

DOCUMENT RESUME

ED 379 879

EC 303 753

AUTHOR Taylor, Ralph
 TITLE Supporting Behaviorally Emotionally Handicapped and Excluded Students and Teachers by Providing Comprehensive Inservice Training for Behavior Modification Technicians.
 PUB DATE 94
 NOTE 54p.; Ed.D. Practicum Report, Nova University.
 PUB TYPE Dissertations/Theses - Practicum Papers (043) -- Reports - Descriptive (141)
 EDRS PRICE MF01/PC03 Plus Postage.
 DESCRIPTORS Behavioral Objectives; *Behavior Disorders; *Behavior Modification; *Inservice Education; Job Performance; *Paraprofessional School Personnel; Program Development; Program Effectiveness; Secondary Education; *Specialists; Staff Development

ABSTRACT

This practicum developed a program to enhance the job performance of support personnel (behavior modification technicians) who work with students having conduct disorders. The behavior modification technicians provided building-level support for principals and teachers working with black adolescents from socially deprived backgrounds. Inservice activities were designed and implemented over a 16-week period in the following areas: human growth and development, preadolescent and adolescent development, behavior disorders, pharmacological intervention, behavior analysis, developing anecdotal records, developing Individualized Education Plans, interagency networking, conflict resolution, and program and school guidelines. Participants also were required to design and implement behavioral objectives and show mastery of aggressive control techniques (therapeutic holds) and parent involvement skills. During an additional 16 weeks, participants met and discussed individual student problems. Participants received the training at no cost, and received 3 semester hours credit from the local state university. Significant gains were found in acquired knowledge after participants completed the inservice activities. Support personnel displayed significant gains not only in technical support skills, but also in self-esteem. Appended is a post-training test. (Contains 36 references.) (DB)

 * Reproductions supplied by EDRS are the best that can be made *
 * from the original document. *

ED 379 879

This document has been reproduced as received from the person or organization originating it.
 Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

Supporting Behaviorally Emotionally Handicapped and Excluded
Students and Teachers By Providing Comprehensive Inservice
Training for Behavior Modification Technicians

by

Ralph Taylor

Cluster 47

A Practicum II Report Presented to the
Ed. D. Program in Child and Youth Studies
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

NOVA UNIVERSITY

1994

PERMISSION TO REPRODUCE THIS
MATERIAL HAS BEEN GRANTED BY

Ralph Taylor

TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)."

2
BEST COPY AVAILABLE

EC 303753
ERIC
Full Text Provided by ERIC

PRACTICUM APPROVAL SHEET

This practicum took place as described.

Verifier:

Ida Reid

Ida Reid

B-EH Program Specialist

Title

1501 Euclid Ave., Charlotte, NC 28203

Address

October 20, 1994

Date

This practicum report was submitted by Ralph Taylor under the direction of the advisor listed below. It was submitted to the Ed. D. Program in Child and Youth Studies and approved in partial fulfillment of the requirements for the degree of Doctor of Education as Nova University.

Approved:

January 20, 1995

Date of Final Approval of Report

Mary W. Staggs, Ed. D.

Mary W. Staggs, Ed. D., Adviser

TABLE OF CONTENTS

TABLE OF CONTENTS.	i
CHAPTER		
I	INTRODUCTION.	1
	Description of Community.	1
	Writer's Work Setting and Role.	2
II	STUDY OF PROBLEM.	4
	Problem Description.	4
	Problem Documentation.	4
	Causative Analysis.	6
	Relationship of the Problem to the Literature.	7
III	ANTICIPATED OUTCOMES AND EVALUATION INSTRUCTION	9
	Goals and Expectations.	9
	Expected Outcomes.	9
	Measurement of Outcomes.	9
IV	SOLUTION STRATEGY.	12
	Discussion and Evaluation Solutions.	12
	Description of Solution Selected.	13
	Report of Action Taken.	17
V	RESULTS, DISCUSSION AND RECOMMENDATION.	29
	Results.	30
	Discussion.	31
	Recommendation.	36
REFERENCES.	38

Appendix

A POST-TRAINING TEST. 42

Abstract

Supporting Behaviorally Emotionally Handicapped and Excluded Students and Teachers by Providing Comprehensive Inservice Training for Behavior Modification Technicians. Taylor, Ralph, 1993: Practicum Report, Nova University, Ed.D. Program in Child and Youth Studies. Inservice Training/Elementary/Secondary/Support Personnel Training/Community Service/Self-Esteem/Mentoring

This practicum was designed to enhance the job performance of support personnel who work with conduct disordered students. Inservice activities were designed in the areas of human growth and development, behavior analysis, medication, designing and implementing behavioral objectives and aggressive control techniques. Participants received the training at no cost, but received 3 semester hours credit from the local state university.

Analysis of the data revealed significant gains in acquired knowledge after participants completed the inservice activities. Support persons displayed significant gains not only in technical support skills, but also in self-esteem.

Permission Statement

As a student in the Ed.D. Program in Child and Youth Studies, I do do not () give permission to Nova University to distribute copies of this practicum report on request from interested individuals. It is my understanding that Nova University will not charge for this dissemination except to cover the costs of microfiching, handling, and mailing of the materials.

1-7-95
(date)

Ralph Taylor
(signature)

CHAPTER 1

Introduction

Description of Community

The community is composed of a very large urban center city mass surrounded by a rural area with varying densities of population. This dichotomy presents an interesting contrast. The urban component of the community represents the new industrial age with a thriving downtown business district and high tech industry. The rural component represents the past where the land is passed down through generations.

The landscape provides a vivid view of history and the future. Much of the rural area consists of thriving farming communities which use high tech equipment in daily operations.

The dichotomy is intriguing in that the school system must provide an appropriate education for these two very diverse populations. Another layer of complexity is added with the influx of new families who increasingly come from Mexico and Asia as well as from other areas of the state and country. New students are constantly moving in and their varying socio-economic and cultural backgrounds continue to further diversify an already culturally and economically rich community. The city has become a stewing pot for many groups and nationalities. Each group brought something different and the school district must be prepared to cope with it.

Writer's Work Setting and Role

The work setting for the writer is a large urban school district with 83,500 students. The writer is responsible for providing programming for Behaviorally Emotionally Handicapped Students (BEH) and students who have been excluded from the regular school system. Excluded students (Exc.) are students who have displayed behaviors that are undesirable in a regular school setting and who do not qualify for special education services.

Behavioral programming consists of providing students with the proper and acceptable social skills needed to be successful in a public school atmosphere. In order to develop appropriate social and emotional behavior, different methods of programming are used. Programming can range from a school wide social skills program to behavioral contracting. Some programs are based on behavior plans which are empowered by the use of behavior modification techniques such as a token economy.

