Stigmatization of Emotional, Behavioral, and Social Disordered Students Due to

Lack of Awareness and Training

A Special Project

Presented to

Dr. Gretta Merwin

Heritage University

In Partial Fulfillment

of the Requirement for the Degree of

Master of Education

Kristie E. Gonzales

## FACULTY APPROVAL

Stigmatization of Emotional, Behavioral, and Social Disordered Students Due to

Lack of Awareness and Training

Approved for the Faculty

\_\_\_\_\_, Faculty Advisor

\_\_\_\_\_, Date

## ABSTRACT

Students with emotional, behavioral, and social disorders have been unfairly stigmatized by educators. Many teachers often lacked the skills and knowledge to effectively deal with these students. Often, teachers became frustrated with students and sent them to the office instead of managing the issues in the classroom. Various techniques that were effective in managing emotional, behavioral, and social disorders were researched. Results of a survey indicated that educators had a lack of understanding and knowledge about students with behavior disorders that often led to stigmatization.

## PERMISSION TO STORE

I, Kristie E. Gonzales, hereby irrevocably consent and authorize Heritage University Library to file the attached Special Project entitled, *Stigmatization of Emotional, Behavioral, and Social Disordered Students Due to Lack of Awareness and Training,* and make such Project and Compact Disk (CD) available for the use, circulation and/or reproduction by the Library. The Project and CD may be used at Heritage University Library and all site locations.

I state at this time the contents of this Project are my work and completely original unless properly attributed and/or used with permission.

I understand that after three years the printed Project will be retired from the Heritage University Library. My responsibility is to retrieve the printed Project and, if not retrieved, Heritage University may dispose of the document. The Compact Disc and electronic file will be kept indefinitely.

\_\_\_\_\_, Author

\_\_\_\_\_, Date

# TABLE OF CONTENTS

	Page
FACULTY APPROVAL	ii
ABSTRACT	iii
PERMISSION TO STORE	iv
TABLE OF CONTENTS	V
LIST OF TABLES	viii
LIST OF FIGURES	ix
CHAPTER 1	1
Introduction	1
Background for the Project	1
Statement of the Problem	1
Purpose of the Project	2
Delimitations	2
Assumptions	2
Research Question	3
Significance of the Project	3
Procedure	3
Definition of Terms	4
Acronyms	5

# Page

CHAPTER 2		
Review	v of Selected Literature	
	Introduction	
	Laws and IDEA6	
	Understanding the Disorders7	
	Stigmatization and Lack of Understanding	
	Techniques and Programs to help	
	Behavior Management Technique: Self-Instruction1	
	Behavior Management Technique: Self-Monitoring12	
	Summary14	
CHAPTER 3.		
Metho	dology and Treatment of Data15	
	Introduction	
	Methodology15	
	Participants10	
	Instruments10	
	Design17	
	Procedure	
	Treatment of the Data	
	Summary	
CHAPTER 4.		

Analysis of the Data	
Introduction19	
Description of the Environment19	
Research Question	
Results of the Study19	
Findings	
Discussion27	
Summary	
CHAPTER 5	
Summary, Conclusions and Recommendations	
Summary	
Conclusions	
Recommendations	
REFERENCES	

APPENDICES	.3	í,	2	
------------	----	----	---	--

# LIST OF FIGURES

Page
Figure 1. Have you had training on behavior disorders in students?20
Figure 2. Do students with behavior disorders need accommodations in
the general education classroom?
Figure 3. Do you know of various techniques to use with behavior
disordered students?
Figure 4. If you know of various techniques, have they been effective
in controlling problem behaviors?
Figure 5. Would you like to receive more information or training on dealing
with behavior disordered students?
Figure 6. Do you have experience with behavior students?25
Figure 7. Do you know of specific characteristics of behavior
disordered students?

## CHAPTER 1

#### Introduction

#### Background for the Project

Students with emotional, behavioral, and social disorders have been unfairly stigmatized by educators. Emotional, behavioral and social disordered students were often treated very differently as compared to peers when discipline and classroom expectations were considered. Many teachers often lacked the skills and knowledge base to effectively deal with these students. Often, teachers became frustrated with students and sent them to the office instead of managing the issues in the classroom.

Behavioral disordered students often lacked appropriate social skills which in turn caused social rejection by peers and adults. Due to the social rejection, emotional, behavioral, and social disordered students often became depressed and outcast from peer groups. The lack of social skills and rejection often added to the misbehavior seen in schools.

