data collection to ensure the plan's success. Moreover, withdrawal, generalization, and intervention maintenance are critical steps to promote long-term positive outcomes. By following these guidelines and continuously monitoring progress, educators can provide targeted student support, improve their behavior, and enhance their academic and social-emotional outcomes.

Reflect, Apply, & Connect

Dr. Amanda Zbacnik, an Associate Professor at UW-Superior, wrote two stories about students facing different challenges. One story is about a second-grade girl named Tenley who needs incentives to help her with transitions in class and faces physical challenges during adaptive physical education and recess. The other story is about a second-grade girl named Nicole who has academic, communication, social, and physical challenges that require many IEP team members, including the speech-language pathologist, to design some reinforcers to support her. Both stories show how important it is to think about each student's needs and make decisions that help them succeed. Read one of the stories and then answer the questions to help you think more about the story and what you can learn from it.

Vignette #22

What "Carrot" Drives Your Students?
by Dr. Amanda Zbacnik

One of the beautiful things Ms. Brown recalls about Tenley includes her fascination with Sponge Bob Square Pants. She loved anything to do with this cartoon character. Ms. Brown remembers the adaptive physical education teacher coming to work with Tenley. One of her primary goals was to work on balance and doing stretches to assist her in developing a normal-looking gait.

One particular Friday morning, the DAPE teacher brought some Sponge Bob step-up cups. These identical cups were brought to previous sessions without the Sponge Bob stickers and Tenley threw them across the gymnasium. Tenley needs to step on top of the cups, work on her balance, and then hold onto the connected ropes with her hands. Then, the task is to walk around the gymnasium while balancing on the cups and holding the ropes. When previously asked to do this, it equated to disaster. However, things changed when the Sponge Bob stickers were included. Ms. Brown will never forget her smile when trying out her Sponge Bob cups. She was practically speed-walking around the gymnasium!! Tenley's brilliant, white smile still stays in Ms. Brown's memory to this very day.

Also, concerning physical exercise, Tenley loved recess. However, the transition from the playground to the school was extremely challenging. Ms. Brown recalled Tenley's paraprofessional coming to her and stating, "She refuses to come in" (Tenley had been left under the supervision of the playground aide, so the paraprofessional could communicate this with me). So, the IEP team had to try many things to help improve this transition.

One of our significant strategies included: having a visual timer, where Tenley removed little red dots from a chart every ten minutes during recess. This worked the majority of the time. However, there was a phase where Tenley would simply refuse and lay out in the snow until the principal was called to come and assist in the situation. As a new special educator, you can imagine Ms. Brown's surprise the first time the paraprofessional returned to the special education classroom without Tenley. The message was that the principal was trying to coax Tenley into the building. So, Ms. Brown bundled up in her winter gear and went outside to help.

Under the direction of the principal, it was decided that a fireman's carry could be used to get the student safely back inside. During the winter, having Tenley ride in a sled back to the school steps was also effective. However, the most effective strategy was to pair Tenley up with a student in her second-grade general education class. This buddy would walk her back to the special education room, where both would be rewarded with a star sticker upon arrival. The transition from recess back to school was simplified by taking the adults out of the picture and allowing peer interaction.

Another vivid memory that involved the first exposure to working with parent/guardian(s) of students with special needs involved the principal providing Ms. Brown with the following information about Tenley's mother: "Mom is very knowledgeable, has a master's degree, and works at a community college in the field of education." Ms. Brown wasn't sure why his statement made her blood pressure spike so much at that moment (because this young mother happened to be just about the best person any teacher could wish to or want to work with). However, Ms. Brown remembers having so many socioeconomic and racial stereotypes shattered in her mind upon interacting with Tenley's mother at the first IEP meeting. Tenley was an African American little girl, so you can imagine Ms. Brown's surprise when her mom was white Caucasian. You can imagine even more surprise on Ms. Brown's part when her mom was the only parent at the IEP meeting. She mentioned that Tenley's father was no longer in the picture. This meeting was a gentle reminder that parent(s)/guardian(s) come in all shapes, sizes, colors, and genders.