The writer is directly responsible for providing behavior programming and consultation to 20 schools. Five of these are discipline schools which serve the Exceptional Students sites. The middle level discipline school is called the Management School, and the high school component is called the Learning Academy. BEH students can be found in the other 15 schools and throughout the district in clusters of three self contained classes. The number of self contained classes can range from 40 - 45 classes depending on the progress of the inclusion movement.

Considering the size of the program and the diverse needs of the students, the writer developed and designed a job description for a position which would

provide support to principals and teachers at the building level, intervention with students in crisis and assistance with the development of behavior plans. The writer provided the staff development and behavior programming techniques that were implemented by these Behavior Modification Technicians (BMTs).

The BMTs are the writer's tentacles into each school and classroom. Currently there are 20 BMTs with whom the writer works. The need and request for these paraprofessionals has grown rapidly and additional BMTs were hired before the school year ended.

CHAPTER II

Study of Problem

Problem Description

The BEH students and excluded population are students that are very difficult to work with. Many of these students are dismissed from their home school. There are certain procedures and guidelines that the staff should adhere to before any students are suspended. These procedures should be implemented by the BMT under the supervision of the administration.

The procedures should consist of appropriate interventions selected and implemented by the BMT. BEH and Exc. students have behavior problems and they can be very confrontational. The confrontation between staff and students create a hostile environment, and this is a problem that can escalate with untrained staff members.

The primary problem in the writer's environment was that behavior modification technicians were providing insufficient behavioral support for students and teachers. The BMTs were not informed about public school procedures to provide the type of support needed to be effective.

Problem Documentation

The hard data that the writer has used to document the problem was in the form of exclusion requests from principals, observation of BMTs, pre-testing and written complaints from parents. Exclusion requests were written by principals to have a student excluded from public schools or placed in a discipline school.

When these requests were written, the principal was to substantiate the interventions performed by the BMT to change the student's behavior. When the writer investigated these interventions by interviewing the principals and the BMTs, the writer found discrepancies in the interventions applied. The writer was told that in many cases the principal lacked confidence in the BMT and didn't truly allow the interventions to take place. In some cases when the interventions were actually done they were inappropriate for the particular behavior problem.

Twenty BMTs were given a pre-test on public school behavior modification techniques used in the public school system. Eighteen of the BMTs scored below the fiftieth percentile.

Many of the BEH and Excluded students live in foster of group homes. These foster parents and group home parents are closely aligned with children advocate groups who are very vocal. Whenever one of these students is suspended a phone call is made to the writer's office to complain about the suspension.

Causative Analysis

When discussing the cause of the problem, one must view the history of the BMTs. They were brought into the school system as a replacement for BEH psychologists. This was a cost effective move but highly controversial, because BEH psychologists have been in the school system for a long time, but they were no longer effective with the BEH classes. However, because of their longevity, they were respected. BMTs came into the school system unprepared emotionally and professionally. They were basically recruited for their expertise in physical

crisis intervention. Private and residential training, has proven to be insufficient for the public school system.

BMTs needed training in crisis intervention, behavior management and conflict resolution as they worked with Excluded and BEH students. The problem was that appropriate techniques and intervention are essential for these special needs students and the BMTs must provide them appropriately.

Principals perceived BMTs as untrained support persons and decided to use them in a myriad of ways. This included being assigned to extra lunch duties, weight room assignments, extra duties and the in-school suspension class. These assignments augmented the problems of the BMTs as their self-esteem dropped. This precipitous drop in morale immediately caused conflict with administrators of the schools. BMTs complained of being misused and the administrators stated they were over reacting. They clearly had a problem related to communication and direction.

Relationship of the Problem to the Literature

A review of literature states that there are specific techniques and procedures for staff to manage conduct disordered students. Knapczyk (1992) cites the need for staff members to be able to identify antecedent behavior which leads to acting out behaviors for emotionally handicapped adolescents. The author states that staff members have problems with BEH students when they do not address the antecedent stage of inappropriate behaviors. Glick and Goldstein (1987) state that BEH staff members should be conversant with Aggressive Control Replacement Training (ART) where staff members are taught alternative ways to handle crisis situations when working with BEH students. ART is based

around the staff members staying under control in a crisis situation, thus modeling the behavior that the staff members want to see in the student.

Center and Kaufman (1993) cite the need for BEH staff members to have special training in the categories of crisis management, conflict resolution, problem solving skills and parental involvement.

Henley (1987) cites according to Redl a leading researcher in the field of behavior disordered children, problems develop when techniques of Behavior Influence are not present in the classroom. Bandura (1977) classic research states that problems exist when staff members model undesirable behaviors in the presence of children no matter what their exceptionalities.

Gelfand and Hartman (1984) warn that staff members not conversant with difficult techniques needed to cope with the diversity of behavior problems of BEH students and their parents can be a major problem. Problems develop in behavior disordered classrooms when there is no effective behavior change program. Many difficulties are discovered in BEH classrooms when there is poor management of Skinner's (1953) operant conditioning techniques. Poor operant conditioning can consist of an inconsistent point system in a classroom for BEH students or a none motivating token economy with students earning privileges to participate in regular education classrooms.

Friedman and Street (1984) state that staff members not conversant with counseling techniques such as, Life Space Interviewing and Reality Therapy will have ineffective programs. Lochman (1987) states that BEH staff members not providing appropriate academics in their programs create a deficiency in the enhancement of appropriate social skills. Roth and Nicholson (1988) states that if

specialized programs to identify the psychoeducational variables differentiating between successful or unsuccessful mainstream students with assaultive behavior are not employed many difficulties with manifest in the mainstreaming process of BEH students.

Behavior disordered students need well defined and written Individualized Education Plans (IEP) especially in the area of behavioral objectives for their handicapping conditioning. Griffin and Carson (1987) report that many problems emanate in the area of IEP development and writing.

Knitzer (1992) reports that only about ten percent of the mental health professionals are trained to specialize in serving children, which in an insufficient percentage to serve this population. To further substantiate the need for qualified personnel to work with BEH student. Grosenick (1981) states that there is a problem when there is not enough skilled public school staff members available to work with the BEH population.

CHAPTER III

Anticipated Outcomes and Evaluation Instruments

Goals and Expectations

The goal was that behavior modification technicians will demonstrate the appropriate skills needed to assist in the management of BEH students educational and emotional programs.

Expected Outcomes

The first expected outcome was that BMTs will be able to develop or evaluate an appropriate goal and three behavioral objectives relating to managing behavior for the individual student.

The second outcome was that BMTs will demonstrate appropriate therapeutic holds for providing crisis intervention.

