Supporting Students with Emotional /Behavioral Disorders at the High School Level

Tim Lewis, Ph.D. & Lori Newcomer, Ph.D.
University of Missouri
Lee Kern, Ph.D.
Lehigh University
Steve Evans, Ph.D.
Ohio University

CARS
CENTER FOR ADOLESCENT RESEARCH IN SCHOOLS
Moving Youth Toward Success
Today

• Overview of CARS
• Description of Intervention Components
• Description of mental health logic and components
• Description of classroom-based components
Center Grant

- Funded for five years by Institute of Education Sciences (IES)
- Focus: secondary age students with intensive social, emotional, and behavioral problems (EBD, students with significant behavior problems)
Need for Research

• Poor outcomes among students with emotional and behavioral problems
  – High dropout rate
  – Poor academic achievement
  – Poor post-school outcomes

• Few evidence-based interventions targeting high school age students
Core Collaborators/Sites

- Lee Kern, Ph.D., Principal Investigator, Lehigh University
- Steven Evans, Ph.D., Co-Principal Investigator, Ohio University
- Tim Lewis, Ph.D., Co-Principal Investigator, University of Missouri
- Deborah Kamps, Ph.D., Juniper Gardens Children’s Project, University of Kansas
- Carl Paternite, Ph.D., Miami University of Ohio
- Terry Scott, Ph.D., University of Louisville
- Mark Weist, Ph.D., University of Maryland
- Paras Mehta, Ph.D., TIMES, University of Houston (design/statistical consultation, data analysis)
- Howard Stevenson, Ph.D., Zewelanji Serpell, Ph.D., Charlayne Hayling, Ph.D.
Cross-Disciplinary Focus

- Special Education
- Mental Health/Behavioral Health
Intervention Development for Schools

Mental/Behavioral Health Researchers

Special Education Researchers
Overview of CARS Activities

Major Study
- Years 1-2: Develop and refine intervention package with small sample of students (n=30, 3 states)
- Year 3: Evaluate and refine intervention package with larger sample of students (6 sites/states)
- Years 4-5: Evaluate efficacy of intervention with large sample of students (n=530)

Supplemental Studies
- Years 1-5: Conduct supplemental research studies in core areas relevant to students with emotional and behavioral problems
Goals of Major Study

• Identify/develop effective education and mental health interventions for students with emotional and behavioral problems
  – Maximize intervention feasibility
  – Maintain evidence based best practices approach
  – Develop interventions that are culturally responsive
Considerations for Intervention Development

• Interventions must be multi-component to adequately address the diverse needs of students with SBD

• Interventions must be delivered by practitioners after relatively little training
Study Participants

• Students grade 9-12
  – Presence of severe behavior disorders
    • EBD, Other Health Impairments
    • May have more than one disability (EBD & LD) as well as co-morbid mental health diagnoses
    • Students with Mental Retardation or Developmental Disabilities (e.g., autism) excluded
  – Receiving special education pull-out services at least one period daily
Study Design

• Randomized Controlled Design
  – Intervention
  – Staff Wellness
Conceptual Framework

Enhancing School Capacity

Academic Skills

Healthy Choices

Social Skills

Behavior Management

Family Support

School Connectedness

Increasing Family and Community Supports

Building Child Capacity

CHILD

Mental Health

CARS

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## Overview of Intervention Components

<table>
<thead>
<tr>
<th>Intervention Focus</th>
<th>Core Student Challenge</th>
<th>Specific Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enhancing School and Teacher Capacity</td>
<td>Academic Skills</td>
<td>• Classroom Structure</td>
</tr>
<tr>
<td></td>
<td>Emotional/Behavioral Problems</td>
<td>• Evidence-Based Academic Instruction (OTR, Student interest, Accommodations)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Teacher-Student Interactions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Screening &amp; Referral for Effective Therapy</td>
</tr>
<tr>
<td>Building Youth Competence</td>
<td>Social Skills</td>
<td>• Interpersonal Skills Coaching</td>
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<td></td>
<td>Academic Skills</td>
<td>• Healthy Choices</td>
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<td></td>
<td>General Living</td>
<td>• Organization and Study Skills</td>
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<td></td>
<td>Connectedness</td>
<td>• Mentoring</td>
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<tr>
<td></td>
<td>Mental Health</td>
<td>• Securing Effective Therapy</td>
</tr>
<tr>
<td>Increasing Family and Community Supports</td>
<td>Behavior</td>
<td>• Parent Education</td>
</tr>
<tr>
<td></td>
<td>Academic Skills</td>
<td>• Homework guidance</td>
</tr>
<tr>
<td></td>
<td>Social Skills</td>
<td>• Securing Effective Therapy &amp; Supports</td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
<td></td>
</tr>
</tbody>
</table>
Outcome Measures