Critical Reflective Questions:

1. What role did student interest play in motivating Tenley to work towards her goals?
2. Transitions can be a very challenging part of classroom management. What strategies were tried to transition Tenley from recess back to the classroom? Ultimately, what was most effective?
3. Special education teachers and parent(s)/guardian(s) must work together to help students achieve their IEP/transition goals. Why is it so important for educators not to have preconceived notions about what a "traditional" family unit may look like?
4. What questions or concerns do you have?

Vignette #23

Student Refusals to Complete Tasks:
A Communication Challenge or Statement of Strong Will?
by Dr. Amanda Zbacnik

When Ms. Brown thought of Nicole, she pictured a big smile—the biggest smile you can imagine for this little girl of Native American descent. Nicole remained in the general education classroom for kindergarten and first grade and had gotten through just fine. But, she was diagnosed with aphasia from lack of oxygen due to complications during her birth. While this affected Nicole's communication skills, she was very bright intellectually. The primary barrier, for her, was expressing to others the knowledge that she possessed.

Nicole loved being around her twin sister. However, their interaction was often laced with struggle. This is because her twin sister often felt embarrassed by Nicole's high-pitched squeals, grunts, and refusals in her communication. Furthermore, Nicole had a bit of a stubborn streak (which Ms. Brown admired; because once agreeing to complete a task, she was persistent and determined to complete it to the greatest/best extreme possible).

On the other extreme of the spectrum, her stubbornness often led to Nicole refusing to do some academic tasks and, in terms of adaptive physical education, refusing to do the requested physical activities. At this point, the staff that worked with her were unsure of the reason behind the refusals; she needed a means of communicating her logic.

Ms. Brown was very fortunate that we had an exceptional speech-language pathologist at this second school. She was willing to teach all of the students in my class primary sign language, to help them communicate with me and the paraprofessionals working with them. In Nicole's case, selecting an augmentative communication device began because she was intellectually able to decipher various symbols.

Initially, Nicole was excited to use Dynavox to talk with her peers. She would practice using it during story time, circle time, and at stations with her classmates. This Dynavox, however, was quite heavy with a strap that secured around the neck and over the shoulder for easy transport. This device might have been ideal for an individual with more limited mobility. However, carrying a five-pound device around for a very active eight-

year-old girl was challenging and annoying. At this point, Nicole began to simply leave her communication device outside on the playground, in the cafeteria, or in the hallway. This became a concern for the special education staff because the equipment cost $1200.

Educators need to make the assistive technology meet the needs of the student. It did not matter that the communication device was user-friendly and easy to navigate. It did not meet Nicole's needs for mobility, leading to frustration over being unable to engage in soccer and other gross motor activities without feeling weighed down.

Critical Reflective Questions:

1. Refusal to complete a task (physical or academic) or use the Dynavox was the most challenging behavior exhibited by Nicole. How might reinforcement be used? What other strategies might her teachers try?
2. What questions or concerns do you have?
3. How might you apply what you learned in this chapter to the student you are using for the course project?

Deeper Dive

Florida Atlantic Reinforcement Tip Sheet

6.

CRISIS PLANNING & PREVENTION

Introduction

Managing challenging behavior in the classroom can be complicated and overwhelming for any educator. One of the most challenging aspects of behavior management is responding to students' sudden, violent, or aggressive outbursts. Despite how sudden these outbursts may seem, they typically follow a predictable pattern known as the acting-out cycle. By understanding the different phases of the acting-out cycle, educators can learn to recognize the warning signs and take steps to prevent or de-escalate potentially dangerous situations. In this chapter, we will explore the acting-out cycle and its seven phases and how educators can create an emergency crisis intervention plan to effectively respond to extreme or dangerous behavior., as described in the table below.

Acting-out Cycle

To learn more complete two IRIS Center Modules: (1) Addressing Challenging Behaviors (Part 1, Elementary): Understanding the Acting Out Cycle (2) Addressing Challenging Behaviors (Part 2, Elementary): Behavioral Strategies. Even though the content is geared toward younger students, you should also find applications for older students.

Then, read the article about school crisis prevention/intervention programs to learn about the types of restraint and other components of crisis programs: Crisis Prevention Programs. Lastly, review the escalation process here and use this to guide your emergency crisis plan: Handling Meltdowns. Also, check out this resource: De-escalation Tips.

