# CHAPTER 5

# Overview of the Individualized Behavior Support Process

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evi is an 8-year-old male diagnosed with attention-deficit/hyperactivity disorder (ADHD), autism spectrum disorder (ASD), and a sensory integration disorder. Levi, a third grader, attends his neighborhood elementary school, where he spends 60% of his day in an autistic support classroom. He participates in social studies, specials, and lunch with his general education cohort. According to recent cognitive assessments, Levi's intellectual functioning is in the low-average range, with a relative strength in working memory and a relative weakness in visuospatial tasks. The examiner noted that Levi's low frustration tolerance may have impacted his effort level on some of the subtests, rendering the results an underestimate of his overall cognitive ability. Levi's fine and gross motor skills are also significantly delayed. Until the beginning of third grade, Levi toe walked when not wearing shoes. He cannot tie his shoes independently and has some difficulty with buttoning and zipping. Levi's handwriting is barely legible, as he often produces written work that contains poorly formed, unevenly spaced letters, as well as missed punctuation and frequent misspellings. Resultantly, Levi receives weekly occupational therapy sessions that are embedded within his autistic support classroom. Levi's coordination and balance are delayed, as he is unable to ride a bicycle without training wheels. Levi also requires adapted physical education services in school to meaningfully participate in physical education activities and improve his motor planning skills.

As early as preschool, Levi exhibited behavioral issues, stemming from emotion dysregulation, that interfered with his ability to comply with adult directions, interact appropriately with peers, and manage frustration. When frustrated or upset, Levi often physically aggressed toward peers and adults, and destroyed materials. As such, Levi was expelled from two day care settings and one preschool program due to the intensity of his violent outbursts. Levi was evaluated and began receiving special education services at age 6, at the end of kindergarten. In accordance with the Individuals with Disabilities Education Act (IDEA) eligibility categories, Levi's special education classifications included Autism and Other Health Impairment (to address his psychiatric diagnosis of ADHD). Since that time, strategies to address Levi's communication needs, behavioral issues, and written expression deficits have been documented in an individualized education program (IEP).

When Levi entered second grade, the severity of his behavioral issues intensified, prompting the addition of a positive behavior support (PBS) plan to his IEP. Presently, Levi engages in severe behavioral incidents multiple times throughout a school day, with the duration of these episodes lasting typically under 10 minutes. These behaviors substantially interfere with Levi's classroom engagement, academic progress, and ability to maintain peer relationships.

In just one recent school day, Levi engaged in the following three behavioral incidents:

• Incident 1: Levi's class was transitioning to the gymnasium for physical education class. Levi was third in line and appeared visibly upset about not being selected as the "line leader." He made facial grimaces at the students in front of him and mumbled disrespectful comments as he entered the gymnasium. The class began with a badminton warm-up activity; Levi was paired with a nonpreferred peer to practice bouncing a shuttlecock on the racket. Each pair had one racket and shuttlecock. The students were instructed to take turns using the racket to bounce the shuttlecock while counting for each other; the number of consecutive bounces achieved would be reported to the teacher at the conclusion of the activity. Levi grabbed the racket from his peer, scowling, "I'll go first!" The peer began counting Levi's bounces, "One, two," and then the shuttlecock fell to the floor. Levi screamed at the peer, "I hate you, cheater! You always make me miss it!" as he threw the racket toward the wall and stormed out of the gymnasium.

- *Incident 2*: Ms. Pennypacker directed her students to begin working independently on their assignment in their math workbooks. As Ms. Pennypacker wrote the page number on the whiteboard, she reminded her students that they needed to show all of their work in order to receive full credit. Levi dramatically fell to the floor and began searching for his favorite blue pencil. After several minutes, Levi returned to his seat and began kicking the legs of his desk. Ms. Pennypacker approached Levi's desk and reminded him that all of his math work had to be finished in order to go outside for recess. Levi yelled, "Idiot!" at Ms. Pennypacker, ripped the pages from his workbook, and began stomping on them.
- *Incident 3:* As Ms. Pennypacker reviewed Levi's point earnings with him at the end of language arts class, she praised him for having his homework completed and submitted on time. She also commended Levi for identifying several supporting arguments in his persuasive essay on preserving natural ecosystems. Next, Ms. Pennypacker urged Levi to use a "quiet raised hand" to get her attention rather than saying her name repeatedly. Levi started talking over Ms. Pennypacker, telling her he needed her help immediately, because he wanted to finish his essay in class. As Mr. Pennypacker continued to speak about Levi's point earnings, he pounded his fists on his desk, repeatedly called her an "idiot," and blamed her for "taking away his points."

There are hundreds of students like Levi. Some present more severe problem behaviors; others present less problematic concerns. Nevertheless, the question of how to begin designing a PBS plan for such a student can be overwhelming—particularly when team members feel pressured to balance the student's needs with the needs and concerns of other students, teachers, parents, and school administrators.

PBS offers a comprehensive, problem-solving approach for understanding reasons for problem behavior and designing effective and long-lasting interventions uniquely tailored to individual students. The problem-solving and ongoing nature of the approach makes the process dynamic and flexible. Team members develop and implement a behavior support plan once they gather sufficient information about a student and potential reasons for problem behaviors. Over time, a number of life changes (e.g., a transition to a new classroom, emergence of mental health concerns) may require the team to modify these supports to address new concerns.

Although the process for providing PBS is dynamic, it is helpful to conceptualize the entire process—from identifying a problem behavior to evaluating and modifying a behavior support plan—in explicit steps (e.g., Bambara, Janney, & Snell, 2015; Dunlap et al., 2010). Our

purpose in this chapter is to overview five basic process steps for designing PBS interventions for individual students. Specific information on how to conduct functional assessments, develop hypotheses, and design and evaluate individualized behavior support plans is described in subsequent chapters. Our goal in this chapter is to provide an organizing framework for illustrating the entire PBS process.

#### STEPS IN THE PBS PROCESS

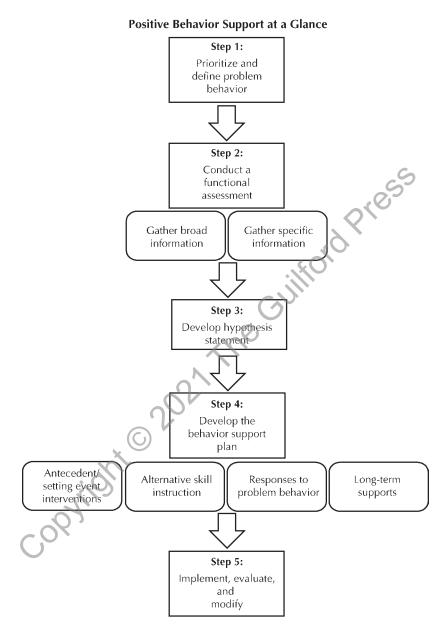
The five-step PBS process is illustrated in Figure 5.1. These five basic steps may be applied across students with and without IEPs, across various disabilities or diagnoses (e.g., learning disabilities, emotional/behavioral disorders, intellectual disability, autism), problem behaviors (e.g., aggression, disruption, self-injury, social withdrawal), and settings (i.e., home, school, community). In this chapter, examples of how the process can be applied are provided for Levi. Other case illustrations with different students and problem behaviors may be found throughout the text.