**PARENT MEASURES**

- Demographic Questionnaire
- Behavior Assessment System for Children-II (BASC 2)*
- Index of Family Relations*
- Impairment Rating Scale (IRS)
- Disruptive Behavior Disorders Scale (DBD)
- Stress Index for Parents of Adolescents (SIPA)
- Alabama Parenting Questionnaire
Outcome Measures

TEACHER MEASURES

• Behavior Assessment System for Children-II (BASC 2)*
• Impairment Rating Scale (IRS)
• Classroom Performance Survey (CPS)
Outcome Measures

STUDENT COMPLETED MEASURES

• Behavior Assessment System for Children-II (BASC 2)*
• WJIII (Letter-Word Identification, Reading Fluency, Passage Comprehension, Calculation, Math Fluency, Applied Problems
• Reynolds Adolescent Depression Scale (RADS) *
• Multi-Dimensional Anxiety Scale for Children (MASC) *
• Student Engagement Instrument
• Youth Risk Behavior Survey (YRBS)
• SAVE
Outcome Measures

Other

• Direct observation teacher behavior (MOOSEs)
• Direct observation student behavior (MOOSEs)
Additional Measures

• Treatment integrity
• Services/Interventions received (SCAPI)
Additional Analyses

• Mediators and Moderators of Intervention Effectiveness
  – Interventionist change
  – Procedural integrity
  – Classroom context
  – School status
  – Student risk/protective factors

• Cost Benefit Analysis
Mental Health Interventions

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Mental Health Intervention Strategies

• Collect descriptive data on staff within each building,
  – How many?
  – How do they spend their time?
  – What is their accountability?
• Offer training in evidence-based interventions
• Measure implementation and outcomes
Choosing Mental Health Interventions

Given the Information Gathered...

1. What is the Problem?
   - Gather teacher, parent, and self-report of difficulties related to impairment at school
   - Obtain relevant school records to assess impairment (e.g., office referrals)
   - Conduct Observations
   - Consult with CARS MH consultant

2. Does student show signs of anxiety or worry?
   - The C.A.T. Project
     - 16 Session Program
       - Group or Individual
   - Coping with Stress program
     - 15 Session Program
       - Group or Individual
   - Interpersonal Skills Group
     - 28 thirty-minute Session Program
       - Group

3. Does student show signs of withdrawal, irritability, negativity or sad mood?
   - Referral to Special Education Teacher for classroom management or Teacher-Student communication concerns, and/or the development of an FBA/BIP
   - De-Escalation Techniques

4. Does student show signs of poor social skills, frequent conflict or poor problem solving skills?
   - 5.1 Referral to Special Education Teacher

5. Does student disrupt class, argue, or display other difficult to manage behaviors?
   - 5.2 De-Escalation Techniques

6. Prioritize Intervention
   - Prioritize based on how much they are impairing school & academic functioning
   - Feasibility: Indicate whether each of the interventions can be feasibly provided
   - Acceptability: Indicate whether the student, teachers, and/or parents are willing to participate
   - Record list of interventions that are feasible and acceptable in order or priority ranking

7. Implement the Intervention
   - Begin with the feasible intervention with the highest clinical priority and proceed through entire intervention
   - Measure outcomes and use data to inform modifications to interventions

Family Interventions
# Rationale for Selecting Areas of Impairment

<table>
<thead>
<tr>
<th>Area of Impairment</th>
<th>Problem for the Student?</th>
<th>Relevant Interview Results</th>
<th>Relevant Scores from Assessments</th>
<th>Other information that contributed to decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety or Worry</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Withdrawal, Irritability, Negativity or Sad Mood</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
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<tr>
<td>Poor Peer Relations</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
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<tr>
<td>Disruptive Behavior</td>
<td>Yes</td>
<td>No</td>
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</tr>
</tbody>
</table>
Instructions: Record all of the interventions indicated by steps one through five on the Choosing Mental Health Interventions diagram. Then rank the interventions in the second column (1,2,3...) . Next indicate whether the interventions are feasible and acceptable. There should be an explanation on the back of this form for all NOs in the Feasibility or Acceptability columns.

