

***Developing Peer Mediated Interventions for Secondary Students with Emotional and Behavioral Disorders***

**Danielle Feeney, M.Ed.,  
University of Nevada, Las Vegas**

***Abstract***

Social skills training has become a major focus for improving the lives of individuals with disabilities. Students with emotional and behavioral disorders often lack the social skills necessary to build and maintain positive relationships with others and require individualized training to appropriately engage across all settings. Despite the growth of research in this topic, there is little known about the efficacy of peer-mediated interventions for high school students who have emotional and behavioral disorders. Peer mediators act as models and supports for students with emotional and behavioral disorders by providing cues, feedback, and praise. This paper suggests ways that classroom teachers can develop peer-mediated interventions at a secondary level.

*Keywords:* emotional and behavioral disorders; peer-mediated interventions; social skills training

***Developing Peer Mediated Interventions for Secondary Students with Emotional and Behavioral Disorders***

Peer-mediated interventions (PMIs) focus on alternative teaching arrangements where students become model academic and social supporters for their classmates (What Works Clearinghouse [WWC], 2007a, 2010a, 2010b). Interventions can be structured differently (i.e. same-age or cross-age pairings, direct or indirect interactions, academic or behavioral goals), but all aim to improve educational outcomes for students with disabilities. In this type of instruction, the teacher becomes a facilitator and trainer to the peer mediator and actively observes interactions between the students (WWC, 2007a, 2010a, 2010b).

Students with disabilities, especially those with emotional and behavioral disorders (EBD), are often isolated by their peers due to a lack of social competency. The impact this has on students with emotional and behavioral disorders can include (a) academic concerns (b) behavioral problems (both internalizing and externalizing), and (c) limited social skills (Farmer et al., 2016). When looking at the combination of these factors in relation to students with EBD in the classroom, researchers found that students with EBD were more likely to fail courses than either students without disabilities or students with learning disabilities (Cullinan & Sabornie, 2004). In addition to academic concerns, a lack of social competency can lead to the inability to build and maintain relationships with both peers and adults. Students with EBD are found to have less-preferred social behaviors in the school setting, home environments, community areas, and work place. According to Sabornie, Kauffman, and Cullinan (1990), high schoolers with EBD were more likely to be rejected by their peers than students without disabilities. Schonert-Reichl (1993) found that students with EBD had fewer communications with their friends, lower quality relationships, and were less empathetic than their peers without disabilities. Students who lack prosocial behavior skills are often more victimized and isolated from their peers (Griese & Buhs,

2014). This leads to a barrier in not only thinking about actions, but also understanding them and being able to voice them to others. Without these core skills, students with EBD struggle with building a healthy emotional intelligence with peers or adults.

Furthermore, students with EBD also exhibit inappropriate behaviors. When considering their conduct, one usually thinks of two drastically different types of behaviors: social withdrawal or aggressiveness. Both have a variety of factors that play into them, but may fall into two primary categories: internalizing behaviors and externalizing behaviors, respectively (Kauffman & Landrum, 2012). While externalizing behaviors are often readily observed by school professionals (e.g., insubordination, defiance, aggressiveness), internalizing behavioral problems are not always obvious. These could include (a) severe shyness (failure to start or respond to social interactions); and (b) habitual indications by a student that he can do few things with success (Pierce, Nordness, Epstein, & Cullinan, 2016).

Together, these factors greatly impact students with EBD both in and out of the school environment. Communication and social skills are needed not only to use language competently, but also to cope effectively. Several students with EBD are reported by parents to have trouble beginning and maintaining a conversation (Wagner et al., 2005); however, other social skills (e.g., offering to help others, listening to others, joining in on activities) are not observed as frequently.

While it is obvious that students with EBD lack certain social skills, it isn't always clear which social skills they need to develop. Often, these students can use language to effectively irritate or anger others, but fail to use it to appropriately communicate their thoughts and/or feelings (Kauffman & Landrum, 2012). Students with EBD often behave in ways that anger or disappoint those around them because they lack social skills and aren't adequately taught them (Kauffman & Landrum, 2012). In addition to this, students with EBD struggle with translating their skills across various settings. Morgan (2010) discusses the importance of analyzing not only school-based environments, but also social networking sites (SNSs) as a way for students to practice and improve upon their social skills.

