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A Case Study on the Application and Implementation of Positive Behavioral Interventions and Supports for Students with Emotional Disabilities in Alternative Education

Kira Candelieri Marcari
Old Dominion University, kiramari14@gmail.com

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A CASE STUDY ON THE APPLICATION AND IMPLEMENTATION OF POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORTS FOR STUDENTS WITH EMOTIONAL DISABILITIES IN ALTERNATIVE EDUCATION

by

Kira Candelieri Marcari
M.A. August 2016, The George Washington University
B.A. May 2014, Christopher Newport University

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Approved by:

Kristy Carlisle (Chair and

Methodologist)

Emily Goodman Scott (Member)

Jonna Bobzien (Member)

ABSTRACT

A CASE STUDY ON THE APPLICATION AND IMPLEMENTATION OF POSITIVE
BEHAVIORAL INTERVENTIONS AND SUPPORTS FOR STUDENTS WITH EMOTIONAL
DISABILITIES IN ALTERNATIVE EDUCATION

Kira Mari Candelieri Marcari
Old Dominion University, 2021
Chair: Dr. Kristy Carlisle

Alternative educational settings are serving students with emotional disabilities (ED) at
an increasing rate; however, there a paucity of research examining the effectiveness of these
programs. A review of the existing literature targeting students with problematic behaviors,
supports the use of a positive, preventative, proactive, and systematic approaches such as the
three-tiered, Positive Behavioral Interventions and Support (PBIS) framework. Although
findings suggest that the PBIS framework is associated with favorable outcomes for students
with ED in both traditional and nontraditional settings, few studies have explicitly examined
whether PBIS can be effectively modified to fit the needs of students with ED in alternative
education settings. As such, the current qualitative study aimed to address these gaps in the
related literature by examining how and why PBIS was effective for students with ED in
alternative education. A single case-study design was used to collect evidence of PBIS
implementation for students in this population from the direct interviews of five staff members,
archival school records, and PBIS-related documentation. Braun and Clarke's (2006) six-step
thematic analysis was used to interpret data and develop themes, resulting in the emergence of
three specific themes: 1) strategies and practices; 2) data tracking: measuring progress and
outcomes; and 3) systems and structures. In addition, the case study team identified nine
corresponding subthemes to support these themes. Findings illustrated the specific adaptations
and modifications made to the PBIS framework, contributing to the effective implementation of

the strategy and meeting the needs of students in the ED population. Findings of this study

provided several implications for constituents and potential future areas of research.

This dissertation is dedicated to my former students and those yet to come,

"So often you find that the people you're trying to inspire are the ones that end up inspiring you".

<div style="text-align: right">*– Sean Junkins*</div>

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TABLE OF CONTENTS

CHAPTER ONE
INTRODUCTION

The following chapter will serve as an introduction to the current study. The researcher will begin by outlining the study's purpose and reviewing the relevant background information to underscore its rationale. This chapter will also include a brief description of the design and corresponding questions that guided the research process. Finally, this chapter will conclude with a definition of key terms.

Research Background

An emotional disability (ED) is characterized by the persistent and pervasive demonstrations of atypical, disproportionate, or disturbed behaviors throughout settings and contexts (Van Acker, 2010). Youth with EBD tend to exhibit acts of aggression, defiance, noncompliance, anxiety, self-isolation, social withdrawal, and depression. The ability to regulate emotion and engage in socially appropriate activity is often impaired. As such, youth with EBD may display excess or deficits in these areas at a level that is significantly different than age-appropriate, cultural, and/or ethnic norms (Anastasiou & Kauffman, 2011; Landrum et al., 2003; Van Acker, 2010). Due to these factors, it can be challenging to provide an effective education for students with EBD. In fact, this population typically experiences difficulties in learning that are not due to intellectual, sensory, or other health factors. Barriers to learning often underlie and can manifest as EBD-like behaviors (Lembke & Stichter, 2006; Simpson et al., 2011; Siperstein et al., 2011). Equally, learning difficulties can exacerbate the problematic behaviors of students within the EBD category (Kamp et al., 2014; Lane et al., 2005; Lembke & Stichter, 2006; Payne et al., 2007; Simpson et al., 2011; Siperstein et al., 2011). As they matriculate through school, students with EBD become less likely to progress within their education, meet academic milestones, and graduate high school (Bradley et al., 2008; Simonsen & Sugai, 2013; Wagner &

Newman, 2012; Wynne et al., 2013). They also experience heightened rates of truancy, suspension, expulsion, and unemployment (Duran et al., 2013; Lane et al., 2007; Simpson et al., 2011). Given that teachers spend the majority of the day with students, the education system is an invaluable means to distributing appropriate intervention methods. However, many educators are not specifically trained nor equipped to meet the needs of this population (Hecker et al., 2014; Jull, 2008; Kauffman et al., 2007; Lane et al., 2005; Simonsen & Sugai, 2013; Simpson et al., 2011; Smith et al., 2011; Wiley et al., 2008).

Critics of the traditional public-school setting question the system's training, and ability to include EBD-specific components in their curriculum development, course implementation, structural organization, and classroom management style (Duran et al., 2013; Jull, 2008; Wagner & Newman, 2012). This places students with EBD at further risk of receiving an education that is not suited to their particular needs. In the absence of effective treatment, the severity of these problematic behaviors will likely increase and worsen over time for this population (Carver et al., 2010; Cook et al., 2014; Duran et al., 2013; Jull, 2008). To combat the unique challenges faced by teachers of students with EBD and the potential limitations of traditional educational accommodations, special education advocates proposed the creation of a separate disability category that would provide students with EBD the opportunity to receive special educational services that are inclusive of their specific needs (Becker et al., 2011; Handwerk & Marshall, 1998; Forness & Knitzer, 1992; Wagner et al., 2005). In 2004, special education law and literature reflected this sentiment with a new category in the Individuals with Disabilities Education Act (IDEA) of an "emotional disturbance" (ED; U.S. Department of Education, 2004). For students with EBD/ED, this disability category established their eligibility to receive special

education and related services and signified a first step toward more effective treatment (Becker et al., 2011; Wagner et al., 2005).

Once a student's eligibility status is confirmed, a multidisciplinary team is tasked with creating an individualized educational plan (IEP) to meet the student's needs (Diliberto & Brewer, 2012; Gartin & Murdick, 2005; Kaye & Aserlind, 1979; Lo, 2012; Washburn-Moses, 2011). The creation of the IEP includes identification of classroom and/or activity modifications and/or accommodations, provisions for related services and/or assistive technology, and determination of educational placement. The decision regarding a student's educational placement must ensure the provision of least restrictive environment (LRE), as mandated by the federal law (EHA, 1975), has been addressed. Specifically, the promise of LRE states that a student with a disability will be educated in their home school, with peers without disabilities, to the extent possible (Gartin & Murdick, 2005; Rozalski et al., 2010; Washburn-Moses, 2011; Yell et al., 2008); however, the IEP team may select a more restrictive placement option (i.e., self-contained classroom, separate school) if the individualized needs of the student warranted accommodations and modifications that are not possible to access or implement in the LRE. Unfortunately, and potentially due in part to the stigma that surrounds diagnosis of an emotional or behavior disorder, it is commonplace for students with ED/EBD who present challenging behaviors in a general education classroom to be removed, either temporarily or permanently, and placed in a more restrictive environment (Alter et. al, 2013; Hecker et. al, 2014; Hughes & Adera, 2006; Landrum, 2011). As such, IEP teams are tasked with determining alternative, yet effective, placements beyond those considered as traditional modes of education.

Alternative educational (AE) options can include a range of nontraditional approaches toward education and they are broadly defined within research. Alternative educational structures

are fluid in whom they serve, where they operate, what they offer, and how they are structured across settings. These settings and programs usually differ in the manner in which they function and deliver services based on individual student needs (Caroleo, 2014; Carswell et al., 2009; Foley & Pang, 2006; Lehr et al., 2009; Morrissette, 2011; Munoz, 2004; Powell, 2003, Schwab et al., 2016;). AE settings can include placements and programs such as: alternative schools, charter schools for at-risk youth, courses within juvenile detention centers, community-based campuses, and other types of academic programs facilitated by school districts (Foley & Pang, 2006; Hoge et al., 2014). Selecting an LRE that is designed to meet the student's specific needs is an imperative part of the IEP process; however, the variations in AE settings and qualities can make it challenging for IEP teams to determine which option is the most appropriate based on the accommodations/modifications required and the services provided. Although students with ED/EBD are being increasingly referred to alternative education settings due to the significance of their problematic behaviors, minimal research examined this intersection (Flower et al., 2011; Hoge et al., 2014; Tissington & Grow, 2010). In fact, current literature lacks efficacious findings that compare outcomes for students with EBD across the AE setting continuum, and in those that do, even less insight is provided regarding which components of the programs were effective and whether the effective components were used with fidelity. This lack of research suggests that students with EBD may be receiving education that is inadequate, inappropriate and ineffective, from teachers in educational systems that are not sufficiently trained or prepared to provide such services; thus, pacing the students with EBD at greater risk of being underserved (Downing & Peckham-Hardin, 2007; Foley & Pang, 2006; Kauffman et al, 2007; Lane et al., 2008; Simonsen & Sugai, 2013; Siperstein et al., 2011; Simpson et al., 2010; Tissington & Grow, 2010).

Recent literature suggests that the population of learners targeted by AE settings has shifted from students with disciplinary issues, towards educating students with more significant ED/EBD-related behaviors (Carswell et al., 2009; Caroleo, 2014; Foley & Pang, 2006; Powell, 2003). Specifically, the behaviors demonstrated most often by students in AE settings increasingly include repeated acts of physical and verbal aggression, truancy, drug and alcohol related use, and other problematic behaviors that usually necessitated removal from the mainstream school environment (Carswell et al., 2009; Foley & Pang, 2006; Lehr et al., 2009). Historically, the field of education employed more punishment-based or punitive forms of discipline (i.e., suspension, expulsion) to address problematic student behaviors (Battalio. & Todd, 2005; Cook & Browning Wright, 2009; Lane et al., 2007; Morrissey et al., 2010). Consequently, those zero-tolerance policies and punitive approaches to education further limited the students' potential to succeed by removing them from the learning environment, rather than attempting interventions that could elicit a positive change in behavior (Lane et al., 2007; Morissey et al., 2010; Oliver & Reschly, 2010; Skiba, 2014). In fact, little evidence supported the continued use of these reactive approaches toward student discipline or that student behaviors were improved as a result of these programs. Despite its association with minimal academic or behavioral advances, these practices are still largely associated with the education of this population today despite concern regarding whether alternative education systems can effectively support this population (Cortez & Malian, 2013; Flower et al., 2011; Hoge et al., 2014; Hoge & Rubinstein-Avila, 2014; Maggin et. al, 2011; Lane et al, 2007; Lane et al., 2005; Markelz & Taylor, 2016; Oliver & Reschly, 2010; Quinn et al., 2006; Rathel et al., 2013). Fortunately, research in other areas has demonstrated that certain educational approaches are associated with more favorable outcomes for students with EBD. These frameworks are preventative in nature

and attempt to proactively address the issues and challenges of students before they occur (Cook and Browning Wright, 2009). One example, known as Positive Behavioral Interventions and Support (PBIS), is one such system currently being employed by more educational systems in favor proactive and preventative methods of discipline (Bradshaw & Pas, 2011; Horner et al., 2010; Lewis et al., 2010; Netzel & Eber, 2003).

PBIS is one systematic implementation program associated with favorable outcomes for a diverse range of students within the literature, including those with EBD (Lane et al., 2007; Lewis et al., 2010; Morrissey et al., 2010; Netzel & Eber, 2003; Reinke et al., 2013; Ross et al., 2012; Simon et al., 2008; Sugai & Simonsen, 2012). Its implementation is associated with a more positive learning environment, advancements in academic achievement, and improvements in socially appropriate behaviors (Bradshaw et al., 2009; Bradshaw et al., 2010; Horner et al., 2009; Reinke et al., 2013). For example, McDaniel et al. (2012) found that students in an alternative education program received less disciplinary referrals, exhibited more school-appropriate behaviors, and demonstrated fewer problematic behaviors following its implementation. Furthermore, in a multiple case study design conducted in 2011 by Simonsen and colleagues, PBIS used in alternative educational settings was associated with improvements in students' outcomes such as: increases in desired behaviors, decreases in aggressive, disruptive, or maladaptive behaviors; stronger receptivity to interventions and support; more frequent achievement and progress toward meeting individualized and therapeutic goals; and an increased number of students being eligible for a less restrictive environment. However, research has narrowly focused on the implementation and successful outcomes of the PBIS framework in alternative education. In fact, most of the current literature on PBIS exists in the context of the general education system with the traditional student population. This is concerning considering

that PBIS typically requires adaptations and modifications promote positive results and meet the needs of students in alternative education settings (Simonsen et al., 2011). In the studies that do reference the use of PBIS in non-general education programs, little context is offered about the of specific use of programmatic components that are associated with positive outcomes for each program.