Crisis Planning

As part of your Behavior Intervention Plan (BIP), you must create an emergency crisis intervention plan for violent or aggressive behavior. Educational providers need safe, practical behavior management training to maintain the care, welfare, safety, and security of all involved in the intervention process. Most often, the students you are working with will not have a level of extreme and dangerous behavior that requires a plan. But since this is a required component to practice by the Department of Public Instruction, please create one

anyway. You can state, for example, "My student doesn't have extreme or dangerous behavior. However, if he/she/they did, here is the emergency crisis plan I would implement."

First, review a state complaint here to see how important the details of your plan are: DPI Complaint Decision. The decision states that positive behavioral interventions and supports (e.g., calming and other de-escalation strategies) must be listed in the Behavior Intervention Plan and implemented with fidelity. The district did not do this in this complaint, so they received corrective action. As an administrator, I have been part of these sorts of complaints, and it isn't fun.

Further, it is essential to note that if the plan is followed yet unsuccessful, seclusion and physical restraint can be used to maintain safety in certain situations. However, WI state law prohibits the use of seclusion or physical restraint by school staff except in rare circumstances where a student's behavior presents a clear, present, and imminent risk to the physical safety of students and school staff, and it is the least restrictive intervention feasible. This law applies to all students, both with and without disabilities. Reporting procedures must be followed after using these restrictive procedures. However, IEP teams no longer need to consider whether or not future use of seclusion or physical restraint is anticipated. The terms "seclusion" or "physical restraint" need not be included in a student's IEP. Here is the DPI's document summarizing the latest seclusion and restraint law: Frequently Asked Questions about the Use of Physical Restraint and Seclusion in Public Schools under Section 118.305, Wis. Stats.

Summary

In conclusion, managing challenging behavior in the classroom can be daunting for educators, especially when dealing with sudden, violent, or aggressive outbursts.

However, by understanding the acting-out cycle and its seven phases, educators can learn to recognize warning signs and take steps to prevent or de-escalate potentially dangerous situations. Creating an emergency crisis intervention plan can also help educators effectively respond to extreme or dangerous behavior. By staying calm, keeping safety as the top priority, and following the appropriate protocols and procedures, educators can create a safe and supportive learning environment for all students.

Reflect, Apply, & Connect

You are known for your success with students who struggle with behavior and in creating function-based interventions. It was not surprising when your principal asked you to attend an IEP meeting for D.B. to help problem solve his behavior. After you read the vignette that your principal provided about D.B., respond to the critical reflection questions.

"Meet D.B."

D.B. is a brilliant 13-year-old boy with a personal history of parental abuse and neglect. He is strong, very independent, and has a reputation for impulsive and aggressive reactions when he feels provoked or contradicted by teachers and peers. He is an oppositionist and proud of his image as a dominant, powerful, and fearful leader. The context of the incident is a hallway full of students. A colleague bangs accidentally into D.B., causing him to spill water on his shirt. D.B. asks for apologies and retribution. The other boy apologizes but does not agree to buy a new bottle of water because it was an accident. D.B. punches the other boy in the face, causing his nose to bleed. The main functions of D.B. "s behavior could be power demonstration and revenge. After the incident, D.B. is calm, convinced that he is right, and satisfied with the revenge he obtained. He does not feel guilt or remorse because he justifies his actions as self-protective and self-affirming measures.

In this case, a punish-based intervention approach will confirm D.B.'s belief that violence/aggression is a suitable way of solving conflict if the punisher is stronger, bigger, or clever. This approach could deepen the social detachment and reinforce D.B. "s narcissism and callousness.

Critical Reflection Questions:

1. Do you agree or disagree with what was shared? Explain.
2. What concerns do you have?
3. What follow-up information do you need?
4. When you attend the IEP meeting, what suggestions might you offer? Back them up with connections to course materials or your research.

Deeper Dive

You can download some excellent videos, including supplemental handouts (see the left side of the web page). In the videos, teachers and students role-play common classroom behaviors that are disruptive and provide options for supporting students. You might check out the following: Provocative Behavior and Disruptive Behavior.

If time allows, check out this website from the University of Nebraska-Lincoln to learn about seclusion and restraint, along with crisis prevention and intervention programs: Physical Restraint and Seclusion Resources. There is information on this website specific to Nebraska, yet you should still find it helpful, and it is the best resource on this topic I've come across. And within this resource, there is information about crisis prevention programs.