# Step 1: Prioritize and Define the Problem Behavior

Key Questions: What is the problem? Is behavior support necessary?

The first step in the process is to determine what the problem is and whether an individualized behavior support plan is necessary. Not every student who engages in problem behaviors requires a comprehensive behavior support plan as described in this book. Most students are responsive to general schoolwide supports, classroom rules, or informal teacher interventions (see Chapters 2 and 3). However, for a student who is unresponsive to general Tier 1 and more targeted Tier 2 interventions, team members must consider whether an individualized behavior support plan is needed. Furthermore, because most students who engage in persistent problem behaviors present many behavioral challenges, teams must determine which problem behaviors are important to change first, which may be addressed at a later time, and which (relatively speaking) may be unimportant to change or of lesser concern. For the student's and the team's sake, it may be simpler not to attempt to intervene on all of the student's problem behaviors at the same time. Also, different behaviors may be responsive to a single support plan, reducing the number of necessary multiple interventions.

Bambara et al. (2015) offer a useful way to prioritize interventions based on the seriousness of problem behavior or degree of concern. They state that a student's behaviors are problematic when they are harmful



**FIGURE 5.1.** Five-step process for designing a PBS plan.

or threaten the safety of the student or others, have a negative impact on learning, hinder participation in activities, or interfere with the development of positive social relationships and social acceptance by others. In other words, the seriousness of a problem behavior, and whether it is a problem to be targeted for intervention, should be judged by its impact on important social and learning outcomes, and not by its general appearance or degree of personal annoyance (e.g., "Her fidgeting is driving me crazy!").

To decide where to start, teams may wish to consider the three levels of priority for intervention shown in Table 5.1. Destructive behaviors, or behaviors that are harmful or threaten the safety of the student or others, should receive first priority when team members are considering interventions. Examples of destructive behaviors include head banging, cutting, or other acts of self-injury; hitting other students; kicking during tantrums; refusing to eat; or bringing weapons to school. Destructive behaviors should always be addressed through a comprehensive PBS plan that includes procedures for crisis management to protect the student and others from harm. It is important to note that teams are required by IDEA to examine a student's existing behavior support plan and to conduct a functional behavioral assessment when disruptive behaviors prompt a change in educational placement (e.g., suspension from school in excess of 10 consecutive days or

#### TABLE 5.1. Priorities for Intervention

# First priority: Destructive behaviors

• Is the behavior harmful, health-threatening or life-threatening to the student or others?

# Second priority: Disruptive behaviors

- Does the behavior interfere with the student's or other students' learning?
- Does the behavior interfere with or impede social relationships?
- Does the behavior prevent the student from participating in daily school, home, or community activities?
- Does the behavior destroy materials in a dangerous or an interfering way (e.g., shredding clothing, ripping books)?
- Is the behavior likely to become destructive without effective intervention?

#### Third priority: Distracting behaviors

- Does the behavior interfere with social acceptance?
- Does the behavior have a negative impact on the student's image?
- Does the behavior damage (not destroy) materials?
- Is the behavior likely to become disruptive if ignored?

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alternative school placement due to a weapon or illegal drug violation) (Ryan, Katsiyannis, & Chmelar, 2007).

Disruptive behaviors should receive the next level of priority consideration in a comprehensive support plan. Disruptive behaviors do not immediately endanger the student or others, but they do interfere with everyday activities and experiences needed for positive development. Persistent acts of disruptive behaviors can interfere with learning; prevent the student from fully participating in school, home, and community activities; and hinder the student from forming positive social relationships with others. Levi's team classified his problem behaviors as disruptive, requiring serious consideration for developing a PBS plan. Talking over teachers and peers, speaking in a disrespectful tone, yelling "idiot" repeatedly, grunting, banging his fists on his desks, and swiping materials off his desk significantly disrupt typical classroom activities and seriously jeopardize Levi's opportunities to become an accepted member of his class and to form friendships with his peers. Levi's behavioral issues have been largely unamenable to past intervention efforts, and thus require additional assessment to modify his existing behavior support plan.

Distracting behaviors should receive the lowest priority for intervention. Generally, a distracting behavior deviates from what is typically expected from a student of the same age, but it does not substantially interfere with learning and participation in daily activities. Distracting behaviors (e.g., walking into the classroom and needing to follow the same path every day, flapping hands when excited, or dressing ageinappropriately) may warrant a behavior support plan when a team and family are concerned that the behaviors could develop into disruptive behaviors over time, or interfere with a student's social acceptance. To be clear, not all atypical behaviors are targets for behavior change. Schools should establish a culture of diversity in which students, teachers, and parents learn to accept differences in others—especially students with disabilities—even when the differences are atypical. For example, Levi is fascinated with ecosystems. He researches extensively about different types of ecosystems and enjoys talking with his peers and teachers about their habitat characteristics, such as the abiotic and biotic factors within each ecosystem. In his free time, Levi enjoys drawing fictional ecosystems for his fantasy world. Although his intense interest certainly sets him apart from his peers, Levi's team members views his fascination as a "special interest" and not a problem behavior or obsession that requires intervention. It may become a behavior of concern if the team members believe that Levi's special interest in ecosystems prevents him from forming other interests or interferes with his opportunities to play or make friends with his peers.

In addition to determining whether there is a problem, another first-step activity is to define the problem clearly. A clear definition of the problem behavior is essential for unambiguous communication, as well as precise measurement of the problem behavior's frequency during functional assessment and intervention. Rather than using general or lay terms (e.g., "Levi is noncompliant or aggressive"), a clear definition describes what the student does or what the problem behavior looks like (e.g., "Levi bangs his fists on his desk, kicks his desk or table legs, grunts, and yells disrespectful comments such as "Fine, you idiots"). Chapter 7 provides more detailed information on how to define problem behaviors in useful ways.

To summarize, team members can justify intervening with a problem behavior and developing a behavior support plan when they can offer a rationale for intervention based on one of the three levels of priority. Once the team members have identified and defined the problem, they are ready for the next step in the PBS process.

# Step 2: Conduct a Functional Assessment

Key Question: Why is the problem behavior occurring?

Conducting a functional assessment (also known as functional behavioral assessment) is a critical step in the PBS process. A behavior support plan is most effective when it is informed by assessment information that explains why a student is engaging in problem behaviors. Most educators would not dream of designing a reading intervention without first knowing about a student's strengths, weaknesses, and specific reading difficulties. Just as a thorough assessment is critical for effective academic interventions, so is it vital for effective behavioral interventions.