Purpose of the Current Study

Students with ED are placed in alternative education at an increasing rate. However, limited research identifies the successful components, strategies, and practices of AE programs for this population. The purpose of the current study was to contribute to the growing body of knowledge and related literature that focuses on youth with emotional disabilities. This study also aimed to address the gaps and limitations in the related literature that fails to identify efficacious educational strategies and intervention methods used to educate this population. In particular, the current study attempted to meet these needs by providing a thick, rich description of the adjustments and modifications made to PBIS implementation within the context of alternative education for students with ED. This research sought to answer how and why PBIS was successful at this intersection by examining this specific setting and structure.

Research Design

The current study used a qualitative-single case study design with a social constructivist paradigm. This design used multiple sources of evidence and methods of data collection to provide an in-depth, rich account of a specific phenomenon (Creswell 2012; Hays & Singh 2012; Yin, 2014). Data were collected from an exemplary, alternative educational program that adapted the PBIS framework to meet the needs of students with ED in its population. Braun and Clarke's (2006) thematic analysis was by the primary researcher and corresponding case-study team to

analyze data from multiple sources of evidence, including documentary information, participant interviews, and direct researcher observations. The following questions guided the research process:

(1) How does an alternative education school implement or apply PBIS within its population of students and setting structure?

(2) From the perspectives of the staff members, why is PBIS implementation successful or useful in this setting?

Definition of Key Terms

Alternative Education Setting- A range of non-traditional academic placements and programs that offer education to students for whom the typical educational setting may be inappropriate or ineffective (Caroleo, 2014; Foley & Pang, 2006; Hoge et al., 2014).

Emotional Behavioral Disorder- A term used within educational research that refers individuals whose behaviors are deviant from societal, cultural, and developmental norm and demonstrate difficulties regulating their emotion and maintaining satisfactory interpersonal relationships throughout settings and contexts (Anastasiou & Kauffman, 2011; Landrum et al., 2003; Van Acker, 2010).

Emotional Disturbance/Disability- A disability category used within special education to identify students that demonstrate one or more of the following: an inability to learn without an indication of intellectual, sensory or health factors; a failure to build appropriate relationships in the school environment; inappropriate behavior; unhappiness; depression; and physical symptoms associated with school-related problems (IDEA, 2004).

Individuals with Disabilities Act- The literature that regulates affordable and appropriate special education and related services for children, teen, and adolescents with eligible disabilities. (U.S. Department of Education, 2004).

Individualized Educational Plan- The educational plan established by a multidisciplinary team that outlines appropriate educational placement, modifications, accommodations, and any specialized services for students with disabilities (Diliberto & Brewer, 2012; Gartin & Murdick, 2005; Kaye & Aserlind, 1979; Lo, 2012; Washburn-Moses, 2011).

CHAPTER TWO

REVIEW OF RELATED LITERATURE

The purpose of the present chapter is to delineate a comprehensive review of the

literature regarding treatment approaches of youth with emotional and behavioral disabilities

(EBD) in alternative educational settings. First, it is important to understand the characteristics of

youth with EBD and the challenges they may face while in an academic context. In this chapter,

the researcher will review the most used methods and practices when working with students

classified as EBD. The researcher will conclude this chapter with a review of the overarching

ideals and principles of the PBIS framework, an approach that has demonstrated success in the

general education sector but is less established within the EBD-specific or alternative education

literature.

Students with Emotional and Behavioral Disabilities

Introduction

Individuals with EBD often exhibit emotional and behavioral responses that are atypical

from cultural and developmentally established norms (Anastasiou & Kauffman, 2011). These

responses can lead to long and short-term consequences across the academic, social, and

behavioral realm (Wagner & Newman, 2012). Although symptomology can differ for

individuals, a review of the literature suggests that there are some similarities in the

characteristics, experiences, and outcomes of students classified EBD. The challenges of EBD

youth in school settings are vast and, at times, indescribable to those who do not experience the

same distresses. However, in the absence of effective intervention and treatment services, youth

with EBD tend to demonstrate higher rates of truancy, social isolation, academic failure,

disciplinary issues, and school drop-out as well as decreased rates of graduation and post-

secondary vocational achievement (Bradley et al., 2008; Simonsen & Sugai, 2013; Wagner &
Newman, 2012; Wynne et al., 2013).

Given these implications, it is imperative that students within this population are
effectively educated. However, critics of the traditional public-school setting question the
system's training and ability to include EBD-specific components in their curriculum
development, course implementation, structural organization, and classroom management style
(Wagner & Newman, 2012). Learning environments that do not include a preventative and
proactive approach to EBD youth, such as differentiated instruction, classroom management and
social skills training, are instead more likely to reinforce problematic behaviors and further
contribute to the lack of student success (Lane et al., 2005). In other situations, traditional school
settings simply do not have the access or means to include EBD specific considerations, such as
providing on-site access to therapeutic resources, as needed (Lane et al., 2005). The following
sections will outline the general themes or patterns found within the population of students with
EBD.

Internalized and Externalized Behaviors

Students with EBD have challenges with regulating and demonstrating appropriate
emotions and behaviors that are pervasive and persistent throughout contexts (Van Acker, 2010).
Although similar challenges can be experienced for students without disabilities, those
considered EBD display excess or deficits in these areas at a level that is significantly different
than age-appropriate, cultural, or ethnic norms (Landrum et al., 2003; Van Acker, 2010). These
challenges can lead to anxiety, frustration, or other emotions that students with EBD struggle to
manage, express, or regulate in an appropriate way (Carver et al., 2010; Foley & Pang, 2006;
Lehr et al., 2009; Mooij & Smeets, 2009). The result can lead to a range of behavioral symptoms,

known as internalized and externalized behaviors, or a combination of both (Cook & Browning Wright, 2009; Gable et al., 2002; Landrum, 2011).

Cook and Browning Wright (2009) outline two categories of behavioral pattern that describe the behaviors of youth with EBD. The first, called externalized behaviors, consists of those that are directed at others and involve the individual's self in relation to the surrounding environment (Cook & Browning Wright, 2009; Gresham et al., 2001; Hinshaw, 1992; Feil et al., 1995; Landrum et al., 2003; McLeskey et al., 2012). The second, called internalizing behaviors, are those that are expressed inwardly toward the individual and reference problems in relation to oneself (Cook & Browning Wright, 2009; Hinshaw, 1992; Feil et al., 1995; Landrum et al., 2003; McLeskey et al., 2012). The externalized behaviors of youth with EBD most commonly present as aggression (physical and verbal) and acts of noncompliance (Gresham et al., 2001; McLeskey et al., 2013; White & Renk, 2012). The most common observations of internalized behaviors for students with EBD are those that present as socially withdrawn or with signs of anxiety and/or depression (Christensen et al., 2007; Feil et al., 1995; Landrum et al., 2003; Marchant et al., 2007; McLeskey et al., 2013;). Externalized behaviors are typically disruptive to the learning environment and perceived as intentionally extreme, inappropriate, or dangerous for the environment (Cook & Browning Wright, 2009; Maggin et al., 2011). Internalized behaviors are typically less disruptive to the learning environment and are more likely overlooked as a social deficit or maladjustment rather than clinical symptomology as a result (Marchant et al., 2007). Behaviors in both domains are associated with a host of negative educational and interpersonal outcomes for students and create barriers to success in several major ways.

Social Skills Deficits

Research cites demonstration of poor social skills is another contributor to the faced by students with EBD in school (Maag, 2006; Simpson et al., 2011). In 2001, Gresham et al. defined social skills as "the socially significant behaviors exhibited in a specific situation that can predict social outcomes." For youth and children in an academic context, Gable et al. (2010) defined social skills as "a set of competencies that allow individuals to build and maintain positive social relationships with adults and peers, adjust to school expectations and cope with the demands of the social environment." Demonstrating an appropriate and effective use of social skills is thus an essential component of life (Gresham et al., 2001). The ability to apply and practice positive social skills such as, forming and maintaining interpersonal relationships with others is connected to better adaptive psychological and social functioning (Gresham et al., 2001). However, the presence of EBD is linked to certain mental health conditions such as, autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD) as well as with being diagnosed with a learning or intellectual disability (ID or LD) (Jull, 2008; Dietz & Montague, 2006; Seifert, 2003). These diagnoses can influence an individual's ability to accurately assess and respond to the surrounding environment and triggering stimuli (Dietz & Montague, 2006; Jull, 2008; Kauffman et al., 2007; Seifert, 2003). In fact, Wagner et al. (2005) note that the population of students with EBD may also have an array of other conditions such as, anxiety disorders, mood disorders, oppositional defiant disorder, conduct disorder, and schizophrenia. The characteristics of those with EBD and these co-morbid conditions can cause students to misinterpret the social environment and respond inappropriately (Magyar & Pandolfi, 2012; Wagner et al., 2005). This includes responses such as: student withdrawal or isolation; classroom disruption; physical and verbal aggression; or oppositional and defiant behavior. Equally, the symptomology of these conditions can make it challenging for students to

consciously demonstrate prosocial and appropriate behaviors. These misinterpretations or symptoms of respective mental health conditions combined with emotional/behavioral dysregulation and a lack of social skills that could help students adjust for these limitations can also negatively impact academic achievement and thus create a cyclical pattern of unsuccess (Jull, 2008; Jolivette et al., 2000; Simpson et al. 2011; Wagner & Davis, 2006).

Academic Challenges

Children and youth with EBD experience the worst outcomes of any population of students attending school, including those with and without disabilities (Gable et al., 2010; Katsiyannis & Ryan, 2011; Nelson & Kauffman, 2009; Wiley et al., 2008). These behaviors and social limitations often lead to gaps across multiple areas of academic, educational or adaptative functioning and exacerbate challenges typically associated with school (Nelson et al., 2004; Maggin et al., 2011). There is also a more prevalent rate of specific learning disabilities within this population (Mattison et al., 2006; Payne et al., 2007). Students with EBD often earn lower grades, pass fewer courses, and demonstrate less academic achievement than others that are the same age (Lane et al., 2007; Nelson et al., 2004; Simpson et al., 2011). Their below average performance extends across subject and content areas, but is particularly evident in reading, vocabulary, mathematics, and written language (Lane et al., 2007; Nelson et al., 2004; Payne et al., 2007). This could be because students with EBD often lack the core academic skills needed to learn (Farley et al., 2012; Kamp et al., 2014; Lane et al., 2005). In fact, students with EBD tend to lack the core academic skills in addition to the adaptive coping skills needed to function. This can create challenges to learning across several contexts (Lane et al., 2005; Kamp et al., 2014; Siperstein et al., 2011). They have trouble remaining on task, focusing on academic instruction, and completing academic assignments that are required for their learning (Benner et

al., 2008; Lane et al., 2005; Kamp et al., 2014; Siperstein et al., 2011). Research suggests that these limitations not only impact learning but can negative contribute to several areas of adaptive functioning (Lane et al., 2007; Mattison et al., 2006; Siperstein et al., 2011).

Barriers to learning often underlie and can manifest as EBD-like behaviors (Lembke & Stichter, 2006; Simpson et al., 2011; Siperstein et al., 2011). Equally, learning difficulties can exacerbate the problematic behaviors of students within the EBD category (Kamp et al., 2014; Lane et al., 2005; Lembke & Stichter, 2006; Payne et al., 2007; Simpson et al., 2011; Siperstein et al., 2011). In fact, below level school performance is associated with a higher rate of externalized behaviors (especially aggression) in students with EBD as well as influential to the rate school dropout (Kauffman et al., 2007; Lane et al., 2007; Mattison et al., 2006; Nelson et al., 2004). These problematic behaviors of student with EBD can also warrant of range disciplinary actions, including school retention, suspension, and expulsion as the most prevalent (Carver et al., 2010; Duran et al., 2013; Jolivette et al., 2000; Kauffman et al., 2007; Wagner & Davis, 2007). However, as students matriculate through school, their academic, social, and behavioral limitations become less responsive to intervention (Hayling et al.,2007; Lane et al., 2007; Wiley et al., 2008). This can lead to a depletion in education and resources opportunities, making them it more likely for these students to experience detrimental consequences as a result (Bradley et al., 2008; Kauffman & Landrum, 2009).

Long- and Short-Term Outcomes

Ineffective support or intervention for children and youth with EBD can attribute to a range of negative long- and short-term outcomes (Kauffman & Landrum, 2009; Mooij & Smeets, 2009; Simpson et al., 2011). Students with EBD become less likely to demonstrate improvements in their academic and social functioning as well as and implement behaviors that

will improve chances for success as they age (Cook et al., 2014; Cortez & Malian, 2013). They are more likely to experience rejection from peers and engage in problematic social relationships within the school, home, and community due to their limitations in social skills (Kaya et al., 2015; Simpson et al., 2011).They also have higher rates of expulsion, suspension, as well as school drop-out, and are thus less likely to earn a standard high school diploma (Duran et al., 2013; Lane et al., 2007; Simpson et al., 2011).