Recently, researchers have begun to explore the effects of PMIs on social outcomes (Bowman-Perrott, 2009; Collins, Gresham, and Dart, 2016; & Presley and Hughes, 2000). It was found that students with disabilities who participated in peer-mediated interventions were more socially competent than those who did not. Similarly, students who have participated in structured PMIs made more academic and behavioral progress than non-participatory peers. The results indicate that peer-mediated interventions foster positive relationships and build social skills for students with disabilities to be successful across environments. Recent research has expanded inquiry beyond communication into conversational strategies, academic discourse, and behavioral regulation. However, in the few studies that address students with EBD, the PMIs have little structure compared to those implemented with students with ASD (Maggin, Wehby, Farmer, & Brooks, 2016). Additionally, much of the research on the efficacy of PMIs has been focused on students with Autism rather than students with EBD. In order to ensure success for students with EBD, these interventions should be modified in developmental, academic, and strategic ways. As educators begin to develop social skills interventions, it is crucial to consider the effects of PMIs at a high school level when determining their use with older students. While most of PMIs

have been conducted and evaluated for students with EBD or ASD at a middle school level, the research shows that PMIs conducted at a high school level primarily focus on conflict resolution and anger management strategies (Presley & Hughes, 2000). Although this is an essential focus for high school students with EBD, educators cannot forget to continue implementing other aspects of social skills curricula in their daily routines (Kaya, Blake, & Chan, 2013).

Interventions that address appropriate peer interactions (i.e. responding with relevant information, using appropriate language, understanding and using appropriate nonverbal cues, participating in academic discourse and group work, utilizing self-control) as well as social skills for transitional purposes (i.e. introducing oneself, interviewing others, problem-solving skills) could be taught in peer-based interactions.

### **Steps to Design, Implement, and Assess PMIs**

Teachers at the elementary and middle-school levels have used PMIs to develop social skills and promote positive relationships. In order to implement PMIs at the high school level, educators need to consider the different aspects of the intervention that were successful and how to adapt them to the high school setting. The following steps detail how to systematically create, implement, and assess a PMI for students with EBD in a high school setting.

#### ***Creating the Intervention***

**Step 1: Identify the target skill.** Teachers must first identify the skill that will have the biggest impact on the student based on their strengths and needs. Robinson and Myck-Wayne (2015) discussed the importance of considering age-appropriate social behaviors, the needs of the individual students, and the priorities of the parent when determining the target skill for social skills interventions.

To find these target behaviors, educators should consider:

1. What skills are needed for this child to be successful with peers immediately?
2. What skills are needed for this child to be successful with peers in the future?
3. What skills does this child need to be successful with siblings or future colleagues?
4. What functional skills or behaviors are affecting this child's performance?

This targeted skill could be linked to data from assessments, informal or formal observations, interviews with students or teachers, discussions with parents or family members, or reviews of Individualized Education Programs or other evaluation records (Zhang, 2011).

**Step 2: Conduct student interest surveys.** Prior to selecting and pairing peer mediators, the teacher should disseminate student interest surveys to all students in the class. Scruggs, Mastropieri, and Marshak (2012) investigated student perceptions of social skills interventions and found that both the students in special education and general education prefer prior relationships with their partner before being paired. Teachers can help foster these relationships by conducting student interest surveys to find out what students will work best together, who will be comfortable with each other, and who has similar interests.

**Step 3:** Select peer mediators. Peer mediators need to be students who will promote positive social interactions with the target population. These students need to appropriately build and maintain positive relationships with their mentee (Kamps, Mason, Thiemann-Bourque, Feldmiller, Turcotte, & Miller, 2014) and develop a level of comfort that is difficult for several high school students to reach. These students could be selected or nominated from their teacher(s), a leadership class, or a student organization such as Student Council or National Honor Society.

