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Bridging the gap between current special education practices and models of best practice in addressing the needs of students with emotional disabilities

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Bridging the Gap between Current Special Education Practices and Models of Best
Practice in Addressing the Needs of Students with Emotional Disabilities

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Abstract

This study serves as an investigation of the current practices of special education teachers when working with children labeled as Emotionally Disabled. This paper explores research that highlights a critical “gap” that has existed between the research and special education fields in the provision of support and intervention services for students with emotional disabilities. Although a significant amount of research exists pertaining to best practices and evidence-based interventions when working with children with emotional disabilities; specific research regarding current practices of special education teachers and to what degree best practices recommendations are being implemented with these students is sparse. The current study is proposed as a means of gaining insight into current practices of special education teachers in order to evaluate if this proposed “gap” continues to exist, and if so, to identify possible reasons for its continued existence. In this study, special education teachers in the state of Virginia were asked to complete a survey specific to their current practices when working with students with emotional disabilities and regarding their personal opinions related to the feasibility, practicality, and applicability of scientifically supported evidence-based recommendations when working with students with emotional disabilities within the academic setting.

Bridging the Gap between Current Special Education Practices and Models of Best Practice in Addressing the Needs of Students with Emotional Disabilities

Introduction

One of the more difficult challenges faced by school systems today is identifying the most effective ways in which to integrate research-based practices into the classrooms of special education teachers when supporting the needs of students with Emotionally Disabilities (ED) (ERIC Clearinghouse on Disabilities and Gifted Education, 2005). Research highlights the wealth of findings within the scientific community related to best practices for working with students with ED, but there is little research that exists on current practices of special education teachers, and if in fact, these evidence-based best practices are currently being used.

Overall, the research literature indicates that an ongoing “gap” continues to exist between both the scientific and educational fields related to linking scientific evidence-based recommendations to educational practice (Gersten, Vaughn, Deshler, & Schiller, 1997). This “gap” has been attributed to many pre-existing barriers and an overall lack of communication between the two fields. Furthermore, there are opposing viewpoints from both sides as to what factors have contributed to the continued existence of the “gap” (Carnine, 1997; Gersten et al. 1997; Greenwood & Abbott, 2001; Kauffman, 1996; Kennedy, 1997; & Robinson, 1998). In her article, Maureen Hallinan (1996) indicated that educators reportedly attribute the existence of the research to practice gap to the following factors: limited resources; time constraints; lack of feasibility and practicality of interventions to the classroom setting, recommended interventions not always applicable to individual student needs; limited training opportunities; and often an overall

lack of support within school systems. She found that representatives of the scientific community expressed beliefs that factors contributing to the gap stem from the educational side in which research findings are not accurately interpreted and not appropriately implemented within the educational environment. Hallinan further pointed out that researchers feel that scientific findings and recommended interventions are often ignored within the classroom environment.

The unique set of challenging behaviors that can present in students with emotional disabilities within the academic setting not only result in negative impacts for the students themselves, but can also have negative consequences for both students and teachers that share in that academic setting with them (Simon, 2016). In their article, Naraian, Ferguson, and Thomas (2012) found that one of the most common responses in addressing such disruptive and aversive behavioral issues has been through identification of alternative placements outside of the general education setting. This is often a sought out option for educational systems for management of such challenging behaviors while still attempting to provide this population of students with a fair and appropriate educational experience. Despite this being the most common response for students with emotional disabilities, the research overwhelmingly indicates that use of exclusionary and restrictive settings are not effective or beneficial strategies for managing student behaviors and addressing their needs. Such practices can in fact lead to many negative outcomes for these students, both short-term and long-term (Powers, Bierman, & Coffman, 2015).

Students with emotional disabilities are more at risk for poorer academic outcomes, lower academic performance, higher retention rates and absenteeism than

students in any other disability category (Reedy & Newman, 2009; Armstrong, Dedrick, & Greenbaum, 2003; Rapport, Denney, Chung, & Hustance, 2001). Furthermore, they are also at risk to: fail one or more classes throughout their academic career, drop out of high school, and/or to receive suspensions and expulsions (as cited in Reddy & Newman, 2009).

Students with emotional disabilities historically have more contact with the juvenile justice systems, and have increased difficulty maintaining employment more than any other disability group (Bradley, Doolittle, & Bartolotta, 2008; Quinn, Rutherford, Leone, Osher, & Poirier, 2005; Harrison, Bunford, Evans, & Sarno Owens, 2013). To make matters worse, this population of students have been indicated within the research to often suffer from a variety of mental health issues which can further compound their difficulties and presenting problems within the educational setting (Reedy & Newman, 2009). Overall, it appears that the use of effectively implemented and empirically supported research findings within the classroom settings is imperative to the overall success of these students in helping to overcome the many challenges and negative life outcomes that they are at risk for as a result of having an emotional disability.

Review of the Literature

Defining and Conceptualizing Students with Emotional Disabilities

In their 2004 study, Topping and Flynn investigated the working practices and views of school psychologists who provided support to students with emotional disabilities within school settings. Their research emphasized the importance of professionals working with children with emotional disabilities using clear definitions

and appropriate conceptualizations of what it means for a student to be labeled as ED, and subsequently, understanding the needs of these students in order to become more successful in serving them. Topping and Flynn (2004) reported other commonly utilized terms for Emotional Disability to be “emotionally and behaviorally disordered,” and/or “seriously emotionally disturbed.” They indicated that the term ED can be conceptualized within two primary frameworks, and found that in the United States, professionals working with students labeled as ED are often influenced by either the psychodynamic/psychoanalytical approach or the behavioral model when defining, conceptualizing, and working with these students.

Their study highlights that the psychoanalytical approach originates from the works of Freud, Jung, and other early psychoanalysts. In their study, Topping and Flynn conceptualized “serious emotional disturbance” as a disorder within an individual that occurs as a result of internal conflicts that must be resolved in order for the individual to experience emotional well-being and overall behavioral control. Within their study, they described the behavioral approach as a model that identifies a “serious emotional disturbance” as being behavioral in nature, and views the “disorder” as an individual’s failure to act appropriately or to make appropriate behavioral choices depending on situational demands.

Within their study, Topping and Flynn highlighted common interventions within the behavioral framework to include: defining the problem behavior, identifying interventions to alter problem behaviors, and reinforcement of appropriate identified behaviors. They indicated that approaches which involve both behavioral and psychoanalytic components are often referred to as an eclectic approach. These more

integrated types of approaches, such as the eclectic model, often view an emotional disability as being more of a deficit that can be altered and improved on over time through focused training related to problem solving strategies, skills training, and crisis intervention support (Topping & Flynn, 2004).

In their study regarding the views and practices of school psychologists, their survey differentiated characterization of students with emotional disabilities as displaying externalizing behavior issues and/or internalizing behavior issues. In their articles, Reedy and Newman (2009) and Topping and Flynn (2004) both clarified how children with emotional disabilities can present with externalizing and/or internalizing symptoms and behaviors. They identified externalizing behaviors tend to include disruptive behaviors such as: ignoring and/or defying teachers, negative and/or inappropriate verbal response, aggression, and/or hyperactivity. Externalizing behaviors are considered to be the most physically observable behaviors, which likely cause the greatest disruptions within educational settings. According to their article, students with more internalized behavioral symptomology are often more difficult to detect as internalized symptomology tends to be less noticeable, and not as disruptive as externalizing behavioral issues.

Internalizing behavioral issues may include but are not limited to: social withdrawal, sadness and/or depressive symptomology, somatic complaints, feelings of hopelessness, tendency to inhibit communication, and/or anxiety related behaviors (Topping & Flynn, 2004; Reedy & Newman, 2009). Furthermore, Topping and Flynn highlighted in their articles that most intervention programs that focus on the needs of students with emotional disabilities prioritized addressing and minimizing the more observable externalized and disruptive-type behaviors over addressing and supporting

those with more internalizing issues. This is indicated to be a more common focus of intervention amongst professionals working with students with emotional disabilities as externalizing behavior issues are often much more directly observable, destructive, hurtful, and disruptive to those around them. To put it simply, it is not uncommon for the internalizing needs of students with emotional disabilities to be frequently overlooked in school settings.

According to the U.S. Department of Health and Human Services (1999), the label “serious emotional disturbance” refers to children eighteen years or younger with a diagnosable mental health disorder, which is found to severely inhibit a child’s abilities to function socially, emotionally, and academically across settings. Furthermore, this term is not necessarily indicative of a particular diagnosis, but rather, it is considered to be more of a legal term that goes along with a number of mandated services. School psychologists within the United States are mandated to follow federal definitions of ED when classifying students as having emotional disabilities (Topping & Flynn, 2004). According to Topping and Flynn (2014), this model of interpretation in identifying a child’s presenting symptoms as whether or not they have an ED is often referred to as an “educational model” in which it must be determined that a child’s academic performance is adversely affected as a result of the emotional disability in order for them to qualify to receive special education services under the Individuals with Disabilities Education Improvement Act (IDEIA). The IDEIA amendments state (U.S. Department of Education, 2004):

- (i.) The term (serious emotional disturbance) means a condition exhibiting one or more of the following characteristics over a long period of time and to marked degree that adversely affects a child's educational performance:
- (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
 - (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
 - (C) Inappropriate types of behavior or feelings under normal circumstances.
 - (D) A general pervasive mood of unhappiness or depression.
 - (E) A tendency to develop physical symptoms or fears associated with personal or school problems.
- (ii) The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance. (Individuals with Disabilities Education Act: §§300.8 *Child with a disability*)

Federal Law and Educating Children with Emotional Disabilities

In 1975, the Education of all Handicapped Children Act mandated that children and youth with disabilities be provided with a free and appropriate public school education (U.S. Department of Education, 2015). The Individuals with Disabilities Education Act (IDEA) mandates that in order for a student to be found eligible to receive special education services, they must be identified by a team of professionals as having a

disability that adversely impacts their academic performance to where they would require specially designed instruction (U.S. Department of Education, 2015).

The No Child Left Behind Act passed in 2001 by President Bush, placed a heavy emphasis on the utilization of research based practices and interventions within the academic setting. According to this act, the education of students must be based in “scientifically-based research” (ERIC Clearinghouse on Disabilities and Gifted Education, 2005). The overall premise of this act is that in order for effective educational reform to occur, educational professionals must integrate research-based practices into their professional practice within the classroom setting. According to the National Center for Education Statistics (2015), for the 2011-2012 academic years, approximately 373,000 children in the United States ages 3-21 years old were served under the IDEA, Part B Emotional Disturbance Disability classification. These students made up approximately 6% of the children served under IDEA, Part B in the 2012-2013 academic years (U.S. Department of Education, 2015).

Many policies and reforms have focused on both underserved and unidentified students with emotional disabilities in addition to addressing concerns that many students with emotional disabilities are excessively placed in and served within excessively restrictive types of settings (as cited in Reedy and Newman, 2009). Although laws, policies, and reforms have been put into place to address these concerns, the research continues to indicate that the most common practice for school systems in managing the challenges presented by students with emotional disabilities continues to be primarily through more exclusionary and restrictive measures. These practices continue to occur despite the research literature indicating that use of such exclusionary and restrictive

settings can likely cause more harm than good to students with emotional disabilities (Mills & Cunningham, 2014; Simon, 2016).

Educating Children with Emotional Disabilities in the State of Virginia

The Virginia Department of Education (VDOE) website provides a clear definition of specific criteria that a child must meet in order to qualify as having an ED. This website also includes information about “Better Serving Students with Emotional Disabilities: A Virginia Plan, “which focuses on ways in which to provide improved evidence-based services to students with emotional disabilities within classrooms in the state of Virginia.” This plan was developed in 2010 by the Virginia Department of Education.

Also included on the VDOE website are the following links and resources specific to addressing significant emotional and behavioral concerns within the educational environment: identified evidenced-based practices and reference guides, professional presentations, functional behavioral assessment guidelines, guidelines for the management of student behaviors in crisis and emergency situations, information specific to manifestation determination, and training and technical assistance supports. Also available on this site is information on Federal and State agencies that are responsible for the education of this population of students. No information is available on this site specific to how educators can best implement these recommended evidence-based strategies within their classroom settings with fidelity.