We've also been talking A LOT about matching the function of the problem/target behavior with an intervention with a similar function. To support that continued growth, you might want to check out

Functions of Aggressive Behaviors – Implications for Interventions. Push through it if you are able or save it for later.

7.

PUTTING IT ALL TOGETHER

Introduction

Self-management or self-regulation is a critical skill that enables individuals to manage their emotions, thoughts, and actions effectively. It is vital to personal growth and development, as it helps individuals navigate complex situations and achieve their goals. Self-regulation strategies are essential tools for all teachers in their instructional repertoires. Remember, the students must have the skills in place for these strategies to work. In this final chapter, we will explore the concept of self-regulation, which is the ultimate goal of the FBA/BIP process.

Self-Management Strategies

Self-directed behavior strategies are those that students use to monitor and regulate their behavior. The teacher guides students in selecting and establishing appropriate self-directed strategies, but the students implement them. Students are seen as controlling their behavior. To learn more, complete the IRIS Center Module: Helping Students Become Independent Learners.

Summary

In conclusion, self-regulation is a crucial skill that allows individuals to manage their emotions, thoughts, and actions effectively. For teachers, self-regulation strategies are essential tools in their instructional repertoire, but it's important to note that students must have the skills in place for these strategies to work. Self-management strategies, implemented by students themselves, are vital to self-regulation and enable students to monitor and regulate their behavior. Teachers play a role in guiding students in selecting and establishing appropriate self-directed strategies, but ultimately, students control their behavior. By teaching self-regulation skills, we can help students navigate complex situations and achieve their goals, leading to personal growth and development.

Reflect, Apply, & Connect

1. What are the advantages of using a self-directed rather than a teacher-directed behavior strategy?
2. What questions or concerns do you have?

MEET THE AUTHORS

Amanda Zbacnik, Ed.D. (she/her)

Amanda Zbacnik, Author

Amanda Zbacnik, EdD, is an expert in special education. She has teaching experience in K-12 schools and higher education as an associate professor of special education. As a previous special educator, Dr. Zbacnik worked with individuals in multiple disability categories: ID, OHI, EBD, SLD, ASD, and MD. At the high school level, Dr. Zbacnik focused on transition for students with special needs and collaboration with multiple stakeholders (therapists, paraprofessionals, and community transition agencies). Dr. Zbacnik volunteers in equine-assisted therapeutic activities, has served as the president, president-elect, and current treasurer of WI- CEC, and co-published the book, "Educators for Diverse Classrooms: A Case Study Approach to Equity and Inclusion in Education" in 2020.

To contact Amanda, please email her at azbacnik@uwsuper.edu

Staci Gilpin, Ph.D. (she/her)

Staci Gilpin, Author

Welcome to our open textbook. Amanda and I are excited to share this resource with you. I was born in Sioux City, Iowa, which occupies the ancestral, traditional, and contemporary lands of the Yankton Sioux. Growing up on a family farm in rural northwest Iowa is one part of my identity that continues to impact me professionally. This experience, as well as the unique assets and needs of rural America, is always on my mind. It is what drives me to advocate for quality online instruction to provide access to higher education for those who live in rural areas, address related teacher shortages, and nurture diversity in all educational spaces. I currently reside in Duluth, Minnesota, on land that was cared for and called home by the Ojibwe people, before them, the Dakota and Northern Cheyenne people, and other Native peoples from time immemorial. My husband and I love sharing the great outdoors with our miniature schnauzer.

My career spans three decades, with many experiences in urban and rural K-12 schools, including teaching students with emotional/behavioral disabilities, elementary classroom teachers, instructional coach, and special education administrator. During this time, I worked in some schools that served large populations of Indigenous students. As a result, digital spaces can provide equity and access for students from historically underserved groups and create spaces that welcome those with diverse backgrounds into K-12 classrooms.

To contact Staci, please email her at stacisparksphd@gmail.com

APPENDIX

Social Skills Lesson Planning Template

Social Skills Lesson Planning Template

Case Studies

Elsa (K-5)

Elsa (she/her) is a 7-year-old female first-grade student living with her caregivers in Phillips, Wisconsin. She is the only child of two caregivers who have completed post-graduate education. Elsa is an intelligent and caring young girl with significant academic potential. In her spare time, Elsa enjoys spending time with her friends and participating in physical activities such as swimming, running, and skating. She enjoys participating in social events and is often invited to play dates and birthday parties.