Before team members ask what can be done to address a student's problem behavior, they must first ask, "Why is problem behavior occurring?" and "What's going on in the student's life and immediate environment?" Although it is often erroneously understood as such, functional assessment is not a single assessment tool or a collection of assessment instruments. Rather, functional assessment is a *process* for gathering information, understanding the reasons for problem behavior, and precisely identifying environmental conditions (both micro-level and macro-level) that lead to and maintain problem behavior. Unlike the medical model, in which the focus is on curing or "fixing" a child, PBS emphasizes changing the environment and teaching alternative skills so that problem behavior is no longer necessary or useful to the student. Thus, the primary purpose of functional assessment is not to diagnose the student (e.g., "Problem behaviors are occurring because the individual is

autistic or has a behavior disorder"), but to uncover relevant and accurate information needed to change the student's environment, teach alternative skills, and promote a better life—all of which are the aims of behavior support interventions.

Like solid detective work, conducting a good functional assessment requires strong diagnostic skills. The process is best guided by team members' knowledge of the many factors that could contribute to problem behavior (as discussed in Chapter 4), information about what questions to ask, and familiarity with what to look for when gathering information and observing a student. Once functional assessment is understood as a diagnostic process, a team can then select from the many available functional assessment tools described in Chapter 8 of this book (e.g., interviews, rating scales, direct observation methods) to assist with information gathering.

A comprehensive functional assessment typically involves gathering two types of information about the student and his or her problem behavior. When gathering broad information, team members are interested in learning about the individual's educational background and history; overall health; skills and abilities; and overall quality of life at home and in school (e.g., relationships with family, peer friendships, community and school involvement). Particularly useful when not all team members know the student well, broad information, gathered through record reviews and interviews with relevant people, may provide important background information that helps explain how problem behavior developed; provide insight and direction for further, more specific assessment; and suggest broad curricular and lifestyle changes that may be needed in addition, gathering broad information can help the team members learn about the student's strengths, preferences, and special interests that may be embedded in a support plan to create motivating learning environments for the student and generally enhance a student's quality of life. In Levi's case, his teacher noted that he enjoys drawing, using technology, and helping with classroom jobs. Also, Levi is able to maintain his attention and focus when involved in a preferred activity, such as reading stories. Socially, Levi enjoys eating lunch with his peers and talking about Minecraft. Although Levi enjoys several types of reinforcers, he tends to satiate quickly on preferred activities when incorporated into his behavioral intervention plans.

An important focal point for Levi's team is to learn more about how his educational history and current academic abilities affect his ability to work independently. In addition, his team might consider exploring whether his deteriorating social behaviors (i.e., his teachers report that problem behaviors are on the rise) are due to the onset of illness, other physical problems, or changes at home (e.g., "Is he experiencing a recurrence of otitis media or suffering from a sinus infection again?"; "Is his asthma worsening?"; "Have there been any changes at home?"). Furthermore, Levi's team might consider learning about his social history, access to peer groups (e.g., "Does he have friends at home, play with neighborhood kids, and participate in after-school clubs and sports?"), and social skills (e.g., "Does he know how to play cooperatively with peers and accept the outcome of competitive activities?"). Answers to such questions can provide useful but very general and often speculative information about potential reasons for problem behavior. To be maximally effective, broad information must be used in conjunction with more specific assessments of problem behavior.

When gathering *specific information*, team members focus their assessment to identify specific environmental events that are more immediately associated with the onset and occurrence of problem behavior. The goals are to reliably predict the precise circumstances that provoke problem behavior and to determine the function problem behavior serves for the student under the circumstances.

For instance, the members of Levi's team might ask questions such as "Does Levi grunt and speak disrespectfully during all school activities, or only some?"; "Does Levi bang his fists and swipe materials off his desk only during math, or also during other academic activities?"; "In situations or activities where problem behavior occurs, how do teachers and peers respond to problem behaviors, and what are the outcomes for Levi?" To answer these questions, team members observe and record what happens before problem behaviors occur to identify potential antecedent or setting events that trigger or set the stage for problem behavior. Likewise, team members record what happens after problem behavior occurs, noting how teachers, peers, and others respond and what Levi seems to get (eventually, if not immediately) from engaging in problem behavior. Noting what happens after problem behavior occurs provides important clues for determining function.

Observation of a student continues over time, until the team is able to discern reliable patterns that predict the specific circumstances provoking problem behaviors (i.e., when, where, how, and with whom) and the function(s) served by them. Once a discernible pattern emerges, team members move to the next step of the PBS process—developing hypothesis statements. However, even when a clear pattern emerges, one fascinating aspect of functional assessment is that the process is ongoing. There are always more questions to ask about the information gathered that lead to refinements of the team's hypotheses and improvements in the behavior support plan over time.

## **Step 3: Develop Hypothesis Statements**

**Key Questions:** What is the association between specific events and the problem behavior? How may these patterns be summarized?

The third step of the PBS process is to formulate hypothesis statements that describe why the student is engaging in problem behavior and what function problem behavior serves for the student (this process is described in detail in Chapter 9). Essentially, hypothesis statements concisely summarize the patterns revealed during the functional assessment process. Hypothesis statements are extremely important because, when constructed appropriately, they help team members to link interventions to the assessment information collected. In other words, they identify the exact environmental circumstances that will be addressed through positive supports.

For example, over several days of observation, Levi's functional assessment revealed three distinct patterns of problem behaviors—one centering around tasks requiring a written response, one around competitive activities, and one around receiving corrective feedback. These patterns are summarized in three hypothesis statements:

- Hypothesis 1: When Levi is provided with tasks that use nonpreferred writing instruments or tasks that require him to continuously maintain focus for more than 5 minutes, he will engage in disruptive behaviors (e.g., grunt, bang his fists on his desk, and/ or throw or swipe materials off his desk) to escape the academic demand or activity.
- Hypothesis 2: When Levi is playing competitive games in the classroom or gym and is assigned to work with a nonpreferred teacher or peer, he will blame others for his mistakes or misbehavior, mumble or yell disrespectful comments (e.g., "You idiot") and punch and karate chop walls to escape the activity and persons assigned to work with him.
- *Hypothesis 3:* When receiving corrective feedback, Levi talks over teachers, speaks in a disrespectful tone of voice, destroys, throws, or swipes materials of his desk (e.g., rips point sheet, throws his pencil case) and/or bangs his fists on his desk to escape the feedback.

Hypothesis statements are always written in a similar format (as above) to identify specific antecedents and setting events ("when this happens"), describe the problem behavior ("the student does this"), and identify the behavior function ("in order to get or avoid something").

This format parallels the four-term contingency introduced in Chapter 4; as such, it is extremely useful for informing team members what specific aspects of the student's environment need to be changed (e.g., antecedents) and what alternative skills to teach to alleviate problem behavior (e.g., teaching Levi to tolerate nonpreferred peers instead of being disrespectful and disruptive). Each of the three hypotheses suggest that Levi engages in problem behaviors to escape the things that are difficult for him; however, each hypothesis points to different circumstances or antecedents that trigger problem behaviors. Thus, Levi's team will need to consider each behavioral function when designing interventions, making sure that the interventions address each antecedent and maintaining consequence.