The third expected outcome was that BMTs will demonstrate knowledge regarding conflict resolution, medical intervention, human growth and development.

Measurement of Outcomes

Writing Behavioral Objectives

Outcomes were measured by demonstration, evaluation, observation and assessment. The BMTs were given a case study of a student with behavior problems. Each BMT suggested an appropriate goal and three behavioral objectives. Each BMT read his goal and behavioral objectives in class aloud and substantiated the selection of the goal and objectives. The writer and the class evaluated the goal and objectives for appropriateness for each BMTs site. The successful development of the behavioral objectives were predicated on human

and physical resources. Successful behavioral objectives may require additional resources such as one-on-one supervision in times of behavioral crisis or a padded time out isolation room for crisis. When writing behavioral objectives for BEH students BMTs must be cognitive of the resources that they have available at their school site because all sites are not equipped the same.

Each BMT was given a blank behavioral objective form to complete. A written profile of a student with three aberrant behaviors was given to the participants. They were instructed to complete the blank behavioral objectives designed to decrease inappropriate behaviors. Each behavioral objective had to be workable in their particular sites.

There were three primary factors the writer looked for when reviewing the behavioral objectives. They had to be measurable in terms of intensity, frequency and duration. Each BMT explained why he/she chose to construct behavioral objectives for each student. The participants were asked to substantiate every minute detail of the behavioral objective. Upon completion, the writer gave immediate input and evaluated each behavioral objective.

Therapeutic Holds

In an effort to achieve 100 percent accuracy the writer worked with BMTs at each site visit demonstrating therapeutic holds step-by-step. The holds were broken down into sequential numbered grasps to give a quantitative value of one for each grasp.

Pre and Post Test

BMTs demonstrated knowledge of conflict resolution strategies, pharmacological interventions, and human growth and development by obtaining an acceptable score on the post test.

BMTs also demonstrated their ability to apply conflict resolution strategies in role plays conducted in the inservice session. The writer provided instant feedback after each session on conflict resolution.

Life Space Interviewing and Reality Therapy were demonstrated by the writer and guest lecturer. Each BMT had the opportunity to role play a crisis situation in the presence of the writer and guest lecturer. Immediate feedback was given to strengthen the conflict resolution process.

CHAPTER IV

Solution Strategy

Statement of Problem

The primary problem in the writer's environment was that behavior modification technicians were providing insufficient behavioral support for students and teachers. The BMTs were not informed about school procedures to provide the type of support needed to be effective.

Discussion and Evaluation of Solutions

Reviewing the literature reveals that staff development is a very important component of working with children with conduct and behavior problems. The literature suggests that specific training and techniques are sorely needed when working with this population.

Duffy (1993) suggests that staff development for public school staff members can help teachers to focus on strategies that will make them and students more efficient in an educational environment. Anders and Richardson (1991) report that staff development can enhance and empower teachers to do a more efficient job in all settings. Sparks and Loucks-Horsely (1989) suggest using one of five models currently being used in staff development training. The author states that these programs have proved to be very effective when used in staff development. Askins and Schwisow (1988) cite the use of a university-school collaboration program to enhance staff development. The programs consist of university faculty members to work with public school staff members.

Olson (1988) states that he has designed a way to train BEH staff members to deal with verbal aggression. The author encourages the use of control practice and individual practice as effective strategies for BEH students. Wood (1986) states that BEH staff members are more effective when there is administrative support. The support should be in the form of staff development and crisis intervention.

Strategies for addressing the problem include parent involvement, conflict resolution, IEP development and planned interventions. The literature states that these are the components needed to function effectively as BEH support persons and provide quality services.

Bijou and Peterson (1983) suggest the A. B. C. approach in behavior management. A. B. C. stands for Antecedent, Behavior, and Consequence. This approach is very important because it lends itself to developing a structured procedure for addressing problems of BEH and Excluded Students. The literature addresses family and parent involvement. Research has shown that parents of handicapped children have a higher rate of divorce, isolation from social support, and an array of emotional problems (Gallagher, Beckman, & Gross, 1983). With this information in mind the support staff for BEH and Excluded Students, who display identical behaviors, should understand the importance of parent involvement.

Description of Selected Solution

The literature cites the need for special techniques and skills needed to work with behavior disordered students, therefore, the solution that was implemented as based on comprehensive staff developed for BMT's.

The planned inservices training addressed behavior management, IEP development, crisis management and parent involvement.

A solution strategy employed to enhance BMT's program support was the use of behavior management techniques. Oken (1992) described such techniques when he discussed the use of Teacher Behavior Continuum (TBC). TBC outlines the use of such strategies as the use of a token economy, point system and physical intervention.

BMTs were taught to develop token economies and point systems as part of their behavior management plan. Petty (1989) suggests that programs for disruptive students should have a continuum of services offered to control disruptive behaviors. The services that the author suggest are parallel to what BMTs received in training. The parallel services provided in training were to design a behavior curriculum that featured reward and punishment, a fully supervised setting, collegial support and physical intervention. Physical intervention is really a necessary skill when working with conduct disordered students. As part of the solution BMTs were required to become efficient with therapeutic holds. According to Hughes (1985), Datema (1988), Rutherford and Nelson (1983) therapeutic physical restraint is a very much needed component when working with conduct disordered individuals.

Social skills training was a very important part of the solution to the writer's problem. The literature focuses on the training of behavior disordered students in social skills as an appropriate intervention. In today's society children are placed and raised in non-traditional settings. These settings range from dysfunctional homes to state supported group homes (Wolfgang & Kelsay, 1992).

Social skills can be defined as appropriate smiling, initiating interactions, and using problem solving skills that enable a person to perform competently in social situations (Hops & McConnell, 1985). Social skills training programs have been successful in helping adults and children improve their skills in interpersonal communication, problem solving, self control, assertiveness and stress management (Howing, Wodarski, Krutz & Godin 1990).

Michelson and Mannarino (1986) state that the key to behavior disordered students success is developing and maintaining appropriate social skills. Gesten and Weissberg (1986) encourages the use of school based social problem skills training to teach conflict resolution. Appropriate social skills are very important to the development of children. Socially, children come from many different backgrounds and cultures. Some children have not been exposed or taught appropriate social skills that are needed for mainstream society which is a very large part of learning conflict resolution.

Skills in conflict resolution was a much needed part of the BMT training. Karlitz (1992) states that special education staff resolved conflicts with parents when problem areas were pointed out ahead of time. Malone (1989) states that program staff working with emotionally handicapped students must be aware of the negative reactions of students and parents. The author states that the staff will function better if they verbalize their frustrations and anxieties on a staff level.

