Another Look at EBD Criteria & Evaluation

Why this new look at an old issue?

- Improved documentation
  - Transfer students
  - Student moving to another level or building
  - Ethics, professionalism, due process
  - Discipline
- Disproportionality
- Inappropriate identification
- Procedural compliance ≠ good practice

Myths and Legends...

- PI-11 criteria are just suggestions
- Checklist is enough w/o comments or examples
- We can refuse to identify a student as EBD because he/she "chooses"...
- Any student who misbehaves qualifies
- Behavior "A" may be at school only, "B" at home only, but we still have "across settings"

"Disturbed"? or "Disturbing"?

- EBD is not
  - For all students with behavioral issues, social deficits, mental health issues...
  - For students who don't "need" special education...
Let’s review...

- Meets the definition
- *Severe and chronic and frequent*
- Occurs across settings
- Pattern/characteristics
- Variety of sources, systematic observations, review prior documented interventions
- Not based solely on a label, diagnosis, etc.

"But anybody can qualify..."

- What’s your agenda?
- Here’s where quality comes in
- Need to do a thorough evaluation

Back to Square One...

*PI-11.36(7) (a) - the definition:*

1) Social/emotional/behavioral functioning
2) So departs from generally accepted
3) Adversely affects 1 or more: academics, social relationships, personal adjustment, classroom adjustment, self-care, vocational skills
Social/emotional/behavioral

- Not necessary to define or delineate
- Issue is not a communication disorder, cognitive limitations, learning problems – or if the student does, the social, emotional, behavioral issues are the root

So departs...

...from generally accepted, age appropriate, ethnic or cultural norms

Let’s take a little detour...

Ethnicity, Culture, and Behavior

[adapted from Dona & Bardon, 2001]

- How aware are you of the child’s cultural background?
- What else should you know about the child’s background and how will you obtain this information?
- What do you need to be aware of regarding your own cultural background that could potentially influence your perception of the child’s culturally-related needs and behaviors?
- What set of factors elicits the behavior of concern?
- What need(s) is the student trying to meet?
- How are these needs a reflection of the child’s cultural background?

[cont.]

- What is the level of “match” between classroom strategies and management techniques and the cultural dimensions that characterize this child’s learning and social orientations?
- Could the child’s problematic behavior be a response to this “mismatch”?
- What supports do you need to bring your classroom instructional approaches into greater alignment with the child’s cultural dimensions and learning orientations?
Don’t forget…

- We cannot assume child deficits without examining context
  - Do negative classroom environments contribute?
  - Does the student know the expectations of the classroom and school?
  - Are there supportive rather than punitive school policies and a commitment to functions of behavior?

Back to the criteria…

Adversely affects -

- Academics: traditional measures of school progress
- Social relationships: get along w/ others
- Personal adjustment: feelings about him/herself
- Classroom adjustment: function & succeed in classroom settings
- Self-care: lack of personal care
- Vocational skills: transition planning

Criteria [PI-11.36 (7)(b)1-3]

- 3-dimensional model
- Behavior characteristic of EBD: same behavior pattern that is severe, chronic, and frequent and occurs at school and at least 1 other setting

Severe, Chronic, Frequent

- Severe: in excess, extremely intense, to a significant degree, repeated
- Chronic: habitual, persistent, recurring over a long period of time, an on-going pattern (chronic ≠ 6 months)
- Frequent: much more than normal or expected, occurring regularly, with very short intervals between occurrences
**Settings**

- “Occurs”, not “is a problem”
- Why don’t certain things occur?
- School (educational disability)
  - All school settings including bus, playground, lunchroom, field trips
- At least one other
  - Home
  - Community
  - Reliability of information

**Preschool Students**

- “So different from children of similar age…”
- Less important to delineate “school, home, community”; more important to focus on behaviors in a variety of settings
- Are the settings appropriate for young children?

**Behavior to Watch With Young Children...**

- Low threshold for frustration
- Excessive difficulty socializing, trusting
- Throwing toys or other objects to get own way
- Yells, shouts, curses to excess
- Frequent and extreme tantrums
- Wants to be alone, not interested in other children
- Appears depressed or withdrawn
- Very short attention span, extreme distractibility, anxiety or impulsiveness
- Unusual behavior: eating unusual things, picking at certain areas of body, crying at inappropriate times

**Characteristics of EBD**

- Patterns, not discrete behaviors
- Patterns are severe, chronic, frequent, across settings
- Consider behavioral deficits as well as excesses - too much or too little
• An inability to develop or maintain satisfactory interpersonal relationships
  - Lacks trust in others or is fearful of others
  - Ignored or rejected by peers
  - Is too easily influenced by peers
  - Uses/manipulates others
  - Excessively dependent
  - Excessively controlling
  - Inability to interact with a group/play by the rules
  - Sees self as a victim
  - Difficulty attaching to others
  - Difficulty separating from caregivers
  - Lack of social awareness—may not understand social conventions or behavioral expectations
  - Exhibits inappropriate sexual behavior
  - Overly affectionate

• Inappropriate affective or behavioral response to a normal situation
  - Inappropriately laughs or cries
  - Lies, cheats, steals
  - Overreacts
  - Refuses to do school work
  - Refuses to respond to others
  - Non-compliant or passive-aggressive
  - Inability to make changes or transitions
  - Exhibits flat affect
  - Appears remorseless
  - Becomes defensive without provocation
  - Lacks empathy
  - Overly perfectionistic or hard on self
  - Disorganized or scattered thought processes
  - Lack of assertiveness
  - Wide mood swings
  - Excessive emotional responses
  - Impulsive; lack of self control
  - Extreme responses to changes in routine or schedule