Appropriate Use of the Term “Evidence-based”

ERIC Clearinghouse on Disabilities and Gifted Education (2005) strongly emphasizes the importance of not creating the misperception that “evidenced-based

practices” are a magic fix-all type of solution. They advised that policy makers should be cautious in their use of this specific terminology, and in the levels of excitement that they exude when claiming that a program or intervention is “research-based.” Additionally, they stressed that evidence-based practices need to be grounded in solid research, and identified through careful trails across many different types of classroom settings.

According to the authors of this article, “evidence-based practices” has become a popular buzz-term which can often be used in a misleading way as a political or marketing tool rather than as a tool for indicating research supported interventions. As a result, they indicated that such use of the term “evidence-based” can cause it to lose its very meaning and purpose.

Potential Barriers in Educating and Serving Children with Emotional Disabilities

Naraian et al. (2012) found that some of the most challenging barriers that educators face in attempting to better serve students with emotional disabilities are the overall lack of teacher preparedness that teachers indicate they feel in serving students with emotional disabilities in addition to the limited amount of professional development trainings that are offered specific to serving this population of students. They indicated that a primary theme reported across teacher expression of frustrations was primarily in regard to difficulties in managing the many challenges presented by students with significant behavioral issues. According to Naraian et al. (2012), these frustrations in managing the very challenging behaviors that students with emotional disabilities can present with was found to be the second most frequently reported reason for teachers to leave their jobs.

Mills and Cunningham (2014) indicated in their article that despite recent efforts to enhance teacher preparedness in supporting students identified as having an ED; that actual efforts in supporting these teachers continues to be insufficient. Often, it is just expected that these teachers simply include these students into their classroom environments; without appropriate support being offered by school systems in the areas of providing additional trainings and/or consultation specific as to how to best serve these students (as cited in Mills & Cunningham, 2014). Mills and Cunningham (2014) found also indicated that teachers working with students with emotional disabilities were often less experienced and less educated than other teachers; and as a result, they experienced higher levels of job-related stress and burn out.

Naraian et al. (2012) also highlighted the critical role that teacher beliefs and biases have in their efforts to serve students with severe emotional and behavioral issues. It was indicated that teachers who possess negative beliefs and biases toward these students, often create additional barriers which could likely negatively impact their effectiveness when working with these students. As a result, Naraian and colleagues (2012) highlighted an ever increasing need for professional development opportunities as a means to better support these teachers in more positive perspectives when working with students with emotional disabilities. It is believed that such trainings would likely increase teacher motivation in implementing more successful and meaningful interventions with fidelity in serving the needs of these students, and as a result, improve overall student outcomes and success. According to Reedy and Newman (2009), other identified challenges identified in best serving the needs of students with emotional disabilities within special education classrooms could be in the form of organizational

barriers; information and skill-based barriers; community and regulatory barriers; child and family-related barriers; and/or regulatory barriers.

Current Practices when Working with Students with Emotional Disabilities

Current practices of educational systems. The school environment can further exacerbate many issues for students with emotional disabilities as a result of placing greater demands on these students to: follow rules and directions, comply with authority figures, complete task demands, and engage in positive social interactions with others within the academic environment (Simon, 2016). In his book, Simon (2016) presents a theoretical framework for delivering school-centered interventions to students classified as having emotional disabilities. He indicated that these students are likely to display an increase in acting out behaviors as a result of frustrations with demands of the learning environment and as a result of learning struggles. Simon's book will be referenced throughout this review of the literature as he conducted an extensive review of the research literature specific to utilizing evidenced-based strategies and practices when working with students with emotional disabilities in addressing social-emotional, behavioral, and academic issues.

Naraian, et al. (2012), found in their review of the literature, that when students with emotional and behavioral difficulties are viewed by educators as becoming too difficult to control within the general education environment, the most common response of educational systems is typically to remove these students from the general education setting and place them in more restrictive settings. Furthermore, they found that these students usually spend more time within more restrictive and exclusionary environments than students with any other disability classifications.

A study conducted by Powers et al. (2015) overwhelmingly indicated that students who are at-risk for developing externalizing social-emotional and behavioral issues often do poorly in school, and often are disproportionately represented within more exclusionary and restrictive educational settings. They found that practices which involved the use of more restrictive type settings for students with severe behavioral issues were more likely to further exacerbate the maladjustment of these children who were either already at risk for, or who were already exhibiting conduct-like behavior issues. In their review of the literature, they indicated that the use of restrictive educational placements with middle school students who presented with severe emotional and behavioral issues; not only increased the risk of these students not completing high school, but also increased the severity of conduct related behavioral issues with which they presented.

According to the U.S. Department of Education (2013), approximately 20.6% of students with emotional disabilities spent less than 40% of the school day in the general education setting, 18% spent 40-79% of the school day in the general education setting, and 43.2% spent 80% or more of their time in school within general education classrooms. It was further indicated that approximately thirteen percent of the ED population were served within separate schools for students with disabilities. Students with emotional disabilities are the second highest disability group to be placed in residential facilities at a rate of 1.9%. The U.S. DOE reported that two-tenths of these students were placed by their guardians in regular private schools, and 1.1% were placed within homebound/hospital placements. In this report, students with emotional disabilities were identified as being at the highest risk for being placed in correctional

facilities (1.8%) when compared to children in other special education disability categories.

Current practices of special education teachers. According to the American Academy of Special Education Professionals Report (2006), special education teachers are the primary teachers responsible for educating and supporting the needs of students with a variety of disabilities, including students with emotional disabilities. Their role is one of great importance, when it comes to addressing the needs of students with emotional disabilities. Nearly 20% of students with emotional disabilities spend 60% or more of their days outside of general education classrooms, meaning they are likely to be spending this time within special education classrooms with special education teachers (National Center for Education Statistics, 2015).

In the American Academy of Special Education Professionals Report (2006), special education teachers are indicated to be typically responsible for providing a wide range of supports to these students including providing services related to their specific educational needs identified within their Individualized Educational Program (IEP). As a result, these educators are in a unique position as their job duties require them to wear many professional hats in meeting the needs of these students. The report indicates they are expected to possess a level of knowledge specific to addressing and supporting all of the disability areas that they serve. According to this report, they are also often responsible for consulting and collaborating with the general education teachers of these students that they share in order to identify ways in which to best serve them within both the general education and special education settings.

It is important to note that although there is an extensive amount of literature on research-based practices and recommendations when it comes to working with students with emotional disabilities; very limited information exists within the literature on the current practices of special education teachers when working with students with this label. This is a topic that will be explored later in this review of the literature. A study conducted by Henderson, Klein, Gonzalez, and Bradley (2005) was the most recent study identified which explored the practices at that time of special educators who were working with students with emotional disabilities. Their study closely examined the level of preparation of special education teachers, reported conditions within which they worked, and factors impacting their effectiveness when working with this population of students.

In their study they highlighted that at that time of their study, there was a national shortage of qualified special education teachers certified to serve students with emotional disabilities. Although recruitment programs for special education teachers were highly prevalent; issues within the field still remained including lack of preparation and training of these professionals; high burn out rates, job-related stress; inadequate working conditions; and previous difficult experiences in serving this population of students. Ferguson (1991) as cited in Henderson et al. (2005), found that students in districts with teachers identified as being more experienced in their skill sets performed better. Years of experience of the special education teachers likely contributed to the level of effectiveness and success of special educators with students with emotional disabilities (Henderson et al., 2005).

Another issue that Henderson et al. indicated within the role of special education teachers who worked with students with emotional disabilities was that they often reported experiencing feelings of isolation as they were often more likely than other special education teachers to be assigned to more segregated schools and/or alternative school settings. If it was determined by a school system that a student with ED could not remain safely within the general education setting; this would likely mean that their special education teacher would be required to work in a more restrictive setting with them, usually in isolation, for extended periods of time. These practices were indicated within this study to result in higher rates of teacher frustration and burn out as a result of managing such difficult behaviors on their own over long periods of the academic day.

Although this study highlighted some key barriers and important considerations related to special education teachers serving this population of students; limited information is available within the research literature regarding if these barriers still exist within current practices of special education teachers when working with students with emotional disabilities. Overall, an extensive search of the literature yielded no specific research studies specific to the current practices of special education teachers of students with emotional disabilities. However, a wealth of research exists on evidence-based recommendations and interventions specific to working with students with emotional disabilities, and the continued existence of the gap between the research and education fields.

Specific Evidence-based Recommendations for Working with Students with Emotional Disabilities

The following recommendations will be discussed specific to evidence-based interventions identified within the research literature as being effective when working with students with emotional disabilities: recommendations for educational systems, classroom management strategies, instruction and curriculum interventions, addressing behavioral concerns, social-emotional skills development, addressing aggressive behaviors, and programs and treatment.

Educational systems. Simon (2016) stated that many behavioral management techniques identified as evidenced-based interventions for families are also identified to be effective interventions when utilized in school settings too. In his book, he indicated that effective comprehensive intervention programs within school systems should be comprised of: clearly identified school-wide behavioral expectations; monitoring; behavior supports; school-wide social-emotional learning curriculums; multi-level intervention techniques; and appropriate discipline policies. He indicated best practices for serving students with emotional disabilities is to include appropriately structured classroom settings and clearly identified rules that are routinely reviewed and identified with these students when appropriate. Furthermore, it was indicated that student compliance with classroom rules needed to be carefully monitored and actively reinforced. His book highlights best practices for educators of these students is to provide a warm and welcoming classroom environment that is balanced with appropriate levels of structure. The purpose of this being to encourage feelings of emotional security and behavioral compliance within this population of students

Classroom management. Simon (2016) reported that children identified with severe externalizing behavioral issues have a heightened sensitivity when they feel they

are viewed as the “troublemakers.” This means that it is important that teachers help these students feel equally valued and welcomed within their classrooms. Additionally, he emphasized through his review of the literature that early recognition of a student’s strengths and abilities in addition to reinforcements for their effort in successful choices and behavioral displays, are important when working with students who presented with such significant behavioral and emotional issues.

Mills and Cunningham (2014) reported similar evidenced-based classroom management strategies proposed by Simon (2016) including: providing consistent structure and routine, designing activities that increase student engagement, providing feedback, clarifying of expectations, and remaining consistent in responses to both positive and negative behavioral displays. Additionally, classroom rules and expectations should be clearly and concisely stated and posted in the classroom. The development of classroom rules should be implemented as a whole group activity. Simon (2016) found within his review of multiple studies, that students with challenging behavior responded better when rules were stated in positive terms, and when rules were consistently expected, monitored, reviewed, and enforced with this population of students.

Classroom instruction and curriculum. Within his review of the research literature, Simon (2016) highlighted several classroom instruction procedures that have been thoroughly researched and empirically supported as being effective when providing instruction to students with emotional disabilities. “Direct instruction” curriculums that progressively build upon already learned skills, in order to accomplish mastery of materials learned, have been identified as effective for children in the elementary and

middle school levels who present with significant behavioral concerns (as cited in Simon, 2016).

Nelson, Benner, and Mooney (2008) suggested other evidence-based recommendations related to classroom instruction and curriculum development to include: continual review of newly learned material; identification of lesson goals and learning objectives before teaching new materials; use of clear and concise step-by-step directions and lessons, scaffolding of content to be learned; providing frequent feedback to each child; and providing consistent positive reinforcement for assignments completed with effort. Furthermore, they found support within the literature for utilization of multi-modal teaching strategies to ensure basic skills are grasped first before teaching more complex materials. Additionally, they suggested the use of guided practice activities and scheduled review sessions to ensure newly taught material was learned.

In his review of the literature, Simon (2016) highlighted the importance of teachers paying careful attention to learning factors that may cause intensified behavioral issues amongst students with emotional disabilities. This included factors in the learning process such as performance anxiety and deficits in areas of learning and processing. It was found that paying attention to such factors resulted in better outcomes for students who presented with challenging and aversive behaviors. It was further indicated that when teachers made appropriate accommodations for the special needs of students with emotional disabilities within the classroom setting, that there tended to be an overall reduction in behavioral issues presented by these students.