In addition to developing hypothesis statements, another important activity in this step is to summarize the broad information gathered during the functional assessment process. When combined with hypotheses for problem behavior, broad information on the student's history, general skills, medical background, preferences, and lifestyle can help the team members to make critical decisions about what specific interventions to select and determine what lifestyle changes are needed to promote desired outcomes for the student, as described in Chapter 13. In addition, summarizing broad information can help to explain why the patterns of problem behavior developed and what conditions appear to support them.

Based on their assessment efforts, Levi's team members concluded that assignments using nonpreferred writing instruments (e.g., pencil, pen, marker) and tasks that require Levi to show his work in math class are problematic for him-not because of actual work difficulty, but because of Levi's negative work history. Even though Levi's third-grade curriculum is matched appropriately to his abilities, his history of low frustration tolerance and repeated failure appears to have made writing tasks unpleasant or aversive to him. Concomitantly, he may dread writing tasks because of his visuospatial weaknesses and poor motor sequencing skills—these types of tasks significantly influence both the quality of the task outcome and speed of task performance. Combining this understanding with their hypothesis, the members of Levi's support team will tailor interventions both to build Levi's ability in, and persistence with, fine motor tasks and provide compensation strategies aimed at reducing the negative impact of writing on learning. With regard to playing competitive classroom games, Levi's team members conclude that Levi's lack of prior social opportunities, lack of social skills (e.g., empathy, turn taking, resiliency), and lack of self-discipline (e.g., manage emotions, exert self-control, develop perseverance) all play a role in influencing his problem behavior. For example, when his class is assigned

to work in dyads and Levi is paired with a peer whom he perceives is not as skilled as other peers, Levi exhibits disruptive and disrespectful behaviors to avoid the possibility of defeat. In other words, Levi struggles with accepting the concept of losing and not always being the winner. This suggests that creating social opportunities for teamwork and collaboration, along with social skills training to cope with losing, will be important to consider in Levi's behavior support plan.

# Step 4: Develop a PBS Plan

**Key Questions:** Given our hypotheses, what aspects of the student's environment need to be changed? What alternative skills need to be taught?

Once hypotheses are formulated, the fourth step in the PBS process is to develop a PBS plan. By this stage in the process, team members are often anxious to be rid of problem behavior; despite their well-formulated hypotheses, they may ask, "OK, what can we do to stop it?" Obviously from our discussions thus far, this is the wrong question to ask, because it can lead to highly punitive and ineffective interventions that ignore the conditions contributing to problem behaviors. Rather, when designing a support plan, team members must stay focused on their hypotheses and other relevant assessment information. They must ask, "What conditions should be changed, and what alternative skills can be taught?"

Unlike conventional behavior management plans, which typically employ a single intervention, PBS plans are comprehensive and comprise multiple intervention or support strategies. This is so for several reasons. First, hypotheses and broad assessment information often suggest multiple influences and functions of problem behaviors, as illustrated in Levi's case. To be maximally effective, support plans need to address as many of these influences as possible and teach students skills for different situations. Rarely does a single intervention do the job. Second, PBS is aimed at facilitating success in all settings in which a student lives, plays, works, or goes to school. As such, sometimes different supports are needed for different settings. For instance, influences on problem behavior are likely to differ in diverse settings, requiring a different intervention approach for each location. In addition, team members must be concerned with selecting supports that can be realistically carried out by people in different settings. Because people have different values and skills, and have to deal with different setting demands and routines, behavior supports necessarily need to be adapted to fit these situations. For example, supports aimed at helping Levi to interact better with his peers in gym class are likely to differ from the social interaction supports in the classroom.

The third reason for the comprehensive nature of behavior support plans has to do with the purposes of PBS. Whereas conventional behavior management plans focus on stopping problem behavior (usually by punishing it), PBS plans focus on *prevention*, *teaching*, and facilitating *long-term effectiveness*. Each purpose requires a different intervention approach to achieve success and cannot be addressed with a single strategy alone.

Comprehensive behavior support plans are built around four key components. Each component serves a different purpose, and when combined, they emphasize prevention, teaching, and long-term effectiveness. As shown in Figure 5.2, these components are (1) antecedent/setting event interventions, to change events that evoke problem behaviors; (2) alternative skills instruction, to teach socially desired substitutes for problem behaviors; (3) responses to problem behaviors, to change (in effective and instructive ways) the reactions of others to problem behaviors; and (4) long-term supports, to make broad curricular, social, or lifestyle changes to support desired outcomes over time.

When designing a support plan, team members select support strategies for each component by considering what is most likely to be effective for the student given hypotheses for problem behavior and other relevant assessment information. In addition, the team selects strategies by considering those that best fir the settings in which the plan will be

Antecedent/setting event interventions	Alternative skills instruction	Responses to problem behavior	Long-term supports
Modify or eliminate problem antecedent and/ or setting events     Introduce positive antecedents/ setting events	replacement skills that serve the same purpose as the problem behavior  Teach coping and tolerance skills  Teach general skills to expand overall competence	Reduce outcomes for problem behavior     Provide instructive feedback/ introduce logical consequences     Develop a crisis management plan	<ul> <li>Make lifestyle changes</li> <li>Implement strategies to sustain support</li> </ul>

**FIGURE 5.2.** Components of a positive PBS plan.

implemented. Fortunately, once team members understand the reasons for problem behaviors, there are often numerous support strategies that can address the same problem in different settings.

For most students with persistent and difficult-to-change problem behaviors, all four components are necessary; however, in some cases, not all components or support strategies may be implemented at the same time. Some teams may decide to focus on antecedent interventions first, and, once problem behavior is prevented, then direct their attention toward teaching alternative skills and designing long-term supports. Other teams may decide to focus on lifestyle changes (a strategy under long-term supports), and to determine, once the changes have been made, what alternative skills or antecedent interventions are necessary. Although it may be possible to implement less than four components at any one time, *it is never appropriate* for a PBS plan to consist entirely of strategies for responding to problem behavior only. This would make intervention consequence-oriented and reactive rather than instructive and preventive. The following discussion provides a brief overview of each component and its purpose.

# Antecedent/Setting Event Interventions

Antecedent/setting event interventions serve a preventive purpose. Once antecedents or setting events are identified in hypothesis statements, team members can *eliminate* or *modify* them so that problem behavior is no longer provoked by these troublesome events. In addition to changing problem events, team members may *introduce positive events*, known to promote desired behaviors, into the student's daily routines. When conditions are built in to promote positive behaviors, problem behavior is less likely.