• Pervasive unhappiness, depression, or anxiety
  - Listless or apathetic
  - Thinks/ talks repeatedly of suicide
  - Overly pessimistic
  - Preoccupied with negative feelings
  - Hides
  - Runs away from home
  - Anxious habits such as nail biting or hair pulling
  - Expresses feelings of worthlessness, hopelessness
  - Preoccupied
  - Obsessive/compulsive
  - Loss of interest in activities
  - Lacks interest in surroundings, activities, etc.
  - Volatile temper or excessive anger
  - Blames self; extremely self-critical

• Physical symptoms, pains or fears associated with personal or school problems
  - Physical complaints that cannot be easily checked or verified and are most visible during stressful situations
  - Excessive absences, tardiness, truancy
  - Frequently requests visits to the school nurse
  - Refuses to attend school (“school phobic”)
  - Self-mutilating
  - Unusual sleeping or eating patterns
  - Eating disorders
  - Flinches or cowers
  - Has atypical physical reactions (i.e., sweaty palms, dizziness, voice tone, always “freezing”, and so on)
  - Excessively fearful in response to new situations, certain people or groups, certain classes or activities
  - Neglects self-care and hygiene
  - Auditory or visual hallucinations
  - Psychosomatic illnesses (stomach aches, nausea, dizziness, headaches, vomiting)
• Inability to learn that cannot be explained by intellectual, sensory or other health factors
  - Disorganized
  - Quits or gives up easily
  - Has been retained
  - No health or sensory impairments have been found by a physician or impairments are not significant enough to explain the discrepancy
  - May be learning to some extent but there's a significant difference between potential and demonstrated learning
  - Achievement scores are incompatible with IQ scores
  - Difficulty retaining material

• Extreme withdrawal from social interaction
  - Does not participate in class
  - Isolates self from family, peers, staff at school
  - Avoids eye contact
  - Keeps head down on desk; may cover head with jacket or other apparel
  - Speaks in a quiet voice or mumbles; refuses to speak
  - Truant or runs away
  - Shuts self in room

• Extreme aggressiveness
  - Recurring patterns (not isolated incidents)
  - Verbal: vulgar language, swears, threatens, belittles, name calling, loud, argumentative, challenging, condescending, lying
  - Physical: spits, kicks, trips, hits, bites, pinches, throws or destroys objects, carries and uses weapons, intimidating, destroys property, vandalism, tantrums, cheating, stealing, bullying, cruelty to animals

• Other inappropriate behaviors that are so different from children of similar age, ability, educational experiences and opportunities that the child or other children in a regular or special education program are negatively affected
  - Within a reasonable range of expectations
  - Reactions are more intense/extreme or passive/apathetic than peers in cultural reference group
  - Taking into account any cultural or ethnic issues so as to avoid misidentification or over-identification of minorities
  - Social maturity
  - Emotional maturity
  - Ostracized by peers
  - Presence interferes with the education of others
  - Reality distortion
  - Hallucinations
  - Rigid or ritualistic behaviors
  - Stereotypic movements
What's Not Okay?

- Isolated incidents
- 1 behavior is chronic at school, while a second behavior occurs at home...
- Setting standards not in PI-11 (e.g., “chronic” = 6 months, deliberate behavior ≠ EBD, etc.)

Complete Evaluation

[PI 11.36(7)( c )]

- Variety of sources of information
  - Interviews
  - Records, grades
  - Testing
  - Rating scales
- Observations
- Prior documented interventions
- Cause?

Best Practices in Evaluation

- Do FBA at the same time
- Educational needs, not just eligibility
- Behavior rating scale/checklist
  - Likert scale rather than “yes-no”
  - Even number of scale options
  - Aggregate data
  - Can be response bias
  - Nothing on antecedents or consequences

- Observations
  - Behavior occurs in a context
  - Variety !!
  - 20 minutes
- Interviews
  - Opportunity to observe
  - Open-ended questions
  - Subjective
Observable, Measurable Behavior
- What does the student do or say? What does the teacher see or hear?
- Objective (e.g., “hits” instead of “gets mad”)
- Measurable
- Definition clear to all

Triangulate!
- At least 3 sources that corroborate each other
- Individually and as a team
- Multiple, varying sources – not all 1 kind (e.g., not all interviews, or not all test scores)

PI 11.36(7)(d)
The IEP team may not identify or refuse to identify a child as a child with an emotional behavioral disability solely on the basis that the child has another disability, or is socially maladjusted, adjudged delinquent, a dropout, chemically dependent, or a child whose behavior is primarily due to cultural deprivation, familial instability, suspected child abuse or socio-economic circumstances, or when medical or psychiatric diagnostic statements have been used to describe the child’s behavior.

Not “solely”...
- No automatics
- Neither inclusionary nor exclusionary
- Information but not determinant
- Systems are not interchangeable
- This is an educational impairment
Need for Special Education

1) Child has needs that cannot be met in regular education as structured; [Mismatch between needs & regular education is too great]

If student needs can be met in regular ed., no "need for special education"; if cannot be met in regular ed., go to #2

2) Modifications, if any, in regular education to allow access to general ed. curriculum and meet the educational standards that apply to all children. Consider:

- Content
- Methodology
- Delivery of instruction

These modifications may (2A) or may not (2B) require special education...

3) Additions or modifications, if any, not provided in regular education

- Replacement content or curriculum
- Expanded core curriculum
- Other supports

"Need for special education" means "yes" to question 1 AND needs listed under 2B or 3

Resources