The challenges of youth with EBD often continue into adulthood and impact relationships and interactions throughout several arenas of postsecondary transition (Kauffman, 2010; Lane et al., 2011; Jull, 2008; Simpson et al., 2011; Smith et al., 2011; Van Acker, 2010). They are less likely to gain employment and accordingly have the highest rate of unemployment amongst the student population (Lane et al., 2007; Newman et al., 2009). Youth with EBD are more likely to engage in be arrested for criminal activity and become incarcerated as a result (Simpson et al., 2011; Newman et al., 2009; Wynne et al., 2013). In addition, they are also more susceptible to drug-use and abuse as they develop (Newman et al., 2009; Simpson et al., 2011; Wynne et al., 2013). Considering the implications, it is imperative that students are provided an effective education that includes EBD specific considerations and mitigates detrimental outcomes. However, little research focuses on this area. The present study aims to address these gaps in the literature and contribute to the growing body of research that identifies proactive strategies that can be used to educate the EBD population. The next section will therefore begin with a historical review of the education system in context and discuss the current educational approaches used for students with EBD.

Education for Students with ED

General or Traditional Education

Students with emotional and behavioral difficulties (EBD) can present with a range of behaviors that can make being successful in a typical public-school setting challenging (Chakraborti-Ghosh, Mofield, & Orellana, 2010; Nelson & Kauffman, 2009). In fact, Nelson and Kaufman (2009) note that students with EBD are more likely to experience negative outcomes than any other student population group. In the absence of effective intervention and treatment services, youth with EBD tend to have higher rates of truancy, social isolation, academic failure, disciplinary issue, and school drop-out as well as decreased rates of graduation and post-secondary vocational achievement (Nelson et al., 2004; Simonsen & Sugai, 2013; Wagner & Newman, 2012). The ramifications of the behavioral challenges of youth with EBD can not only disrupt learning and academic progress for individual students, but also for the peers around them (Carver et al., 2010; Cook et al., 2014; Duran et al., 2013; Jull, 2008). Without proper intervention, the severity of these problematic behaviors will likely increase and worsen over time (Carver et al., 2010; Cook et al., 2014; Duran et al., 2013; Jull, 2008). Given that teachers spend most of the day with students, they are invaluable to distributing appropriate intervention methods. However, critics of the traditional public-school setting question the system's training and ability to include EBD-specific components in their curriculum development, course implementation, structural organization, and classroom management style (Duran et al., 2013; Jull, 2008; Wagner & Newman, 2012). Given that many educators are not specifically trained nor equipped to meet the needs of this population, students with EBD are at-risk an education that is not suited for their needs (Hecker et al., 2014; Jull, 2008; Kauffman et al., 2007; Lane et al., 2005; Simonsen & Sugai, 2013; Simpson et al., 2011; Smith et al., 2011; Wiley et al., 2008). Problems with academic instruction and retaining content have been shown to increase the frequency and severity of problematic behaviors for youth with EBD (Kamp et al., 2014; Payne

et al., 2007; Wiley et al., 2008) This can be detrimental to educators that are tasked with educating this population without proper support and are thus more likely to experience teacher burnout or turnover as a result (Alter et al., 2013; Brown, 2012; Hecker et al., 2014).

Special Education

The internalizing and externalizing behaviors of youth with EBD may become severe enough to warrant consideration for a disability category (Becker et al., 2011; Handwerk & Marshall, 1998; Forness & Knitzer, 1992; Wagner et al., 2005). In this event, behaviors for students with EBD such as classroom disruption or physical aggression often prompt school officials or parents to seek outside services and determine further steps support (Bradley et al., 2008; Maggin et al., 2011; McLeskey et al., 2012). In cases where school officials and treatment teams find students behaviors so severe that they are eligible for special education and related services, teams are then tasked with determining the proper disability category appropriate for eligibility and then with determining the least restrictive environment (LRE) appropriate to meet their needs under the IDEA (Bradley et al., 2008; Maggin et al., 2011; McLeskey et al., 2012).

The Individuals with Disabilities Education Act (IDEA). In 1975, the Education for All Handicapped Children Act (EHA; Public Law 94-142) mandated that all schools that received federal funds assessed students with disabilities and created individualized plans that modified their educational accommodations accordingly. Since this time, the EHA has endured several major reauthorizations. In 1990, this included a name change to the Individuals with Disabilities Education Act (IDEA; Public Law 110-476) and precluded an additional reauthorization in 1997 (Public Law 105-17). The most recent, in 2004, involved a name change to the Individuals with Disabilities Education Improvement Act of 2004 (IDEIA) and has been the governing regulation system of special education since its creation in 2004 (U.S. Department

of Education, 2004). The Currently, it is the only federal law to regulate special education and related disability services. The IDEA presents thirteen categories of disabilities that allow youth to be considered eligible for special education and related services (U.S. Department of Education, 2004). However, readers will find that it makes no reference to the EBD term specifically. Instead, the IDEA includes the categorization of an "emotional disturbance" (ED), to describe students with behavioral emotional disorders that lead to disruptive tendencies or other indicators of socio-emotional problems. (U.S. Department of Education, 2004) Students with EBD must therefore meet the standards outlined in the IDEA to become eligible for special education and related services under the ED category as defined by the following:

(i) The term means a condition exhibiting one or more of the following

characteristics over a long period of time and to a marked degree that

adversely affects a child's educational performance:

(A) An inability to learn that cannot be explained by intellectual, sensory, or

health factors.

(B) An inability to build or maintain satisfactory interpersonal relationships

with peers and teachers.

(C) Inappropriate types of behavior or feelings under normal circumstances.

(D) A general pervasive mood of unhappiness or depression.

(E) A tendency to develop physical symptoms or fears associated with

personal or school problems.

(ii) The term includes schizophrenia. The term does not apply to children who are

socially maladjusted, unless it is determined that they have an emotional

disturbance. (CFR §300.7 (a) 9)

Students who meet the criteria, as determined by a multidisciplinary team, are eligible to receive special education and related services according to the IDEA. Accordingly, students with EBD are those that demonstrate at least one of the aforementioned emotionally based characteristics at such frequency, duration or and intensity that it significantly impairs their educational performance and warrants special education services (U.S. Department of Education, 2004).

Least Restrictive Environments. School districts are typically given thirty days to complete an Individual Education Program (IEP) once a student is diagnosed with a disability that is eligible for special education and related services under the IDEA (Diliberto & Brewer, 2012; Gartin & Murdick, 2005; Lo, 2012). IEPs are educational plans that are completed by a team of individuals that decide the placement, accommodations, and specialized services most appropriate for students with ED or any other disability category (Diliberto & Brewer, 2012; Gartin & Murdick, 2005; Kaye & Aserlind, 1979; Lo, 2012; Washburn-Moses, 2011). During this time, IEP teams are tasked with considering multiple factors for the best course of action for the student, including the least restrictive environment (LRE) needed to promote academic success (Gartin & Murdick, 2005; Rozalski et al., 2010; Washburn-Moses, 2011; Yell et al., 2008;). Under the IDEA, students should receive educational services in the least restrictive environment necessary (Gartin & Murdick, 2005; Rozalski et. al, 2010; Yell et. al, 2008). This means that students should be able to receive their accommodations for their disability amongst the general education population of students as much as possible (Gartin & Murdick, 2005; Rozalski et. al, 2010; Yell et. al, 2008;) The IDEA also dictates that students should only be separated from general education schools and classrooms when the severity of their needs cannot be met the traditional classroom setting with support (Gartin & Murdick, 2005; Rozalski et. al,

2010; Washburn-Moses, 2011; Yell et. al, 2008;). The most appropriate LRE is one that will allow the student to have their academic and special educational needs met and will thus accordingly vary from student to student and throughout disability categories (Rozalski et. al, 2010).

Accommodations and Modifications. The IDEA outlines a spectrum of modifications or alternative placements that can be considered for students. It considers the least restrictive environment as one that allows students to remain in the general education setting while meeting the needs of their disability category as often possible (Gartin & Murdick, 2005; Jull, 2008; Lo, 2012; McLeskey et. al, 2012; Rozalski et. al, 2010; Washburn-Moses, 2011). This can range for students throughout disability categories depending on the best combination of strategies suited to meet their needs (Gartin & Murdick, 2005; Jull, 2008; Landrum et. al, 2003; Lo, 2012; McLeskey et. al, 2012; Rozalski et. al, 2010; Washburn-Moses, 2011). For example, the IEP may determine that the student can remain in general education classes with specific support and modifications to their curriculum and teaching methods (Becker et. al, 2011; Landrum et. al, 2003; Lane et. al, 2007; Maggin et al, 2011; McLeskey et. al, 2012; Rozalski et. al, 2010). This could mean that students may be required to have more time allotted to complete tests, or that students have the option to take more frequent breaks as needed or that students may receive their education in a separate, self-contained classroom. IEP teams may also decide to place students in general education settings that incorporate attending needs-based programs as a component of their educational program (Becker et. al, 2011; Duran et al., 2013; Jull, 2008; Landrum et. al, 2003; Lane et. al, 2007; Maggin et al, 2011; McLeskey et. al, 2012; Rozalski et. al, 2010; Washburn-Moses, 2011). One example may be a public education school that builds a substance use and abuse treatment program into one part of the otherwise traditional student's

academic day. School systems may also offer separate programs that are specifically delineated to a population of needs but are housed within the general education setting (Becker et. al, 2011; Duran et al., 2013; Foley & Pang, 2006; Jull, 2008; Landrum et. al, 2003; McLeskey et. al, 2012; Rozalski et. al, 2010). These programs, such as those designed for teen-pregnancy, may exclude students from the general population to provide academic instruction that is more suitable for their needs but may also offer opportunities for inclusion throughout the day such as lunch periods or elective courses.

However, the restrictiveness of each environment increases as the special needs of the student become more challenging to serve. In some cases, students require accommodations and modifications that are not possible to access or implement in traditional methods. In other events, students present with such challenging behaviors that the general educational system has revoked the opportunity for inclusion. These types of settings and programs must then exclude students from the general population to provide academic services and are considered as a more restrictive environment as a result. Students with EBD exhibit the behavioral and emotional challenges that often warrant such approaches to education. The behavioral and emotional disabilities of this population combined with the stigmas perceived with this group often result in students with EBD receiving some component of their education separately from general education (Alter et. al, 2013; Hecker et. al, 2014; Hughes & Adera, 2006; Landrum, 2011). In fact, these students are amongst the highest population of students that receive education through these exclusionary measures and are most likely to be served through exclusionary means (Achilles et al., 2007; Mathur & Jolivette, 2012; McLeskey et. al, 2012; Sacks & Kern, 2007). These separations can take place in the form of students attending separate needs-based programs as well as students being sent for education in alternate locations. The various

locations and program implementations suited to meet these types of students and their needs have become known as alternative education (AE) settings, placements, and/or programs (Foley & Pang, 2006; Lane et. al, 2005; Lehr et al., 2009; Simonsen & Sugai, 2013; Washburn-Moses, 2011).

The IEP and Alternative Education

The term alternative education refers to a range of alternatives to education for those students that are faced with barriers to their academic functioning (Foley & Pang, 2006; Lehr et al., 2009; Schwab et al., 2016; Simonsen & Sugai, 2013; Wilkerson et al., 2016). This could mean that students have interpersonal, behavioral, emotional, social, environmental, or other factors that limit their capabilities to successfully matriculate through school. Alternative education is one option for special education students with EBD that experience some of these behavioral and emotional challenges in an academic setting (Caroleo, 2014; Foley & Pang, 2006; Lane et al., 2005; Lehr et al., 2009). It is one type of special education environment that tends to be considered as more restrictive and thus serves students with more severe needs (Caroleo, 2014; Foley & Pang, 2006; Lehr et al., 2009; Schwab et al., 2016; Simonsen & Sugai, 2013; Wilkerson et al., 2016). IEP teams must also consider a range of factors when determining which AE possibility will be best for the student to succeed (Hoge et al., 2014; Washburn-Moses, 2011). Selecting an environment that is specifically designed to support students with their specific needs is an imperative component of this process (Hoge et al., 2014; Washburn-Moses, 2011). Needs can be determined by their educational history, financial status, educational characteristics etc. (Becker et al., 2011; Diliberto & Brewer, 2012; Gartin & Murdick, 2005; Kaye, 1979; Landrum et al., 2003; Lane et al., 2005; Lo, 2012; Mathur & Jolivette, 2012; McLeskey et al., 2012l; Rozalski et al., 2010; Simpson & Smith, 2011). IEP teams must also

consider disability category, placement options, accessibility, census of environment, financial

etc. in the placement's deciding factors (Becker et al., 2011; Diliberto & Brewer, 2012; Gartin &

Murdick, 2005; Kaye, 1979; Landrum et al., 2003; Lane et al., 2005; Lo, 2012; Mathur &

Jolivette, 2012; McLeskey et al., 2012l; Rozalski et al., 2010; Simpson & Smith, 2011;

Washburn-Moses, 2011). Equally, parents or legal guardians must agree that the exclusionary

measures of AE are needed to promote better academic functioning (Gartin & Murdick, 2005;

Hoge et al., 2014; Kaye, 1979; Lo, 2012). Once the IEP team decides that a student's needs

warrant alternative education as the least restrictive environment needed to facilitate student

success, there are numerous possibilities that can be utilized to support students in this process

(Gartin & Murdick, 2005; Hoge et al., 2014; Kaye, 1979; Lo, 2012).