In an effort to eliminate parent staff conflict, parents need to be included in the decision making process for their child. Many BEH and behavior disordered students meet the guidelines for special education services.

Part of the special services for special education students is the development of an Individual Education Plan (IEP). Developing the IEP is a very important component of the survival package for a BEH student. The document grants the student the right to have special services under federal law. IEP development is very important to BEH students because of their aberrant behaviors.

Maier (1986) provides the results of a conflict resolution program for special education instructors. The author states that conflict resolution skills improved vastly when special education instructors followed the basic strategies provided in the program. The chief component of the program was allowing parents to speak and allow them to express their feelings. Allowing parents to self express and letting them have input in some of the decision made about their children was really emphasized in the BMT training.

The BMT training also emphasized the use of interagency support. Developing interagency support was important because of the many needs of BEH students. Historically, the burden of serving behavior disordered students has been left to the public school system. Knitzer (1982) states that research has been done to try and establish the needs for behavior disordered students. The author cites the serious need for state and federal services for behavior disordered students. Grosenick and Huntze (1990) states that when there is not a collaborative effort by community service agencies to work with behavior disordered students they sadly end up on public school homebound services at a tremendous cost to the education system.

Action Taken

The solution addressed in this practicum was to develop and implement a training program to enhance the efforts of behavior modification technicians in the public school setting.

The writer was primarily responsible for the conception and inception of the plan for using BMTs. The writer was very aware that when recruiting BMTs, that they were not conversant with public school procedures and regulations.

BMTs basically originate from residential and private mental health facilities. Consensus was reached in a meeting with the writer's supervisor that training would consist of the following categories:

1. Human Growth and Development
2. Pre-Adolescent and Adolescent Development
3. Behavior Disorders
4. Pharmacological Intervention
5. Behavior Analysis
6. Developing Anecdotal Records
7. Developing Individual Education Plans (IEPs)
8. Interagency Networking
9. Conflict Resolution
10. Program and School Guidelines

Once the curriculum for BMTs was approved by the assistant superintendent, the writer needed to find appropriate human and physical resources.

The writer called the Staff Development Center which houses classrooms for providing instruction to school system employees. The writer reserved a classroom for Thursdays for the next four months for three hours each session. Next, credible instructors were identified to assist the writer in delivering the specific areas of training.

The writer contacted the department of special education at the local university and secured a commitment from the department head that he would teach some of the courses. In addition to support from the university, the writer also enlisted the active participation and support of school system administrators who agreed to teach specific content areas. Though these individuals would be volunteering their time and expertise, their positive responses and helpful postures were notable. The writer became quite conversant with each subject area to be presented in order to prepare for days when a substitute was needed.

After the logistics were firmly in place the writer attended a district-wide principal's meeting to explain the inservice plan to principals. In addition to giving principals notice of the upcoming inservice, this meeting served to inform them that any misuse of BMTs would not be tolerated by central administration.

BMTs were informed of the inservice plans at the writer's weekly meeting of this group. The information was also sent by E-Mail and through the local staff development newsletter which is disseminated to all school system personnel.

BMTs were given a pre-test to determine their level of knowledge of the district's behavior guidelines and of behavior management techniques. Less than fifty percent of the BMTs scored 70 percent which clearly established a need for

the training. BMTs were informed of their low scores and given a preview of the inservice. Their attention was specifically drawn to the objective of increasing their proficiency in the use of behavior management techniques, and their knowledge of the behavior guidelines such that they would achieve 90 percent accuracy on the post-test.

During week one of the practicum, the writer discussed with the 20 participating BMTs the objective and purpose of the training, including how critical it was that they take the training seriously and perform well on the job as a result. The writer shared with them that this expectation came from the superintendent of schools via the assistant superintendent.

Week two consisted of an academic lecture on Human Growth and Development which was delivered by a university professor. Following the lecture, a written assignment was given which required participants to consider and compare the internal and external control factors present in BEH and EXC students. Participants were to be prepared to discuss student behavior problems and their relationship to environmental, genetic, and hereditary factors at the next class session. When the assignment was discussed at the next class session, BMTs were able to relate behavior problems to environmental conditions as well as genetic and hereditary factors.

The next session featured a discussion of the physical, cognitive, language and social-emotional development of school aged children. This session, conducted by the writer and a guest lecturer, generated much discussion and ended with a correlation being drawn between the developmental attributes of students and their impact on a public school environment.

At the fourth session of inservice, the writer continued with the previous week's discussion and encouraged feedback from the class. The discussion was divided into three areas; cognitive development, language development, and social-emotional development. Participants were encouraged to think of examples of how adolescent development impinged on their respective work sites. It was clear from the discussion that BMTs could identify how the developmental issues related to BEH/Exc. students, and their environments.

At week five, there appeared to be an air of buoyancy and increasing confidence among the BMTs in the class. BMTs began to be more verbal and assertive. The topic of behavior disorders was introduced by the writer and the guest lecturer. The writer encouraged the class to discuss behavior disorders in general and the specific types of behavior disorders that could be identified at their respective sites. Each BMT described the characteristics of a student at their site and designated the student either emotionally handicapped, socially maladjusted, opposition-defiant, or conduct disordered. Designations were based on Diagnostic and Statistical Manual of Mental Disorders, 3rd Edition, Revised (DSM III-R) and federal guidelines for identification of emotionally handicapped students (IDEA). Some BMTs had heard of the DSM III-R as a diagnostic tool. Since many others were unfamiliar with it, however, the writer provided time during this session for the BMTs to become more familiar with this resource. (The DSM III-R is a technical manual devised by mental health professionals for the purpose of describing and labeling certain mental/emotional/behavioral disorders, thereby aiding diagnosis and treatment. The manual is used extensively in mental health centers and by mental health practitioners, but sees only limited

use in public school systems. Since BMTs have daily contact with mental health practitioners, they need an operational knowledge of the language, perspective and general intent of the manual).

At the sixth session, the writer led a discussion on socially maladjusted students. The writer reviewed the federal guidelines for severely emotionally disturbed students. The guidelines clearly state that socially maladjusted students should not be included within the category of severely emotionally disturbed. This opened up a realm of interesting issues related to the assessment of students suspected of having a behavioral/emotional disturbance. The writer pointed out that if the school district is assessing purported BEH students properly, there should be no misdiagnosed students in the BEH classrooms. At this point, the writer asked the BMTs to write down the race and SES of the students in their programs. Each BMT stated that ninety-five percent of the students in their classrooms were black male adolescents. These students typically were from single parent homes and received free lunches. Both indices are barometers of low socio-economic status. The writer posed to the class the question, "Why is your population ninety-five percent black males who qualify, according to the guidelines, as *in poverty*?" It became increasingly clear to the BMTs that they were working almost exclusively with poor black boys from socially deprived homes and backgrounds. These factors certainly suggest more social maladjustment than emotional disturbance. The writer explained to the class that there was no research which illustrates a correlation between being emotionally disturbed and being a black male adolescent. There was, the writer continued, a high correlation between single parent status, poverty, and misconduct in children

at school. It was noted that research documents that black male adolescents experienced a significantly greater degree of racism than black females or their white counterparts.