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Ranking (no fractions, decimals or ties)</th>
<th>Feasible (if NO, then record explanation on back)</th>
<th>Acceptable (if NO, then record explanation on back)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1R.</td>
<td>1F. YES NO</td>
<td>1A. YES NO</td>
</tr>
<tr>
<td>2</td>
<td>2R.</td>
<td>2F. YES NO</td>
<td>2A. YES NO</td>
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<tr>
<td>3</td>
<td>3R.</td>
<td>3F. YES NO</td>
<td>3A. YES NO</td>
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<tr>
<td>4</td>
<td>4R.</td>
<td>4F. YES NO</td>
<td>4A. YES NO</td>
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<tr>
<td>5</td>
<td>5R.</td>
<td>5F. YES NO</td>
<td>5A. YES NO</td>
</tr>
<tr>
<td>6</td>
<td>6R.</td>
<td>6F. YES NO</td>
<td>6A. YES NO</td>
</tr>
</tbody>
</table>
Brief Descriptions of Interventions

• CBT for anxiety and worry
• CBT for depressed mood
• Interpersonal Skills Group for social impairment
• De-Escalation training for anger control
• Family Interventions
C.A.T. Project

- CBT is an effective treatment for anxiety in children and adolescents
- C.A.T. Program
  - Developed by Phil Kendall
  - Most studied protocols for treating child & adolescents with anxiety
  - Supported with effectiveness research
- Manuals and interactive computer training materials are available
- 14 individual child sessions
Coping with Stress Program

• CBT is a moderately effective treatment for adolescents with depression (mean $ES = 0.34$; Weisz, McCarty & Valeri, 2006). Recommendations include:
  – Increasing dosage
  – Providing booster sessions or other long-term follow-up

• *Coping with Stress* is a manualized CBT intervention for adolescents with depression, is available free of charge, and has been used in many trials (Clarke & Lewinsohn, 1995).

• 16 individual or group sessions plus 3 parent and adolescent sessions
Interpersonal Skills Group

• There is no empirically supported treatment for impaired social functioning
• Interpersonal Skills Group (ISG) was developed over last ten years working with middle and high school students with ADHD
• As part of comprehensive program, we do not have outcome data specific to ISG
• Measures of social functioning have indicated improvement in response to programs
De-escalation Techniques

• There is no empirically supported treatment for anger control

• Our procedures integrate:
  – Collaborative Problem Solving (Greene, 2006)
  – Adolescent Anger Control (Feindler & Ecton, 1994)

• Target student and includes some teachers as coaches and treatment extenders
Family Interventions

• Family Interventions
  – Functional Family Therapy (Alexander & Sexton, 2002)
    • Has been disseminated in community clinics in NY (Zazzali et al., 2008) and school-community clinic partnerships (Mease & Sexton, 2004)
    • Requires “multi-year clinical training, clinical consultation, and quality assurance monitoring...” in order to implement
  – Family Check-Up (Dishion & Kavanagh, 2003)
    • Part of Adolescent Transitions Program (secondary school based treatment program)
    • Some evidence for effectiveness
  – Negotiating Parent Adolescent Conflict (Robin & Foster, 1989)
    • Modest benefits in two trials with families with adolescents with ADHD (Barkley et al., 1992, 2001)
Family Interventions

• Our family intervention is based on elements of all three of these and trial and error with families of adolescents with ADHD over last ten years.