#### Statement of the Problem

Students with emotional, behavioral, and social disorders have been unfairly stigmatized by educators. This stigmatization created by educators stemmed not from a lack of caring but from a lack of understanding and training on emotional, behavioral, and social disorders.

## Purpose of the Project

The purpose of this research was to determine the amount of adequate training teachers actually received to effectively deal with students who had emotional, behavioral, and social disorders. Staff members in the elementary school where this study took place were surveyed and responses were analyzed to determine exposure to classroom strategies that were effective.

#### **Delimitations**

The elementary school used in the research was located in the lower Columbia Basin in an agricultural community next to the Columbia River. The population of this elementary school was predominantly Hispanic accounting for 95.3% of the population. African Americans accounted for 3% of the school population and 1.3% were Caucasian and other races. The percentage of students who qualified for free or reduced lunch was 93.7%. The population consisted of 18.2% who qualified for Special Education Services (OSPI, 2009).

The elementary school employed 43 certificated staff that were all deemed highly qualified by the state. The average years of experience were 11.1 years of service. Fifty three point five percent of the teaching staff had completed a master's degree program. The study took place during the fall of 2009 through spring of 2010.

#### **Assumptions**

General educations teachers lacked knowledge about emotional, behavioral,

and social disordered students and the various techniques and strategies to use when dealing with these students. Teachers often unknowingly stigmatized emotional, behavioral, and social disordered students because of a lack of understanding and knowledge of the disorder. Stigmatizing children was not done to hurt students, but was often done because teachers genuinely thought that they were doing what was best for the student at the time.

#### Research Question

Were students with emotional, behavioral, and social disorders unfairly stigmatized by educators due to lack of understanding and training on emotional, behavior, and social disorders?

#### Significance of the Project

Students with diagnosed and undiagnosed emotional, behavioral, and social disorders were often unknowingly stigmatized by educators. This stigmatization stemmed from the lack of understanding of the disorders and from the lack of training on the disorders. If it could be determined that most teachers did indeed lack adequate training in dealing with these children, school administrators might be encouraged to provide such training.

#### Procedure

A survey was created and given to certificated and non-certificated staff who worked in the elementary school where this study took place. The purpose of the survey was to determine the amount of training and experience that each staff

member had with the subject of emotional, behavioral, and social disorders. A short letter was also provided to explain the purpose of the research. Surveys were collected from staff members who were willing to participate. Once the surveys were collected, each response was recorded and a table was created to demonstrate the results of each response.

#### Definition of Terms

<u>attention deficit hyperactivity disorder.</u> Attention deficit hyperactivity disorder was a childhood mental disorder with an onset before 7 years of age and involved impaired or diminished attention, impulsivity, and hyperactivity.

<u>behavioral disorder</u>. A behavior disorder was characterized by displayed behaviors over a long period of time which significantly deviated from socially acceptable norms for a person's age and situation.

emotional disorder. An emotional disorder was an emotional disability, psychiatry behavior, emotional, and/or social impairment exhibited by a child or adolescent that consequently disrupted the child's or adolescent's academic and/or developmental progress, family, and/or interpersonal relationships.

social competence. Social competence was a person who possessed the social skills necessary to interact with others in socially acceptable ways.

stigmatization. Stigmatization was to set some mark of disgrace or infamy upon.

## Acronyms

ADHD. Attention Deficit Hyperactivity Disordered

CCBD. Council for Children with Behavioral Disorders

EBD. Emotion or Behavior Disorder

IDEA. Individuals with Disabilities Education Act

OSPI. Office of Superintendent of Public Instruction

SST. Social Skills Training

## CHAPTER 2

## Review of Selected Literature

#### Introduction

This topic was researched because of a necessity to adequately serve the needs of EBD students in the general education classroom. Outlined in the research were the laws pertaining to special education and a discussion of the disorders. Also reviewed were the stigmatization of EBD students applied by educators and several strategies that aided in teachers' ability to effectively serve EBD students. Laws and IDEA

In 2002 President George W. Bush created the Freedom Commission on Mental Health to analyze the United States' mental health system. According to the findings of the Commission on Mental Health (2003), the "mental health delivery system is fragmented and in disarray, leading to unnecessary and costly disability, homelessness, school failure and incarceration" (Stephan, Weist, Kataoka, Adelsheim, & Mills, 2007, p. 1330). This commission recognized that schools were a critical component in building the mental health system for children (Stephan et al., 2007).