There is an extended family history of Attention Deficit/Hyperactivity Disorder (ADHD), mental health concerns, and academic excellence. While Elsa interacts well with peers her age, her parents note that she can be easily led and influenced by others. They also report that Elsa gets upset when she does not receive recognition or feels that she has been ignored. Her teacher notes that she sometimes acts 'socially immature' and often demonstrates attention-seeking behavior. Behavioral concerns like these (aggression, lying, arguments, and disruptive behavior) have been noted since Elsa participated in the preschool program at age 4. Her family obtained an ADHD diagnosis from their family doctor a year ago. Since late kindergarten, age 6, Elsa has received special education services under the disability category of Other Health Disability (OHD). Notably, she did not know her address or home phone number, could not print her surname, and recognized only a few pre-primer words.

Elsa describes difficulties with focusing and sitting still in class. She recognizes that she can 'hyper focus' on some activities of interest but often has difficulty sustaining her attention at school. Her parents and teacher indicate that Elsa is restless and often requires reminders to help her stay on task. She is described as "constantly running around" and struggling to listen and follow instructions. Elsa's teacher indicates that she often blurts out answers and interrupts other students in the classroom. Elsa recognizes this tendency in herself but says she can't stop despite her best intentions. Elsa has always had challenges falling asleep and sometimes wakes up in the middle of the night. When she wakes up, she has a difficult time getting back to sleep – sometimes staying awake for as long as an hour and a half.

Her father reports difficulties at home with following routines and remembering instructions. Her caregivers describe emotional reactivity and aggressive behaviors shown at home and school. Her teacher notes that Elsa is defiant towards listening to instructions but interacts well with her peers. She is easily frustrated and emotionally impulsive – Elsa has had several incidents of hitting, crying outbursts, and inappropriate behavior.

Recently, her teacher brought up conducting a Functional Behavioral Assessment (FBA) to help understand the functions of her behavior and design supports. This would add to the current supports listed in her IEP, including social skills instruction related to self-management.

Tokala (6-8)

Tokala (he/him) is a twelve-year-old sixth grader who attends a small rural middle school comprised mostly (90%) of students who identify as white and come from middle-class backgrounds. On a nearby reservation in Northern Wisconsin, Tokala lives with his biological father and his grandmother. His biological mother left when he was young and is no longer involved in Tokala's life. He loves to play basketball and computer games and watch videos on his iPad. He also talks a lot about his life on the reservation and is proud about attending cultural events and gatherings with family.

Tokala is also a student with an Emotional or Behavioral Disability (EBD). His teachers perceive him as not caring about academics and sometimes coldly interacting with others. He says he wants to make friends at school yet shows aggression towards peers and adults (e.g., grabs, shoves, hits). This aggression has become dangerous as he sometimes kicks adults trying to comfort him and peers who are worried about him. This behavior has led to several days of suspension, and it is only November. His behavior has also led to him being bullied by some peers, and others are now avoiding him.

The behavior occurs more after the weekend or extended breaks, when he wants to do something someone else has or is doing, or when the activity is unstructured, such as gym class, lunch, assemblies, and before/after school in the hallways. Tokala's father reports that the same behaviors happen at home after he has gained access to desired items or activities. He is then asked to transition to something else or put the item away. His father shared that he eventually "gives in to avoid conflict." To support Tokala in developing tools to better deal with these situations, his special education case manager explicitly taught him strategies to help him resolve difficult social situations. For example, he was provided individual social skills instruction about how to (a) interact appropriately with his peers, (b) tell his teachers when he was frustrated, and (c) initiate self-imposed "breaks" rather than become violent.

Despite all of these supports, data on the frequency of his use of (and his success in using) the new strategies to resolve complex social situations in different school environments indicates he can utilize these skills 50% of the time. Based on formative assessment data, he is at grade level in reading but below grade level in writing and math. Nevertheless, he still receives D's or F's in all his courses except music, where he shares that he enjoys participating in many activities and songs connected to his indigenous background.