In Levi's situation, academic assignments that require him to use nonpreferred writing instruments trigger Levi's disruptive behaviors (e.g., grunting, banging his fists on his desk, and/or throwing or swiping materials off his desk). The members of Levi's team can prevent this problem behavior by considering how they might change this antecedent event. Depending on what is possible or practical to implement in the classroom, Levi's team might consider presenting him with digital (e.g., computer, iPad) and nondigital (e.g., paper, pencil) options to complete his assignments, thereby reducing the negative impact of writing on the task outcome. Also, embedding instructional choices within writing tasks and tasks that require Levi to continuously maintain focus for more than 5 minutes, such as choice of assignments or locations to work, may help increase Levi's motivation and greater sense of control, reducing the likelihood of escape. Levi's team may also use noncontingent escape to

preferred activities (e.g., drawing time, access to preferred technology, classroom jobs helper) at established intervals during writing-intensive tasks. To increase the robustness of the noncontingent escape procedure, Levi's teachers must remind him of his access to escape ("Levi, 5 more minutes until iPad time") at the start of a perceived difficult task and as needed throughout the task, particularly if his teachers notice Levi's subtle facial expressions (e.g., furrowed brow, clenched jaw, eyes narrowed, face reddening). In this option, building in opportunities for Levi to engage in preferred activities that are not contingent on his behavior can increase his motivation to persist during less-preferred tasks. The team's selection of intervention or combination of interventions depends on what makes the most sense for Levi and what can be practically carried out in the classroom.

Although antecedent/setting event interventions may only provide a temporary solution, their chief advantage is that they quickly prevent problem behaviors, because instigating factors are eliminated or modified. Their quick-acting nature can provide immediate relief for teachers, for parents, and for the student who is troubled by the antecedent/ setting events, and in some cases they can result in very powerful outcomes (e.g., placement in a more restrictive setting can be avoided). Just as importantly, antecedent/setting event interventions play an important role in creating positive conditions for learning new or alternative skills. It is extremely difficult to teach students new ways of responding when they are engaging in problem behaviors. But when troublesome antecedent conditions or setting events are changed, learning new ways of dealing with difficult situations becomes easier and more enjoyable for the learner. Various antecedent and setting event interventions, along with guidelines for their selection, are presented in Chapter 10.

### Alternative Skills Instruction

The purpose of alternative skills instruction is to teach the student socially acceptable substitutes for problem behaviors. Whereas antecedem/setting event interventions are dependent on the actions of others, alternative skills instruction gives the student the power to achieve desired outcomes and change conditions, so that problem behaviors are no longer needed. Alternative skills instruction contributes to long-term effectiveness, because the learner is less dependent on teacher or parent interventions and has the ability to control his or her environment in both effective and socially appropriate ways.

Three types of alternative skills interventions may be included in a behavior support plan. The first type, *replacement skills*, teaches the student to use a socially acceptable alternative that achieves *exactly the* 

same purpose or function as the problem behavior. This intervention is predicated on the assumption that problem behaviors can be effectively eliminated if the learner has another appropriate means of achieving the same outcome as the problem behavior. Simply put, if an alternative skill is as good or better than the problem behavior at obtaining the desired outcome, the student will use it instead. For example, to replace talking over teachers, speaking in a disrespectful tone of voice, destroying, throwing, and/or swiping materials off his desk in order to escape teacher feedback, Levi's team might consider teaching him how to calmly communicate with his teacher that he is not ready to receive corrective feedback and would like take a break (e.g., "May I take a break?", "I'm not ready now, I need to take some time"; "I'm upset, may I have a break please?"). Levi may also be taught to request a break instead of engaging in problem behaviors during gym class or when working independently on an assignments to escape nonpreferred situations.

The second type of alternative skills intervention focuses on teaching coping and tolerance skills for dealing with difficult or stressful situations. Like all of us, students who engage in problem behaviors need to learn how to cope effectively with difficult situations that cannot or should not be changed or avoided. Targets for intervention might include learning how to wait, relaxing during stressful events, controlling anger, persisting with difficult tasks, and learning how to problemsolve independently rather than relying on others to generate solutions to problems. An important target for Levi is learning how to calmly listen to and accept corrective feedback from his teacher, and to use an anger management strategy (e.g., put his head down and take a few deep breaths) if he becomes upset or frustrated. Another coping skill critical to Levi's success is accepting unfavorable outcomes of competitive activities. Additionally, although antecedent/setting event interventions can reduce some of the burden for Levi, eventually he will need to learn how to persist with tasks that require sustained focus for more than 5 minutes and accept losing without speaking disrespectfully and exhibiting disruptive behaviors. In this option, Levi's team may consider using a contingency map, a cognitive-behavioral visual support strategy that illustrates what to do and what not to do during difficult situations, and the consequences of each. For example, the contingency may show that when losing a game, Levi has the choice of remaining calm and congratulating the winner, which will result in peer acceptance, teacher praise, and participation points, or engaging in problem behavior, which will result in peer rejection, teacher dissatisfaction, and loss of participation points. While Levi's contingency map provides immediate visual reminders of the consequences of his behavioral choices, it also encourages him to be more involved in managing his behavior, sharpening his

decision-making abilities, and ultimately helping foster his independence.

The third type of alternative skills intervention focuses on teaching general adaptive skills to expand social, communicative, and academic competence. Teaching general skills addresses some of the broad or underlying skills deficits that may be contributing directly or indirectly to problem behavior. The greater students' general competence becomes, the more control they will have to circumvent problems and pursue desired outcomes for themselves through positive means. Team members can target general skills by looking carefully at what outcomes are important for a student and what skills are needed to be successful now and in the future. With regard to Levi, it is important not only to teach him to appropriately escape and tolerate nonpreferred situations, but to also teach social skills that allow him to work cooperatively with all peers, including nonpreferred ones (e.g., peers whom he perceives as less skilled than other peers) across a variety of situations. To amplify the impact of his targeted social skills instruction, Levi's teachers need to provide structured opportunities for him to practice managing various social situations (e.g., cooperating with peers during noncompetitive activities, showing empathy, learning perspective taking) and reinforce his attempts to interact appropriately with his peers. Levi's team may also want to consider other general adaptive skills that would lead to meaningful lifestyle improvements, such as learning teacher-pleasing behaviors. Showing competed assignments to his teachers, for example, may help to recruit teacher praise, add to his feelings of success, and, as a result, begin to erode the impact of his negative learning history on his current and future achievements. Strategies for teaching alternative skills are discussed in Chapter 11.

# Responses to Problem Behaviors

The third component of a behavior support plan describes how teachers, parents, and others should respond to instances of problem behavior. If the antecedent/setting event modifications and alternative skills training are working, then the frequency of problem behavior should be dramatically reduced. Nevertheless, team members need to consider how they and others can respond to problem behaviors, if they should occur, in both effective and instructive ways.

Responses to problem behaviors are structured around several goals, although not all may be incorporated in a single support plan. One goal is to *reduce outcomes for problem behavior*. When combined with alternative skills instruction, a critical goal of PBS is to teach the student that alternative skills work to bring about desired results,

whereas problem behaviors do not. If problem behavior no longer serves a useful purpose for the student (e.g., grunting, banging his fists on his desk, and/or throwing or swiping materials off his desk does not result in Levi's avoiding his written academic tasks), then problem behavior will stop. Levi's team may attempt to extinguish his escape-motivated behaviors by using planned ignoring of his disruptive behaviors, coupled with prompting of replacement behaviors, such as requesting a break or using a coping strategy. It is important for Levi to learn that his disruptive behaviors no longer provide escape; rather, only through the emission of replacement behaviors will Levi be successful in avoiding written tasks, corrective feedback, and competitive games.