Individuals with Disabilities Education Act was reauthorized in 2004. According to the U.S. Department of Education, IDEA was a law that ensured services to students with disabilities. IDEA outlined each qualifying condition and what parameters were to be used in determining if a student qualified under the law. IDEA also outlined the right of each student when discipline was administered. A student that was covered under IDEA was allowed to be suspended for no more that 10 days in an academic year. If a suspension was to take a student past the 10 days, then a manifestation hearing was to be held by the district to determine if the student's actions were caused by the disability. If the school found that the student's actions were because of a disability, then the student was not to be suspended and allowed to return back to school. If the finding was that the actions were not due to the disability then the students was suspended (U.S Department of Education, 2004).

#### Understanding the Disorders

The exact definition of EBD has been disputed. The National Association of School Psychologists (2005) agreed to the definition as being a condition in which the behavior or emotional responses of an individual differed greatly from his or her generally accepted, age appropriate, ethnic or cultural norms so that they adversely affected performance in areas such as social relationships, personal adjustment, academic progress or classroom behavior. In order for students to be considered for EBD, students must have displayed these behaviors over a long period of time and in at least two different environments.

Students who had EBD often had difficulties with relationships with their peers. Often this lack of social skills aided in the diagnosis of EBD (Chen, 2006). Chen (2006) defined social skills as "skills seen as socially acceptable learned

behaviors that enable individuals to interact in ways that elicit positive responses and assist in avoiding negative responses from them" (p. 143). This lack of social skills led to the stigmatization by some teachers and peers.

#### Stigmatization and Lack of Understanding

The stigmatization of individuals with EBD was a direct result of teachers and peer groups' lack of understanding or experiences with such disorders. Teachers often labeled a student as a behavior problem based on their own experiences, not on the child and the child's need (Gosh, 2008). This label came with a negative perception that adversely impacted the students' self esteem and achievement in school. Oftentimes these stigmatizations led to depression, social withdrawal and eventually time in the juvenile system or drop-out from school.

Teachers who had EBD students enrolled in their classrooms interacted and choose differing activities based on the EBD students' label instead of being based on the students' need. According to Gosh (2008):

Teachers interact differently with these students, but also they were treated differently by their regular education teachers, non-disabled peers, administrators and school staff. The label *BD* impedes some regular teachers from including these students in their classrooms; some administrators often blame the students for misconduct, and they are the first ones to be blamed for any gang violence. (p. 141)

Teacher education programs lacked training in the area of students with

disabilities to successfully prepare new educators. Teachers did not have sufficient understanding of why these students reacted in a particular manner to various stimuli or techniques to deal and or make accommodations for students with behavior problems.

## General Techniques to Help

General education teachers that had EBD students enrolled in their classrooms used several effective techniques. Teacher praise was a positive technique that when used correctly helped EBD students change behavior. Praise was to be given immediately and specifically when appropriate behavior was displayed (Nieysn, 2009).

Peer tutoring was a very promising instructional strategy for decreasing negative behavior and increasing positive behavior for students with EBD. According to Nieysn (2009):

The underlying theory is consistent: Peer interaction can have a powerful influence on academic motivation and achievement. The tutor is afforded the opportunity to construct an explanation of the problem being addressed, thereby increasing his or her own understanding. The tutee is afforded increased opportunities for guided practice as well as increased opportunities to receive specific feedback and praise, all of which are associated with an increase in desired behavior for students with EBD. (p. 229)

When peer tutoring was used, all students benefited. Students were actively engaged in lessons and were provided with opportunities to respond in a nonthreatening environment. Students learned to positively work together to accomplish tasks and assignments which in turn helped in learning valuable life skills (Perrott, 2009).

Student choice provided EBD students with opportunities to express their thoughts on issues in the classroom. Students were allowed to give input on classroom rules, and independent activities (Perrott, 2009). Allowing EBD students to make choices in their school routine helped the students feel more self confidence in their abilities to make choices. In turn this helped with EBD student's behavior choices (Perrott, 2009).

Cooperative learning groups provided an opportunity for positive peer interactions and promoted the use of prosocial skills. Both behavior and general education students were provided life experiences that involved students working together to accomplish various tasks. Cooperative learning groups also allowed for the deliberate and sequential instruction of social skills (Chen, 2006).