Once possible peer mediators are selected, teachers need to meet with them to discuss the intervention. All aspects of the intervention should be reviewed, including confidentiality. No names should be revealed until student and parent consent forms are signed and at no point during the intervention should student diagnosis or disability be revealed.

**Step 4: Train peer mediators.** Prior to the start of the intervention, teachers need to provide social skills training to the peer mediators. This type of instruction will differ based on the behaviors being targeted during the intervention. Some teacher and mediator pairs may model and role-play situations that the mediator will translate into lessons with the student. Others may work together to create a scripted curriculum with sentence stems and picture prompts to signal the student in varying situations. Teachers need to work with mediators on how to set goals with students, how to reflect on goals, and how to give immediate feedback. Training mediators on how to use rubrics, tracking sheets, and reflection charts is also beneficial depending on the target behavior.

**Step 5: Determine the mode of delivery.** Peer mediation at the high school level can manifest in a variety of ways. In this setting, the method of delivery is reliant on class schedules and school set-up. Teachers need to consider the frequency with which mediators and students see each other and the intensity of mediation that is needed. Similarly, it is crucial to consider the setting in which the behaviors are occurring. For a student who needs more frequent mediation in academic settings, the mode of delivery may be to have the mediator serve as a tutor, model, and prompter during class periods. For a student who needs mediation in unstructured settings, the mode of delivery may be to have the mediator act as a guide to accompany the student between classes and to eat with during lunch. Strategic planning of mediators and students puts all individuals on the path to success. Refer to Table 1 for recommended delivery methods.

Table 1

*Possible Modes of Delivery for Peer-Mediators in Various School-Based Settings.*

If target behavior is exhibited in:	Consider these modes of delivery:
Teacher-led instruction	Mediator as a seating partner to give prompts when answering aloud
	Mediator as a support for who provides praise or feedback
	Mediator as a support to provide visual cues
Small-group/cooperative settings	Mediator as group member to initiate conversation
	Mediator as group member to provide non-verbal or verbal prompts
	Mediator as a support to provide visual cues
Independent practice	Mediator as a nearby peer model
	Mediator as a support who provides prompts, praise, or feedback
Unstructured environments	Mediator as a guide between classes to initiate conversation
	Mediator as a seating partner during lunch who provides social support
	Mediator as a guide before and after school

**Step 6:** Determine the mode of tracking. Students will exhibit different behaviors at varying intensities. Based on the target behavior and how intense it is, teachers and mediators need to determine the frequency of monitoring, reporting, and feedback. At the high school level, the frequency of check-in can range from each period, to multiple times a day (i.e., before and after school or before school, at lunch, and after school), every few days, or weekly. This can also be changed or updated as the student makes progress towards his or her goals.

Equally important to the frequency of tracking is the accessibility of the monitoring sheet. When considering social relationships in a high school setting, it is crucial to consider social hierarchy and stigmatization. To allow students and mediators to track progress, teachers need to consider reporting methods that are discreet. If students attend a Bring Your Own Device (BYOD) or 1:1 Device School, a tracking and reporting method could be created in an application on the device. For students who prefer paper-and-pencil methods, a wallet-sized foldable card would allow students to have their report readily accessible yet not easily seen (see Figure 1). Similarly, if a binder system is already in place at the school, students could use a progress report that is kept in the binder and accessed as necessary.

**Student Name:** Mark Smith

**Target Behavior:** Initiate conversation in a small-group setting

**Daily Goal:** During small-group instruction in Government class, I will be able to respond to my peers twice in a ten-minute work time.

	Monday	Tuesday	Wednesday	Thursday	Friday
Times Responded	II	III	II	II	III
Prompts Used	III	II	III	III	III

**Goal Reached:** Yes

**Reward Chosen:** Lunch outside with friends

Figure 1: Sample Wallet-Sized Foldable Card as a Mode of Tracking.

Note. Student name is a fictional.

### *Implementing the Intervention*

**Step 7: Collect baseline data.** It is crucial to have an idea of where the student's skills are prior to the intervention in order to analyze the growth being made during and after the intervention. The type of data that needs to be collected (i.e., frequency, interval, duration) is dependent on the behavior that is being exhibited and should be collected a minimum of three times before moving forward with the intervention. Teachers also need to consider the environment(s) that the behavior is occurring in and if data needs to be collected in more than one location.