Another goal is to provide instructive feedback and introduce natural or logical consequences to problem behavior. The general objective here is to establish clear social boundaries by communicating what behaviors are acceptable and not acceptable in school, at home, or in the community. Specifically, the goal is to teach students that problem behaviors can violate certain school or societal rules, and that negative consequences will follow (e.g., "If you throw food, you will have to clean it up," "If you break the iPad, you will have to pay for it"). If students are to become good community citizens, then they need to understand the consequences of their actions. In order to be consistent with the values of PBS, however, negative consequences must be selected and implemented judiciously. Not all natural or logical consequences are beneficial or appropriate for all students, and the consequences chosen for a particular student should be linked as closely as possible to the team's hypotheses for problem behavior. Furthermore, in order to be maximally instructive, negative consequences must be age-appropriate, respectful, and matched to the student's cognitive understanding.

A third goal is *crisis management*. Despite intervention efforts, some students engage in very dangerous behaviors that can cause harm to themselves or others, or engage in highly disruptive behaviors that can significantly disrupt school, home, or community activities. In such cases, a crisis intervention plan should be developed. Crisis management plans describe specific steps that teachers, parents, and others should follow to defuse potentially dangerous or disruptive behaviors, and to keep the student and others safe. It is important to note that unlike the first two strategies described in this section, crisis management is not considered an intervention that reduces problem behavior. Its sole purpose is to protect and deescalate, not to instruct or decrease problem behaviors in the future. Although Levi has not physically aggressed toward peers since preschool, his team might consider using a room clear procedure (i.e., removing other students from a potentially dangerous situation by escorting those students to a "safe place" in the school environment) in

the event Levi exhibits unsafe and potentially violent behaviors. One teacher would remain with Levi to support his deescalation process and provide prompts for him to engage his anger management strategies as necessary. Strategies for responding to problem behavior are presented in Chapter 12.

### Long-Term Supports

The fourth and last component of a behavior support plan contributes to long-term prevention and maintenance of positive outcomes. One way to ensure that problem behavior is prevented in the long term and that the other intervention components are supported and maintained over time is to make lifestyle changes for the student. Problem behavior may continue to persist despite smaller antecedent changes or alternative skills training, because broader issues in the student's life, educational program, or social network impede positive growth and work against the other interventions. For example, despite small instructional adaptations to make schoolwork more interesting, some students may persist in refusing to work and may eventually drop out of school if they believe that their entire educational curriculum is not relevant to their vocational goals. Other students, despite alternative skills instruction, may continue to interact inappropriately with peers if they are routinely excluded from social activities and have limited social outlets. And still others, despite being given something to do during some "down periods," may continue to engage in self-stimulation if, overall, their daily school and home routines are boring or repetitive and provide little opportunity for meaningful or enjoyable activities. Unless changes in these broader contexts are considered, interventions that focus only on the immediate conditions that surround problem behaviors are likely to fail. Obviously, team members cannot intervene in all problematic aspects of a student's life, and many problems are beyond a team's resources and control. However, when professionals and families work together, teams can make very specific lifestyle changes that support desired outcomes for students. For example, an important lifestyle focus for Levi is to cultivate peer friendships and membership in his classroom. One strategy considered by his team is to purposely use Levi's strengths and interests to engage his peers in noncompetitive activities. Levi enjoys drawing and discussing ecosystems. Levi's plan should include opportunities for him to share his passion for ecosystems and enjoyment of drawing. For example, Levi's teacher might begin each science class with an opportunity for peers to briefly share information about their favorite science topic (e.g., "Students, please turn and talk to an elbow partner about a science topic that excites you. You will each have 2 minutes to share").

Deliberately increasing opportunities for successful interactions with his peers will build Levi's social relationships and self-confidence. Unless supports are developed for Levi to help him to become an accepted member of his class, intervention efforts to change his grunting, scowling, and name-calling will be futile in the long run. To practice generalization, Levi's parents may enroll him in an after-school program, such as an art class, where he has opportunities to socialize with peers and engage in preferred activities outside of a classroom setting.

In addition to making lifestyle changes, this component consists of *strategies to sustain supports* and positive outcomes over time. One of the most frustrating realities, especially for parents, is that problem behavior will resurface year after year, because team members have failed to consider how successful supports can be transferred and adapted to new settings and teachers. When selecting interventions for this component, a team plans longitudinally by considering how supports can be adapted and introduced to new settings or situations, how supports will be communicated and learned by new teachers and other support staff, and what alternative skills the student should learn to apply in new settings. Strategies to sustain support also refer to team needs: What do team members need in order to sustain their efforts to develop and implement PBS interventions? Long-term supports are discussed more completely in Chapter 13.

# Step 5: Implement, Evaluate, and Modify the Plan

Key Questions: Is the behavior support plan working? Is progress being made? If not, what modifications are needed to make it more effective?

The last step in the PBS process is to implement the behavior support plan, and just as importantly, to decide whether the support plan is working and, if not, what modifications are necessary to improve effectiveness. Because comprehensive support plans may be implemented across settings and involve multiple people (e.g., teachers, support staff, parents), coordination among team members is essential. Effective behavior support requires team members to meet regularly, set specific student outcome goals, and based on the data collected, problem-solve about what to do next. The team needs to make decisions about refining, eliminating, or introducing new interventions and gradually fading out certain interventions over time. Team members may also decide to gather more assessment information and modify their hypotheses based on intervention data and new assessment information. In short, evaluation in the PBS process is ongoing; it begins as soon as the plan is implemented,

and continues until desired outcomes are achieved and maintained for reasonable periods of time. The process for evaluating and modifying a behavior support plan is described in detail in Chapter 14.

In order to evaluate progress, the team needs to take some important actions. First, team members need to establish student outcome goals by which progress can be judged. Like behavioral objectives, goal statements are observable and measurable, and include the condition and criteria for performance. In addition to writing goals pertaining to the reduction of problem behaviors, goals should also be written for expected or desired behaviors, especially when teaching alternative skills. Furthermore, goal statements may be both short term and long term (Dunlap et al., 2010). Short-term goals focus on the expected immediate outcomes of the behavior support plan, whereas long-term goals may reflect broader academic or social outcomes as a result of the intervention. Table 5.2 provides examples of outcome goals for Levi.