Social Skills Training (SST) was one strategy that educators used to aid in the development of prosocial skills in students with EBD. One form of SST was the use of modeling and role-play. This model was based on using positive reinforcement for targeted social skills that a student displayed. Modeling and role-play helped to reinforce the skill (Maag, 2006).

#### Behavior Management Technique: Self-Instruction

Self- instruction was a technique that involved strategies that were taught to EBD students in a one-on-one situation. According to Fitzpatrick and Knowlton (2009) (as cited in Keel et al., 1999), "Teaching self-instruction involves modeling for the student, then having the student overtly then covertly repeat a series of self-instruction prompts such as 'Do I understand what I am working on?' and 'What don't I understand?'" (p. 257).

Before a teacher implemented the self-instruction model, the teacher needed to identify the social or academic problems. Materials were then gathered to help with the implementation of identified problems. The teacher and the student then met to present strategies to be used and obtained commitment from the student to learn the desired behaviors (Fitzpatrick & Knowlton, 2009).

The implementation of self-instruction involved several steps. The first step in the implementation was for the teacher to model the desired task and the student then had to verbalize the task's steps. Next the teacher again modeled and verbalized the desired task while the student listened and completed the task. After the last step the teacher modeled the task again using a quiet voice. The student observed the facial expressions and body language of the teacher who then completed the task silently (Fitzpatrick & Knowlton, 2009).

#### Behavior Management Technique: Self-Monitoring

Self-monitoring was a strategy that was implemented relatively easily. Self-monitoring was used in a variety of content areas and settings (Lane, Lee, & Menzies, 2009). This was a strategy that allowed students to assess both positives and negatives in a positive manner. According to Lane, Lee, and Menzies (2009) (as cited in Mace, Belfiore, & Huchinson, 2001):

Self-monitoring is a two-stage process that involves observing and recording. The student needs to determine if the target behavior did or did not occur. Then, the student self-records some feature of the target behavior. He or she can either record the number of occurrences of a target behavior to be decreased (e.g., getting out of one's seat) or to be increased (e.g., time on task). (p. 28)

One suggested way for implementing self-monitoring was to use a five-step process. In the first step teachers were to identify and define the behavior of concern. To identify the target behavior the student and the teacher discussed and role played the behavior. This identification helped both the student and the teacher agree on the targeted behavior (Lane, Lee, & Menzies, 2009).

The next step suggested was the design of a self-monitoring procedure and monitoring form. In step 2, the teacher created a simple form that used small increments of time and was age appropriate for the student. Using small

increments of time helped students receive a more immediate response to behaviors (Lane et al., 2009).

Step three in the process was to teach the student the self-monitoring procedures. The teacher showed the student how to correctly fill out the form and discussed the desired target behaviors. Before each time period the teacher positively drew the student's attention to the target behavior to help in reinforcing the desired outcome. A key to this strategy's success was the ability to make selfmonitoring a positive reinforcement rather than a negative one (Lane et al., 2009).

Step four in the self-monitoring strategy was to monitor student progress by collecting data before and after the target behaviors were identified. Data that was collected before behaviors were identified provided a baseline for comparison. After a student self-recorded the target behaviors, the teacher and the student met to discuss the amount of the occurrences. The teacher and the student would then set an allowed amount of occurrences and an appropriate reinforcer to help in the changed behavior. The student and the teacher graphed the data on to a graph so that the student had a visual of how his or her behavior was changing (Lane et al., 2009).

The last step in this process was to maintain and follow-up. Once the student had successfully and consistently used the self-monitoring process for targeted behaviors, students were slowly taken off the process. This was obtained

by lengthening the amount of time between recordings. The goal of the process was to keep and maintain the learned behaviors (Lane et al., 2009).

## <u>Summary</u>

Students that were diagnosed with EBD were often stigmatized by educators and peers. This stigmatization often unknowingly happened due to the educator's incorrect perceptions and understanding of the disorder. The reauthorization of IDEA in 2004 ensured students with disabilities various rights. IDEA also outlined the qualifying conditions for the EBD diagnosis.

Several techniques and programs were shown to be effective when dealing with EBD students. Two strategies that seemed to be the most effective were selfinstruction and self-monitoring. Both of these strategies involved the student and the teacher working together to identify problem behaviors. Through modeling, role-play and monitoring with graphs, EBD students replaced problem behaviors with appropriate behaviors.