Juanita (K-5)

Juanita (she/her) is a charming but shy nine-year-old Latina child who lives with her parents and younger brother in Milwaukee, Wisconsin. Her family relocated from New Mexico when Juanita was four years old. Spanish is the language used at home. Shortly after her fifth birthday, Juanita's caregivers enrolled her in a general education kindergarten class nearby. The staff and students are predominantly white, and English is the only language used in the school. Juanita had several behavioral challenges in kindergarten. Her teacher reported that Juanita frequently had difficulty following directions and sometimes threw tantrums when she did not "get her way." She also had problems getting along with her peers. Juanita did not like " waiting for her turn" or "standing in line" with her class. Juanita's mother reported that she displayed similar behaviors at home. For example, her caregivers were concerned that Juanita often "did not listen" to them. She often tried to "be the boss" with her brother at home and during family outings in the community.

Juanita's problem behaviors continued and escalated in first grade. For example, she defied her teacher and refused to follow her instructions—loud verbal arguments led to physical altercations with her peers at lunch or recess. Given the increasing frequency and severity of these and other problem behaviors, Juanita was referred to the school's Individual Education Program (IEP) team, assessed, and identified as a student with EBD.

At the beginning of second grade, Juanita's principal, her teacher, and her caregivers decided to enroll Juanita in a unique program called First Steps, an evidence-based behavioral intervention program for young children developed by researchers at the University of Oregon. The intervention had school and home components. At school, Juanita's second-grade teacher used a "token economy" program to reinforce her appropriate behavior positively. The teacher set clear behavioral expectations for Juanita's behavior in the classroom, hallway, lunchroom, and playground. Juanita received "tokens" for appropriate behavior (e.g., waiting quietly in line) but lost tokens for misbehavior (e.g., talking out of turn or leaving her desk without permission). Juanita turned in tokens for special prizes. She could choose something fun for herself (e.g., extra library time) or the whole class (e.g., playing Simon Says or extra recess). She could also earn time with her moms (e.g., walking in the woods).

At home, a First Step interventionist visited Juanita's home once a week for six weeks. The interventionist taught her mother to play short games to help Juanita succeed at school. Her moms liked the games; they even modified some of them so that they could be played with Juanita and her brother. They shared that they felt more empowered as caregivers. She felt the First Step activities offered structure and helped them learn how to interact with their children positively. Moreover, Juanita started to thrive in school, doing well both academically and socially.

However, toward the end of third grade, the COVID-19 pandemic shut down Juanita's school. She spent the final three months of her third-grade year sporadically attending online courses from her family's kitchen table and simultaneously caring for her younger brother while her moms worked. She began to

become withdrawn at home. Around the same time, her grandmother, who was close to her, came to live with them and became ill.

At the start of her fourth-grade year, she returned to in-person classes. Juanita's caregivers attended school conferences that fall, and her teacher shared similar concerns. When her moms and teacher attempted to discuss the changes in her behavior, she walked away or said nothing was wrong. Her grades also began to suffer.

Nolan (K-5)

Nolan (he/him) is an outgoing white 9-year-old who is the youngest of four children and attends Northern Lights Elementary School in Wausau, Wisconsin. Nolan's family moved there from Biloxi, Mississippi, just before birth to be closer to his paternal grandparents. The family is busy in the community, and Nolan is no exception. Sports and the Special Olympics are a big part of his life, as are meet-ups with his teammate and best buddy, Milo. In addition, his caregivers ensure he participates in other activities with his brother and sisters, including attending services at the local synagogue, which can sometimes be challenging as Nolan has Down syndrome. Within three weeks of his birth, Nolan started speech and language early intervention service thanks to a HelpMeGrow referral made by his pediatrician. This was delivered four times a month during in-home visits. He is currently served under the disability category of Intellectual Disabilities per his Individualized Education Plan (IEP).

In school, Nolan's teachers report he seems to enjoy participating with his peers in learning activities, but he struggles with reading, writing, and math. Despite being in grade three, he reads at a first-grade level and has been unable to move beyond sight words. Cognitive needs impact his progress. At his last three-year re-evaluation meeting, his IQ was 65. Handwriting is also challenging, and he uses an adaptive keyboard for written assignments, which he loves. Nolan is also easily distracted and is supported with frequent prompts to help him stay on task. His father shared, "He can be silly, which we love about him, but that also makes the school day's structure difficult for him."