Second, the team needs to decide how to measure implementation of the plan. Student outcomes or the effectiveness of a behavior support plan cannot be evaluated unless the team can determine whether the plan is being implemented as intended. To measure implementation, team members can create simple integrity checklists that translate components of the behavior support plan into actionable steps (see Chapter 14 for examples). Integrity checklists are then used by a designated team member (e.g., behavior specialist) to periodically observe the

#### TABLE 5.2. Sample Goals for Levi

#### Short-term

- 1. With modifications outlined in his behavior support plan, Levi will complete assigned academic tasks with no incidents of disruptive behaviors (e.g., grunting, banging fists on desk, throwing or swiping materials).
- 2. When confronted with nonpreferred writing materials or tasks that require sustained focus for 10 minutes or less, Levi will quietly raise his hand and ask for alternative writing materials or a short break.
- 3. Levi will listen to teacher feedback on his assignments with no incidents of disruptive behaviors (e.g., speak disrespectfully, destroy or throw materials), requesting a break from feedback as needed.

#### Long-term

- Given independent assignments, Levi will work independently on all assigned tasks for 20 minutes with no incidents of disruptive behaviors (as defined above).
- 2. Levi will participate in a variety in school social activities, demonstrating good sportsmanship (e.g., turn taking, positive peer statements, acceptance of defeat) with no incidence of disruptive behaviors for 3 consecutive weeks.

interventionist's (e.g., teacher, paraprofessional) implementation of the plan. Integrity checklists can also be written in a self-evaluative format, so that interventionists can self-monitor or judge their own adherence to the plan.

Third, the team needs to decide on data collection methods for evaluating student outcomes. This includes direct observation methods for measuring student outcomes (e.g., reductions in problem behaviors, use of alternative skills), as well as social validity measures that assess team member satisfaction with the outcomes of the plan. In addition to deciding what and how to measure, the team should consider data collection systems that are easily implemented; otherwise, they will not be used. Chapter 7 describes various strategies for measuring behavior change and assessing social validity.

As data are gathered, the team members meet regularly to determine whether progress is being made and what to do next. If progress is being made, the team may decide to continue with the plan. If student outcomes have been achieved and team members are satisfied with the results, they might consider expanding the support plan to address other problem behaviors, teach new skills for new settings, and/or consider fading all or parts of the intervention components that are no longer needed. However, many students with complex needs are likely to require some continued adaptations and supports to be successful in home, school, or community environments. Continued interventions are often needed to teach new teachers how to set up positive learning environments and respond to alternative skills, so that positive behaviors are maintained (see Chapter 13).

If there is no or insufficient progress toward student outcome goals, the team must ask, "Why?" In asking this question, team members consider several likely factors that could contribute to an ineffective plan, then problem-solve solutions that will lead to modification and eventual success. Chapter 14 presents several important troubleshooting questions for team members' consideration. In Levi's case, the rise of problem behaviors in his third-grade classroom created the impetus for the team to conduct a new functional assessment. After reviewing the intervention integrity data, it was clear to the team members that they were following the intervention procedures developed for second grade, but somehow the interventions were not working well in the third-grade classroom. This caused them to wonder whether the triggers for problem behavior might have changed and whether Levi needed to learn new skills to adjust to the more challenging demands of a third-grade classroom. This then prompted the team members to gather new data to revise their hypotheses and behavior support plan as described in this chapter.

#### SUMMARY

Our purpose in this chapter has been to overview the five basic steps for designing a PBS plan for an individual student. Specific information on how actually to conduct a functional assessment, develop hypotheses, select interventions for each support plan component, and evaluate the effectiveness of a support plan are described in detail in later chapters of this book. Continuing with our overview of the basic principles and processes of behavior support, Chapter 6 addresses collaborative teaming. As will be discussed, building a team is just as important as designing a support plan for students. Chapter 6 addresses how team-building strategies can be infused into the five-step process.

#### **CASE EXAMPLES**

To illustrate the complete PBS process for designing individualized behavior support plans from beginning to end, we offer two student case examples. The stories of Malik and Bethany, and the development of their support plans, are described in selected chapters (beginning with this chapter and ending with Chapter 13). The case information provided at the end of each chapter is intended to demonstrate application of the content within that chapter. In the end, these case illustrations provide examples of how the four intervention components work together to form a comprehensive behavior support plan.

# **Background Information for Malik**

Ten-year-old Malik is a Black boy diagnosed as having Down syndrome, ADHD, and oppositional defiant disorder. Malik was born in a large city in the Northeast. His father died of a drug overdose when Malik was not yet 2 years old; he never had contact with Malik. His mother, Marina, was 17 when she gave birth. She was living with a friend, did not have a job, and was unable to care for Malik. His maternal grandparents obtained temporary custody. When Malik was 18 months old, Marina obtained a job with a regional newspaper. She worked the 11:00 P.M. to 7:00 A.M. shift, inserting flyers into newspapers in preparation for delivery. At that time, she took custody of Malik. However, she was fired from her job after 1 month because of drug involvement, and her parents once again obtained temporary custody of Malik. During the years that followed, Marina entered various drug rehabilitation programs. Although she sometimes experienced brief success, she was unable to remain drug-free for longer than a month or two. When Malik was 4 years old,

Marina was arrested for prostitution. At that time, Malik's grandparents were awarded permanent custody. Marina had only infrequent contact with Malik, and he never established a close relationship with her.

Malik lives in a small, well-kept, single home. In addition to Malik, his grandparents cared for their son's children, 19-year-old Jenna and 17-year-old Thomas. Malik's family members were very devoted to his care and well-being. Although Malik's grandparents asserted that they sometimes felt the lack of energy needed to care for a young boy, they were very grateful for the support and assistance of Jenna and Thomas. In fact, Malik often treated Jenna as a mother, which Jenna enjoyed. Malik was eager to please Jenna and took pleasure in assisting her with household routines. Thomas was active in sports; he was often busy with practice or games, which kept him away from home during the evenings and weekends. However, when he was home he played a "big brother" role, teaching Malik to throw and to catch, and to stream movies and TV shows. Periodically, his grandparents expressed concern that Jenna and Thomas would soon be moving out on their own, and that they themselves might not be able to meet all of Malik's needs.

At age 6 years, Malik first attended public school in an inclusive kindergarten classroom. At that time, Malik appeared to understand simple requests and questions, and would respond affirmatively or negatively by shaking his head. He began to develop spoken language, but his speech was very difficult to understand. For his academic and language difficulties, he received support services from the special education teacher and language therapist several times a week. However, he had difficulty making friends due to his lack of spoken language. During the school year, his teacher noticed that Malik began to push and shove his peers when they would not let him play or did not understand him. He also began to refuse engaging in activities that were difficult for him, such as cutting, identifying letters, and tracing objects. Because of concerns about Malik's failure to progress academically and socially, the following school year he was placed in a special education classroom for most of the school day, with the exception of recess, lunch, art, and physical education. He remained in that classroom for 2 years.