Behavioral Interventions. Many common practices including use of punitive strategies and exclusionary practices have not only been found to be less effective with

this population of students, but have also been identified to result in greater risks for these students (American Psychological Association Zero Tolerance Task Force, 2008; Losen & Skiba, 2010; Sharkey & Fenning, 2012). The use of exclusionary methods (i.e., out-of-school suspension) for children with severe behavioral issues has not been indicated within the research to be effective in deterring unwanted behavioral issues in the school setting (Simon, 2016). Instead, according to Simon (2016), these practices are likely to increase displays of future behavioral issues by leaving these students in situations of little to no supervision and unstructured routines when they are absent from school.

As a result, the research indicates that being excluded from school can further contribute to additional behavioral issues. In fact, Simon (2016) pointed out when students with emotional disabilities are excluded from school settings as a result of out-of-school suspensions; that this is likely to result in a reverse effect of the intended consequences for poor behavior. Being away from school in an unstructured environment with no routine may likely encourage students with emotional disabilities to engage in socialization with other peers with similar behavioral problems and issues. This may likely increase these students' participation in delinquent activities, and further minimize their levels of motivation when it comes to the academics arena. These students are likely to feel further discouraged, as a result of becoming further and further behind in school as a result of missing a significant amount of academic instruction due to being suspended.

Bloomquist and Schneel's (2002) indicated that less effective teachers have been found to focus more on punitive strategies when addressing students with emotional disabilities. It was further indicate that more successful teachers are more likely to use

forms of positive reinforcement strategies that were appropriately paired with mild forms of punishment in order to maintain balance with highly disruptive students in their classrooms. Simon (2016) identified evidence-based best practices found within the research literature to include: periodic reviews of intervention plans, progress monitoring, and making modifications to intervention plans where needed when addressing areas of problem behaviors and concerns with these students.

Simon (2016) further indicated many behavioral intervention practices to be effective and empirically supported when working with students with emotional disabilities. He identified behavioral contracts to be greatly supported by the research as being an effective intervention for students with severe behavioral issues. Behavior contracts not only positively reinforce desirable behaviors, but also help lessen the likelihood of power struggles of these students with authority figures.

According to Simon (2016), effective use of these contracts involves: clearly stating a student's identified goals and expectations; identify how their behavioral successes will be monitored and rewarded; clarify what is identified to be inappropriate behavior choices, and to state the consequences that coincide with such behavior choices. It is recommended that these contracts be developed with the student and they should be agreed to by the student, their teacher, and their families as indicated by obtaining the signatures of all parties. Furthermore, behavioral contracts have been identified to be effective when a student is about to exhibit an explosive tantrum or meltdown as their teacher can use their specific contract to guide them in remembering their goals, and considering their choices. This can be used as a means of helping the student to further develop consequential thinking and self-management skills.

Educational software programs often are used as interventions for students with Attention Deficit Hyperactivity Disorder (ADHD) behavioral issues, and have been found to be effective when used with children with disruptive classroom behaviors too (Simon, 2016). These programs have been shown to reduce levels of defiance and argumentation within students with emotional disabilities. This is often a result of these student's interactions being with a computer program instead of with an adult which can typically be a trigger for highly reactive behaviors. Simon (2016) indicated that within his review of the literature that students with emotional disabilities tend to be motivated by earning incentive time on these computer programs, which has been found to increase more successful levels of work completion. It was indicated that such electronic programs should be used sparingly, and should not be used as a substantial part of a student's curriculum.

According to Simon's book, (2016), students with emotional disabilities have been shown to respond better to pre-identified supports during times of transition, independent learning, and /or working activities within the classroom setting. In more unstructured and less supervised settings, such as "specials classes" (i.e., music, art, P.E.), negative and unwanted behavioral issues can be redirected through means of individualized behavioral management plans as mentioned previously. Simon indicated that behavioral plans should include interventions which provide significant supervision during more unstructured times of the day, identification and rehearsal of expected behaviors prior to each setting, and should identify contingent reinforcers and/or response-cost punishment.

Response-cost punishment entails the temporary loss of time with an identified activity. An educator working with a student with ED can teach the student how to appropriately behave and participate in more unstructured and less well-supervised environments through utilization of a response-cost punishment system (Simon, 2016). Also in his book, Simon indicated that punishment-oriented methods of addressing behavioral issues are not found to be as effective as reinforcement procedures. Such reinforcement procedures likely include whole-class behavioral goals to include individualized behavioral plans for students with emotional disabilities, such as a use of a point or token-systems to address presentation of more challenging behaviors.

Social-emotional skills development. Exclusionary practices from activities of social nature should not be utilized with this population of students (American Psychological Association Zero Tolerance Task Force, 2008; Losen & Skiba, 2010; Sharkey & Fenning, 2012). Such practices have not been found within the research to be beneficial to students with emotional disabilities. Removing students with ED from participation in prosocial activities could likely result in them becoming more antisocial in their behaviors (American Psychological Association Zero Tolerance Task Force, 2008; Losen & Skiba, 2010; Sharkey & Fenning, 2012). It was suggested in their research that an important component of students with emotional disabilities engaging in prosocial activities is that they be under appropriate levels of supervision and structure in order to allow them to benefit socially from such positive social interactions with others.

Addressing aggressive behaviors. In his comprehensive review of the literature, Simon (2016) found empirically-supported interventions for aggression depending on what form/s of aggression are displayed by the student. The two most common forms

identified were reactive and proactive forms of aggression. Students that display reactive forms of aggression were found to benefit from interventions that helped manage their tendency to hyper-arousal. In fact, it was indicated in his book that professionals working with these students were better able to guide them in identifying and utilizing alternative problem-solving strategies in situations in which they were inclined to react with aggression when these students had been provided with a prior education specific to: emotional self-regulation skills, cognitive distortions and reframing, and hostile attribution biases.

When children were indicated to display more proactive forms of aggression, Simon (2016) indicated that interventions in addressing such issues should include more intensive contingency behavior management strategies that allow for meaningful reinforcers that would likely compete with a child's inclination to act out aggressive tendencies. His findings indicated that supervision is key with these students because it needs to be at a more intense level as proactive aggression is usually pre-meditated by the student. Therefore, he stressed the importance of providing close monitoring as a means of intervening before these behaviors actually occur. Structured activities, that highlight the importance of the development of empathy and positive social skills interactions, were identified as important to include as students who struggle with exhibiting proactive forms of aggression are often drawn to and reinforced by negative and antisocial peer encounters. Another key component of intervention with students that resort to proactive forms of aggression is to include them in supervised social activities that allow for and guide positive peer interactions (Simon, 2016).

Programs and treatment for students with Emotional Disabilities. Eyberg, Nelson, and Boggs (2008) conducted a literature review from research spanning 1996-2007 aimed at identifying Evidenced Based Treatments (EBTs) for challenging behavior issues within the classroom. In their review, fifteen EBTs were found to be “probably efficacious treatment” interventions when working with this population of students. Studies that they evaluated were of random assignment, had a clearly identified sample, and clear definitions of target behaviors and treatment. The authors then evaluated the treatments used, and whether or not the EBTs were “well-established” by research or “probably efficacious.” Figure 1 below identifies E.B.T. programs targeted at addressing the challenging behavioral, social, and emotional issues presented by students with emotional disabilities that were identified to be “well-conducted” studies.

Figure 1.

“Well-conducted” Evidence-based Treatment Programs for Children with Challenging Behavioral Issues, (Eyberg, et al., 2008)

Treatment Programs	Description
Anger Control Training	Rooted in Cognitive-behavioral theory, and designed for intervention with elementary aged children with difficult to manage behaviors in school.
Group Assertive Training: Counselor-led and Peer-led	Culturally sensitive model based on the Verbal Response Model of Assertiveness.
Helping the Noncompliant Child	Designed for preschool and early school-aged children; integrates families in addressing behavior challenges; parents are taught to avoid use of coercive parenting styles and are instead taught: use of positive feedback, clear directions, praise, and appropriate use of timeouts.
Webster-Stratton’s Incredible Years (Parent Training	Addresses aggression and behavioral issues in students. A comprehensive prevention and intervention program that is designed to include the child, their parents, and educators in

and Child Training)	intervention strategies. Developed by Webster-Stratton and Reid in 2010. include: parent skills training, child skills training, group skills training, generalization of learned skills across settings, introduction of environmental supports, and family based therapy supports.
Multi-systematic Therapy	Model of therapy found to be effective when working with adolescents who present with difficult behavioral challenges. Combines family and community components in addition to treatment of the individual child. Focus lies in encouraging responsible adolescent behaviors and prevention of out-of-home placements.
Problem-Solving Skills Training Program combined with Parent Management Training	A behavioral form of intervention that addresses adolescents with difficult behaviors. They are taught problem solving skills and encouraged to generalize these skills across various settings.
Rational-Emotive Mental Health Program	A cognitive-behavioral based model designed for high-risk Junior and Senior students presenting with very challenging and at-risk school behaviors.

As highlighted in the table above, many intervention programs such as Problem-Solving Skills Training and Parent Management Training and the Incredible Years Training Series include multi-component intervention strategies, as these techniques are supported by the research to be effective interventions for students with emotional disabilities (Eyberg, et al, 2008; Simon, 2016). Simon (2016) also found that combinations of cognitive-behavioral and behavioral and family therapies were empirically supported as effective methods of intervention in addressing the needs of these students.

Topping and Flynn (2016) and Simon (2016) conducted a review of the literature related to treatment of adolescents with serious emotional disabilities and identified several self-management and self-monitoring behavior techniques to be effective

interventions. These techniques were indicated to reduce behavioral challenges posed by students with emotional disabilities. Such interventions included: point systems, use of rewards and incentives, behavioral contracts which focused on behavioral modification, and social skills training techniques.

As mentioned previously, there is significant evidence within the literature that multi-component programs, along with collaboration of professionals involved with these students, are most effective when providing interventions to students with emotional disabilities (Simon, 2016). Topping and Flynn (2016) found very strong agreement within their study (98%) amongst the school psychologist surveyed, that a multi-disciplinary approach and collaboration amongst all professionals working with these students is essential in order to be successful in implementing interventions with students with emotional disabilities. School-based programs that are collaborative in nature have been indicated by the research to be promising and successful approaches when supporting students with emotional disabilities within the special education environment (President's New Freedom Commission on Mental Health, 2003). Figure 2 identifies programs and approaches that have been found within the research literature to be effective in addressing the needs of students with emotional disabilities.

Figure 2.

Programs and Approaches Found to be Effective in Addressing the Needs of Students with Emotional Disabilities (Simon, 2016; Mills & Cunningham, 2014)

Model of Treatment and Approach	Description
Kazdin's Problem-Solving Skills Training with combined Parent Management Training	A behavioral form of intervention that addresses adolescents with difficult behaviors. Adolescents are taught problem solving skills and encouraged to generalize these skills across life settings.

 Program

Webster-Stratton's Incredible Years (Parent Training and Child Training)	Addresses aggression and behavioral issues in students. A comprehensive prevention and intervention program that seeks to include the child, their parents, and educators in intervention strategies. Developed by Webster-Stratton and Reid in 2010. Intervention formats within these programs include: parent skills training, child skills training, group skills training, focus on generalization of learned skills across settings, introduction of environmental supports, and family based therapy.
Cognitive-Behavioral Therapy Approach and Anger Management Training	Includes anger management skills training which usually focuses on self-awareness training (understanding the link between thoughts, actions, reactions, feelings, and behaviors as a part of the "aggressive acting-out cycle"). May include: cognitive restructuring therapy techniques, role play activities, teaching of appropriate strategies to express needs and feelings in a non-threatening manner, and teaching of problem-solving skills and strategies. Example curriculums: Think First Program for high school students and the Anger Coping program for elementary and school aged children.
Mental Health Treatment Model and the Intensive Mental Health Program (IMHP)	Incorporates mental health treatment with recommended interventions listed above. Includes prevention strategies and programs as a means of addressing internalizing issues. An additional mental health based program aims to address the needs of students with emotional disabilities are day-treatment programs which are offered within the public school settings
Response to Intervention (RTI)	RTI is a multi-tiered process that involves universal screening of students to determine student needs and intensity of support required to address those needs, in addition to: assessment, implementation of evidence-based interventions, and continued progress monitoring.
Positive Behavior Intervention Support Program (PBIS)	Goals of this program are to have positive universal outcomes for students in need, especially those with emotional disabilities. PBIS also utilized a tiered approach and can be especially tailored to students with emotional disabilities.