## CHAPTER 3

#### Methodology and Treatment of Data

#### Introduction

This topic was researched because of a necessity to adequately serve the needs of EBD students in the general education classroom. Students with emotional, behavioral, and social disorders have been unfairly stigmatized by educators. EBD disordered students were often treated very differently as compared to peers when discipline and classroom expectations were considered. Many teachers often lacked the skills and knowledge to effectively deal with these students. Often, teachers became frustrated with students and sent them to the office instead of managing the issues in the classroom.

#### Methodology

The research project was conducted using the qualitative sampling method (Gay, Mills, & Airasian, 2006). This method involved the researcher selecting a small number of staff from the building where the researcher worked. Educators were given a survey about trainings and experiences with EBD students. A short letter was also provided to explain the purpose of the research. Surveys were collected from staff members who were willing to participate. Once the surveys were collected, each response was recorded and a table was created to demonstrate the results of each response.

## Participants

Participants of the study were certificated and non-certificated staff in the elementary school where the researcher was employed. The elementary school employed 43 certificated staff with an average of 11.1 years of service. Fifty three point five percent of the teaching staff had completed a master's degree program. <u>Instruments</u>

A survey was used to gather information from staff at the elementary school. The survey was designed to be non-threatening in nature and encouraged staff participation. Responses to each question were in a yes or no format. The first question asked staff if they had had any training on behavior disorders in students. This was asked so that the researcher was able to determine the amount of understanding and knowledge on the research topic.

The second question asked staff if behavior disordered students needed accommodations in the general education classroom. This question was designed to assess staff's perceptions about having behavior disordered students included in the general population of the classroom.

Question three asked if staff had had knowledge about various techniques to use with behavior disordered students. Question four went along with question three, asking the respondents to identify whether the various techniques had been effective in controlling problem behaviors. Responses to the two questions were to assess whether or not staff was knowledgeable about the various techniques and to see if the techniques that they knew about were effective in the classroom.

The fifth question in the survey questioned if staff would like to receive training or information about students with behavior disorders. The responses to the question also indicated if a need for knowledge and understanding of the disorder was needed.

Question six asked staff to answer if they had any experiences in dealing with behavior students in or out of the classroom setting. The purpose of this question was to assess the amount of experience staff had in working with behavior disordered students.

The last question in the survey asked if staff knew of any specific characteristics that were associated with behavior disordered students. Responses to this question were to assess the knowledge base of staff members in regards to the disorder.

#### <u>Design</u>

Survey research was used by the researcher. A survey was given to the staff in March of 2010 to assess the level of knowledge and understanding of EBD students.

#### Procedure

The first step the researcher took was to create a survey that assessed the understanding and knowledge level of the staff at the elementary school where the researcher worked. After the survey was created a letter was written that explained the reason for the survey.

The next step was to give the survey to all staff in the building. The staff was asked to keep the survey anonymous by not writing names on the survey. When staff completed the surveys they were asked to turn them into the researcher's box for collection.

After the surveys were collected, the results were analyzed. The results were then recorded by the yes and no responses to each question. A graph was created to demonstrate the results of the survey.

## Treatment of the Data

The results of the surveys were analyzed for trends in the level of knowledge and understanding of EBD. The results were also analyzed for the need for training and support of staff.

#### Summary

This chapter was designed to review the methodology and treatment of the data related to the knowledge and understanding of staff about EBD. The methodology of this research was to survey educators about trainings and experiences with EBD students. The reasoning behind the research was due to EBD students being treated differently as compared to peers when discipline and classroom expectations were considered. The data from the surveys was put into a graph to display the findings of the research.

## Chapter 4

## Analysis of the Data

## Introduction

Students with emotional, behavioral, and social disorders have been unfairly stigmatized by educators. EBD disordered students were often treated very differently as compared to peers when discipline and classroom expectations were considered. Many teachers often lacked the skills and knowledge to effectively deal with these students.

#### Description of the Environment

A survey was conducted in March of 2010 in the elementary school where the researcher worked. The elementary school employed 43 certificated staff that were all deemed highly qualified by the state. The average years of experience were 11.1 years of service. Fifty three point five percent of the teaching staff had completed a master's degree program.

#### **Research Question**

Were students with emotional, behavioral, and social disorders unfairly stigmatized by educators due to lack of understanding and training on emotional, behavior, and social disorders?