The term alternative education was originally used to define programs that served

students at-risk for academic failure (Foley & Pang, 2006). However, it has since expanded to

include a range of non-traditional academic placements and programs such as: alternative

schools, charter schools for at-risk youth, courses within juvenile detention centers, community-

based campuses and other types of academic programs facilitated by school districts (Foley &

Pang, 2006; Hoge et al., 2014). They range from programs that are found within the general

education system to those that are implemented separately in the private sector (Foley & Pang,

2006, Hoge et al., 2014; Morisette, 2011). Students can reside in these campuses, attend classes

virtually from home, or receive these services as part of their regularly scheduled academic day

(Foley & Pang, 2006). AE programs can be free, low-cost, or require students a specific cost to

enroll (Foley & Pang, 2006). Enrollment is equally varied throughout the AE system as students

can be required to attend certain programs or voluntarily elect to attend (Foley & Pang, 2006).

However, the disparities amongst these settings and populations they serve represents a lack of

definitional clarity. This is because alternative educational structures are fluid in whom they serve, where they operate, what they offer, and how they are structured across settings. This can cause the alternative education process and determination to range from students to student even amongst the same county. Further, the alternative education field has grown and expanded during the period of educational reform in the 1960's. This means that alternative education can be associated with stigmas and biases by educators, community and family members that are not relevant within today's context (Atkins & Basura, 2010; Caroleo, 2014; Carswell et al., 2009; Carver et al., 2010; Edgar-Smith & Palmer, 2015; Foley & Pang, 2006). Further, the current literature on the field of alternative and special education uses various terms to reference this category of special education and those it treats. Therefore, the term of alternative education more generally refers to a range and spectrum of educational options that students can use depending on a set of circumstantial factors. Given these disparities, it is important that the current treatment approaches and educational strategies used by AE settings are appropriate for the students that they serve. However, there is currently minimal research that focuses on AE settings at this intersect. The current study aims to address these gaps in the literature by examining how one alternative education setting structures its treatment and programming to effectively target its population of students with EBD. Therefore, the following sections will review the intersection of alternative educational programming for students in this population as it is relevant to the study's context.

Alternative Education Settings and Programs for Students with ED

The 1960's marked a period of educational transformation and reform for the United States. Since this time, adaptations to traditional education, such as the introduction of alternative resources have emerged (Caroleo, 2014; Carswell et al., 2009; Foley & Pang, 2006; Quinn et al.,

2006; Wilkerson et al., 2016). Alternative education was originally created to offer alternatives for students that were not succeeding in the typical educational environment (Caroleo, 2014; Foley & Pang, 2006; Lehr et al., 2009; Wilkerson et al., 2016). At this time, students referred to these programs were largely those that presented with conditions or circumstances that posed risk to their graduation or matriculation rate (Caroleo, 2014; Carver et al., 2010; Foley & Pang, 2006; Lehr et al., 2009; Wilkerson et al., 2016). This population of students, later known as "at-risk youth," were those students who had decreased chances of completing educational requirements due conditions such as teen parenthood or pregnancy, behavioral disabilities and learning deficits that impaired academic functioning (Caroleo, 2014; Carver et al., 2010; Foley & Pang, 2006; Lehr et al., 2009; Wilkerson et al., 2016). Due to the behavioral, emotional, and academic challenges faced by non-traditional students at these settings, alternative education began to be associated with a population of youth that were perceived as problematic, challenging, and troublesome (Chakraborti-Ghosh, 2010; Kauffman et al., 2007; Lane et al., 2005; Munoz, 2004; Wynne, 2013). In fact, Munoz (2004) believes that these philosophies and negative stigmas of this group still plague the beliefs and misconceptions regarding alternative education today. These same stigmas and biases laid the foundational groundwork for the type of resources, educational structures and programmatic implementation methods that were subsequently used to approach this population of students.

Alternative Education

The success and development of these institutions over the course of the last decade reflect the education system's belief that there are several routes to effective education for the multiple types of learners within the system. Since its initial creation, the alternative education system has since expanded and grown to include a range of types and settings that target specific

educational populations over recent years (Foley & Pang, 2006; Morrissette, 2011; Powell, 2003; Schwab et al., 2016). These settings and programs typically differ in the manner in which they function and deliver services based on students' needs (Caroleo, 2014; Carswell et al., 2009; Foley & Pang, 2006; Lehr et al., 2009; Morrissette, 2011; Munoz, 2004; Powell, 2003, Schwab et al., 2016;). AE can take place in both the public and private educational sectors as well as be used to educate general education students well as those deemed eligible for special education (Caroleo, 2014; Carswell et al., 2009; Foley & Pang, 2006; Lehr et al., 2009; Morrissette , 2011; Munoz, 2004; Powell, 2003, Schwab et al., 2016;). Thus, the mention of alternative education references a host of educational options and outcomes for diverse student needs. The most common types of alternative education reference school settings or programs that are separate from traditional means such as; public alternative schools, charter schools, schools for at-risk youth and programs within juvenile detention centers (Caroleo, 2014; Foley &Pang, 2006; Lehr et al., 2009; Morrissette, 2011). Typically, AE settings and programs have the ability to function differently from traditional education to meet various student needs by (Caroleo, 2014; Carver et al., 2010; Foley & Pang, 2006; Lehr et al., 2009; Morrissette, 2011; Munoz, 2004; Schwab et al., 2016). For example, they may offer the opportunity for students to receive one to one support and develop interpersonal interactions with staff through the use of smaller class sizes and lowered student to teacher ratios (Caroleo, 2014; Foley & Pang, 2006; Hoge et al., 2014; Lane et al., 2005; Lehr et al., 2009; Morissette, 2011; Wilkerson et al., 2016). However, the recent expansion and growth of AE systems and programs have made delineating AE systems are shifting their focus to students that exhibit more conduct related behaviors, such as drug and alcohol related use, truancy, and acts of physical aggression (Carswell et al., 2009; Caroleo, 2014; Foley & Pang, 2006; Powell, 2003). The following sections will outline the types of AE

settings as well as the consistent aspects and factors associated with AE settings and the students
that they serve.

Types of AE Settings and Programs

The types and settings of various AE programs are largely characterized by the specific
needs of the student. This can cause a lack of universal understanding and clarity when
attempting to identify its respective components. To compensate for these gaps in understanding,
Raywid (1994) developed a three-tiered classification system that the identified specific
components of AE systems at each level. The three levels of AE settings according to Raywid
are: Type 1, Schools of Choice; Type II, Schools for Discipline and Type III, Schools for
Remediation/Rehabilitation (Raywid, 1994). Type 1 schools were those that students attended
voluntarily and provided for the opportunity for students to focus on certain content and
curriculums based on certain themes or interests (Gable et al., 2006; Genao, 2014; Heinrich,
2005; Morrissette, 2011; Quinn et al., 2006). Magnet programs and charter schools are both
examples of Schools of Choice (Gable et al., 2006; Genao, 2014; Heinrich, 2005; Morrissette,
2011). Type 2 schools provided the opportunity for students at-risk for long-term expulsion and
detention a "second chance" at academic success and were colloquially known as "last chance
schools" (Carpenter-Aeby & Aeby, 2012; Heinrich, 2005; Morrissette, 2011; Quinn et al., 2006).
Schools for Discipline are exemplified by settings such as suspension programs or long-term
placements in day treatment schools that aimed remediate problematic behaviors (Carpenter-
Aeby & Aeby, 2012; Heinrich, 2005; Morrissette, 2011). Type 3 schools were those that were
corrective and perceived as therapeutic in nature (Caroleo, 2014; Heinrich, 2005; Morrissette,
2011; Quinn et al., 2006). Schools for Remediation/Rehabilitation were schools that students
attended when they needed rehabilitation or remedial services before returning having the

opportunity to attend more traditional schools or programs (Caroleo, 2014; Heinrich, 2005; Morrissette, 2011). However, Quinn et al. (2006) suggested that the that expansion of AE programs caused even more disparity amongst the AE classification system and warranted modifications to Raywid's original work.

Over time, AE settings and institutions became increasingly known as the setting used for students at-risk for developing (or currently exhibiting) maladaptive behavioral patterns or functioning (Foley & Pang, 2006; Powell, 2003; Quinn et al., 2006). The educational system also began to endure changes in its federal regulations and guidelines that impacted alternative education and the way it was structured (Caroleo, 2014; Carswell et al., 2009; Foley & Pang, 2006; Quinn et al., 2006; Wilkerson et al., 2016).). In 1998, Raywid accordingly restructured her original classification to reflect the changes shifts within the AE system (Quinn et al., 2006). Raywid (1998) newly defined these levels as: Type I, Change the Student; Type II, Change the School, and Type III, Change the Educational System (Quinn et al., 2006; Raywid, 1998). Alternative schools that attempt to change the students are typically temporary placements in highly structured environments that focus interventions on the individual student to promote change (Quinn et al., 2006; Raywid, 1998). Educational programs that implement curriculum content and instructional methods that are atypical to the traditional school environment are considered programs that attempt to change the school (Quinn et al., 2006; Raywid, 1998). Change the educational system schools are those that incorporate systematic change to the traditional education system within their programmatic framework (Quinn et al., 2006; Raywid, 1998). However, discerning the efficiency of alternative programs can be as challenging as it is variant (Quinn et al., 2006). Quinn et al. (2006) suggests that although change-the-school programs demonstrate academic and behavioral improvements as well as overall favorable

responses the environment, students continue to have difficulty upon their transition to traditional environments. Efficacious support for change-the-student programs is even further mitigated as students rarely exhibit positive changes. This is especially true for change the student programs that are punishment based or punitively oriented. On the other hand, studies on programs that attempt to change-the-educational systems programs have shown some early promise but are too limited to substantiate these findings.

Alternative Educational Characteristics

Despite the Raywid's typologies, the true definition of alternative schools or program are highly variant. The lack of a standardized definition and concept within research as well as within each state's governing regulation body of education complicate matters further (Caroleo, 2014; Carswell et al., 2009; Foley & Pang, 2006; Lehr et al., 2009; Morrissette, 2011). However, research does illuminate several traits and characteristics of alternative education school that are consistent across settings. For example, alternative education programs typically educate youth circumstances that would be best served outside of the traditional school setting (Caroleo, 2014; Carver et al., 2010; Foley & Pang, 2006; Gable et al., 2006; Heinrich, 2005; Lehr et al., 2009). Typically, students are referred to alternative education programs to receive more individualized services that can support their academic and socioemotional needs. Alternative schools can be located in separate buildings or campuses from the general the school district system and are typically classified by fewer students on enrollment rosters, smaller sizes, lowered student to teacher ratios, modified instruction or curriculum and an ability to incorporate nontraditional approaches to education (Foley and Pang, 2006; Lehr et al., 2009; Powell, 2003; Schwab et al., 2016; Washburn-Moses, 2011;).

Many AE institutions often prioritize learning throughout multiple areas of adaptive functioning and subsequently implement an environment conducive to do so (Caroleo, 2014; Foley & Pang, 2006; Lagana-Riordan et al., 2011 Lehr et al., 2009; Morisette, 2004; Powell, 2003; Quinn et al., 2006; Schwab et al., 2016; Washburn-Moses, 2011; Wilkerson et al., 2016). For example, alternative education may offer various learning modalities to address student's interests or vocational goals as well as opportunities to practice life skills such as healthy decision-making strategies. They may also implement flexible schedules and structure that can accommodate the student's academic and socioemotional needs as while simultaneously fostering a caring environment that promotes resiliency (Caroleo, 2014; Foley & Pang, 2006; Hemmer et al., 2013; Lagana-Riordan et al., 2011; Lehr et al., 2009; Morisette, 2004; Powell, 2003; Quinn et al., 2006; Schwab et al., 2016; Washburn-Moses, 2011; Wilkerson et al., 2016). In fact, the ability to increase positive interactions between staff members and students and foster a mutually supportive learning environment is inherent to most alternative education settings (Edgar-Smith & Palmer, 2015; Hemmer et al., 2013; Hughes & Adera, 2010; Powell, 2003; Slaten et al., 2015; Quinn et al., 2006).

The most effective alternative education settings and programs offer staff members specifically targeted training on working within these settings (Edgar-Smith & Palmer, 2015; Hughes & Adera, 2010; Powell, 2003; Slaten et al., 2015). This includes support for teachers to competently work within the diverse needs of students as well as how to integrate evidence-based practices in their student assessment, evaluation, and curriculum development (Edgar-Smith & Palmer, 2015; Hughes & Adera, 2010; Powell, 2003; Slaten et al., 2015). Porowski et al. (2014) summarize these statements by suggesting that most current alternative education programs generally help in academic instruction, counseling or therapeutic services, social skills

acquisition and development, vocational skills training, and support in behavioral management strategies.