The Research to Practice Gap

The research literature indicates that for years educational practices have been plagued by the notorious "research to practice gap" (Carnine, 1997; Gersten et al., 1997;

Greenwood & Abbott, 2001). Greenwood and Abbot (2001) identified four reasons for the existence of this identified “gap” between the research and educational settings: (a) lack of involvement of educational professionals within research settings (b) limited relevance and practicality of research findings when applied to classroom settings; (c) recommended evidence-based interventions are not always found to be applicable to or user-friendly when addressing particular student needs; (d) and minimal opportunities for professional development and training opportunities for professionals working with students with emotional disabilities.

Maureen Hallinan (1996), Professor of Sociology at the University of Notre Dame, attributed the existence of this “gap” between the education and research fields to be a result of failed communication efforts amongst both sides, in addition to opposing views and differing agendas related to the way in which to best serve student needs. Hallinan argued that such a divide hinders the quality of educational support services and interventions being provided to students in need. She indicated differing agendas amongst each side with overall opposing views centered on the following issues: budgeting issues, differences in timing priorities and time constraints; differences within the social dynamics of communities; and differences in school climates of different demographic regions. According to ERIC Clearinghouse on Disabilities and Gifted Education (2005), this research-to-practice gap exists within both the general education and special education fields, and presents many challenges for both researchers and educators in how to most effectively and efficiently serve these students. As a result, the need for feasible and practical evidence-based interventions that transfer well from the lab setting to the classroom setting is prominent throughout the research literature.

In her research, Hallinan (1996) described how each side views what they believe are factors that contribute to the continued existence of this gap. She indicated that many researchers reportedly felt that the gap exists as a result of research either being ignored or misinterpreted by teachers and educational systems. Additionally, they expressed concerns that research findings and best practices were often not being implemented with integrity and fidelity within the classroom settings. The opposing views of educators indicated that they believed the reason for the existence of the gap to be a result of: research findings not being applicable to particular student needs and that best practices interventions and recommendations are not always practical to implement within the classroom setting.

In order to support education in delivering the use of empirically supported research practices, a better understanding of current practices is needed. This study sought to answer the following research questions:

Research Question 1. What types of interventions are special education teachers currently using in addressing the needs of students with emotional disabilities?

Research Question 2. What is the focus of intervention when special education teachers are working with students with emotional disabilities?

Research Question 3. What level of training, preparation, and/or knowledge do special education teachers feel they have when addressing the needs of students with emotional disabilities?

Research Question 4. To what extent do special education teachers feel they have access to necessary resources and supports when working with students with emotional disabilities?

Research Question 5. To what extent do special education teachers feel they are supported by their school systems in working with students with emotional disabilities?

Research Question 6. What is the current level of understanding that special education teachers have related to best practices when working with students with emotional disabilities?

Research Question 7. To what level do special education teachers feel recommended interventions in the literature are acceptable and feasible within the classroom setting?

Methods

Participants

In this study, the participants consisted of special education teachers employed in public schools in the state of Virginia for the 2016-2017 academic years. One hundred and ninety-seven participants completed this study. On average, the participants indicated they had been teaching within the role of a special education teacher for approximately 11.7 years. The minimum number of years teaching in this role was under a year to the maximum number of years identified was 30 years. The highest degree attained by 58.3% of participants was a Masters degree and 36.3% of participants indicated their highest degree of attainment was a Bachelor's degree. Other degrees that 5.5% of participants indicated having were Educational Specialist degrees and a Psy.D. degree. When asked in what types of settings they provide or have provided services, 50.6% currently provide or have provided services in elementary schools, 42.5% in high schools, 36.8% in middle school settings, 7.5% in alterative settings, 6.3% within pre-school settings, and 2.3% in settings identified as "other." On average, participants indicated serving approximately eleven students within their caseloads. The minimum case load number of special

education students being served at that time ranged from zero to twenty cases total. It was further indicated that the number of students they served identified as ED as either a primary or secondary classification ranged from zero to fourteen cases within their overall caseload.

Measures

In order to answer the research questions, a 20-item survey was developed by the researcher which is included in written format in Appendix A. Qualtrics, a web-based survey program, was used to create, collect, and store survey items and participant responses. The survey items were presented in multiple-choice style formats, checklist style answer choices, and Likert scale questions. These items were then summarized by descriptive statistics and frequency charts generated from the Qualtrics program. Survey items 14, 15, 16, 17, 18, and 19 examined research question one, survey items 15, 16, 17, 18, and 19 examined research question two, survey items 6, 7, 8, 9, 10, 11, 12, and 20 examined research question three, survey items 8, 9, 10, 11, 12, and 20 examined research question four, survey items 20 and 22 examined research question five, survey item 20 examined research question six, and survey item 20 examined research question seven. These questions addressed current professional practices of the participants surveyed, and allowed participants to share their opinions related to their roles as special education teachers in providing services to students with emotional disabilities.

Procedures

The Virginia Department of Education website was utilized as part of the sampling procedures to identify local directors of special education within the state of Virginia. Each director was then sent an e-mail requesting that they forward a survey,

which was developed by the researcher, to all special education teachers within their districts. The e-mail included information about the purpose of the study, consent to participate in the study, contact information for the researcher, and instructions on completing the online survey. Volunteers who consented to take the survey responded electronically through a hyperlink that was included in the e-mail. Each participant was asked to complete the Qualtrics survey individually. The survey contained various questions specific to the current professional practices of special education teachers within the state of Virginia. The survey remained accessible for thirty days, and a second prompt was sent fifteen days before the close of the survey as a reminder to complete it. Once the survey was closed, the data were stored electronically.

Results

Survey items were presented to the participants in multiple-choice style formats, checklist style answer choices, and Likert scale questions. These items were summarized by descriptive statistics and frequency charts generated by the Qualtrics program.

Research Questions One and Two

Multiple questions were asked to examine research questions one and two which focused on what types of interventions are currently being used by special education teachers when working with students with emotional disabilities. Out of 197 participants, 115 participants indicated that on average, they spend 23% of their time each day providing crisis intervention and direct support to students with emotional disabilities. When asked, “What school-wide and/or student-centered programs have been used by the school systems you have worked within (past and present) in addressing and supporting the needs of students with emotional disabilities,” a majority of respondents indicated that programs used most often were: Positive Behavior Intervention and Supports

(76.3%), Response to Intervention (69.7%), and referring out to Therapeutic Day Treatment support services (69.1%). “Other” types of programs identified by respondents included: Family Preservation Service counselors, referral to school counselor, self-contained classrooms, MANDT training, Boys Town Social Skills Model, Handle with Care Training (restraint); Brother Keeper, Crisis Prevention Intervention, and/or Functional Behavioral Assessments and Behavior Improvement Plans.

Table 1.

School-wide Student Centered Programs

Special Education Teachers' Responses	
PBIS	76.3%
RTI	69.7%
Social-emotional Learning Curriculums	27%
Skills Training Programs: Problem-solving Skills	30.3%
Referring to TDT Support Services	69.1%
Other	8.6%

Survey participants were asked, “In your role as a special education teacher, please rank what order your responsibilities (over-arching goals) are when addressing issues presented by student with emotional disabilities from most important to least important.” Out of 146 participants that responded to this question, their responses indicated the three most important responsibilities a special education teacher has in serving students with emotional disabilities are “minimizing/extinguishing externalizing behavior issues” (49.3%); “supporting development of self-regulation skills” (33.6%); and “Supporting internalizing behavior issues” (28.1%).

Table 2.

Responsibilities of Special Education Teachers when Addressing the Needs of Students with Emotional Disabilities

Special Education Teachers' Responses	
Minimizing/extinguishing externalizing behavior Issues	49.3%
Supporting development of self-regulation skills	33.6%
Supporting internalizing behavior issues	28.1%
Improving social-emotional development	26%
Preparation for return to regular education classroom	59.6%

When asked to identify what strategies from a menu of options special education teachers use when working with students with emotional disabilities regarding social-emotional concerns, 139 participants reported that they utilize the following strategies most frequently: 89.2% provide a structured classroom environment; 83.5% provide a welcoming classroom environment and ensure students feel valued as members of the classroom community; and 77% use multi-component interventions which may or may not include: collaboration with the school counselor, school psychologist, school administration/staff, outpatient counseling services, families, and other professionals working with the child in designing interventions for that student across multiple settings. "Other" strategies indicated by 4.3% of respondents included: use of recess time and breaks to learn and practice social skills and problem solving skills, Growth Mindset Curriculum, Speech and Language Pathologist support, and/or therapeutic interventions.

Table 3.

Strategies Utilized When Addressing Social-emotional Concerns

Special Education Teachers' Responses	
Multi-component interventions	77%
Teaching students anger management skills/strategies	68.4%

Utilization of social-emotional learning curriculums	27.3%
Providing a welcoming classroom environment	83.5%
Providing a structured classroom environment	89.2%
Education related to development of prosocial skills	39.6%
Education related to problem solving strategies	59.7%
Inclusion of student in supervised social activities	64%
Other: extended time to learn social skills and problem solving; Growth Mindset Curriculum; specific behavior plans; and therapeutic interventions	4.3%

When participants were asked to identify what strategies from a menu of options they use when working with students with emotional disabilities regarding behavioral concerns, 138 participants reported that they utilize the following three strategies most often: 85.5% provide positive reinforcement of desired behaviors and choices in addition to providing consistent feedback; 76.1% develop classroom rules and behavior expectations as a whole-group activity in addition to posting in the rules within the classroom and frequently reviewing them; 71.1% indicated they use multi-component interventions to include professionals working with the student in designing interventions across multiple settings and/or remove student from general education classroom if warranted; and 70.3% use modeling and teaching of desirable and self-monitoring related behaviors . Of the participants that responded, 5.8% indicated that “Other” strategies are sometimes employed including: use of technology, social stories in book and video format, choice chart for alternative positive behaviors, zones of recovery, and/or therapeutic interventions.

Table 4.

Strategies Utilized When Addressing Behavioral Concerns

Special Education Teachers' Responses	
Multi-component interventions	71%

Utilization of school-wide prevention services and programs	68.1%
Removal from general education classroom if warranted	71%
In-School and Out-of-School suspensions	38.4%
Classroom rules and behavior expectations developed as whole-group activity, posted, and frequently reviewed	76.1%
Positive reinforcement strategies paired with mild forms of punishment to redirect behavioral issues	68.9%
Positive reinforcement of desired behaviors in addition to providing consistent feedback	85.5%
Response to Intervention	60.1%
Pre-identified supports for transition times and coordination with “specials” teachers in addition to pre-identified forms of supervision throughout the day in identified areas of difficulty	37%
Use of token economy, point system, rewards, contingency behavior management system with use of meaningful reinforcers, and/or individualized behavior plans	54.4%
FBA/BIP	73.9%
Modeling and teaching of desirable and self-monitoring related behaviors and skills	70.3%
Exclusion from free-choice activities and/or outside activities as form of consequence	19.6%
Other: use of technology; removal from classroom; social stories and videos; choice chart for positive alternative behaviors	5.8%

Another question required that special education teachers rank what they feel their responsibilities (over-arching goals) are when addressing issues presented by students with emotional disabilities in order from what responsibilities they feel are their most important responsibilities to what responsibilities they feel are of lesser importance. Out of 146 special education teachers who responded to this question, 49.3 % of

respondents indicated they felt their most important role in addressing the needs of these students is “minimizing/extinguishing externalizing behavioral issues.”

Table 5.

Overarching Goals when Addressing the Needs of Students with emotional disabilities from Most Important to Least Important

Special Education Teachers’ Responses	
Minimizing/extinguishing externalizing behavior issues	49.3%
Supporting development of self-regulation skills	33.6%
Supporting internalizing behavior issues	28.1%
Improving social-emotional development	26%
Preparation for return to regular education classroom	59.6%

Another question aimed at answering research question two asked; “When working with students with emotional disabilities regarding academic concerns, please indicate which of the following strategies you utilize on a regular and consistent basis.” The most frequently used strategies indicated were: 93% collaborate with parents, teachers and school staff regarding student progress, 90.9% recognize and work within individual student strengths, and 78.9% provide clear and concise multi-step directions prior to beginning each lesson/activity when addressing academic concerns with students with emotional disabilities.

Table 6.