#### Results of the Study

The survey contained seven questions asking the respondents to answer either yes or no. The researcher handed out 43 surveys to staff and asked for the surveys to be placed back in the researcher's box when completed. Seventeen surveys were returned to the researcher. The first question in the survey was, have you had training on behavior disorders in students? The results of the survey for this question indicated that 12 out of the five staff members had not had training on students with behavior disorders. Five staff members had had training on behavior disorders. The responses to the question indicated that there was a lack of training about students with behavior disorders.



Figure 1. Number of yes and no responses to question 1.

The second question in the survey asked staff if students with behavior disorders needed accommodation in the general education classroom. The results of the survey were that 16 out of 17 staff members felt that students with behavior disorders needed accommodations in the general education classroom. One staff member felt that students with behavior disorders did not need accommodations in the general education classroom. The results of the survey indicated that staff members felt that students with behavior disorders needed accommodation.





The third question in the survey was, do you know of various techniques to use with behavior disordered students? Nine of the 17 staff members who responded indicated that they knew of various techniques to use. Eight of the 17 staff members indicated that they did not know of various techniques to use with behavior disordered students. The results of the the survey indicated that there was a fairly even split in the knowledge of techniques that helped in dealing with behavior disabled students.





Question 4 asked staff to respond to whether or not the various techniques that they had knowledge of were effective in controlling problem behaviors. Question 4 was a component of question 3, so responses were given if there was a yes answer to question 3. Out of the 9 staff that responded yes to question 3, 5 of the staff members felt that the techniques that they knew about were effective in controlling problem behaviors. Four of the respondents indicated that the techniques were not effective in controlling behaviors. Results of the survey indicated that staff that knew of various techniques found that the techniques were



effective in controlling problem behaviors in behavior disordered students.

Figure 4. Number of yes and no responses to question 4.

The next question in the survey asked if staff would like to receive more information or training on dealing with behavior disordered students. Out of the 17 respondents, 14 answered yes to the question. Three of the respondents answered with a no response. The answers to this question indicated that staff were interested in receiving training or information about behavior disordered students.



Figure 5. Number of yes and no responses to question 5.

The next question in the survey asked if staff had had experiences in dealing with behavior students. Twelve responded with a yes to having experiences in dealing with behavior disordered students. Five of the staff members answered with a no. The results of the survey indicated that most of the staff had had experiences in dealing with behavior disordered students.



Figure 6. Number of yes and no responses to question 6.

The last question in the survey asked if staff knew specific characteristics of behavior disordered students. Out of the 17 staff members who completed the survey, 10 answered yes to knowing specific characteristics of behavior disordered student. Three of the staff answered that they did not know any characteristics about the disorder. The responses to the survey question indicated that staff did have knowledge of specific characteristics of behavior disordered students.



Figure 7. Number of yes and no responses to question 7.

### **Findings**

Given the analysis of the data, students with emotional, behavioral, and social disorders were unfairly stigmatized by educators due to lack of understanding and training on emotional, behavior, and social disorders. Educators that participated in the survey indicated that there was an overall need for training and information about the disorder. The survey also indicated that techniques that staff did know were not completely effective in dealing with behavior disordered students.

#### **Discussion**

The results of this research were what the researcher had expected. Educators had a lack of understanding and knowledge about students with behavior disorders that often led to a stigmatization. The stigmatization of individuals with EBD was a direct result of teachers' lack of understanding or experiences with such disorders. Teachers often labeled a student as a behavior problem based on their own experiences, not on the child and the child's need (Gosh, 2008).

## <u>Summary</u>

According to the results of the survey, educators had a lack of understanding and knowledge about students with behavior disorders that often led to stigmatization. Educators that participated in the survey indicated that there was an overall need for training and information about the disorder. The survey also indicated that techniques that staff did know were not completely effective in dealing with behavior disordered students.

#### Chapter 5

#### Summary, Conclusions and Recommendations

#### Introduction

This topic was researched because of a necessity to adequately serve the needs of EBD students in the general education classroom. Students with emotional, behavioral, and social disorders have been unfairly stigmatized by educators. EBD disordered students were often treated very differently as compared to peers when discipline and classroom expectations were considered. Many teachers often lacked the skills and knowledge to effectively deal with these students. Often, teachers became frustrated with students and sent them to the office instead of managing the issues in the classroom.

#### <u>Summary</u>

Students that were diagnosed with EBD were often stigmatized by educators and peers. This stigmatization often unknowingly happened due to the educator's incorrect perceptions and understanding of the disorder. The reauthorization of IDEA in 2004 ensured students with disabilities various rights. IDEA also outlined the qualifying conditions for the EBD diagnosis.