Session seven addressed the use of medical/pharmacological intervention for BEH students. The guest lecturer was a registered nurse from one of the local mental health facilities. The nurse informed the class of the types of medications used most commonly with school populations and familiarized the BMTs with the side effects of these. Ritalin was identified as the drug of choice for most students in BEH programs who are using medication.

The nurse stressed the fact that medication was not a cure-all for behavior and emotional problems (unless there is an unusual physiological component). She emphasized the necessity for good behavior management, effective academic programming, and meaningful parent involvement if a balanced program which would yield maximum, sustained results is to be provided.

During weeks eight and nine, behavior analysis was the focus. Because of the relative importance of good skills in this area, two sessions were devoted to it. The investment of time on this session was also necessary because of revisions this writer had previously initiated in procedures for Administrative Placement Committee (APC) meetings. These meetings, which are required by state and federal regulations, are held to determine whether a student will be certified BEH, or otherwise found to be exceptional. The new procedures will include charts and graphs to substantiate frequency, intensity and duration of the aberrant behaviors as well as documentation of the intervention tried and their impact.

This revision had the effect of (a) removing subjective evaluations of aberrant behavior, (b) expediting the APC process by adding meaningful data, and (c) decreasing emotional testimonies which served only to add a negative charge to the atmosphere and cloud the issues, thereby potentially undermining the child's needs.

As the writer explained to the class, behavior analysis involves learning to create graphs and charts that will substantiate and illustrate aberrant behaviors. Once aberrant behaviors are adequately documented and identified, specific behaviors can be targeted and appropriate interventions developed. As a class exercise, the BMTs each identified a student at their site and designed a behavior intervention program to address an aberrant behavior targeted for change. The BMTs were then given an opportunity to explain and justify the interventions, and to receive feedback from the writer, guest lecturer and other members of the class. These exchanges were constructive, instructive and supportive and apparently valued by participants.

During week ten, the class was given the assignment of developing an IEP plan for a student who qualified for special education services. BMTs were given a written profile describing the student and his needs from which to develop the plan. The writer and guest lecturer reviewed the profile with the class and used an overhead projector to illustrate the process of developing behavior goals as part of the IEP.

During week ten, the BMTs continued to demonstrate growth. The 20 BMTs formed a mentor group with the writer's support, and each committed to becoming a mentor for a black male at his/her site. The motto for the emerging

mentoring program is "We can't save the world, but we can save one child." The mentor program resulted in each BMT "adopting" the most violent student in his/her program for an intensive shared experience. The mentor program was well received by both schools and the community. Parents were pleased to have a black, male professional who took a personal interest in their sons and who would work with them for 3 days a week after school and at least 2 weekends a month. The advent of BMTs into mentoring substantially broadened what needed to be addressed from an inservice perspective, and as such, the writer was required to quickly revise and prepare to implement new plans. The writer immediately identified and arranged for presentations from seasoned professionals who could offer expertise to this group on the process of mentoring. The writer believed that a mentoring program for black male adolescents who are at-risk of becoming extinct should be taken seriously. Further, the writer believed that additional research needed to be done in this area and a specific action plan developed for this group. Research was conducted by the writer and distributed to and discussed with BMTs at each subsequent weekly meeting of the group.

The eleventh session was used as an introduction to and exploration of First Call For Help. This locally produced referral handbook lists and describes virtually all of the community services in the county that offer services to residents, including families and school-aged children in need. The writer reviewed the process of developing an interagency network of community service agencies to assist an imaginary BEH/Exc. student in crisis. The crisis was described as one in which the student reported to the BMT that he was being sexually and physically abused by his step-father. Each BMT was required to

outline a procedure reflecting what appropriate actions should be taken to ensure that the student's needs were met. [Note: School board policy requires that, "...in compliance with state law, any school employee who has reasonable cause to suspect that any child is an abused or neglected child,... shall report the case of such child to the Department of Social Services, Child Welfare Division and to the school principal."] It is reasonable to include other persons in the network of school-based intervention specialists who need to know of the situation such as the school psychologist, the school counselor or school social worker and classroom teacher who understand the ramifications of confidentiality and are in a position to support and protect the child. The BMT would be expected to facilitate and/or maintain contact with school-based personnel and community agency representatives, such as Department of Social Services case workers, Police Department investigators, United Family Services staffers or Family Support Center personnel, as necessary. The BMT should be available to assist in developing and implementing a plan for the student if such involvement is indicated.

Week twelve was used to enhance and extend the BMTs skills in interagency relationship development and communications. Speakers from the Department of Social Services, Juvenile Justice Center, Parole and Probation Board, Community Mental Health and the Police Department's School Resource Officers all gave presentations. Each representative stressed the need for cooperation between their agencies and BMTs to ensure appropriate service provision to students. This session was extremely important since 85% of BEH/EXC. students are involved with multiple community service agencies.

The second half of this session was devoted to conflict resolution skills and adult communications. The Class identified and discussed two avenues to conflict resolution: Reality Therapy and Life Space interviewing. These techniques were presented as follows:

Realty Therapy

(Steps in process)

1. Develop good rapport
2. Ask what happened
3. Ask for an evaluation (Is it helping you?)
4. Make a plan
5. Make a commitment
6. Accept no excuses
7. Use no punishment
8. Hold Problem Solving meetings
9. Hold Open-Ended meetings
10. Hold Educational-Diagnostic meetings

All meetings must take place on a regular basis. BMTs should sit in a circle with students. The length of meetings is determined by the age and ability of the student. Primarily, young children should meet for 10-30 minutes and older students for 30-40 minutes.

Life Space Interviewing

(Identify and explore)

1. Instigating Conditions
2. Depth and Spread
3. Content Clarification
4. Acceptance of Feelings

Life Space Interviewing works best in a time of crisis. Crisis is the time that the student or parent is most vulnerable and will negotiate feelings and hostilities.

During week thirteen, the writer reviewed the subject area related to the pre-test as well as other pertinent information. An extra review session was held in lieu of the regular weekly meeting of BMTs. The writer suggested to the BMTs that they set up study groups and proceed to study on their own. The importance of a successful performance on the post-test was emphasized.