Students Population of Alternative Education

The variations in specific characteristics and types that alternative education is associated with is not consistent when examining its population of students. Throughout history, alternative education schools have been used to serve students with a varying range of interests, capabilities, and experiences. However, research shows that alternative education settings are becoming increasingly connotated with educating students with learning, socioemotional and/or behavioral challenges (Edgar-Smith & Palmer, 2015; Foley & Pang, 2006; Gable et al., 2006; Hoge et al., 2014; Hughes & Adera, 2010; Porowski et al., 2014; Rozalski et al., 2010; Schwab et al., 2016; Simonsen & Sugai, 2013). This could be due to the growing attention in recent literature that has focused on providing alternative education to diverse student populations such as those who whoa are at-risk of failing or dropping out, have repeated disciplinary issues or those with mental health, behavioral and/or academic concerns (Carolea, 2014; Carver et al., 2010; Gable et al., 2006; Slaten et al., 2015). This could also be due to the historical context, stigmas and associations surrounded by the origination of alternative education that seen has "dumping grounds" to house and further marginalize "troubled" students who present typical from those in the mainstream (Cox, 1999; Foley & Pang, 2006; Munoz, 2004). In either case, it is true that alternative education students typically differ traditional education peers due to their difficulties in normative social, academic, and emotional contexts (Achilles et al., 2007; Caroleo, 2014; Edgar-Smith & Palmer, 2015; Foley & Pang, 2006; Hughes & Adera, 2010; Lane et al., 2005; McGregor & Mills; 2012).

A large number of these students education system exhibit limitations that are aligned with criterion needed for an emotional disturbance (ED) and/or a learning disability (LD; Achilles et al., 2007; Atkins & Bartuska, 2010; Becker et al., 2011; Caroleo, 2014; Carver et al., 2010; Duran et al., 2013; Edgar-Smith & Palmer, 2015; Foley and Pang, 2006; Heinrich, 2005; Hoge et al., 2014; Hughes & Adera, 2006; Lehr et al., 2009; McGregor & Mills; 2012; Simonsen & Sugai, 2013). In fact, a growing number of students with disabilities are being placed in alternative education settings (Atkins & Bartuska, 2010; Duran et al., 2013; Lehhr et al., 2009; McLeskey et al., 2012; Schwab et al., 2016). The majority of these youth are eligible for services through their IEP which protects the education of students with disabilities through under the IDEA (Diliberto, & Brewer, 2012; Jull, 2008; Lo, 2012). While it seems that most of these students are eligible for placement under an LD, EBD categorization students may also qualify for alternative education through other health impairments (OHI) that impact functioning such as Attention Deficit Disorder (ADD; Achilles et al., 2007; Atkins & Bartuska, 2010; Dietz & Montague, 2006; Foley & Pang, 2006; Hoge et al., 2014; Lehr et al., 2009; McGregor & Mills, 2012). Students that have been expelled or suspended can be placed in alternative educations in order to receive educational services in accordance with their IEP (Foley & Pang, 2006; Gable et al., 2006; Hughes & Adera, 2010; McGregor & Mills, 2012). However, research also suggests that there exists a strong link between student problematic or maladaptive behavioral patterns and learning deficiencies (Achilles et al., 2007; Benner et al., 2008; Carswell et al., 2009; Cook et al., 2014; Farley et al., 2012; Kauffman et al., 2007; Simonsen & Sugai, 2013 This poses the question as to whether students in alternative education exhibit problematic behaviors from the frustration of difficulties in or whether these behaviors act as the predecessor to their decreased academic performance.

In a study conducted by Porowski et al. (2014), the target populations of alternative schools were found to be those that categorized as: students with behavior problems and academic problems, students that were unable to benefit from the traditional school setting, students who have dropped out, those with attendance issues and students that are considered "at-risk." The term, "at-risk" is general one used to describe individuals that are more vulnerable for behaviors, experiences or outcomes due to certain circumstances. When used to describe students, to more accurately refers to the category of children and youth that are less likely to meet academic or personal milestones due to dangerous or problematic behaviors (Gage et al., 2012; Gresham, 2015; Hecker et al., 2014; Lagana et al., 2011; Lane et al., 2005; Munoz, 2004; Slaten et al., 2015). In students, this can manifest as school disengagement, truancy, lowered academic test scores and course failure, grade retention, a history of disciplinary issues and experiences that are negatively linked to school. (Caroleo, 2014; Gut & McLaughlin, 2012; McGregor & Mills, 2012; Slaten et al., 2015; Smith & Thomson, 2014). Students may also attend alternative education programs as a result of poor academic performance, mental health needs or disciplinary consequences that have resulted in suspension or expulsion from their previous school (Carpenter-Aeby, 2012; Carver et al., 2010; Edgar-Smith et al., 2015; Foley & Pang, 2006; McGregor & Mills, 2012) The behaviors of students at these schools can be often be typified by those that warrant legal intervention such as chronic absenteeism, use/abuse of illegal or recreational substances, physical altercations as well as those that are not conducive for the learning environment (Carpenter-Aeby, 2012; Carver et al., 2010; Foley & Pang, 2006; Gable et al., 2006; Schwab et al., 2016). Student histories of those in alternative education often include repeated acts of physical and verbal aggression, truancy, and other problematic behaviors that usually necessitate removal from the mainstream school environment (Carswell et al., 2009;

Foley & Pang, 2006; Lehr et al., 2009). Saunders and Saunders (2002) found that students in alternative education often attributed their own placements to due to chronic absenteeism, decreased academic performance, suspension, expulsion, and difficulties functioning within the classroom.

Alternative Educational Approaches to Students with EBD

Research has long substantiated the fact that alternative education programs are being used to educate students with disabilities (Afacan & Wilkerson, 2019; Atkins & Bartuska, 2010; Duran et al., 2013; Foley & Pang, 2006; Hoge et al., 2014; McLeskey et al., 2012; Schwab et al., 2016; Washburn-Moses, 2011). In fact, it is estimated that the majority of youth in alternative education have a physical, mental, emotional and/or learning disability (Foley & Pang, 2006; Lehr & Lange, 2010; Lehr et al., 2009). The largest group of students amongst this population, those with emotional and behavioral disabilities, are being increasingly referred to alternative education settings due to the significance of their problematic behaviors (Flower et al., 2011; Hoge et al., 2014; Tissington & Grow, 2010). However, there is little evidence to suggest the population of students that is best suited for alternative education settings. This raise concerned as to whether alternative education systems can effectively support serve this population of students that already exhibit the tendencies toward suspension, expulsion, retention, and academic failure (Flower et al., 2011). Simonsen & Sugai (2013), suggest that alternative education systems that align their structures to traditional education programs do not facilitate growth for students with EBD. This sentiment is echoed by researchers such as Quinn et al. (2006), Munoz (2004), and Simonsen and Sugai (2013), who suggest that alternative education schools that use traditional approaches to education are enacting contrary to its mission. Instead, it more accurately facilitates further damage to school experience and leads to further

disciplinary action rather fostering support (Battalio. & Todd, 2005; Munoz, 2004; Simonsen & Sugai, 2013). These typical behavioral management approaches of students with emotional and behavioral challenges are considered as reactive and responding to the behavior as it occurs or in response to its completion (Battalio. & Todd, 2005; Cook & Browning Wright, 2009; Lane et al., 2007; Morrissey, Bohanon, & Fenning, 2010). For example, reactionary responses of school personnel most commonly include disciplinary action such as, "timeouts," office referrals, suspensions, expulsion, or other forms of punishments (Cook & Browning Wright, 2009; Lane et al., 2007; Morissey et al., 2010; Oliver & Reschly, 2010; Skiba, 2014). Despite its rampant use, reactive approaches are not likely to facilitate positive growth nor favorable long-term outcomes when attempting to correct negative behavior (Battalio. & Todd, 2005; Cook & Browning Wright, 2009; Oliver & Reschly, 2010; Skiba, 2014). Schools with zero tolerance policies and "no exception" rules that have little regard for extenuating and mitigating circumstances of the student are more likely to demonstrate higher rates of problematic behavior and induce a more negative school climate when compared to those that use a more preventative approach (Cook & Browning Wright, 2009; Quinn et al., 2006; Simpson et al., 2011; Skiba, 2014;). In fact, Cook and Browning Wright (2009) suggest that these reactive responses may be unintentionally reinforcing students' adverse behavior and undesirable beliefs about schools and staff by using punishments that further alienate or isolate them from the milieu.

There is currently limited evidence to suggest that students with EBD are thus receiving adequate, appropriate, and effective education through educators and education systems that have the training or knowledge required to produce positive outcomes (Downing & Peckham-Hardin, 2007; Foley & Pang, 2006; Simonsen & Sugai, 2013; Simpson et al., 2010; Tissington & Grow, 2010). This implies that school-age youth with emotional and behavioral difficulties are

at-risk of being grossly underserved (Kauffman et al, 2007; Lane et al., 2008; Siperstein et al., 2011). Recent studies that have examined educational services provided to students with emotional and behavioral difficulties have demonstrated minimal academic or behavioral improvements (Hoge et al., 2014; Hoge & Rubinstein-Avila, 2014). This could be due to a concept known as the "curriculum of non-instruction" where classrooms and staff are merely attempting to contain students with EBD and predominantly focus on minimizing disruptive behaviors such as classroom disruption, destruction and acts of aggression, disruption, and destruction (Maggin et al., 2011; Markelz & Taylor, 2016). Unfortunately, these are practices that are still largely associated with the education of students with EBD today (Cortez & Malian, 2013; Maggin et. al, 2011; Lane et al,, 2007; Lane et al., 2005; Markelz & Taylor, 2016; Oliver & Reschly, 2010; Quinn et al., 2006; Rathel et al., 2013) The scarcity of literature that has been dedicated to examining the incorporation and effectiveness of program specific behavioral supports or interventions for students with EBD in alternative education settings further exacerbates the issues and concerns for this population today (Simonsen & Sugai, 2013).

The growing connection between alternative education and students with EBD necessitate that these environments can effectively meet and treat the needs of those they serve. However, there are limited studies that compare outcomes for students with EBD across the AE setting continuum. The studies that do exist offer little explanations of the effective program components that were used within these programs and whether they were used with fidelity. This can make it challenging to ascertain direct linkage to these types of programs and improved outcomes which undoubtedly influences findings on alternative treatment settings for EBD youth and represents a gap in the current literature. However, research has demonstrated that certain educational approaches are associated with more favorable outcomes for students with EBD.

These frameworks are preventative in nature and attempt to proactively address the issues and challenges of students before they occur (Cook and Browning Wright, 2009). One example, known as Positive Behavioral Interventions and Support (PBIS), is a system currently being employed by educational systems in favor proactive and preventative methods of discipline (Bradshaw & Pas, 2011; Horner, Sugai, & Anderson, 2010; Lewis et al., 2010; Netzel & Eber, 2003). It is one systematic implementation program that has been associated with favorable outcomes for a diverse range of students within the literature, including those with EBD (Lane et al., 2007; Lewis et al., 2010; Morrissey et al., 2010; Netzel & Eber, 2003; Reinke et al., 2013; Ross et al., 2012; Simon et al., 2008; Sugai & Simonsen, 2012). However, there are limited studies that illustrate how PBIS is specifically implemented for students with EBD in an alternative education setting. The present study aims to address these gaps in research by providing further knowledge as to how one alternative education setting is able to adapt and modify the PBIS framework so that it effectively able to target its majorly EBD student population. Therefore, the following sections will review the history and development of PBIS to provide a foundation and context for the current research.

Positive Behavioral Interventions and Supports

Historically, the field of education has used more punishment based or punitive forms of discipline to address the problematic behaviors of their students (Battalio. & Todd, 2005; Cook & Browning Wright, 2009; Lane et al., 2007; Morrissey et al., 2010). However, these zero-tolerance policies and approaches to education more accurately limited students' potential to learn by removing them from the learning environment than elicit a change in behavior (Lane et al., 2007; Morissey et al., 2010; Oliver & Reschly, 2010; Skiba, 2014). In fact, little evidence supported the continued use of these reactive approaches toward student discipline or that

student behaviors were improved because of these programs. Those in educational reform started to advocate for the inclusion of more evidence-based practices and research-informed strategies to educate students with behavioral disorders. In the 1980's, one framework known as PBIS was first introduced to help improve the selection, implementation, and documentation process for students within this population (Sugai & Simonsen, 2012). Since this time, PBIS has been implored as a school-wide initiative used to promote effective education through the use of prevention strategies, research-based practices, database implementation, and professional development (Bradshaw & Pas, 2011; Horner et al., 2010; Lane et al., 2007; Lewis et al., 2010; Reinke et al., 2013; Ross et al., 2012; Sugai & Simonsen, 2012).