Several techniques and programs were shown to be effective when dealing with EBD students. Two strategies that seemed to be the most effective were selfinstruction and self-monitoring. Both of these strategies involved the student and the teacher working together to identify problem behaviors. Through modeling, role-play and monitoring with graphs, EBD students replaced problem behaviors with appropriate behaviors.

#### Conclusions

A conclusion of this study was that educators had a lack of understanding and knowledge about students with behavior disorders that often led to stigmatization. Educators that participated in the survey indicated that there was an overall need for training and information about the disorder. The survey also indicated that techniques that staff did know were not completely effective in dealing with behavior disordered students.

## Recommendations

The first recommendation from this research is to have building administrators talk to staff about the lack of understanding about students with EBD. This lack of understanding can cause EBD students to be unsuccessful in school. The administrators should initiate a discussion with staff about where the staff would like to go next with this issue.

A second recommendation from this research is for the district or building administration to provide trainings that address the concerns of behavioral disabilities. In order for educators to gain an understanding of these disorders, they need to have the information presented to them in a well-informed and research-based presentation.

#### REFERENCES

- Chen, K. (2006). Social skills intervention for students with emotional/behavioral disorders: A literature review from the American perspective. *Educational Research and Reviews*, 1(3). Retrieved October 15, 2009, from http:// www.academicjournals.org/ERR
- Fitzpatrick, M, & Knowlton, E. (2009). Bringing evidence-based self-directed intervention practices to the trenches for students with emotional and behavioral disorders. *Preventing School Failure*, 53(4), 253-266.
- Gay, L., Mills, G., & Airasian, P. (2006). *Educational Research* (8<sup>th</sup> ed.). Upper Saddle River, NJ: Pearson Education Inc.
- Gosh, S. (2008). Understanding behavior disorders: Their perceptions,
  acceptance, and treatment--a cross-cultural comparison between India and
  the United States. *International Journal of Special Education*, 1(23), 136-146.
- Lane, K, Lee, M, & Menzies, H. (2009). Self-monitoring strategies for use in the classroom: A promising practice to support productive behavior for students with emotional or behavioral disorders. *Beyond Behavior*, 27-35.
- Maag, J. (2006). Social skills training for students with emotional and behavioral disorders: A review of reviews. *Behavioral Disorders*, 32(1), 5-17.

Nasp position statement on students with emotional and behavioral disorders.

(2005, July). Retrieved January 12, 2010, from www.nasponline.org

- Niesyn, M. (2009). Strategies for success: Evidence-based instructional practices for students with emotional and behavioral disorders. *Preventing School Failure*, 53(4), 227-233.
- Office of Superintendent of Public Instruction. (2009). Washington State report card. Retrieved January 12, 2010, from

http://reportcard.ospi.k12.wa.us/summary.aspx?year=2008-09

- Perrott, L. (2009). Class-wide peer tutoring: An effective strategy for students with emotional and behavioral disorders. *Intervention in School and Clinic*, 44(5), 259-267.
- Stephan, S, Weist, M, Kataoka, S, Adelsheim, S, & Mills, C. (2007).
  Transformation of children's mental health services: The role of school mental health. *Psychiatric Services*, 58(10), 1330-1338.
- U.S. Department of Education. (2004). Building a legacy: IDEA 2004. Retrieved January 12, 2010, from <u>http://idea.ed.gov/explore/home</u>

# APPENDICIES

Behavior Disordered Students in General Education Classrooms					
	<ul> <li>Please circle the response that best reflects your thoughts.</li> <li>1. Have you had training on behavior disorders in students?</li> <li>Yes No</li> </ul>				
2.	2. Do students with behavior disorders need accommodations in the general education classroom?				
	Yes	No			
3.	3. Do you know of various techniques to use with behavior disordered students?				
4.	Yes No 4. If you know of various techniques, have they been effective in controllin problem behaviors?				
	Yes	No			
5.	. Would you like to receive more information or training on dealing with behavior disordered students?				
	Yes	No			
6.	6. Do you have experience with behavior students?				
	Yes	No			
7.	Do you know specific chara	cteristics of behavior disordered students?			
	Yes	No			

## Dear Staff,

Attached is a survey that I am conducting as part of my research project for my masters program. This survey is meant to be anonymous, so please do not put your name on it. When you are finished with it, please place it in my box. Thank you for your time and cooperation.

Kristie Gonzales