At week fourteen, the post-test was administered. The writer assured the BMTs that the post-test would have no surprises and encouraged them to be confident in their ability to recall and apply what they had ostensibly learned. BMTs were allowed to leave the testing room as soon as they completed the test.

Week fifteen was reserved for evaluating the post-test. The writer was very pleased to see scores of 90% and above on the test.

The final class meeting was conducted at week sixteen, at which time the writer returned to the BMTs their test results. Participants in the class radiated pleasure and confidence. The test results served as another shot of the self esteem so needed by this group of "hybrid" professionals. In summary, the objectives of

the in-class training were reviewed and reemphasized with notations made at each objective accomplished. Finally, the principals were informed about the performance of their respective BMTs. To follow-up, the writer initiated site visits once a week to assist BMTs with crisis management plans and other program particulars.

Weeks seventeen through 30 consisted of weekly meetings where each BMT had the opportunity to discuss a student who presented a particular problem for the BMT. The writer listened to and critiqued the interventions and other peripheral input from BMTs.

In addition to other basic job prerequisites, BMTs were also required to become certified in aggression control. As such, at each site visit and during weekly meetings, the writer reviewed therapeutic holds, physically and by video. (The writer is a certified aggressive control trainer). The writer certified each BMT for each hold when 100% proficiency was achieved. Each BMT was completely certified by week 25 of this process.

Weeks thirty-one and thirty-two were used to review all test scores with BMTs individually and to share and discuss observation notes. When informing the assistant superintendent of the success of the inservice for BMTs he stated that the training was completed in a timely manor and that many facets of the program could be used in some programs that are still in developmental stages.

CHAPTER V

Results, Discussion and Recommendations

Results

The primary problem in the writer's environment was that behavior modification technicians were providing insufficient behavioral support for both students and teachers. The BMTs have been neither adequately nor appropriately trained in public school procedures to provide the type of support needed. As a workplace, public schools are unlike most other "shops", and require a different approach and attitude.

The writer planned and implemented a comprehensive inservice to enhance the support services of BMTs. The inservice included behavior management techniques, IEP development, crisis management techniques and parent involvement training.

The first outcome is that BMTs are now able to write or evaluate an appropriate goal and three behavioral objectives for an individual student.

BMTs received intense training on the development of IEPs. The inservice given by the writer placed a heavy emphasis on writing behavioral objectives that correlated with the aberrant behavior. Given a blank IEP, after the sessions on IEP writing, the BMTs wrote appropriate behavioral objectives. The objectives the BMTs wrote were appropriately stated for the intensity or degree of the problem, and were written in terms that were measurable. Additionally, their IEPs correctly highlighted areas targeted for the decrease or extinction of inappropriate behaviors and the increase or enhancement of appropriate behaviors.

The second outcome is that BMTs are now able to demonstrate appropriate therapeutic holds with 100% proficiency. At present, all of the BMTs are certified by the writer in physical aggression control. The writer used video taped sessions and physical demonstrations to certify the BMTs. The holds were broken down into sequential steps, with each step assigned a number value of one. Some holds had as many as eight steps, and all steps had to be executed correctly for mastery of the hold to be achieved. When the writer made visits to schools, there were opportunities to observe BMTs using therapeutic holds to remove violent students from hostile situations. When therapeutic holds were used with students, the BMTs were required to document and discuss them with the writer.

The third outcome is that BMTs are able to demonstrate knowledge of conflict resolution, pharmacological intervention, and human growth and development, as indicated by their performance on the post-test. All BMTs scored 90% or better on the post-test. Further, the BMTs were required to role play a hostile parent and to use conflict resolution skills to diffuse and manage the situation appropriately. BMTs were guided through the role play by the writer and guest lecturers, and were evaluated according to whether they met the established criteria: avoidance of use of condescending language, avoidance of hostile facial expressions and gestures, and voice modification.

All three outcomes were met by all BMTs who are experiencing great success in this area at their work sites. It is apparent that the inservice was valuable to and needed by the BMTs to enhance their efforts on the job.

Discussion

There were several outcomes that evolved from this practicum that were not anticipated by the writer. These outcomes were related to the impact of the writer's involvement with the BMTs, and the impact of this involvement and provision of training on the interpersonal development of the BMTs. The increase in their level of self-esteem was not directly measured since it was not considered, however, it was clearly an observable phenomenon that built momentum during the training period. To get a better understanding of the personal development of BMTs it is necessary to explain the history of professionals.

The writer has referred to the BMT as a "hybrid" professional because when developing the job description the writer rather haphazardly wrote down the duties these professionals would perform.

These duties included those such as using physical and verbal intervention, as is done by policemen; conducting group sessions, as a counselor in a mental health or residential facility would do; using knowledge of substance abuse intervention, as would a psychiatric nurse; facilitating parent and family counseling and involvement, as would a social worker; and providing information about alternative and special education programs, as would a school counselor. Considering this job description, the writer was doubtful that anyone would be found with such qualifications. In addition to the desired qualifications, the prospective applicant should also have the ability to work effectively with a population that would be 95% black male adolescents.

When interviewing for BMTs, the writer looked for as many of the qualities as possible in each applicant. The majority of applicants were from private and public residential treatment facilities.

The factor that made the BMT position so attractive to prospective BMTs was the salary and benefits package. BMTs received the same salary as did a beginning teacher, which represented a substantial increase from their previous jobs. However, with the pay increase would come an increase in duties and responsibilities. It was very clear that this hybrid professional would require constant and intensive training to be successful in a public school environment.

The pre-test involved a diagnostic effect to measure what was needed to make BMTs function more efficiently in the public school system. The low scores on the post-test for BEH/EXC students indicated the real need for in-service training.

After receiving the academic portion of the inservice BMTs were given a post-test which displayed a significant gain in test scores. On the pre-test BMTs scores ranged from a low of 20 to a high of 70. More than 50% of the BMTs scored less than 60 on the pre-test. The writer could see a certain amount of disillusionment on the faces of the BMTs when they completed the pre-test, nevertheless, he encouraged them to "keep the faith".

These individuals formed a group of people who had taken on a new position and had abruptly learned that they were not as qualified as they had believed themselves to be. The writer worked long and hard during the inservice sessions to give these new employees the information and skills they would need to be effective. It was understood by them that their level of competence

depended on a successful experience in the inservice and their ability to apply what they would learn in the workplace. The BMTs felt somewhat intimidated by the other professional staff at their schools because their positions were new and they, themselves, were untried. No one knew what to expect of them. The writer should also state that these positions are held largely by black males. There is copious literature substantiating the lack of self-esteem in black males.