**Step 8: Initiate peer mediation.** After baseline data is taken, the mediators need to initiate conversation with their students. This should occur in the setting where they will first be meeting daily so it becomes a natural part of their daily routine. To develop comfort and trust, this method should start and remain one-on-one until the student is working towards independence, maintenance, and generalization (see steps 11 and 12).

Because students may feel uncomfortable or unnatural, peer mediators may need to provide more prompting or initiate more communication at first. It is important for the teachers to have front-loaded the mediators with training for conversation starters, sentence frames, and information from the student interest surveys to help mediators build the relationships from the start.

**Step 9: Apply bi-weekly focus groups.** Teachers and mediators need to meet to reflect on the intervention and make strategic decisions to improve the effectiveness of it. This would be a whole-group meeting with the focus of sharing progress across mediators, brainstorming ideas, and troubleshooting concerns. This meeting time could also be a time to teach or re-teach strategies to mediators, create or update tracking sheets or rubrics, or share resources. As students begin to move toward independence, the target students could also be invited to demonstrate and practice their skills in a non-threatening environment with model peers.

### *Assessing the Intervention*

**Step 10: Collect data.** Mediators and teachers (as purely observers and facilitators) need to document student progress to determine if the intervention is being effective. It is important that the data from tracking and progress reporting is being systematically documented, analyzed, and used to inform decisions. Mediators and teachers need to analyze the data together to ensure that the student is making adequate progress and should not remove the intervention too quickly.

**Step 11: Encourage independence.** As the data continues to show growth, the student and peer work toward reaching mastery. To do this, the teacher guides the peer mediator through fading techniques to promote independence. These strategies will differ depending on the target behavior, but may include moving from sentence frames to picture prompts, bi-weekly to weekly check-ins, or mediation through proximity. To successfully become autonomous, all supports that are put in place during the intervention need to be removed slowly and independently of one another. This process could occur over several days or weeks and will vary from student to student.

**Step 12: Maintenance and generalization.** High school is a place where social skills are an essential component of daily life. The teacher evaluates the effectiveness of the intervention by first ensuring the skill is maintained without the peer mediator for days or weeks after mastery



and independence has been achieved. Next, teachers assess generalization by observing or gathering data in a new setting. Due to the nature of changing classes, unstructured time, and extracurricular activities, there are several opportunities to assess generalization. For high schoolers, this could also be generalizing the learned skill to popular social media platforms such as Facebook, Instagram, Snapchat, and Twitter, or using their skills with peers appropriately through text messaging. Transferring these skills to popular and largely used platforms shows that students are not using them in settings in which they were not taught and monitored, and also using them in a way that is socially accepted and commonly used with their new-found peer groups.

### *Conclusion*

Peer-mediated interventions have been shown to increase students' social and academic skills relative to elementary and secondary-aged students. Results from the research indicate that interventions with peer mediators aid in the improvement of social, behavioral, and academic concerns. Peer-mediated interventions that lack structure and proper training do not show sufficient growth in social, behavioral, and academic areas. Using the structure and student training in the 12 steps outlined in this paper, PMIs can help students to make adequate growth in the respective areas and could be equally effective for all students with EBD, including those at a secondary level.