Strategies Utilized on a Regular and Consistent Basis to Address Academic Needs of Students with emotional disabilities

Special Education Teachers’ Responses	
Educational technology and software programs	54.2%

for learning material	
Use of scaffolding of content and/or direct learning curriculum that progressively builds upon prior learning	68.3%
Collaboration with parents, teachers, and school staff regarding student progress	93%
Provide clear and concise multi-step directions prior to beginning each lesson/activity	78.9%
Monitoring of intervention success and student progress toward identified academic goals	75.4%
Use of multi-modal teaching strategies for content to be learned	57.8%
Guided practice activities	73.2%
Review sessions of newly taught material	59.9%
Recognizing and working within child's strengths	90.9%
Other	7.8%

Respondents were also asked, “When working with students with emotional disabilities regarding social-emotional concerns; please indicate which of the following strategies you utilize on a regular and consistent basis?” Of 139 special education teachers that responded, 89.2% indicated they provide a structured classroom environment, 83.5% provide a welcoming classroom environment and ensure students feel valued as members of the classroom community, and 77% utilize multi-component interventions which may or may not include: collaboration with the school counselor, school psychologist, school administration/staff, outpatient counseling services, families, and other professionals working with the child in designing interventions for students across multiple settings.

Table 7.

Strategies Utilized on a Regular and Consistent Basis to Address Social-Emotional Needs of Students with Emotional Disabilities

Special Education Teachers' Responses	
Multi-component interventions which may or may not include: collaboration with the school counselor, school psychologist, school administration/staff, outpatient counseling services, families, and other professionals working with the child in designing interventions for students across multiple settings.	77%
Teaching students anger management skills/strategies	68.4%
Utilization of social-emotional learning curriculums	27.34%
Providing a welcoming classroom environment and ensuring students feel that they are a valued member of the classroom community	83.5%
Providing a structured classroom environment	89.2%
Education related to development of prosocial skills	39.6%
Education relate to problem solving strategies	59.7%
Inclusion of student in supervised social activities	64%
Other	4.3%

Finally, special education teachers were asked; “When working with students with emotional disabilities regarding behavioral concerns, please indicate which of the following strategies you utilize on a regular and consistent basis.” Out of 138 respondents, the top three strategies utilized among special education teachers were use of positive reinforcement of desired behaviors, choices, and providing consistent feedback (85.5%); classroom rules and behavior expectations are developed as a whole-group activity, posted, and frequently reviewed (76.1%); and utilization of Functional Behavioral Assessments (FBA’s) and Behavior Improvement Plans (BIP’s) (73.9%).

Table 8.

Strategies Utilized on a Regular and Consistent Basis to Address Behavioral Needs of Students with Emotional Disabilities

Special Education Teachers' Responses	
Multi-component interventions which may or may not include: collaboration with the school counselor, school psychologist, school administration/staff, outpatient counseling services, families, and other professionals working with the child in designing interventions for students across multiple settings.	71.1%
Utilization of school-wide prevention services and programs (i.e., PBIS, school-wide behavior expectations and rules that are clearly stated and presented)	68.1%
Removal from general education classroom if warranted	71%
In-school and Out-of-school suspensions	38.4%
Classroom rules and behavior expectations are developed as a whole-group activity, posted and frequently reviewed	76.1%
Positive reinforcement strategies paired with mild forms of punishment to redirect behavioral issues	68.8%
Positive reinforcement of desired behaviors and choices in addition to providing consistent feedback	85.5%
RTI: progress monitoring, collecting data toward goals, modifications to intervention plan if needed	60.1%
Pre-identified supports for transition times and coordination with "specials" teachers in addition to pre-identified forms of supervision through the academic day and/or in areas of difficulty	37%
Use of token economy, point system, rewards, contingency behavior management system with use of meaningful reinforcers, and/or individualized behavior plans	54.4%
FBA/BIP	73.9%
Modeling and teaching of desirable and self-monitoring related behaviors and skills	70.3%
Exclusion in free-choice activities and/or outside activities as form of consequence	19.6%
Other	5.8%

Research Question Three

Several questions were asked to examine reported levels of training, preparation, and knowledge that current special education teachers in the state of Virginia felt they have when addressing the needs of students with emotional disabilities. Out of the respondents who completed this survey, the mean number of years that special education teachers have been teaching within a special education role was 11.7 years. The minimum number of years teaching in this role amongst respondents being 0 years, meaning a first-year special education teacher, and the maximum number of years being identified as 30 years. Of 168 respondents, 58.3% indicated they had a Masters degree, 36.3% had a Bachelors degree, and 5.4% indicated having “Other” degrees and/or certifications including: Educational Specialist Degrees, MED/EDS, and/or a Psy.S degree.

Out of 168 respondents; 60.7% indicated that their training in working with students with emotional disabilities was part of their degree program; 39.3% indicated they completed a course specific to working with students with emotional disabilities; and 13.7% did not receive any specific training related to serving students with emotional disabilities within their degree program. Out of these participants, 10.7% selected “Other” and indicated that their training consisted of one of the following: SOAR program through the University of Virginia, Master’s/Ed.S. in School Counseling, and prior experience within ED classrooms with students with Autism, and/or within children’s homes for students with emotional disabilities.

Of the 165 special education teachers that responded, 49.1% indicated that there are not currently any training opportunities available specific to supporting and working

with students with emotional disabilities, 29.7% indicated that they are unsure if training opportunities are available within their school systems, and 21.2% indicated that there are training opportunities available within their school systems. Thirty-five respondents indicated they had received some type of professional development and/or training opportunities. Of these, 22.9% were extremely satisfied, 25.7% were moderately satisfied, 22.9% were slightly satisfied, 11.4% were neither satisfied nor dissatisfied, 11.4% were slightly dissatisfied, and 5.7% were extremely dissatisfied with the quality of the training.

Out of 160 respondents, 45% indicated they are currently members of one or more of the following professional organizations: Virginia Education Association (VEA), Council for Exceptional Children (CEC), and the Virginia Association for Supervision and Curriculum Development (ASCD). When asked if the organization/s in which they are a member of address and/or provide information related to serving students with emotional disabilities, 49.3% of 71 responders indicated “yes.” Another question asked was how prepared current special education teachers in the state of Virginia feel in serving students with emotional disabilities. Of 165 special education teachers who responded to this question, 18.8% feel “very prepared,” 37.6% feel “prepared,” 37.6% feel “somewhat prepared,” 4.9% feel “unprepared,” and 1.2% feel “very unprepared.”

Finally, when asked to indicate which factors listed, if any, they felt may impede and/or hinder their success in providing adequate support services and interventions in meeting the needs of students with emotional disabilities, 60.9% of 128 special education teachers who responded reported “The high number of demands placed on me as a special education teacher are a factor in my abilities to adequately meet the needs of

students with emotional disabilities in addition to limited professional development trainings offered and time constraints. Additional factors indicated to impede success in addressing the needs of this population of students were: not being up-to-date with regard to what the research currently states are best practices (31.3%), research findings not being applicable to student needs (19.5%), limited time (57.8%), limited resources (43%), difficulty in interpreting research findings, research findings are not user-friendly (10.2%), and/or limited professional development opportunities (41.4%). “Other” factors indicated by respondents were: lack of support from school board office level and “too much red tape;” working with teachers who do not believe in positive supports and reinforcement in working with students presents challenges and is a source of constant frustration; research is not easily accessible to special educators who wear many hats; not having enough time to allocate to students due to large caseloads; and the pressures to have students with emotional disabilities in class at the expense of their emotional well-being.

Table 9.

Factors Identified to Impede and/or Hinder the Success of Special Education Teachers in Meeting the Needs of Students with Emotional Disabilities

Special Education Teachers’ Responses	
I am not up-to-date on what the research currently states as best practices when working with students with emotional disabilities	31.3%
I do not always feel that research findings are applicable to the needs of students with emotional disabilities I serve currently, and those that I have served in the past	19.5%
Time is a factor in my abilities to keep up with the research and implement research findings	57.8%
Lack of resources is a factor in my abilities to adequately meet	43%

and serve the needs of students with emotional disabilities	
I find that the research related to serving students with emotional disabilities is too difficult to interpret and is not user-friendly	10.2%
The high number of demands placed on me as a special education teacher impacts my abilities to adequately meet the needs of students with emotional disabilities	60.9%
Lack of professional development opportunities and training are factors in my abilities to adequately meet the needs of students with emotional disabilities	41.4%
Other	12.5%

Research Questions Four and Five

Participants were presented with several questions to examine research questions four and five. When asked, “To what extent do special education teachers feel they have access to necessary resources and supports when working with students with emotional disabilities?” lack of resources was identified by 43% of respondents as a factor that impedes and/or hinders their success in providing adequate support services in meeting the needs of students with emotional disabilities. Out of 138 respondents, 88 indicated that additional resources specific to meeting the needs of students with emotional disabilities would be more helpful to them in successfully serving and supporting students with emotional disabilities.

Participants were presented with four questions to examine research question five, “To what extent do special education teachers feel they are supported by their school systems in working with students with emotional disabilities?” When respondents were asked to identify what they feel would be more helpful to them in serving students with emotional disabilities, 31.9% of them identified that increased administrative support from their schools would be beneficial to their success in working with this population of

students. Additionally, when asked to identify factors that may impede and/or hinder the success of providing adequate support services and interventions in meeting the needs of students with emotional disabilities, one respondent that selected “other” as their response option listed “lack of support from school board office level” as being an impediment to their delivery of support and services.

Research Questions Six and Seven

Research participants were asked several questions to examine research questions six and seven. These two questions examined to what level special education teachers understand best practices when working with students with emotional disabilities, and if they feel recommended interventions are feasible and practical when addressing specific student needs. Out of 128 respondents, 31.3% indicated they felt they were not up-to-date on what the research currently states as best practices when working with students with emotional disabilities and feel this is a factor that impedes/hinders their abilities in meeting the needs of these students. Some respondents (19.5%) indicated that they do not always feel that the research findings are applicable to the needs of students with emotional disabilities that they serve currently and that they have served in the past. Other respondents (10.2%) indicated that they find the research related to serving students with emotional disabilities is too difficult to interpret and is not user-friendly. One respondent who selected “other” as their answer choice, indicated that “it is not the research that is too difficult to understand, but that it is not easily accessible to a special educator who wears many hats.”

Discussion and Future Implications

The results of this study highlight that a “gap” in practice continues to exist between the research and educational fields. Current factors indicated to be contributing to the continued existence of this gap: time constraints, limited resources, not being up-to-date with what research currently states as best practices, research findings not being applicable to needs of students with emotional disabilities and being too difficult to interpret and/or not user-friendly, high number of demands placed on special education teachers within their roles, limited professional development opportunities, lack of administrative support, difficulties in collaborating with teachers with opposing viewpoints, and research findings not being easily assessable. Despite this, results of this study indicate that, many special education teachers within the state of Virginia are currently implementing evidenced based practices identified within the research to be effective in addressing the social, emotional, and behavioral needs of students with emotional disabilities.

Although, a majority of special education teachers who participated in this study feel at least “somewhat prepared” to “prepared” when it comes to serving the needs of these students, many special education teachers need more assistance with addressing the social and emotional needs of these students. These teachers indicated a need for more time to be able to effectively plan for interventions with these students. Additionally, educators acknowledged a need to become more up-to-date with best practices and for guidance in making these best practices applicable to particular student needs. Teachers reported the need for support interpreting more difficult to understand research findings and would value additional professional development training opportunities specific to serving this population of students. Finally, educators reported a need for ideas to better

access studies and research-based recommendations for working with students with emotional disabilities.

Based on participant responses in this study, it is evident that special education teachers in Virginia value and appreciate specialized training; although, there is limited specialized training available for many of these teachers. While special education teachers within the state of Virginia who support the needs of students with Emotional Disabilities are experienced and often well-qualified, most have a need for further training and professional development opportunities in serving this population of students. Time and resources are critical factors for continued education and support of these teachers. Participants of this study indicated they appreciate and value information about best practices when it comes to serving students with emotional disabilities.