History of PBIS

1980's. The historical roots of PBIS first began in the 1980s (Sugai & Simonsen, 2012). During this time, supporters of educational reform advocated for the improved selection, implementation and documentation of effective treatment practices used for students with behavioral disabilities (Gresham, 1991; Sugai & Horner, 1999; Sugai & Simonsen, 2012; Walker et al., 1996). In response, researchers at the University of Oregon began a series of studies that examined problematic student behaviors and its relation to education system (Colvin et al., 1993; Gresham, 1991; Horner et al., 2010; Sugai & Horner, 1999; Sugai & Simonsen, 2012; Walker et al., 1996). Their findings illuminated several key limitations within the education field, including its approach on students within the EBD population. In particular, their results highlighted a need for more preventative practices and approaches toward education that were evidence-based and supported by research on student outcomes (Sugai & Simonsen, 2012). This shift represented the first step in systematic change for school systems and its practices. Thus, PBIS was originally created as an alternative to the more punitive and punishment-based systems of behavioral

management and was first presented as a framework at the University of Oregon's 1992 conference (Carr & Durrand, 1985; Carr et al., 2002; Colvin et al., 1993).

1990's. The reauthorization of the Individuals with Disabilities Act of 1997 included a grant to develop a national center for Positive Behavioral Interventions and Supports (Sugai & Simonsen, 2012; Sugai et al., 2000). It was intended to disseminate information and aid schools attempting to incorporate PBIS into its programs (Sugai & Simonsen, 2012). Given their previous work, the grant was awarded to researchers at the University of Oregon who eventually established partnerships with other universities. This collaboration between the University of Oregon, Kansas, Kentucky, Missouri, and South Florida through the center expanded the opportunity for further research and distribution of PBIS related findings.

2000's. The National Technical Assistance (TA) center on PBIS began to define, evaluate, and implement PBIS across the United States (Sugai & Simonsen, 2012). Several studies deriving its work indicated that implementing PBIS and its framework was associated with improved academic and behaviors for students as well as contributed to a more positive overall environment in schools (Sugai & Simonsen, 2012). In fact, research conducted at the center highlighted limitations in other areas of educational development that lead to even further systematic change. For example, both the special and general education field began to examine manners in which students were classified as "at-risk" or disabled (Ardoin et al., 2005; Fuchs, & Fuchs, 2006). Even further, educational pieces of legislation such as the Reauthorization of the Individuals with Disabilities Act in 2004 and the No Child Left Behind Act of 2001 echoed this call for change as they advocated for the use of high-quality and evidence-based educational instruction and interventions that meet students' individual needs (Klotz & Canter, 2006). This

influenced the treatment and educational approaches for students with behavioral disabilities and promoted the use of PBIS and its practices further.

Research deriving from these areas as well as from the national center on PBIS has cultivated the PBIS framework into the school-wide initiative it is today (Sugai & Simonsen, 2012). In fact, the center continues to provide professional development and support for thousands of schools across the country (Sugai & Simonsen, 2012; Sugai et al., 2000). It contains an extensive online collection and distribution materials related to and in support of PBIS (OSEP Technical Assistance Center on Positive Behavioral Interventions & Supports, 2015; Sugai & Simonsen, 2012; Sugai et al., 2000). This includes resources and information on national leadership conferences; publications and professional presentations; evidence-based behavioral practices and interventions; programmatic blueprints for implementation, evaluation, and professional development; and demonstrations of school, district, and state implementation strategies (OSEP Technical Assistance Center on Positive Behavioral Interventions & Supports, 2015; Sugai & Simonsen, 2012).

The (PBIS) and The Applied Behavioral Analysis (ABA) Connection

PBIS is the application of a behaviorally-based, systems framework that aims to incorporate resources, efficacious practices, and data-driven interventions into the educational setting (Horner & Sugai, 2015; Sugai et al., 2000; Sugai & Simonsen, 2012). As a framework, it is important to conceptualize it as a process or approach rather than a curriculum, intervention, or practice (Sugai et al., 2000; Sugai & Horner, 2009; Sugai & Simonsen, 2012). The overarching goal of this framework is to provide the space for students to learn and practice more appropriate, prosocial behaviors that maximize their opportunity to grow. It has roots in the field of Applied Behavior Analysis (ABA; Carr et al., 2002; Hormer & Sugai, 2002). ABA examines

the underlying meaning of socially significant behaviors and develop practices for improved

intervention (Dunlap, 2006). PBIS mirrors this philosophy within in its structure and can be

observed in intervention practices such as positive reinforcement, stimulus control, antecedent

prevention, and contingency management (Dunlap, 2006). ABA and PBIS prioritize positive

reinforcement of as a method of behavioral management. Positive reinforcement can be

described as the delivery of a positive stimulus after an individual has demonstrated a desirable

behavior in order to increase the chance of its repeated occurrence. However, both are open to

the inclusion of other reinforcement strategies when behaviors are still not responsive. This

includes aspects of negative reinforcement as well as both forms of positive and negative

punishment.

Similar to ABA, PBIS uses several methods of data-collection to inform intervention

practices and evaluate effectiveness (Carr et al., 2992; Dunlap, 2006; Horner & Sugai, 2015).

This ensures that reinforcements are appropriately selected and applied for on the contextual

factors of the situation (Carr et al., 2002; Dunlap, 2006; Horner & Sugai, 2015). PBIS and ABA

insist reinforcement strategies must be consistently applied to promote advancements in target

behavior (Austin & Soeda, 2009; Carr et al., 2002; Dunlap, 2006; Horner & Sugai, 2015). These

target behaviors must be attainable and clearly defined (Austin & Soeda, 2009; Carr et al., 2002;

Dunlap, 2006; Horner & Sugai, 2015). It is also essential that individuals have the opportunity to

practice these target behaviors and receive the appropriate reinforcement (Austin & Soeda, 2009;

Carr et al., 2002; Dunlap, 2006; Horner & Sugai, 2015; Swain-Bradway et al., 2013). This is

why PBIS operates on the foundation that all staff members involved with students are

responsible for teaching and reinforcing behaviors (Evanovich & Scott, 2016; Horner & Sugai,

2015; Irvin et al., 2004; Swain-Bradway et al., 2013). Administrators and faculty alike are active

participants in the PBIS framework and heavily responsible for creating opportunities for

students to demonstrate and experience success as well as appropriate reinforcers (Evanovich &

Scott, 2016; Horner & Sugai, 2015; Irvin et al., 2004; Pinkelman et al., 2015; Swain-Bradway et

al., 2013). It is these individuals that are tasked with providing access to the full spectrum of

behavioral interventions and supports that support behavioral change for students (Evanovich &

Scott, 2016; Horner & Sugai, 2015; Irvin et al., 2004; Pinkelman et al., 2015; Swain-Bradway et

al., 2013).

Essential Components and Features of PBIS Framework

Four Critical Components. There are four critical pillars to effective PBIS

implementation: outcomes, practices, data, and systems (Sugai & Horner, 2002; Sugai & Horner,

2008). The first element relates to the school system's ability to select and determine the

expected or desired outcomes of its implementation. This can vary depending on a number of

contextual and cultural factors for each location such as the local and state requirements or the

variant of student needs within its population. As previously mentioned, the inclusion of

research-informed practices is another essential feature of the PBIS framework. School

administration and personnel must be willing and able to implement evidence-based practices

supported by research instead of relying on traditional approaches that are outdated or those

unfounded. A third mainstay of this framework is the use of data collected at the individual and

school-wide level. It is essential that programs use this information to make informed decisions

about its practices and evaluate outcomes. This requires the cooperation of all school staff and

faculty members within various systems, especially when considering various designs of school

programming. In fact, the collaboration of the various systems needed to support the school

program is the final critical component of this framework. Given that PBIS approaches

behavioral management from a multi-systems perspective, it is essential that schools include various systems of support for students in its program.

Features of Effective Implementation. PBIS approaches behavioral management from a proactive, preventative standpoint and attempts to provide consistency for students within their behavioral expectations (Coffey & Horner, 2012; Simonsen & Sugai, 2013). It maintains that in order to decrease problematic behaviors, faculty and staff must attempt to prevent these situations before they can occur (Coffey & Horner, 2012; Lewis et al., 2010; Morissey et al., 2010; Ross et al., 2012; Simonsen & Sugai, 2013). Doing so can mitigate the opportunity for students to engage in situations that reinforces problematic behavior and provides students with the opportunity to practice newly learned, alternative skills (Simonsen & Sugai, 2013).

Sugai and Horner (2002) suggest that there are six core features of an effective PBIS program. The first is a detailed purpose statement that specifically addresses the objective and rationale of including PBIS within the school (Sugai & Horner, 2002). This statement should link behavioral and academic outcomes for all students and all staff throughout all settings (Sugai & Horner, 2002). There should also be clearly defined rules and expectations that help support a community of respectful communication (Sugai & Horner, 2002). These behavioral guidelines must be developmentally appropriate for students in each respective setting as well as phrased in a manner that is positive, specific, and comprehendible for students (Horner & Sugai, 2015; Reinke et al., 2013; Ross et al., 2012; Simonsen & Sugai, 2012). They should be readily visible and accessible throughout the learning environment as well as enforced/reinforced consistently throughout settings (Evanovich & Scott, 2016; Horner & Sugai, 2015; Reinke et al., 2013; Ross et al., 2012., Simonsen & Sugai, 2012). In fact, consistent and clear staff member responses to misbehaviors may more actively contribute to sustained changes for students in the academic and

learning environment (Evanovich & Scott, 2016; Horner & Sugai, 2015; Morissey et al., 2010; Simonsen & Sugai, 2012).

PBIS also suggests that staff members should develop standards for teaching behavioral expectations, school policies and classroom procedures (Bradshaw et al., 2008; Horner & Sugai, 2015; Morissey et al., 2010; Simonsen & Sugai, 2013; Sugai & Horner, 2002). These lessons can be used by staff members to teach students about school-wide expectations, routines as well as positive and negative consequences in a consistent manner (Bradshaw et al., 2008; Lewis et al., 2010; Morissey et al., 2010; Sugai & Horner, 2002). PBIS schools should set and define a system that will encourage positive behavior and prevent the need to use those more negative (Bradshaw et al., 2008; Lewis et al., 2010; Morissey et al., 2010; Reinke et al., 2013; Sugai & Horner, 2002). This system should be organized and provided along a continuum that ranges in severity (Bradshaw et al., 2008; Lewis et al., 2010; Reinke et al., 2013;). The strategies used to promote desired behaviors should include the opportunity for students to receive positive feedback from staff in ways that are both social and tangible (Lewis et al., 2010; Morissey et al., 2010; Sugai & Horner, 2002). In fact, ensuring that students are recognized and rewarded for their use of more positive or appropriate behaviors is a key feature of the PBIS program (Christofferson & Callahan, 2015; Houchens et al., 2017; Marthur & Nelson, 2013). Providing praise or other rewards can reinforce desirable behavior and help facilitate prosocial interactions with staff and peers (Houchens et al., 2017; Morissey et al., 2010). In turn, this positively impacts students' behavioral challenges by providing motivation to demonstrate more acceptable behaviors and decrease the use of problematic behaviors further (Houchens et al., 2017; Lewis et al., 2010). This can also help to form and maintain a more positive working alliance for staff and peers so

that interventions are more successful when prevention tactics are not effective (Houchens et al., 2017; Morissey et al., 2010; Reinke et al., 2007; Kalis et al., 2007; Stormont & Reinke, 2009).

Reinke et al. (2007) found that classrooms lead by teacher acknowledged students for positive behaviors tended to increase the presence of prosocial student behaviors and decrease the presence of those more disruptive or off-task behavior. These approaches should be varied in frequency and the manner in which they are delivered in order to be most effective (Bradshaw et al., 2008; Reinke et al., 2007) Conversely, the strategies used in preventative efforts should include a range of strategies and used aversions of negative behavior (Bradshaw et al., 2008; Bruhn et al., 2014). This includes establishing a set of procedures and hierarchies of consequences that address both minor and major rule infractions (Bradshaw et al., 2008; Bruhn et al, 2014). One example of a preventative strategy is the providing academic instruction that is relevant, engaging and appropriately paced (Simonsen et al., 2008). This opportunity for students to actively participate in their education in a manner that maximizes their chance for growth and success may eliminate the need for students to act-out with more inappropriate behaviors to meet their underlying needs (Simonsen et al., 2008). It is equally important for schools to develop a system of record-keeping and documentation strategies that will effectively monitor and evaluate the implementation efforts of the program (Sugai & Horner, 2002). Ideally, these systems would include procedures for important decision-making strategies as well as cultivate the opportunity for routine feedback and collaboration on intervention and prevention strategies (Sugai & Horner, 2002).

The Framework. The PBIS framework is encompassed of three-tiered system of supports that provide specific interventions, prevention strategies and supports (Reinke et al., 2013; Krach et al., 2017; Swain-Bradway et al., 2013; Upreti et al., 2010). This tiered system

provides students with the opportunity to receive services based on their level of need and their responsiveness to intervention (RTI; Kaufman et al., 2009). However, important social skills and aspects of healthy adaptive functioning such as conflict resolution, problem-solving, bullying prevention, how to engage in mutually respectful interactions are interwoven throughout framework of this tiered system (Harvard Education, 2009). This ensures that students are taught how to initiate and respond to socially appropriate behaviors.