Nolan spends half the day in the general education third-grade classroom with 20 peers. This year, inclusion focuses on academics (e.g., science and social studies) and social development. He is learning that reading has a purpose and is eager to share what he knows with others. With the help of a paraprofessional, Nolan starts the morning with his peers and then goes to the special education classroom for 60 minutes of intensive reading and math instruction. He also receives previewing of content/background-building support in the special education classroom before participating in science and social studies lessons with his peers. A real strength is he can understand complex concepts if we present them in multiple ways and formats other than print. Every other week, he has a "Lunch Bunch" social skills group with the school counselor to strengthen peer relationships. Nolan also participates in adapted physical education and occupational and speech therapies to help improve his physical coordination, self-care, and communication.

Much of Nolan's success depends on coordinated support from his caregivers and teachers. Nolan's

parents meet with his IEP manager and third-grade classroom teacher weekly via Zoom to stay on top of communication and expectations for his progress. Nolan's mother reports these informal 20-minute meetings as a time to talk openly about his progress and better coordinate what he needs at school and how they can support his learning at home. Collaboration is a high priority and the key to Nolan's success. Yet, in two years, Nolan's caregivers worry about transitioning to middle and high school. Not only do they worry about his academic progress, but also heavy on their minds is what the future holds for him – employment, friendships, living, sexual maturation, and so on.

Faduma (9-12)

Faduma (FA-du-mah) is a 17-year-old high school student with intellectual disabilities. Faduma uses the pronouns she/her. Her name was given to her as it is a tradition in Somalia for first-born females. Faduma is an active and engaged student. She enjoys participating in school activities and has made many friends. On the weekends, she enjoys cooking with her large extended family, participating in cultural events, and doing her school work with the support of her tutor at the Minnesota Somali Community Center. Faduma's teachers, parents, and IEP team are working together to help her achieve her goal of becoming a certified nurse assistant (CNA).

Faduma moved with her family in 2011 to Minneapolis, MN, after her family experienced the famine in Somalia that killed more than a quarter of a million people. They joined her grandparents in Minnesota, who fled Somalia like many others in the 1990s when the civil war broke out. Despite employment opportunities and community resources, things are not as simple as they seem. Two months before Faduma arrived in Minneapolis, six young Somalis from the area were arrested. Federal prosecutors said the men planned to sneak into Syria and join the ISIS terror group. Then a short time later, a Somali was shot dead after stabbing 10 people at a mall in St. Cloud, a city about 60 miles away from Minneapolis. These headlines are an outward sign that things may not be as simple as they seem for Faduma and her family. Radicalization and terrorism are real things that affect the community. Somali people in Minneapolis are very conscious of how people outside the community perceive them and are concerned about being unfairly portrayed as terrorists. The current political climate, including an executive order limiting travel for people from majority Muslim nations, including Somalia, worried Faduma. She's heard her parents talk about friends and siblings being unable to come to America. And they can't leave the country now because they are unsure if they'll be able to return.

Faduma needs help understanding complex instructions and concepts and requires additional support and accommodations to participate in regular classroom activities. Social situations cause her anxiety; she is sometimes awkward and withdrawn. Her parents support their daughter and are actively involved in her education. They have expressed concerns about Faduma's academic progress and have requested additional support from the school. Her teachers have also noticed that she struggles with reading comprehension, math, and writing skills.

Faduma's Individualized Education Program (IEP) team has recommended that she receive specialized instruction and support from a special education teacher. The special education teacher works with Faduma in small groups to provide individualized instruction that meets her unique learning needs. The special education teacher has also implemented various strategies to support Faduma's learning. For example, the teacher uses visual aids, such as pictures, charts, and diagrams, to help her understand concepts better. The teacher also breaks down complex instructions into smaller, more manageable steps, which helps Faduma follow directions. Faduma's IEP team has also recommended that she receive speech therapy to improve her communication skills. The speech therapist works with Faduma to develop her speech and language abilities and to help her better understand and express her thoughts and ideas. As part of her transition plan, Faduma will visit nearby Normandale Community College in the fall to explore their CNA program. Her parents worry Faduma will be unable to keep up with the academic demands of a CNA program. Recently they emailed her IEP manager asking about a meeting to discuss additional post-high school options for Faduma. When Faduma learned about this communication, she was furious with her parents.

Attributions

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