Participants indicated a reliance on school wide prevention and intervention programs in helping to further support the needs of students with emotional disabilities. In fact, the three most widely used programs currently in school systems within the state of Virginia, according to respondents, are: Positive Behavior Intervention Supports, Response to Intervention, and referring students for Therapeutic Day Treatment Services. All three of these programs have been identified by the research to be effective in addressing the needs of student with emotional disabilities. Furthermore, special education teachers in the state of Virginia indicated utilization of a variety of behaviorally-based and academically-based strategies in supporting the needs of these students. Collaboration across disciplines is viewed as very important to these teachers when it comes to providing comprehensive support to this population of students.

This study highlights the continued need for school based professionals such as school psychologists to offer support to special educators who work with students with emotional disabilities. Additional efforts are needed to help close the gap between research and practice when it comes to serving students with emotional disabilities and supporting the teachers responsible for ensuring and supporting their success. This could likely be achieved through collaborative efforts of professionals involved in working with these students and their families, in addition to consultative services that could be provided through school psychologists. Within their role, School Psychologists are able to offer additional specialized support within many of these areas of need. The following is a comprehensive list of ways in which school psychologists could address the above mentioned concerns and needs of special education teachers in providing supports to students with emotional disabilities:

1. Provide information, guidance, and support related to the development and implementation of social emotional curriculum programs.
2. Provide summaries of what research based practices are specific to particular student needs through a consultative style format.
3. Offer professional development opportunities to faculty and staff specific to identified areas of need.
4. Complete classroom observation components of student evaluations and/or offer to complete achievement testing when special educators need additional time to provide direct support to students with emotional disabilities.
5. Offer collaborative consultation to special education teachers who are working with extremely challenging behaviors and needs. Provide observations and

feedback of teacher implementation of evidenced based programs and strategies in order to help teachers become more confident in their abilities to appropriately and effectively address support data-driven decision making and monitoring of intervention effectiveness.

6. Support a collaborative approach with school leaders and administration. Address teacher and school bias toward students with emotional disabilities through dialogue and advocacy. Develop specific evidenced based interventions to match individual student needs.

Future studies could focus on perspectives of students with emotional disabilities and what supports and services they feel would be helpful in meeting their needs. A study of this nature could also examine advocacy skills and abilities of this population of students. Other studies could focus on the perspectives of non-disabled students within the general education setting related to being in a classroom with students with emotional disabilities or additional studies could focus on administering the survey that was designed for this study within other areas and regions within the United States to identify if the gap is indicated to exist within other states and/or localities. Again, such studies could provide important information related to what current practices are and how best to serve the needs of students with emotional disabilities.

Limitations

The current survey was sent to participants through their special education directors, meaning that not all special education teachers within the state of Virginia had the opportunity to participate in the survey. It is important to note that a few directors within different school districts in the state of Virginia indicated that their school systems

had their own Internal Review Boards (IRBs) which served the purpose of reviewing and approving research studies to be conducted within their specific school districts. The researcher of this study did not seek approval from each of these individual systems as this required an extensive amount of additional work, time, and possibly travel. As a result, not all potential participants were able to participate in the survey due to the IRB process requirements for some of the individual school districts regarding research. The timing in which the survey was sent out could have been another potential limitation as it was sent out in November of the academic year.

Participants who responded may have been more invested in the topic than other participants who chose not to participate in the study. The survey design relied on recall of past experiences in serving students with emotional disabilities, which may have been difficult to recall for some participants. It is possible that more information would have been obtained through use of focus groups and possibly individual interviews.

Appendix A

Email of Informed Consent

Dear Director of Special Education services,

My name is Mandi Simmers and I am a graduate student in the school psychology program at James Madison University. As part of the completion of my Educational Specialist thesis project, I have developed a study to **explore the needs of Special Education teachers in working with students with Emotional Disabilities**. In order to explore what these needs are, I have designed a survey to be completed anonymously by Special Education teachers within the state of Virginia. It is my hope that the results of this survey can help better inform future practices and support of special education teachers in serving and meeting the needs of students with emotional disabilities. This study has full approval of the JMU Institutional Review Board and is being supervised by Dr. Tammy Gilligan, Professor and Director of the School Psychology Program at JMU.

Please forward this email on to all of the special education teachers within your school district. Below I have included information specific to this study, including a link to the survey, which is important to be included in your email. I would like to thank you in advance for your time and cooperation in ensuring that this survey reaches the intended participants.

Thank you.

Research Study

Identification of Investigators & Purpose of Study

You are being asked to participate in a research study conducted by Mandi Simmers, M.A. from James Madison University. The purpose of this study is to identify current practices and views of special education teachers when supporting students with emotional disabilities. This study will contribute to the researcher's completion of her Educational Specialist thesis project.

Research Procedures

This study consists of a survey that will be administered to individual participants in the state of Virginia through *Qualtrics* (an online survey tool). You will be asked to provide answers to a series of questions related to your experience in providing services to students with emotional disabilities. Should you decide to participate in this confidential research you may access the survey by following the web link under the "Giving of Consent."

Time Required

Participation in this study will require 10-15 minutes of your time.

Risks

The researcher does not perceive more than minimal risks from your involvement in this study (that is, no risks beyond the risks associated with everyday life).

Benefits

There are no direct benefits for participation in this study. However, contributing to the understanding of professionals within the research community and educational systems of the current practices of special education teachers when working with students with emotional disabilities is an indirect benefit to research in the fields of education and psychology.

Confidentiality

The results of this research will be presented for classroom research and may be published in a peer reviewed journal in aggregate form (i.e., without identifying any individual). Individual responses will be anonymously obtained and recorded online through *Qualtrics* (a secure online survey tool), and data will be kept in the strictest confidence. The researcher will know if a participant has submitted a survey, but will not be able to identify the individual based on their responses as identifying information will not be collected, therefore maintaining anonymity of the survey. The results of this project will be coded to further maintain anonymity of the survey. Aggregated data will be presented representing averages or generalizations about the responses as a whole. All data will be stored in a secure location accessible only to the researcher and their advisor. Final aggregate results will be made available to the participants upon their request. Contact information of the researcher is provided below. The researcher retains the right to sue and publish non-identifiable data.

Participation & Withdrawal

Your participation is entirely voluntary. You are free to choose not to participate. Should you choose to participate, you can withdraw at any time without consequences of any kind. However, once your responses have been submitted and anonymously recorded you will not be able to withdraw from the study.

Questions about the Study

If you have questions or concerns during the time of your participation in the study, or after its completion or you would like to receive a copy of the final aggregate results of this study, please contact:

Mandi Simmers, M.A.
Department of Graduate School Psychology
James Madison University
simmerml@dukes.jmu.edu

Advisor's Name: Dr. Tammy Gilligan
James Madison University
(540) 568-6564
gilligtd@jmu.edu

Questions about Your Rights as a Research Subject

Dr. David Cockley
Chair, Institutional Review Board
James Madison University
(540) 568-2834
cocklede@jmu.edu

Giving of Consent

I have read this cover letter and I understand what is being requested of me as a participation in this study. I freely consent to participate. I have been given satisfactory answers to my questions. I certify that I am at least 18 years of age.

Follow this link to take the survey:

http://jmu.co1.qualtrics.com/SE/?SID=SV_5nHN1PHYAn66yDH

This study has been approved by the IRB, protocol # 17-0072

Appendix B

Survey Items

Please answer the following questions based on your caseloads of students as a special education teacher (within the last 3 years) that qualify or have qualified, to receive special education services under the Emotional Disability classification.

1. In what grade levels/settings have you provided special education services and supports to students with emotional disabilities? (Please indicate all answers that apply):

Pre-school

Elementary School

Middle School

High School

Alternative School Settings

Other: (Please specify in the box below)

2. How many students with individualized education plans (IEPs) are currently on your caseload?
3. How many of these students are identified as emotionally disabled as a primary or secondary disability category?
4. How many years have you been teaching in this role?
5. What is your highest degree attained?
6. What level of training did you receive in your degree program related to serving students with emotional disabilities? (Please indicate all that apply):

I completed a course specific to working with students with emotional disabilities.

My training in working with students with emotional disabilities was embedded within my degree program.

I did not receive any specific training related to serving students with emotional disabilities within my degree program.

Other: (Please indicate any other forms of professional development training you received in your degree program related to serving students with emotional disabilities)

7. Are there professional development training opportunities available within your school system specific to working with students with emotional disabilities?

Yes

No

I am not sure if training opportunities are available within my school system.

8. If previous Questioned was answered as, “Yes”: How satisfied were you with the training opportunities provided by your school system in meeting your needs in working with students with emotional disabilities?

Extremely satisfied

Moderately satisfied

Slightly satisfied

Neither satisfied nor dissatisfied

Slightly dissatisfied

Moderately dissatisfied

Extremely dissatisfied

9. Are you a member of a professional organization?

Yes (If yes, please indicate which professional organizations you are a member of in the text box below)

No

10. If responded with “Yes” to question 9, does this organization address and/or provide information related to serving students with emotional disabilities?

Yes

No

11. How prepared do you feel in serving students with emotional disabilities?

Very prepared

Prepared

Somewhat prepared

Unprepared

Very unprepared

12. Consider a typical work day for yourself. What percentage of your day is spent on the following? (Please click and drag cursor to indicate your responses):

Working one-on-one with students with emotional disabilities on your caseload, and/or working one-on-one with a student with an emotional disability in the ED program

Providing collaborative teaching in general education classrooms

Consulting with general education teachers and other professionals working with students with emotional disabilities on your caseload

Completing paperwork and attending meetings in which you do not have direct student contact

Providing crisis intervention and direct support to students with emotional disabilities

Other: (Please list any other tasks as a special education teacher working with students with emotional disabilities that require a significant role in your day)

13. What school-wide and/or student centered programs have been utilized by school systems you have worked within (past and present) in addressing and supporting the needs of students with emotional disabilities? (Please select all that apply):

PBIS (Positive Behavior Intervention Supports)

RTI (Response to Intervention)

Social-emotional learning curriculums

Skills training programs: Problem solving skills

Referring students to receive Therapeutic Day Treatment services

Other: (Please indicate any programs not listed above)

14. In your role as a special education teacher, please click and drag response options below from 1-5 according to what you feel your responsibilities (over-arching goals) are when addressing issues presented by students with emotional disabilities, from #1 being the most important role to #5 being the least important role.

Minimizing/extinguishing externalizing behavior issues

Supporting internalizing behavior issues

Improving social-emotional development

Preparation for return to regular education classrooms

Supporting development of self-regulation skills

15. When working with students with emotional disabilities regarding academic concerns, please indicate which of the following strategies you utilize on a regular and consistent basis:

Educational technology and software programs for learning materials

Use of scaffolding of content and/or direct learning curriculums that progressively builds upon already learned information and skills

Collaboration with parents, teachers, and school staff regarding student progress

Provide clear and concise multi-step directions prior to beginning each lesson/activity

Monitoring of intervention success and student progress toward identified academic goals

Use of multi-modal teaching strategies for content to be learned

Guided practice activities

Review sessions of newly taught materials

Recognizing and working within child's strengths

Other: (Please indicate other strategies that you utilize in helping students with emotional disabilities related to academic concerns)

16. When working with students with emotional disabilities regarding social-emotional concerns, please indicate which of the following strategies you utilize on a regular and consistent basis:

Multi-component interventions which may or may not include: collaboration with school counselor, school psychologist, school administration/staff, outpatient counseling services, families, and other professionals working with the child in designing interventions for the student across multiple settings

Teaching students anger management skills/strategies

Utilization of social-emotional learning curriculums

Providing a welcoming classroom environment and ensuring students feel as valued members of classroom community

Providing a structured classroom environment

Education related to development of prosocial skills

Education related to problem solving strategies

Inclusion of student in supervised social activities

Other: (Please list any additional supports not listed that are provided to meet the social-emotional needs of students with emotional disabilities within school systems that you have worked)

17. When working with students with emotional disabilities regarding behavioral concerns, please indicate which of the following strategies you utilize on a regular and consistent basis:

Multi-component interventions which may or may not include: collaboration with school counselor, school psychologist, school administration/staff, outpatient counseling services, families, and other professionals working with the child in designing interventions for the student across multiple settings

Utilization of school-wide prevention services and programs (i.e., PBIS, school-wide behavior expectations and rules that are clearly stated and printed)

Removal from general education classroom if warranted

In-school and out-of-school suspensions

Classroom rules and behavior expectations are developed as a whole-group activity, posted, and frequently reviewed

Positive reinforcement strategies paired with mild forms of punishment to redirect behavioral issues

Positive reinforcement of desired behaviors and choices in addition to providing consistent feedback

Response to Interventions: progress monitoring, collecting data toward goals, and/or modifications in behavior plans if warranted

Pre-identified supports for times of transition and coordination with “specials” teachers in addition to pre-identified forms of supervision throughout the academic day and/or in areas of difficulty

Use of token economy, point system, rewards, contingency behavior management system with use of meaningful reinforcers, and/or individualized behavior plans

FBA/BIPs

Modeling and teaching of desirable and self-monitoring related behaviors and skills

Exclusion from free-choice activities and/or outside activities as a form of consequence

Other: (Please list any additional strategies not listed that you utilize in addressing behavioral concerns)

18. Which of the following factors below, if any, do you feel may impede and/or hinder the success of providing adequate support services and interventions in meeting the needs of students with emotional disabilities? (Please indicate all that apply):

I am not up-to-date on what the research currently states as best practices when working with students with emotional disabilities

I do not always feel that research findings are applicable to the needs of students with emotional disabilities I serve currently, and/or those I have served in the past

Time is a factor in my abilities to keep up with the research and implement research findings

Lack of resources is a factor in my abilities to adequately meet and serve the needs of students with emotional disabilities

I find that the research related to serving students with emotional disabilities is too difficult to interpret and/or is not user-friendly

The high number of demands placed on me as a special education teacher is a factor in my abilities to adequately meet the needs of students with emotional disabilities

Lack of professional development opportunities and training are factors in my abilities to adequately meet the needs of students with emotional disabilities

Other: (Please indicate any other factors that may impede/hinder your abilities in providing adequate services and interventions in meeting the needs of students with emotional disabilities)

19. How satisfied are you with your current school system's abilities in helping you meet the needs of students with emotional disabilities that you currently serve?