• Some of the specific procedures have been evaluated in pilot studies (Raggi et al., 2009) and have been part of comprehensive programs evaluated with positive outcomes (Evans et al., 2009).
Enhancing Teacher and Classroom Capacity
Current High School Challenge

• Lack of effective differentiated instruction and classroom management found in many classrooms

• Wide range of instructional delivery set-ups driven largely by curriculum and credit requirements
Basic Logic

• All students enrolled in “check & connect”
  – Organization
  – Progress Monitoring

• Classrooms targeted for intervention based on combination of student failure and evidence of problem behavior

• Classroom Assessment – interventions tailored to address weaknesses / missing components & reinforce strengths
Check & Connect

• Developed for high-risk urban students at the secondary level (Anderson, Christenson, Sinclair, Lehr, 2004; Evelo, Sinclair, Hurley, Christenson, Thurlow, 1996)

• Utilizes a monitoring system with two components
  – **Check**
    – Systematically assess the extent to which students are engaged in school.
  – **Connect**
    – Respond on a regular basis to students’ educational needs according to their type and level of risk for disengagement from school.

• Establish an adult mentor at school to enhance school engagement
Check & Connect: Implementation Steps

• Meet with student regularly (daily or at least weekly)

• Give students regular feedback about their overall progress and in relation to specific risk factors
### CHECK

<table>
<thead>
<tr>
<th>Tardy</th>
<th>Skip</th>
<th>Absent</th>
<th>Behavior referral</th>
<th>Detention</th>
<th>In-school suspension</th>
<th>Out-of-school suspension</th>
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<th>M</th>
<th>Tu</th>
<th>W</th>
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### Failing classes/Behind in credits

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<tr>
<th>D's</th>
<th>F's</th>
<th>Classes passed out of</th>
<th>Credits earned out of</th>
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### CONNECT

#### BASIC

- Shared general information
- Provided regular feedback
- Discussed staying in school
- Problem-solved about risk

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<th>M</th>
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#### INTENSIVE

- Arranged for alternative to suspension
- Contracted for behavior or grades
- Communicated with parents
- Made special accommodations
- Participated in community service
- Participated in social skills group
- Worked with tutor or mentor
- Other ________________________

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</table>

< High risk for month>
Classroom Assessment Targets

- Classroom Structure
  - Rules and routines
- Improving Teacher-Student Interactions
- Responding to problem behavior
- Evidence-Based Academic Instruction
  - Opportunities to Respond (OTR)
  - Incorporating students’ choice and interests
  - Accommodations
# Interview Guide

**Interviewer:** ____________________________________________  **Date:**

<table>
<thead>
<tr>
<th>Question</th>
<th>Scoring Rubric</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do you have <strong>rules</strong> that are specific to your classroom?</td>
<td>Yes = 2</td>
<td></td>
</tr>
<tr>
<td>☐ Yes</td>
<td>No = 0</td>
<td></td>
</tr>
<tr>
<td>☐ No  If no, skip to #6</td>
<td></td>
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</tr>
<tr>
<td>2. What are the classroom <strong>rules</strong>?</td>
<td>3-5 rules =1</td>
<td></td>
</tr>
</tbody>
</table>
<pre><code>                                       | Stated Positive = 1                                                          |       |
                                       | Observable/measurable =1                                                     |       |
                                       | (3 points possible)                                                         |       |
</code></pre>
<p>| 3. How were the <strong>rules</strong> communicated to the students?                | Verbal review = 1                                                             |       |
| Distributed handout = 1                                                      |       |
| On board/discussed = 1                                                      |       |
| Taught using lesson plan = 2                                                 |       |
| (5 points possible)                                                         |       |
| 4. Are the <strong>rules</strong> available as a visible cue? (e.g. written in front of student planner, posted) | Yes = 2                                                                      |       |
| No = 0                                                                       |       |</p>
B. Conduct three 30 minute observations in classroom using mini-m.o.o.s.e.s. This data will serve as baseline and assessment for possible intervention.

1. Transfer the score that correlates with each variable to the matrix below.
2. Compute the mean for each variable.
3. Use the mean scores to determine appropriate classroom intervention(s).