The first tier of supports is comprised of universal intervention and prevention strategies that are conducive for all students across all educational settings (Reinke et al., 2013; Simonsen & Sugai, 2013; Sugai & Horner, 2009). This level aims to improve the learning environment and proactively address behavioral or academic limitations successfully for approximately 80% of the student population (Horner & Sugai, 2015; Muscott et al., 2008; Reinke et al., 2013). All students in the educational setting are provided with the social skills lesson and support curriculum of Tier 1 (Bradshaw, 2013; Horner & Sugai, 2015). However, the level to which they are exposed may vary depending on the school's discretion (Bradshaw, 2013; Horner & Sugai, 2015). If students are not responsive to the universal and school-wide behavioral supports in Tier 1, more intensive services are be provided in Tier 2 (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009). In this tier, students with at-risk behaviors are provided services through smaller group settings to receive more directive and intensive support (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009). It addresses approximately 15% of students in each setting (Bradshaw, 2013; Muscott et al, 2008; Reinke et al., 2013).

Students appropriate for Tier 2 typically exhibiting difficulties that require supports and interventions that are specifically designed for those with academic and/or behavioral challenges

(Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009). These interventions attempt to decrease the frequency of students exhibiting problematic by targeting those that are most severe (Harvard Education, 2009). Students that remain unresponsive to positive supports in Tier 2 may require assessments to determine the function of their behavior (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009).

Tier 3 interventions are usually developed from the results of these assessments and include the remaining 2-5% of the population (Horner & Sugai, 2015). Students at this level demonstrate the need for more intensive, individualized, and specialized support due to the previous resistance of their behaviors (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009). These three tiers operate as a framework for schools to deliver effective interventions and supports for all students and more intensive services to those that require it (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009).

PBIS in Alternative Education

There are several studies to suggest the benefits of incorporating PBIS into the general education system (Bradshaw et al., 2008; Bradshaw & Pas, 2011, Coffey & Horner, 2012; Horner et al., 2010; Pinkelman et al., 2015). Its school-wide implementation has been associated with benefits for students and staff alike (Houchens et al., 2017; Netzel & Eber, 2003; Ross et al., 2012; Sugai & Horner, 2009). Research on PBIS suggests that is contributes to a more positive learning environment, advancements in academic achievement, improvements in prosocial behaviors and increased levels of teacher self-efficacy (Bradshaw et al., 2009; Bradshaw et al., 2010; Horner et al., 2009; Reinke et al., 2013). Bradshaw, Waasdrop, and Leaf,

(2012) indicates that PBIS can have significant improvements on student behavior such as the ability to implement prosocial skills and self-regulating behaviors. PBIS has also been shown to promote collaboration amongst staff and help faculty incorporate evidence-based strategies into their educational practice (Ross et al., 2012). Research has narrowly focused on the implementation and successful outcomes of the PBIS framework in alternative education. In fact, most of the current literature on PBIS exists in the context of the general education system with the traditional student population. In the studies that do reference the use of PBIS in non-general education programs, little context is offered about the of specific use of programmatic components that are associated with positive outcomes for each program. This is concerning considering that PBIS typically requires adaptations and modifications promote positive results and meet the needs of students in alternative education settings (Simonsen et al., 2011). The following sections will examine the use of PBIS in alternative education, including its successful implementation and associated outcomes.

Outcomes of PBIS in Alternative Education

Research on using the PBIS framework in alternative schools is limited. However, some studies advocate that its implementation can be modified to fit AE settings and contribute to more positive student outcomes (Simonsen & Sugai, 2013). Descriptive case studies within this area indicated that student participants demonstrated increases in prosocial behaviors and required fewer interventions for crisis-response, such as physical restraint (Farkas et al., 2011; Kalke et al., 2007; Miller et al., 2005; Simonsen et al., 2010). Results of single case study designs have also shown PBIS interventions specifically targeted for students in AE settings promoted behavioral growth and advances (Ennis et al., 2012; Swoszowski et al., 2012). In a multiple case study design conducted in 2011 by Simonsen and colleagues, PBIS used in

alternative educational settings was associated with improvements in students' outcomes such as: increases in desired behaviors, decreases in aggressive, disruptive, or maladaptive behaviors; stronger receptivity to interventions and support; more frequent achievement and progress toward meeting individualized and therapeutic goals; and an increased number of students being eligible for a less restrictive environment. This is similar to quantitative findings of a study conducted by McDaniel et al. (2012) that found students in an alternative education program received less disciplinary referrals, exhibited more school-appropriate behaviors, and demonstrated fewer problematic behaviors following its implementation.

Research studies that used qualitative data to investigate the outcomes of PBIS in alternative education also advocate for its use. For example, McDaniel et al., (2012) reported that qualitative results of his study indicated that staff members at an alternative school believed PBIS was of valuable use in the academic environment and contributed to a more positive school climate and culture. Teachers of a similar study conducted by Kelm and McIntosh (2012) found that PBIS implementation was related to stronger feelings of teacher self-efficacy and a shared sense of purpose. The qualitative themes interpreted from a focus group in a study conducted by Jolivette et al. (2014) suggested that school-wide implementation of PBIS promoted a proactive and positive strategy of behavioral management that helped staff members teachers feel equipped to apply alternatives to punitive forms of punishment. Thematic results of the results of the same study suggested that faculty and staff members believed PBIS contributed to the reduction problematic behaviors by providing students with motivation to demonstrate more positive behavior through the use of incentives. Based on these outcomes, the previously mentioned studies justify the use of PBIS within alternative learning environments. However, these research fail to describe the specific programmatic components of these institutions, including their

student population and environment. There is limited information as to the intervention and implementation methods used and how these methods were adjusted to fit the learning climate and culture of the student's surroundings. Further, little is known about the program's fidelity to the PBIS framework and whether this contributed to certain behavioral improvements.

The positive benefits and anticipated outcomes of PBIS implementation in alternative education even extend to those students with various disabilities. For example, Simonsen et al. (2010) studied the effects of PBIS for a range of student disabilities across a 3-year period. This included students with Downs Syndrome, Intellectual Disabilities Visual Impairment, Emotional Disturbance, Traumatic Brain Injury, Autism Spectrum Disorder or Other Health Impairments. The findings of this study demonstrated a correlation with increased positive interactions between faculty and students as well as and decreased instances of truancy and aggression (Simonsen et al., 2010). PBIS implementation in alternative settings for students with disabilities was also correlated with fewer serious behavior incidents such as physical aggressive acts and the need for physical restraints to be used on students. (Simonsen et al., 2010). Flower et al. (2011), PBIS may be especially helpful for students in alternative education diagnosed with EBD. This is because it can offer a system of presentations and responses to difficult student behaviors in a structured educational environment that accounts for consistent reinforcement of behaviors and the delivery of contingencies based on student performance (Flower et al., 2011). In fact, these authors claim it is not used enough for students with EBD in these settings (Flower et al., 2011). Their philosophy is mirrored in findings of studies such as those conducted by Jolivette et al., (2014) that demonstrated a correlation between PBIS implementation and general behavioral improvements, fewer acts of aggression and less disciplinary referrals for students with EBD in a residential school. In another a different study conducted by George et al. (2013),

PBIS was shown to have significantly contributed to fewer physical restraints and suspensions for students with EBD in an alternative school setting. These findings remained consistent throughout a follow-up period of 12 years. Researchers also suggest that students perceive PBIS implementation as helpful and conducive to their behavioral growth (Jolivette et al., 2014). In one study, student participants attributed PBIS to their ability and eligibility to transition to a less restrictive academic environment. However, little further evidence is provided to ascertain how these studies specifically measured student growth.

PBIS Implementation in Alternative Education

PBIS is most frequently implemented in general education settings. There is limited research specifically referencing the practices and strategies that are specific to alternative education. There is even less evidence to support these practices in the research. In fact, some of the tenets and teachings of PBIS may not be feasible in non-traditional settings. Simonsen et al. (2011) make suggestions as to the programmatic components of PBIS that can be used throughout alternative education. This is because these supports are not specifically used in the classroom and can be generally applied throughout contexts. These recommendations include actively engaging in the direct supervision of students, specifically detailing, outlining, and teaching socially appropriate behaviors and societal norms, the expected routines, and outcomes of a particular settings, using prompts and behavioral cues to pre-correct behavior regularly, and delivering consistently specific feedback that provides positive reinforcement (Simonsen et al., 2011). They also recommend that each setting specifically establishes a detailed set of observables, measurable and specific outcomes that will be used to evaluate and measure progress annually (Simonsen et al., 2011). McDaniel et al. (2012) indicates that alternative settings should work collaboratively to collect, analyze, and interpret data that will formulate

setting-specific applications of the PBIS framework. This includes creating system of rewards or contingency strategies (McDaniel et al., 2012). Faculty and staff should agree on a system of rewards for complying with school-wide behavioral expectations, as well as a contingency management strategy focused on individualized behavioral objectives (McDaniel et al., 2012). Staff members that felt they had contributed to the establishment and maintenance of these systems were more likely to implement the PBIS framework with fidelity (McDaniel et al., 2012). This is essential to the success of a PBIS program in alternative education according to McDaniel et al. (2012). The other essential components include faculty and staff member buy-in; administration participation and support; and professional training and development on the PBIS framework (McDaniel et al., 2012).

Jolivette, McDaniel, Sprague, Swain-Bradway and Ennis (2012) suggest that alternative settings use PBIS's tiered intervention system of support in the following ways. First, primary interventions should be preventative in nature and aim to eliminate the disruptive, aggressive, or other problematic behaviors from occurring. The secondary tier of interventions and supports should address the behavioral limitations of students that are not yet chronic or severe. The last tier should include interventions and approaches that are individualized to the most severe behaviors of specific students and include those that individuals at-risk of harm. Jolivette et al., (2012) suggests that primary and secondary interventions are implemented universally to students to conserve resources and energy. In the event that students are not responding to Tier 1 and 2 interventions, students should be given screenings and assessments that determine the most effective individualized system of interventions and supports.

Jolivette et al. (2014) notes that many alternative education settings serve students with established teams of supports. These teams may include caseworkers, social-workers, mentors,

or other providers of treatment that share decision-making responsibility within the services

suited for the student (Jolivette et al., 2014). These authors cite the importance of incorporating

these individuals within the intervention and on-going monitoring or evaluation and of students

within these types of programs. This means that alternative settings must establish a routine

system of collaboration and cooperation where members are educated or included on various

components the student's individualized program. Jolivette et al. (2014) also emphasizes the use

of data in alternative education settings when implementing the PBIS framework. This data

should be used to inform and guide the intervention or prevention practices that are provided at

each level within the school system. It should also be used to formulate decisions based on

student and staff member needs. This includes measuring student progress and outcomes,

monitoring the school's fidelity of PBIS framework practices and evaluating staff member

performance as well as job satisfaction.

<div align="center">**Summary**</div>

Children, youth, and adolescents with ED face a myriad of challenges. These challenges

can be further exacerbated in an academic context where students are expected to behave in

accordance with societal, cultural, and developmental norms. Historically, the educational

system has attempted to rectify these problems with the recognition that these students have

disabilities. Alternative forms of education system have been used since this time to educate and

meet the needs of the students in this population. Little research focuses on the efficacious

structural components and educational practices of these programs. However, a review of the

literature suggests the use a proactive, three-tiered, systematic approach toward problematic

behaviors. This framework, known as PBIS has been associated with favorable outcomes for

students with ED in general education. Equally, recent research advocated for its use in

alternative education. In the few studies that examine the PBIS framework in this context, its implementation has been associated with an increase in prosocial behaviors and a decrease in those that are problematic. Although the research is limited, findings suggest that PBIS framework can be effectively modified to fit the population of students in alternative education. However, few studies examine PBIS at this intersection. Limitations of the current literature include the identification of specific programmatic components and practices that are conducive for this population. The current study aimed to address these gaps in research by examining how and why PBIS is effective for students with ED in alternative education.

The Current Study

The current study attempted to contribute to the growing body of knowledge and related literature that examines students with emotional disabilities. This study aimed to address gaps and limitations of research that fails to delineate the efficacious educational strategies associated with this population. The following chapter will discuss the methodology used to examine an example of this specific type of setting and structure that illustrates how and why PBIS was successful at this intersection.

CHAPTER THREE

METHODOLOGY

The following chapter will outline the methodology that was used for the present case study. This section will introduce the purpose of this study and the subsequent research questions. It will also include details on the study's research design, data collection procedures, and data analysis methods. The researcher will outline the specific strategies that were taken to ensure trustworthiness of the study, such as triangulation of data, member-checking, audit trial and auditor, and the composition of a thick rich description. This chapter will conclude with a summarization and discussion of limitations.