The dynamics of the program began to shift as BMTs scored significantly higher on the post-test. Passing the test boosted the confidence of the BMTs who became very upbeat about continuing in the program and mastering the additional materials.

Writing appropriate behavioral objectives was accomplished in several inservice sessions. BMTs were given a scenario from which appropriate objectives had to be written. The successful writing of these objectives required their acquired knowledge of behavior disorders, behavior analysis, IEP development and developing behavioral interventions. BMTs were given these inservices to enhance their ability to write appropriate behavioral objectives and goals. The writer and guest lecturers closely monitored writing of behavioral objectives in the inservice classroom and on-site visits. BMTs wrote appropriate, efficient behavior objectives and management plans.

Working with children who are emotionally unstable is difficult because they are unpredictable. They are capricious, to say the least. At one moment, they can be compliant and adhere to the rules and regulations, and in the next moment, hit someone over the head with a chair rendering them unconscious.

In many cases, verbal cues or verbal conflict resolution strategies will not work. Physical restraint becomes very necessary. As unappealing as this eventuality is, when students become dangerous to themselves or others, or are physically destructive, school officials have the legal right to and sometimes must restrain them. BMTs were certified by the writer in physical aggression control. They have become valuable members of the school staff, especially in times of crisis, because of their facility in managing crises and helping the school to return to normalcy.

The writer certified BMTs in TEAM aggression control. The TEAM is approved by the state of North Carolina, as well as Florida, as a method of physically restraining students. The writer chose TEAM over other techniques because it requires two or more people to restrain an individual. This is desirable because 1) two people have more control than a lone individual, and 2) when there is an investigation an incident can be reported from the vantage point of two adults. A third person/witness should always be present when a student is restrained.

TEAM is a physical control technique that can be scrutinized by the legal system when there is litigation. The techniques are non-abrasive and sequential. BMTs received TEAM training in the inservice by video instructions as well as demonstrations at their sites by the writer. Many of the components from this practicum will be used to guide the school district's anti-violence program. The district has received a grant to directly address violence in the schools. From the grant came the Project SUCCESS Program. Project SUCCESS is in the process of taking the 10 best BMTs from the writer's program and placing them in the

new violence prevention program. The administration is promoting BMTs as the major cogs in the violence prevention program. When the writer asked what would happen to the BEH programs and the discipline schools, he was told that Project SUCCESS takes precedence over these programs. The writer was told that BMTs were allowed to work and continue in the inservice over the summer so that they could receive the training for Project SUCCESS in the fall. The Superintendent has benchmark goals to meet and the 10 BMTs were essential to Project SUCCESS.

The writer has some real serious concerns about the integrity and direction of the program. This school year, the writer was instructed by his supervisor to recruit and institute another training session for BMTs. The writer was further instructed to recruit more BMTs than are really needed and increase the standard for successful completion of the course. The writer has been informed that the starting salary will decrease by \$1,500.00 because of the large number of applicants for the BMT positions.

The writer's ideas appears to have given the district administration an optional component to enhance the development of programs to combat violence in the district and state-wide. The writer hopes that the BMTs moving to new programs are allowed to keep their professional ethics and integrity. The success of BMTs can be related to the implementation of this practicum. If other programs are to utilize BMTs to augment the chances for success of their program it would be prudent to adhere to the guidelines of this practicum.

Recommendations

As big businesses "downsize" and streamline their organizations it appears that educational leaders in the writer's district are adopting many of the same methods of operation. Hybrid professionals like BMTs appear to be the prototype of the future. The most advantageous aspect of the BMT position is that it allows people to be hired at a reasonable salary and trained to perform a myriad of duties with the utmost efficiency.

The proliferation of violence on public school campuses is opening the doors for personnel such as BMTs. The advent of BMTs in BEH programs and alternative schools have reduced violent attacks on students and staff in those programs and schools by 90% in the writer's district. There are several factors contributing to the drastic plunge in the rate of violence where BMTs have been placed.

There are very few black male role models working in the writer's district and there are even fewer working with behavior disordered adolescents in a non-teacher assistant capacity. As self-esteem increased among BMTs, the writer observed self-esteem growing in the most violent students in their programs. BMTs and many of the black behavior disordered students developed a symbiotic relationship. BMTs functioned more efficiently as behavior support personnel and mentors for this very disruptive group of students. The students displayed an attitude of wanting to be a part of school and certainly behavior change.

The writer strongly recommends that the function of BMTs as mentors and behavior change personnel be scrutinized closely for expansion into other programs. The Project SUCCESS program has certainly capitalized on the idea

of using black male role models to work with a violent population which is predominately black.

The research is replete with examples of modeling as the best examples for teaching appropriate behaviors. Placement of appropriate role models in programs for at risk students is needed to curb the tragic outcomes of many adolescents.

The writer recommends that :

1. BMTs be placed in regular education to work with at risk students before they receive a label or are placed in the management schools.
2. BMTs be used as mentors to work with parents and students.
3. Training for BMTs be continuous and result in formal certification.

BMTs are the future specialists for children with behavior problems. They represent cost efficiency, high motivation and are a major deterrent to violent behavior.

References

- Anders, P. L., & Richardson, V. (1991) Staff development that empowers teachers: Reflection and enhances. Language Arts, 68, 4, 316-321.
- Askins, B. E. & Schwisow, J. A. (1988) A university school partnership for providing in-service staff development to a rural school: The greenwood experience. Journal of staff development, 9, 4 40-44.
- Bandura, A. C. (1977) Social Learning Theory. Englewood Cliffs, New Jersey: Prentice-Hall.
- Bijou, S. W. & Peterson, R. F. (1971). Functional analysis in the assessment of children. In P. McReynolds (ED), Advances in psychological assesment. Palo Alto, CA: Science and Behavior Books.
- Center, B. C., & Kaufman, M. E. (1993) Present and Future Needs for Personnel to Prepare Teachers of Behaviorally Disordered. Behavioral Disorders.18.
- Datema, T. (1988). Program description for the phoenix reception and assessment center. Michigan State Board of Social Services, Detroit.
- Duffy, G. (1993). Rethinking strategy instruction: Four teachers development and their low achievers understanding. Elementary School Journal. 93, 3, 231-47.
- Friedman, R. & Street, A. (1984). Interagency collaborations for children with emotional disorders. Florida Mental Health Institute. Tampa, Fla.
- Gallagher, M., Beckman, P., Gross, S. (1983). The relationship between behavioral characteristics of children and social interaction in an integrated setting. Journal of The Division of Early Childhood. 7, 69-77.
- Gelfand, D. M. & Hartman, D. P. (1984) Child behavior analysis and therapy (2nd ed.). New York: Pergamon Press.