Extremely satisfied

Moderately satisfied

Slightly satisfied

Neither satisfied nor dissatisfied

Slightly dissatisfied

Moderately dissatisfied

Extremely dissatisfied

20. What do you feel would be more helpful to you in serving students with emotional disabilities? (Please check all that apply):

Consultation with school psychologist

Professional development training opportunities

Increased administrative support

Additional time to plan for interventions

Additional resources specific to meeting the needs of students with emotional disabilities

Additional assistance and support staff in providing services

Other: (Please list any factors not listed above that you feel would be more helpful in your service to students with emotional disabilities)

Appendix C

Project Handout

ADDRESSING THE NEEDS OF STUDENTS WITH EMOTIONAL DISABILITIES- CURRENT PRACTICES

Mandi Simmers, M.A.
James Madison University

BACKGROUND

- Students with emotional disabilities (ED) can present a variety of challenges for educators
- Students with ED typically spend a significant portion of their school days with special education teachers
- School systems face the challenge of integrating what research states as best practices into current practices when serving the needs of these students Many evidence-based practices (EBP's) have been identified by the research field as effective interventions for this population of students
- Currently, little research exists on what current practices of special education teachers are when addressing and supporting the needs of these students, and if in fact, EBP's are currently being utilized.
- A "gap" is reported by the literature to exist between what the research field states as best practices and service delivery with regards to serving students with ED in the classroom
- With the existence of such a "gap," it is possible that students with emotional disabilities may not be receiving the most effective and appropriate services based on what research indicates as best practices

REASONS FOR THE "GAP" BETWEEN RESEARCH AND PRACTICE- ACCORDING TO THE RESEARCH LITERATURE

- Lack of educator involvement in research settings and limited communication between both fields
- Limited relevance and practicality of findings to the classroom setting and individual student needs
- Time constraints
- Lack of resources
- Organizational barriers
- Regulatory barriers

PURPOSE OF STUDY

- To identify if "gap" continues to exist within the current practices of special education teachers, and if so, to identify the barriers that continue to contribute to this "gap" to identify if such barriers are congruent with previous research findings.
- 197 special educators in VA completed a web-based survey aimed at investigating seven research questions specific to supporting the needs of students with ED.

WHY DOES THIS MATTER?

- In order to support educational systems in the delivery of empirically supported research practices; we need a more informed idea of what current practices are.
- We know the potential risk-factors that students with ED may likely face if appropriate supports, services, and interventions are not put into place to address their needs.
- Mental health needs of students with ED can often be overlooked. By being more informed about what current practices are; professionals working with these students can more easily connect these students with needed interventions and services.
- This information can be helpful in regard to providing counseling support services, evaluating individual student needs, and connecting them with appropriate service providers.

RESEARCH FINDINGS, DISCUSSION, AND IMPLICATIONS

RESEARCH QUESTIONS 1 & 2: TYPES OF INTERVENTIONS UTILIZED & FOCUS OF INTERVENTION

<p><u>DATA</u> In a typical day, how is your time spent?</p>	<p>Out of 197 participants,</p> <ul style="list-style-type: none"> • 115 reported spending an average of 23% of their days supporting crisis intervention and providing direct support to students with ED • 121 reported spending an average of 29% of their days working one-on-one with students with emotional disabilities and/or working one-on-one with a student with an ED in the ED program • 127 indicated spending on average 52% of their days providing collaborative teaching in general education classrooms • 132 indicated spending on average of 27% of their days completing paperwork and attending meetings in which they do not have direct student contact <ul style="list-style-type: none"> • Summary <ul style="list-style-type: none"> ▪ 64% spending ½ of their time providing <i>collaborative teaching</i> ▪ 61% spend over ¼ of day working <i>one-on-one with students</i> with ED ▪ 67% of respondents are spending ¼ of their days on <i>paperwork/meetings</i> ▪ 58% spend a ¼ of their day providing <i>individualized attention</i> and services to this part of their caseload of students
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<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • More than ½ of their time is spent on <i>collaborative teaching</i> in general education classroom. <ul style="list-style-type: none"> ○ This may be a way in which to help reduce use of more exclusionary and restrictive practices when educating these students. ○ May indicate that when students with ED are being taught with same age peers and integrated into general education setting, that this could allow for these students with further generalizing development and utilization of behavior management skills, impulse control skills, and social-emotional skills into other settings. • Over half of special education teachers are spending over a ¼ of their day in working one-on-one with students with ED. <ul style="list-style-type: none"> ○ Because special education teachers are reportedly spending so much of their days with these students, it important to make sure they have necessary supports in place, as managing students with such challenging behaviors can be exhausting. ○ Considerations that can be made to address potential teacher burnout and exhaustion when working with these students: teacher wellness programs, opportunities for consultation with administration and school psychologists, having available support staff in which they can delegate important tasks to with regard to other students on their caseloads. • Almost ¾'s of special education teachers are spending ¼ of each day in meetings and in completing paperwork. <ul style="list-style-type: none"> ○ Highlights a need for having productive and efficient meetings-streamlining meetings and having meaningful discussion. School psychologists and administrators are able to help with maintaining the focus of meeting to encourage on-topic conversations. ○ May highlight the need for allotted time for paperwork completion for these teachers, or to decrease amount of paperwork documentation that these teachers are responsible for-to allow for more time in serving student needs.
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<p><u>DATA</u> School-Wide/Student-Centered Programs Currently being Utilized...</p>	<p>School-wide/student-centered programs used by school systems that special education teachers are working or have worked with in (past or present) in addressing the needs of students with ED:</p> <ul style="list-style-type: none"> • Programs used most often: PBIS 76.3%, RTI 69.7%, and referring to TDT 69.1%
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<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • The three most widely used programs currently within state of VA, according to respondents are: PBIS, RTI, and TDT referral. <ul style="list-style-type: none"> ○ All three have been identified within the research to be EBP for working with students with ED • Indicates a reliance on school wide prevention and intervention programs to help further support the needs of these students. • It appears that school systems in VA may be using a combination of the above evidence-based programs in order to support the needs of students with emotional disabilities • With support of school systems in providing school-wide student-centered programs that are indicated by research to be effective in addressing the needs of students with emotional disabilities (provided they are implemented consistently and with fidelity) - This provides opportunities at a universal level to reduce problematic behaviors in students with emotional disabilities to potentially allow for special education teachers to address other areas of need for these students.
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<p><u>DATA</u> Responsibilities/ Over-Arching Goals...</p>	<p>In their role as special education teachers (146 participants), the most important responsibilities/over-arching goals when addressing issues presented by students with ED are from most important responsibility to lesser important responsibilities:</p> <ul style="list-style-type: none"> • 1st: 49.3% Minimizing/extinguishing <i>externalizing behavior</i> issues • 2nd: 33.6% supporting development of <i>self-regulation skills</i> • 3rd: 28.1% supporting <i>internalizing behavior</i> issues • 4th: 26% Improving <i>social-emotional development</i> • 5th: 59.59% Preparation for <i>return to regular education</i> classroom
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<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • Results align with research in that often externalizing behaviors are addressed before more internalizing types of behaviors- Meaning that students with ED that struggle with primarily internalizing issues may be overlooked or may not receive as much support as students with externalizing behavioral needs • Only a ¼ of respondents work with students on social-emotional skills development and/or focus on supporting and addressing internalizing behavior issues. <ul style="list-style-type: none"> ○ As students with more internalizing types of issues may get overlooked, this highlights the need for support in helping teachers identify ways in which to support both internalizing and externalizing issues in order for all students to have their needs equally addressed. Could be achieved through professional development training opportunities which can be provided by school psychologists. • Also highlights the need for additional professional development training opportunities related to teaching students with ED important self-regulation skills and social-emotional skills
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<p><u>DATA</u> Strategies most widely used for addressing</p>	<p>Strategies most often used with students with ED in addressing academic concerns (142 participants):</p> <ul style="list-style-type: none"> • 93% <i>Collaboration</i> with parents, teachers, and school staff regarding student progress
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<p>academic concerns</p>	<ul style="list-style-type: none"> • 90.9% Recognizing and <i>working within child's strengths</i> • 78.9% Provide <i>clear and concise multi-step directions</i> prior to beginning lessons/activities • 75.4% <i>Monitoring of intervention success</i> & student progress toward identified academic goals • 73.2% <i>guided practice</i> activities • 68.3% <i>scaffolding</i> of content and/or direct learning curriculums that progressively build upon already learned information and skills. • 59.9% <i>Review sessions</i> of newly taught material • 57.8% Use of <i>multi-modal teaching strategies</i> for content to be learned • 54.2% Educational <i>technology and software</i> programs • 7.8% Other: preparing and delivering instruction, outline lessons and provide concise directions, teacher think alouds, relationship building
<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • Most widely used strategies in addressing academic concerns are: collaboration, working within child's strengths, clear and concise communication, monitoring of intervention success, and guided practice activities • Teachers value collaboration with those involved with students with emotional disabilities • Participants indicated utilization of a variety of academically-based strategies in supporting the needs of these students • Many of strategies used to address academic concerns align with what research indicates as best practices when working with students with emotional disabilities including: <ul style="list-style-type: none"> ○ Curriculums that progressively build upon already learned skills/scaffolding ○ Continual review of newly learned material ○ Clear and concise step-by-step directions and lessons ○ Multi-modal teaching strategies ○ Guided practice activities • EBP's that could be utilized more to encourage more positive outcomes: <ul style="list-style-type: none"> ○ frequent feedback and positive reinforcement for assignments completed with effort ○ Paying attention to learning factors that may cause intensified behavioral issues (performance anxiety, deficits in learning, ect.) • Highlights that teachers are already using a variety of EBP when addressing academic concerns/needs of these students, and that there are additional areas that teachers could place additional focus on that may led to increased success.