### *References*

- Collins, T. A., Gresham, F. M., & Dart, E. H. (2016). The effects of peer-mediated check in/check-out on the social skills of socially neglected students. *Behavior Modification*, 40(4), 568-588. doi:10.1177/0145445516643066
- Cullinan, D., & Sabornie, E. J. (2004). Characteristics of emotional disturbance in middle and high school students. *Journal of Emotional and Behavioral Disorders*, 12(3), 157-167. doi:10.1177/10634266040120030301
- Farmer, T. W., Chen, C., Hamm, J. V., Moates, M. M., Mehtaji, M., Lee, D., & Huneke, M. R. (2016). Supporting teachers management of middle school social dynamics: The scouting report process. *Intervention in School and Clinic*, 52(2), 67-76. doi:10.1177/1053451216636073
- Griese, E., & Buhs, E. (2014). Prosocial behavior as a protective factor for children's peer victimization. *Journal of Youth & Adolescence*, 43(7), 1052-1065. doi:10.1007/s10964-013-0046-y
- Hogue, A., & Dauber, S. (2011). Diagnostic profiles among urban adolescents with unmet treatment needs: Comorbidity and perceived need for treatment. *Journal of Emotional and Behavioral Disorders*, 21(1), 18-32. doi:10.1177/1063426611407500
- Kauffman, J. M., & Landrum, T. J. (2012). *Characteristics of emotional and behavioral disorders of children and youth* (10th ed.). Upper Saddle River, NJ: Pearson.
- Kamps, D., Mason, R., Thiemann-Bourque, K., Feldmiller, S., Turcotte, A., & Miller, T. (2014). The use of peer networks to increase communicative acts of students with autism spectrum disorders. *Focus on Autism and Other Developmental Disabilities*, 29(4), 230-245.
- Morgan, J. J. (2010). Social networking web sites teaching appropriate social competence to students with emotional and behavioral disorders. *Intervention in School and Clinic*, 45(3), 147-157. doi:10.1177/1053451209349533

- Pierce, C. D., Nordness, P. D., Epstein, M. H., & Cullinan, D. (2016). Applied examples of screening students at risk of emotional and behavioral disabilities. *Intervention in School and Clinic, 52*(1), 6-11.
- Presley, J. A., & Hughes, C. (2000). Peers as teachers of anger management to high school students with behavioral disorders. *Behavioral Disorders, 25*(2), 114-130.
- Robinson, S., & Myck-Wayne, J. (2015). A teacher training model for improving social facilitation in the inclusive program. *Young Exceptional Children, 19*(1), 16-26. doi:10.1177/1096250615586028
- Sabornie, E. J., Kauffman, J. K., & Cullinan, D. A. (1990). Extended sociometric status of adolescents with mild handicaps: A cross- categorical perspective. *Exceptionality, 1*, 197–209. doi:10.1080/09362839009524754
- Schonert-Reichl, K. A. (1993). Empathy and social relationships in adolescents with behavioral disorders. *Behavioral Disorders, 18*, 189–204.
- Scruggs, T., Mastropieri, M. A., & Marshak, L. (2012). Peer-mediated instruction in inclusive secondary social studies learning: Direct and indirect learning effects. *Learning Disabilities Research and Practice, 27*(1), 12–20. doi:10.1111/j.1540-5826.2011.00346.x
- Wagner, M., Kutash, K., Duchnowski, A. J., Epstein, M. H., and Sumi, W. C. (2005). The children and youth we serve: A national picture of the characteristics of students with emotional disturbances receiving special education. *Journal of Emotional and Behavioral Disorders, 13*(2), 79-96. doi:10.1177/10634266050130020201
- What Works Clearinghouse. (2007b). Peer tutoring and response groups. Retrieved from <http://ies.ed.gov/ncee/wwc/interventionreport.aspx?sid=363>
- What Works Clearinghouse. (2010a). Classwide peer tutoring. Retrieved from <http://ies.ed.gov/ncee/wwc/interventionreport.aspx?sid=83>
- What Works Clearinghouse. (2010b). Peer-assisted learning strategies. Retrieved from <http://ies.ed.gov/ncee/wwc/interventionreport.aspx?sid=366>
- Zhang, K. C. (2011). Let's have fun! Teaching social skills through stories, telecommunications, and activities. *International Journal of Special Education, 26*(2), 70-78.

*About the Author*

**Danielle Feeney, M.Ed.**, is a doctoral student at the University of Nevada, Las Vegas, 4505 South Maryland Parkway, Las Vegas, NV, 89154; email: [feeney@unlv.nevada.edu](mailto:feeney@unlv.nevada.edu). Her research interests include academic and behavioral supports for students with emotional behavioral disorders, students with learning disabilities, and English Language Learners.