Because Malik had begun to develop a verbal repertoire, his special education teacher felt it was important to promote verbal language as his mode of communication. Thus, she encouraged him to respond verbally, often using prompts or requiring him to imitate her. In addition, Malik could discriminate objects and a few letters by pointing to them. Therefore, she determined that a traditional academic program was appropriate. She vigorously and enthusiastically worked on letter and number discrimination and identification, as well as other early academic skills. However, Malik's challenging behavior started to escalate. He began to

engage in disruptive and aggressive behaviors that included destroying materials, throwing objects, hitting and kicking his teacher, and (on two occasions) biting her. Not knowing what to do, she consulted the district behavior specialist. The behavior specialist hypothesized that Malik's teacher was allowing him to get out of his assigned work, and encouraged her to ignore Malik's behavior problems and "work through" tasks, even if this required physically guiding him to complete the task. In addition, despite Malik's reluctance to speak at times, the behavior specialist encouraged the teacher to continue prompting him to speak and not let him "get away with" nonverbal communication. Malik's teacher consented to these recommendations but saw no improvements in Malik's behavior. In fact, she noted that Malik became more aggressive when she physically guided him through task completion or repeatedly prompted him to respond. Furthermore, she was beginning to see aggression occurring outside of the classroom, directed toward peers and other school staff members. This resulted in phone calls to the principal by a number of parents who believed that their children were at risk of being injured. A meeting was held in which the principal stated that Malik "could not stay in this school and put the other students in harm's way." His special education teacher agreed that her classroom was not an appropriate placement for Malik, because he had made little progress in academics and his behavior had deteriorated. Thus, in third grade, Malik was moved to a private school serving students with behavior problems.

Malik's new school offered services to approximately 100 students, all of whom had been removed from their public school setting. He was placed in a classroom with seven other students, a teacher, and two teaching assistants. There was a schoolwide behavior system in place that encouraged positive behaviors. After the proverbial "honeymoon" at his new school, Malik began to engage in very high rates of aggressive and destructive behavior, similar to those of the previous school year. An additional teaching assistant was hired to work on a one-to-one basis just with Malik. Although once hopeful that Malik's new school would lead to success, Malik's grandparents were now alarmed by his lack of progress and initiated a team meeting with his school. The school agreed to work with the family to approach Malik's behavior problems in a systematic and comprehensive way.

# **Background Information for Bethany**

Bethany, a 12-year-old White girl, attends middle school in a suburban area that serves students grades 6 through 8. Bethany was labeled as having ADHD and an emotional/behavioral disorder. Bethany's parents had separated several times in her first few years of life. They worked

hard at reconciliation but were unable to work out their differences and live compatibly. They divorced when Bethany was 4. Bethany was an only child and had lived with her mother since the divorce. Her father had had difficulty maintaining employment since high school, due to mental health issues (he experienced bipolar disorder, for which medication had limited effectiveness). Shortly after his divorce, he moved back in with his parents to save expenses. Unfortunately, his parents lived almost 300 miles from Bethany, so he was unable to spend time with her on a regular basis. Bethany did, however, visit him on weekends whenever it could be arranged, and for a month every summer.

Bethany's mother, Ms. DeLope, worked for a cleaning agency, making slightly over minimum wage. She received very little financial support from Bethany's father, who sent money only sporadically even when he was employed. Ms. DeLope had a very difficult time making ends meet and described this as a constant source of stress for her. She felt compelled to work extra hours whenever she had the opportunity to improve the family's financial situation but did not enjoy doing so, because she missed out on time with Bethany. Also, when she worked late, Bethany was home alone until early evening, and Ms. DeLope was worried that her daughter did not have ample supervision.

Bethany and her mother had moved several times, because they were unable to afford rent increases. They currently live in a two-bedroom apartment in an area of town with a relatively high crime rate. Ms. DeLope has always tried to make sure that Bethany is inside by dark, but this had become a serious problem in the past few years. Bethany preferred hanging out with her friends in the neighborhood. Bethany often failed to inform her mother of her whereabouts and often did not return home until past midnight. After staying out late at night, Bethany did not want to get up the next morning for school. Ms. DeLope also worried because she thought that Bethany's friends were a bad influence on her. She suspected that they might drink alcohol and do drugs.

Bethany had difficulty with preacademic skills beginning in kindergarten. Although she was quite verbal and articulate, she had a hard time paying attention and completing tasks. An intelligence test indicated that her IQ was above average. Bethany's mother requested advice from her pediatrician but was told that Bethany was just "immature" and would catch up. School personnel attributed her school difficulties to adjustment problems resulting from her parents' breakup. They also assured Bethany's mother that she would do just fine, once she got used to the school environment. Because of these assurances, Ms. DeLope did not seek additional assistance for Bethany.

Bethany's academic problems persisted into elementary school. Because of her strong verbal skills, she was able to compensate and get

by. But she gradually fell further and further behind. Her academic difficulties caused her a great deal of frustration in school. In third grade, Bethany's behavior problems accelerated. Her teacher determined that Bethany was capable of doing the assigned work, but was not trying. She was also convinced that Bethany's previous teachers had failed to be stern enough, and was sure that her no-nonsense approach to schoolwork would solve the problem. She constantly stayed on top of Bethany, reminding her to get to work or reprimanding her for not finishing. Bethany found this very embarrassing. In an attempt to redeem herself, she began refusing to do her work by saying "No" or "Make me" to her teachers when they gave her work assignments that seemed overwhelming. Unwilling to tolerate this behavior, Bethany's teacher kept her inside the classroom during recess and free time to complete her assignments. She also punished her by giving her after-school detention. In addition to her problems with classwork, Bethany began to have difficulties with her peers. As her classmates were making friends and enjoying socializing together, she was overlooked. On the few occasions she was permitted to join them in play, she felt like an outsider. She began to lash out at them by verbally criticizing them and ordering them to stay away from her. She grew to hate going to school.

By the end of fourth grade, Bethany's behavior and academic performance had deteriorated. She was completing fewer academic assignments, had become disruptive in the classroom, and was aggressive with her peers. At the end of the school year, Bethany's teacher referred her for a special education evaluation. Bethany was tested at the beginning of her fourth-grade school year, and it was determined that she had an emotional/behavioral disorder. Her pediatrician also diagnosed her as having ADHD.

Convinced that Bethany's problems were rooted in poor motivation, her fifth-grade teacher believed she would respond positively to a structured point and level system. However, as the year passed, the teacher and staff members were very surprised to find that her problem behaviors not only continued but in fact increased. She appeared to be uninterested in earning points for tangible rewards and weekly activities. Bethany regularly failed to complete her assigned work and was required to remain in the classroom almost every Friday afternoon, while her classmates enjoyed weekly activities (free time, movies, swimming excursions, etc.).

Bethany is now a sixth grader in a new middle school. Bethany's mother and teachers were very surprised when triennial testing, administered in the beginning of the school year, revealed that Bethany was only slightly behind grade level in all academic areas. During the past 2 school years, Bethany had never received a grade in any academic area

that surpassed a C. Although Bethany continued attending general education classes with support from the special education, her team determined that her current supports were not adequate. The team members decided to attempt additional and more individualized supports, so that Bethany could be maintained in general education. They decided that a functional assessment was the most parsimonious way to specify individualized supports that were likely to be effective.

The stories of Malik and Bethany continue at the end of Chapter 6 with a discussion of their support teams.

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