<p><u>DATA</u> Strategies most widely used for addressing social-emotional concerns</p>	<p>Strategies most often used with students with ED in addressing social-emotional concerns (139 participants):</p> <ul style="list-style-type: none"> • 89.2% <i>structured classroom</i> environment • 83.5% <i>welcoming</i> classroom environment • 77% <i>multi-component</i> intervention • 68.4% Teaching <i>anger management</i> skills • 64% inclusion of students in <i>supervised social activities</i> • 59.7% education on <i>problem solving</i> strategies
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	<ul style="list-style-type: none"> • 39.6% <i>prosocial skills</i> education • 27.3% <i>social-emotional</i> curriculums • 4.3% Other: extended time to learn social skills and problem solving, growth mindset curriculum, behavior plans, therapeutic interventions
<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • Most commonly used strategies are: structured class environment, welcoming classroom, and multi-component intervention • Align with what research indicates as best practices in addressing social-emotional concerns in areas of: <ul style="list-style-type: none"> ○ Structured classroom, welcoming classroom, multi-component intervention, inclusion in supervised social activities, prosocial and social-emotional curriculums • School psychologists can be utilized to provide information, guidance, and support related to the development and implementation of social emotional curriculum programs; help set up structure within classrooms; and provide skills development/behavior management intervention support to students in need

<p><u>DATA</u> Strategies most widely used for addressing behavioral concerns</p>	<p>Strategies most often used with students with ED in addressing behavioral concerns (138 participants):</p> <ul style="list-style-type: none"> • 85.5% <i>Positive reinforcement</i> of desired behaviors in addition to providing consistent feedback • 76.1% <i>classroom rules</i> and behavior expectations developed as whole-group, posted and reviewed frequently • 73.9% <i>FBA/BIP</i> • 71% <i>multi-component</i> interventions • 71% <i>removal from general education</i> setting if warranted • 70.3% Modeling and <i>teaching desirable and self-monitoring</i> related behaviors and skills • 68.9% <i>positive reinforcement</i> strategies paired with mild forms of punishment • 68.1% <i>school-wide prevention</i> services and programs • 60.1% <i>RTI</i> • 54.4% token economy, point systems, rewards, contingency behavior management system with meaningful reinforcers, and or individualized behavior plans • 38.4% In-school and out-of-school <i>suspension</i> • 37% <i>pre-identified supports</i> for transition times and coordination with “Specials” teachers and pre-identified supervision throughout the day • 19.6% <i>exclusion from free-choice activities</i> and/or outside activities as a form of consequences • 5.8% Other: use of technology, classroom removal, social stories/videos, choice chart for positive alternative behaviors
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<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • Most widely used interventions are: positive reinforcement/consistent feedback, development of rules as a whole group and reviewed frequently, and FBA/BIP's • It is concerning that according to participant responses that 40% of schools resort to suspension. This still seems to be a relatively common practice despite research indicating that use of suspensions have not been indicated to be effective; and can often cause more harm than good when addressing the needs of students with emotional disabilities • 20% continue to use exclusionary practices- although this too is indicated by the research to not be effective/helpful to this population of students • Use of behavioral contracts have been indicated to be effective within the research literature- So more use of this may help decrease unwanted choices/behaviors • Teachers could also consider use of educational software programs to help reduce levels of defiance and argumentation with adults/authority figures. This could also be used as part of a rewards system to increase student motivation and cooperation. • Indicated utilization of a variety of behaviorally-based strategies. • School psychologists are able to help school systems identify alternative strategies/interventions to decrease use of more exclusionary, restrictive, and punitive types of measures such as suspensions. • Highlights the need and opportunities for skills teaching in areas of: problem solving, prosocial skills development, anger management, impulse control. Again, school psychologists are trained to aid in this. Additionally, school psychologists are able to aid in the development of behavioral contracts that are individualized to student needs; and could help with development of data collection for progress monitoring, research educational software programs, and how to best utilize them with students with emotional disabilities
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RESEARCH QUESTION 3: LEVELS OF TRAINING, PREPERATION AND KNOWLEDGE

- **Mean number of years** teaching within this role: 11.67 years
 - Range: 0 years to 30 years

<p><u>DATA</u></p> <p>Degrees and/or certifications & training received specific to working with students with emotional disabilities</p>	<p>Degree's attained (168 respondents):</p> <ul style="list-style-type: none"> • 58.3% Masters • 36.3% Bachelors • 5.4% "Other" degrees/certifications: Educational Specialist, MED/EDS, Psy.S. • Level of Training: Of these respondents (168 respondents): <ul style="list-style-type: none"> ▪ 60.7% said their training in working with students with emotional disabilities was embedded within their degree program ▪ 39.3% completed a course specific to working with students with ED ▪ 13.7% did not receive any specific raining related to serving students with ED within their degree programs ▪ 10.7% "Other": SOAR program through UVA,
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	Master’s/Ed.S. in school counseling, prior experience within ED classrooms and/or children’s homes for students with emotional disabilities
<u>DISCUSSION & IMPLICATIONS</u>	<ul style="list-style-type: none"> • Special education teachers in Virginia value and appreciate specialized training; although, there is limited specialized training available for many of these teachers. It is important to note that some of them did not receive specific training within their degree programs. • While these teachers are experienced and often well-qualified, most have a need or could potentially benefit from further training and professional development opportunities in serving these students.

<u>DATA</u> Current training opportunities...	<p>Are there current training opportunities offered within your school system specific to supporting the needs of students with ED (165 respondents):</p> <ul style="list-style-type: none"> • 49.1% not currently any • 29.7% unsure if training opportunities are available • 21.2% yes • 35 respondents indicated they had received some type of professional development and/or training opportunities within their school systems. <ul style="list-style-type: none"> ○ Of these 35 respondents: <ul style="list-style-type: none"> ▪ 22.9% were extremely satisfied ▪ 22.9% were slightly satisfied ▪ 11.4% were neither satisfied nor dissatisfied ▪ 11.4% were slightly dissatisfied ▪ 5.71% were extremely dissatisfied with the quality of training
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<u>DISCUSSION & IMPLICATIONS</u>	<ul style="list-style-type: none"> • Special education teachers in VA value and appreciate specialized training; although, there is limited specialized training available for many of these teachers. • While these teachers are experienced and often well-qualified, most have a need for further training and professional development opportunities in serving these students- Only 21.2% have current training opportunities available to them within their school systems- - This may indicate that needs of students may not be entirely met as a result • Opportunity for school systems to collaborate to organize efforts in providing additional professional development training for teachers working with these students- School psychologists could help facilitate this as well, and are able to provide such professional development trainings.
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<u>DATA</u> Membership with Professional Organizations...	<p>Membership with professional organizations (160 respondents):</p> <ul style="list-style-type: none"> • 45% are currently members of 1 or more of the following organizations: Virginia Education Association, Council for Exceptional Children, and the Virginia Association for Supervision and Curriculum Development • When asked if these organizations provide information related to serving students with ED?
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	<ul style="list-style-type: none"> • 49.3% (71 respondents) Yes
<u>DISCUSSION & IMPLICATIONS</u>	<ul style="list-style-type: none"> • Highlights opportunity for collaboration and involvement in more or related professional organizations • Of organizations- only ½ of them are indicated by respondents to provide information specific to serving students with emotional disabilities • School psychologists are in a position in which they can help increase awareness of resources and other professional organizations which provide valuable information on EBP’s when working with students with emotional disabilities

<u>DATA</u> How prepared do special education teachers feel in serving students with emotional disabilities?	<p>How prepared do special education teachers feel (Research question 3 & 4) they are in serving students with emotional disabilities (165 respondents):</p> <ul style="list-style-type: none"> • 18.79% feel very prepared • 37.6% feel prepared • 37.6% feel somewhat prepared • 4.9% feel unprepared • 1.2% feel very unprepared
<u>DISCUSSION & IMPLICATIONS</u>	<ul style="list-style-type: none"> • A majority of teachers who participated in this study feel at least “Somewhat prepared” to “prepared” when it comes to serving the needs of students with ED • Many still feel the need for more assistance with addressing the social and emotional needs of these students • Participants indicated they would value additional professional development training opportunities • While these teachers are experienced and often well-qualified, most have a need for further training and professional development opportunities in serving these students • School psychologists are able to provide: trainings, resources, research summaries, consultation, and behavioral intervention support

<u>DATA</u> Factors that may impede/hinder success in addressing the needs of students with emotional disabilities	<p>Factors that may impede/hinder success in providing adequate supports/services in meeting the needs of students with ED (128 respondents):</p> <ul style="list-style-type: none"> • 60.9% high number of demands in role as special education teacher • 43% Lack of resources • 41.41% Limited professional development trainings • 57.8% Time constraints • 31.3% Not up-to-date on what research states is best practices • 19.53% research findings are not always applicable • 10.2% research is difficult to interpret • 12.5% Other: lack of support from school board, working with teachers who do not believe in PBIS, research is not easily accessible to a busy special educator, not having enough time due to a large caseload
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<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • Results of this study highlight that a “gap” in practice continues to exist between the research and educational fields • Indicated a need for more time within their roles to be able to effectively plan for interventions with these students • Current factors contributing to gap are similar to factors identified within past studies • Special education teachers in VA value and appreciate specialized training; although, there is limited specialized training available for many of these teachers; and limited time to attend such trainings • Educators reported a need for ideas to better access studies and research-based recommendations for working with students with emotional disabilities • School psychologists can support a collaborative approach with school staff and administration. They can also address teacher and/or school biases toward students with emotional disabilities through dialogue and advocacy. School psychologists are able to develop specific evidenced based interventions to match individual student needs. • School Psychologists are trained to complete classroom observation components of student evaluations and/or can offer to complete achievement testing when special educators need additional time to provide direct support to students with emotional disabilities • School psychologists can: offer collaborative consultation to special education teachers- who are working with extremely challenging behaviors and needs. They can provide observations and feedback of teacher implementation of evidenced based programs and strategies in order to help teachers become more confident in their abilities to appropriately and effectively address student needs
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RESEARCH QUESTIONS FOUR & FIVE: ACCESS TO RESOURCES AND LEVEL OF SUPPORT FROM SCHOOL SYSTEMS

<p><u>DATA</u> Factors that may be helpful in the success of special education teachers in addressing the needs of students with emotional disabilities</p>	<p>When identifying what factors would be helpful to their success in serving these students:</p> <ul style="list-style-type: none"> ○ 58% additional assistance and support staff in providing services ○ 32% increased administrative support ○ 26% consultation with a school psychologist • Lack of support from school board was indicated as an “Other” response for factors that impede success
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<p><u>DISCUSSION & IMPLICATIONS</u></p>	<ul style="list-style-type: none"> • Collaboration across disciplines is viewed as very important to teachers when it comes to providing comprehensive support and services to this population of students • Study highlights the continued need for school-based professionals, such as school psychologists, to offer support to the teachers who work with students with emotional disabilities. • Additional efforts are needed to help close the gap between research and practice when it comes to ensuring the success of these students. Could be achieved through collaborative efforts of professionals involved in working with these students, increase administrative support. • Educators reported a need for ideas to better access studies and research-based recommendations for working with students with ED • School psychologists can offer collaborative consultation to special education teachers, who are working with extremely challenging behaviors and needs. They can provide observations and feedback of teacher implementation of evidenced based programs and strategies in order to help teachers become more confident in their abilities to appropriately and effectively address the needs of students with emotional disabilities.
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RESEARCH QUESTION SIX & SEVEN: AWARENESS OF BEST PRACTICES & FEASIBILITY AND ACCEPTABILITY OF EBP’S IN CLASSROOM SETTING

<p><u>DATA</u> What level of understanding do SPED teachers posses in regard to EBP’s?</p>	<ul style="list-style-type: none"> • When asked a question to look at to what level do special education teachers understand is best practices when working with students with emotional disabilities (128 respondents): <ul style="list-style-type: none"> ○ 31.3% are not up-to-date on what research currently states as best practices when working with students with emotional disabilities & feel this is an impediment to their success ○ 19.5% do not always feel that the research findings are applicable to the needs of students with emotional disabilities ○ 10.2% find the research related to serving students with emotional disabilities to be too difficult to interpret and/or is not user-friendly ○ “Other”: it’s not that the research is too difficult to understand, but more so that it is not easily accessible to a special educator who wears many hats
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<u>DISCUSSION & IMPLICATIONS</u>	<ul style="list-style-type: none">• Educators reported a need for ideas to better access studies and research-based recommendations for working with students with ED• Acknowledged a need to become more up-to-date with best practices and for guidance in making best practices more applicable to particular student needs, and with interpreting more difficult to understand findings• Indicated they would value additional professional development training opportunities• While these teachers are experienced and often well-qualified, most have a need for further training and professional development opportunities in serving these students and help with regard to research interpretation and implementation.• School Psychologists could provide summaries of what research based practices are specific to particular student needs through a consultative style format.• School Psychologists are able to offer professional development opportunities to faculty and staff specific to identified areas of need.
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