### Student Behavior

<table>
<thead>
<tr>
<th>Variable</th>
<th>Obs. #1</th>
<th>Obs. #2</th>
<th>Obs. #2</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Engagement</td>
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<tr>
<td>Passive Engagement</td>
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<tr>
<td>Off-task</td>
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<tr>
<td>Down-time</td>
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<td></td>
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<tr>
<td>Disruptive</td>
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</tr>
</tbody>
</table>

### Teacher Behavior

<table>
<thead>
<tr>
<th>Variable</th>
<th>Obs. #1</th>
<th>Obs. #2</th>
<th>Obs. #2</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching</td>
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<td></td>
</tr>
<tr>
<td>Not Teaching</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>OTR group</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>OTR individual</td>
<td></td>
<td></td>
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<tr>
<td>Positive feedback</td>
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<tr>
<td>Negative feedback</td>
<td></td>
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<tr>
<td>Correction</td>
<td></td>
<td></td>
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<tr>
<td>If</td>
<td>Intervention Options</td>
<td></td>
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<td>---------------------------------------------------------------------------------------</td>
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<tr>
<td>Rules total is less than 8</td>
<td>☐ Implement rules intervention</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Routines total is less than 10</td>
<td>☐ Implement routines intervention</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Questions 10-12</td>
<td>☐ If a problem behavior exists that is not included in the rules or routines, develop a rule or routine that teaches the replacement behavior</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>☐ If a rule or routine exists that addresses the problem behavior, the teacher should reteach the rule, provide precorrects and active supervision (see rules intervention)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Student off-task behavior is 10% or greater</td>
<td>☐ Increase OTR (group or individual)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>☐ Choose option from curriculum based interventions</td>
<td></td>
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<tr>
<td></td>
<td>☐ Increase precorrect</td>
<td></td>
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<tr>
<td></td>
<td>☐ Increase praise for on-task</td>
<td></td>
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<tr>
<td></td>
<td>☐ Increase corrections (re-teach expectation)</td>
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<tr>
<td></td>
<td>☐ Increase circulation</td>
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</tbody>
</table>
Rules & Routines

• Provide structure and increase predictability of classroom environment.

• Same instructional procedures used to teach academics:
  – Present the rule or routine. Post in prominent positions in the classroom at student eye level.
  – Discuss why the rule or routine is important.
  – Ask for student demonstrations of examples and non-examples of the desired behavior.
  – Provide opportunities for practice with feedback.
  – Explain what will happen when the rule or routine is followed and what will happen if not followed.
  – Once taught, provide frequent and consistent acknowledgement for compliance.
Teacher-Student Interactions

• Increase ratio of positive to negative interactions (4:1)
• Provide instruction that involves frequent opportunities to actively respond to academic requests (OTR):
  – Response Cards (RC)
  – Computer Assisted Instruction (CAI)
  – Class-wide Peer Tutoring (CWPT)
  – Guided Notes
Responding to Problem Behaviors

1. Identify triggers and intervene early in the chain.

2. Set up environment to reduce “triggers” and teach students skills to handle those that cannot be controlled.

3. Create “new chains” and reinforce student use.
1. Calm
2. Trigger
3. Agitation
4. Acceleration
5. Peak
6. De-escalation
7. Recovery
Curriculum-based Interventions

• Incorporate choice and preference in classroom activities

• Design relevant activities that will incorporate the students’ interests:
  – Assess the content for importance or relevance.
  – Point out to students the importance and worth of information.
  – Select topics that reflect students’ interests.
  – Relate content to local issues or problems that are important or familiar to students.
  – Begin and conclude classes with statements such as “This is an important topic/skill because...,” and “Why was this important for us to learn about?”
  – Allow students to select from a list of options.
A Peek Into High School Core Classrooms

- 74% of teacher time was coded as “non-teaching”
- Teacher Feedback:
  - Positive 0.16 per hour
  - Correction 0.16 per hour
  - Negative 0.44 per hour
- Opportunities to Respond
  - Group 2.5 per hour
  - Individual 0.4 per hour
- Student Engagement:
  - Active 18%
  - Passive 12%
  - Off Task 14%
  - Down Time 57%
HS Classroom Challenges

- Embedding classroom/instructional strategies within current “system”
- Accountability for student with EBD success (sped? Gen ed?)
- Incentive to change instructional environments and practices to increase the likelihood of student success
For More Information:

www.ies-cars.org