- Gesten, E. L. and Weissberg, R. P. (1986). Social problem-solving training with children: A guide to effective practice. Special Services in the Schools, 2, 19-39.
- Glick, B., & Goldstein, A. P. (1987) Aggression replacement training. Journal of Counseling and Development, 65, 7, 356-362.
- Griffin, L. B. & Carson, M. Y. (1989). How to write a what: Handbook on Writing an Individualized Education Program and Public Law 94-142. Durham N. C. Sanddollar Tree.
- Grosenick, J. K. & Huntze, S. L. (1980). National needs analysis in behavioral disordered: Columbia, MO: University of Missouri.
- Grosenick, J. K. (1981) Public school and mental health services to severely behavior disordered students. Behavior Disordered, 183-190.
- Henly, M (1987) Egofunction and dysfunction: A guide to understanding problems. Pointer, 31 4, 24-30.
- Hops, C. B., & McConnell, J. T. (1985). The Promotion of social competence: Longitudinal study of a preventive school-based program. American Journal of Orthopsychiatry, 61, 409-416.
- Howing, P. T., Wodarski, J. S., Kurtz, P. D., & Gaudin, J. M. (1990). The empirical base for the implemetation of social skills training with maltreated children. Social Work, 35, 460-468.
- Hughes, C. (1985). Planning and control techniques. Pointer, 29, 34-37.
- Karlitz, H/ (1982). Minimizing staff resistance to federally mandated policies: A proposed model for special education. Urban Education, 17, 301-321.
- Knapezyck, D. R. (1988). Reducing aggressive behaviors in special and regular class settings by training alternative social responses. Behavioral Disorders, 41, 1, 27-39.
- Knitzer, J. (1982). Unclaimed Children: The failure of public responsibility to children and adolescents in need of mental health services. Washington, D. C. Children's Defense Fund.

- Lochman, J. E. (1988). Residential re-ed treatment of highly aggressive youth: Preliminary indicators of effectiveness and the precursors of improvement. Education and Treatment of Children, 11 1, 52-62.
- Maher, C. A. (1986). Evaluation of a program for improving conflict management skills of special services directors. Journal of School Psychology, 24, 45-53.
- Malone, G. L. (1989). When nothing works: Staff reactions to the resistant, troubled student. Pointer, 33, 43-46.
- Michelson, L., & Mannarino, A. (1986) Social skills training with children: Research and clinical applications: In P. S. Strain, M. J. Guralnick & H. M. Walker (Eds.) Children's social behavior: Development, assessment and modification. New York: Academic Press.
- Nelson, S., (1983). Overview of research on social interactions: A historical and personal perspective. Behavioral Disorders, 12, 233-241
- Oken, W. P. (1992). From tug of war to "let's make a deal": The teacher's role, Young Children, 48, 15-20.
- Olson, J. (1988). After twelve years of training teachers, I think I've found a way to teach teachers of the emotionally handicapped to deal with verbal aggression. Severe Behavior Disorders Monograph, 8, 188-194.
- Petty, R. (1989). Managing disruptive students. Educational Leadership, 46 2, 26-28.
- Roth, H. & Nicholson, C. (1988). Differences between successfully and unsuccessfully mainstreamed violent and assaultive youth. Diagnostique, 13, 130-138
- Rutherford, R. B., & Nelson, C. M. (1983). Timeout revisited: Guidelines for its use in special education. Exceptional Educational Quarterly, 3, 56-67.
- Skinner, B. F. (1953). Science and human behavior. New York: Macmillian Publishing.

- Sparks, D. & Loucks, H. S. (1989). Five models of staff development for teachers. Journal of staff development for teachers. 10, 4, 40-57.
- Wolfgang, C. H. & Kelsay, K. L. (1992). Problem students in class: Disobedient or just de-valued? The Education Digest, 57, 58-60.
- Wood, M. W. (1986). Use of staff development by teachers and aides with emotionally disturbed and behavior disordered students. Teacher Education and Special Educators. 9, 3, 104-12.

APPENDIX A

POST-TRAINING TEST

Instructions for Taking Tests

1. Work independently.
2. Record answers in provided blue book.
3. Once you have complete the test, please turn your test in to the instructor, and then you may leave.

Pre - Post Test

Name: _____ Date: _____

Research, Measurement, Interventions

1. Define:
 - a. Mean
 - b. Mode
 - c. Medium

2. Define How these three measurements can be used when measuring behaviors.

3. Name an instrument to measure student behaviors.

4. What is a frequency count.

Explain the following:

5. Duration of behavior
6. Intensity of behavior
7. Aberrant behavior
8. Intervention
9. Antecedent
10. What is an anecdotal record?
11. Observations are used for what purpose?
12. Define the meaning and purpose of an IEP.

Test (con't)

Page 2

13. Describe an intervention for each of the following:

1. Running off campus
2. Talking out in class
3. Fighting in class
4. Throwing chairs in class
5. Not coming to class directly

Behavior Modification

1. What is an example of.
 - a. Primary Enforcer
 - b. Secondary Enforcer
2. Define the term "shaping behavior".
3. Define the term "chaining".

Define:

4. Operant Conditioning.
5. Classical Conditioning.
6. Unconditional Stimulus.
7. Conditioned Stimulus.
8. Positive Reinforcer.
9. Negative Reinforcer.
10. Cognitive Processing.

11. Concrete Thinking.
12. Abstract Thinking.
13. Intrinsic Motivation.
14. Extrinsic Motivation.
15. What is the best way to show appropriate behavior?

Basic Concepts in Assessment

Match each item at the left with the appropriate description at the right.

- | | |
|----------------------------|--|
| 1. Achievement Tests | ___A. The standard deviation of set of repeated measures of the same characteristic. |
| 2. Norm-Referenced Tests | ___B. The standards for performance on a particular test. |
| 3. Reliability | ___C. A test intended to identify pupils strengths and weaknesses |
| 4. Correction for Guessing | ___D. The movement which attempted to generate tests which reflect only the abilities under consideration unaffected by external influences. |
| 5. Norms | ___E. Standardized tests which have tables yielding estimates of standard performance. |
| 6. Standard Error | ___F. An estimate of the stability of a set of data obtained by generating separate scores for odd and even items. |
| 7. Diagnostic Test | ___G. Tests which indicate mastery of highly specific skills |
| 8. Criterion-Referenced | ___H. The stability or consistency associated with a particular set of data. |
| 9. Split-Half Reliability | ___I. Instruments designed to estimate learning achieved in a content area. |

Basic Concepts in Assessment
Page

10. Culture-Free and Culture-Fair Test _____ J. A reduction in score on an objective test based on the number of options offered.