Rationale & Research Question

The present study aimed to contribute to a growing body of research and knowledge on the use and implementation methods of PBIS in alternative education settings. In particular, this case-study examined how a single alternative education setting adapted PBIS for its students with ED or EBD. PBIS implemented in the public-school setting has been associated with positive outcomes for traditional students. There are also studies which suggest that PBIS could be beneficial for general education students with ED or EBD. However, an increasing number of students with ED or EBD are being served in alternative education settings. The long and short-term consequences of ineffective education for students with ED or EBD can be detrimental for students' socioemotional health. Therefore, it is imperative to ensure that this population is receiving education that supports their personal and academic growth. While recent literature suggests promise for PBIS students in alternative education with ED or EBD, little research has examined the manner in which it was modified to fit the setting structure. Deficits in the literature include knowledge regarding how and why PBIS implementation was successful at this

intersection. Therefore, the present study aimed to address these gaps in the literature by providing a thick, rich description of PBIS implementation in alternative education with this specific student population. By studying this exemplary case, the researcher hoped to offer additional insights to future educational structures that are contemplating incorporating the PBIS framework into its system. Equally, this research may be used as a reference point for educational leaders currently including PBIS into their programmatic approach. The present study used a qualitative-single case study design of an exemplary, therapeutic educational program that implemented PBIS for its students, ages 5-22, with special needs who have difficulty learning in a traditional school setting. The primary researcher conducted interviews with the school's faculty and PBIS leaders as well examined the school's related documents to collect and analyze data. This study used the following questions to guide the research process:

(1) How does a therapeutic educational program implement or apply PBIS within its population and setting structure?

(2) From the perspectives of the staff members, why is PBIS implementation successful or useful in this setting?

Context

Blue, (a pseudonym), is a regional nonprofit healthcare system based out of Virginia. It offers medical treatment at various facilitates and practices throughout the state. LDS is a special education service offered by Blue that provides a therapeutic educational program for students, ages 5-22, with special needs. This includes students who have difficulty learning in a traditional school setting due to an underlying emotional, behavioral, learning, intellectual, or developmental disability. LDS aims to support students in their personal and academic growth to increase their quality of life. To do so, they offer more individualized services. Class sizes are

approximately eight to ten students and are taught by special education instructors and counselors. Each plan of study is coordinated with LDS faculty and the student's respective public-school academic curriculum in order to include social skills development, individual and group counseling, family support, and pre-vocational training in their learning program. Treatment teams are encompassed of board-certified behavior analysts, certified special education teachers, mental health counselors, licensed professional counselors, school administrators as well as speech, occupational, and physical therapists. During the 2019-2020 school year, there were twelve LDS located throughout the state of Virginia. All locations were licensed by the Virginia Department of Education and the Virginia Board of Education. All locations were fully accredited by the Virginia Association of Independent Specialized Education Facilities (VAISEF) and the Southern Association of Colleges and Schools (AdvancedED-SACS).

Living the Dream Schools are private, non-profit, special education day schools with several campuses across Virginia. Ten of these twelve locations focus on family-centered, evidence-based treatments founded within Applied Behavioral Analysis (ABA) and Verbal Behavior for children and adolescents with Autism Spectrum Disorders (ASD). Within these ten schools, ASD is the primary disability category for a majority of students. However, the population of each setting varied. For example, the primary disability category for the majority of students at the site in the current study is ED. Thus, the researcher elected to collect evidence from this specific LDS location for the purposes of the current study. Data collection from this campus began with the 2016-2017 school year and ended with the 2019-2020 school year. The 2016-2017 school year was selected as the data collection start date given that it was the first year that this specific LDS location transitioned from its previous structure to an exclusive PBIS

Framework. Therefore, the researcher collected evidence from this period of time to illustrate how LDS modified and implemented PBIS throughout these changing periods.

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Research Method & Design

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A case study is one type of qualitative research method used by researchers to examine a current or underlying phenomenon within its real world-context (Yin, 2014). These designs use multiple sources of evidence and methods of data collection to provide an in-depth, rich account of a specific phenomenon (Creswell 2012; Hays and Singh 2012; Yin, 2014). A case study design is useful when researchers need to study a specific case in detail without the manipulation of variables and can be categorized as a single-case study or a multiple-case study (Creswell 2012; Hays and Singh 2012; Yin, 2014). Single-case study designs examine a specific set of circumstances or singular case compared to multiple-case studies that are organized by two or more cases (Yin, 2014). Given that the study examined a specific case that was unique or unusual to the current implementation methods of PBIS, the researcher utilized a single-case study design. To analyze and interpret data, the researcher used Braun and Clarke's (2006) thematic analysis. This type of design was most appropriate for this study given the aforementioned criteria and in order to provide a thick description of PBIS implementation methods for students with ED/EBD at LDS.

Yin (2014) specifies the typology of single-case studies designs even further. He denotes the following three criteria to justify the use of a qualitative, descriptive case-study. First, is that the context of the study uses "how" or "why" questions to guide the research process. Second, is that the researcher has limited control over the series of events throughout the study or cannot manipulate its variables. Third, is that study seeks to illustrate a current phenomenon within its real-world application or context. The present case-study examined Living the Dream School

(LDS, a pseudonym) for its research. LDS has been recognized as a therapeutic educational program specifically for students with students with emotional, behavioral, learning, and developmental disabilities. It is one of the few alternative educational programs that was explicitly structured around the PBIS framework. Therefore, the researcher used a descriptive, single-case study design to highlight the implementation process and perceived successes of PBIS at this site.

Hays and Singh (2012) note that selecting a research paradigm is essential to any qualitative inquiry. It is the foundation of the study and frames the future of the research process. Social constructivism is one such belief system identified by Hays and Singh (2012). In this paradigm, no "universal truth" exists. There are multiple realities and subjective experiences that cause the meaning-making processes of each individual to be unique. Social constructivists claim that counseling and educational phenomenon will always reflect some sort of bias given that each participant and researcher come from their own set of identities and experiences that inform the manner in which they construct social knowledge. The present study was interested in examining the PBIS phenomenon for students with ED/EBD in a therapeutic and educational context. This relative construct can only be understood within the social context of those who experienced it and within the environment and situation in which it was implemented. The data was heavily impacted by the perspectives of the researcher, attitudes of the participants and reciprocal relationship between the two. For these reasons, a social constructivist paradigm was the most appropriate for the context of the study and was utilized as the framework throughout the research process.

Reflexivity

Qualitative research is a meaning-making process (Dodgson, 2019). It requires the interpretation of data collected from social, cultural, and relational contexts. This means that the researcher must have remained conscious and aware of how her personal dialogues, experiences and narratives impacted the research methods or practices. The researcher must have also been able to reflect on her roles and relationships with the various components of the study and monitor how these factors were impacted by such dynamics. To account for these factors during within the present study, the primary researcher kept a reflective journal throughout the process. These accounts and entries helped her to monitor her own responses and reactions and was used as an additional tool to help her maintain an open dialogue with other members of the case-study team. This process, known as researcher reflexivity, increased the trustworthiness and credibility of the study and strengthened the researcher's understanding of the work.

In the current study, the researcher used the case to fulfill the dissertation requirements for a doctorate degree in counselor education. She completed a master's degree in clinical mental health counseling and is a licensed professional counselor, certified clinical mental health counselor and nationally certified counselor. The researcher self-identified as a White, cisgender female of European descent. She worked full-time as a mental health therapist and has been employed by Blue for the past five years. These identities and roles undoubtedly impacted, influenced, and informed her work in this area of research. For example, the researcher was granted more access to private or confidential material. The researcher was also entrusted with more autonomy or independence within the setting and required less permission or guidance to operate within the system. However, these also presented greater risk and threats to the study's reliability. The researcher attempted to interpret data and evidence as objectively as possible to increase credibility and reliability in the work, although her previous exposure and experience at

the setting may have elicited a different assessment or interpretation of evidence. The researcher's minimal experience with the education system and heightened background in mental health could have also provided a limited or skewed understanding. Due to her employment status, data gathered from interviews or direct observations could have also been impacted. The previously established and on-going relationships with interviewees or potential informants could have informed researcher-related interactions and created biased responses or results. Therefore, it was important for the researcher to remain reflective of how her own experiences, biases, and background contributed to the researcher process and take the steps to necessary to provide reliable and credible results.

Procedures & Data Collection Methods

The current case-study attempted to explore the PBIS framework. In particular, the research examined how a single alternative educational setting modified PBIS for its students with ED or EBD. The primary researcher began the study with the completion of a series of preparatory steps. First, the researcher obtained approval from Old Dominion University's Institutional Review Board (IRB). Next, the researcher sought permission from the setting's administrative team or personnel to conduct the study at their site. Obtaining approval from of these review boards protected human subjects and ensured that the research was conducted ethically. Once the study was approved, the researcher began fieldwork and distributed a letter of introduction (see Appendix A). This letter was sent electronically to all faculty and staff and provided the researcher's contact information, supervisory contact information, the study's purpose, goals, and other information that participants may have required. Next, Yin (2014) noted that a single case that entails intensive or in-depth data collection from one location might have required a team of researchers. Given that the present study took place at one alternative

educational setting, a case-study team was formed. Members of the case-study team were required to attend and complete a training on the case before their participation in the study began. The objective of theses trainings was to educate members on the study's subject, design, methods, and techniques. In addition, the members of the case-study team contributed to the development of the study's protocol before they began the data collection procedures. This protocol (see Appendix D) included an overview of the case-study, the methods of data collection, the data collection questions, and served as a guide to the case-study's final report.

Once the case study team prepared and trained for the specific case-study, data collection procedures began. Yin (2014) suggests that credible and quality case-studies used multiple sources of evidence to collect data. However, this often produces an extensive amount of information and made it difficult to later parse through. To help determine what evidence was appropriate for the case-study, Yin (2014) suggests the triangulation of data. This method of using multiple sources of evidence to confirm or corroborate the same information found in other areas and was important to ensure trustworthiness of the study and accuracy of the results. The most complementary sources of evidence that were used for triangulation were organized by categories: documentation, archival records, interviews, direct observations, participant observation, and physical artifacts. In addition, Yin (2014) also suggests that a comprehensive list could be extensive and included evidence found within additional sources such as films, photographs, and videotapes. Each source of data was associated with its own set of strengths and weaknesses and was considered as complementary of one another. An effective case thus capitalized on these aspects and incorporated them into the study. Thus, the researcher used the following types of data collection methods for triangulation and the purposes of the current study.

Documentary information.

Documentary information is a valuable source of evidence for most case-study topics (Yin, 2014). To access this data, a thorough, systematic review of relevant documents was conducted through an investigation of related literature and reviewed in Chapter 2. Documentary evidence important was also imperative to the current study given that it provided evidence over a range of time. Sources included those found on the internet, public library, and through other contexts of reference. It was also imperative to review the records, files and other documentation kept on the site. Examples that were found and used in the current study included memoranda, e-mail correspondence, personal documents, written reports of events, administrative documents, internal records, formal assessments, or evaluations. These documents were used to specifically focus on the context of the current setting and expanded upon evidence from other areas. Documentation evidence helped the researcher collect case data that was unbiased, specific, and ranged over a broad period of time. Therefore, it was an essential source of evidence for the current case study. Archival records collected from the case study offered similar benefits for data collection. This type of documentation was accessed through computer files and other forms of electronic record-keeping such as data-trackers and training modules. The setting's archival records reflected evidence of PBIS implementation through sources could not be accessed physically while on-site because they were not recorded electronically. Thus, this type of evidence was essential in helping the researcher to substantiate evidence further and provided additional data. The current study used documentary information and archival records for data collection and triangulation for evidence found within other areas. Both sources helped the researcher examine the setting's method of PBIS implementation. More specifically, this included PBIS treatment plans, student files to assess presence of PBIS execution, and written

records of Blue's twice weekly PBIS meetings. The researcher established access to this information due to her employment status at the school. The accuracy, applicability, and relevancy of this type of data was then determined and assessed by the researcher and supported by members of the case-study. Collecting both types of data allowed the researcher further insight into programmatic components and encapsulated various dimensions of the school's and staff's implementation of the PBIS framework.

Interviews

Interviews are an integral source of case-study data (Yin, 2014). In the present study, participant interviews were used to collect evidence that reflected the staff members' experiences and perspectives during PBIS implementation. It provided insights as to other relevant sources of data and was used to verify information. Interviews were most effective when conducted as fluid conversations rather than formal inquires helped the researcher to illicit authentic, objective responses from interviewees. The case study's purpose and goals determined that the primary researcher would use in-depth and focused interviews to collect data. In-depth interviews were used to gain insight from important or essential individuals connected to the case. This included establishing key facts or gaining insight on significant events. In-depth interviews lead to paths of further inquiry with other participants and were considered crucial in the corroboration or contradictions of other sources of data.

The current study also used in-depth and focused semi-structured interviews as additional sources of triangulation and collected data from the school's administrative staff, PBIS team and other influential members that were identified through other sources of evidence. In-depth interviews lead to the investigation of sources of evidence and introduced other key informants. These provided perspectives were helpful given that they were not depicted within the

documentary or archival data or reflected in the researcher's understanding of the information

collected. Additionally, it helped corroborate evidence found within these areas. Focused

interviews were used given that the case-study's protocol necessitated that the researcher

collected specific information. It drove the direction of interviews and focused the interview on

the investigation of specific PBIS-related content. Single-session interviews with participants

tended to provide the researcher with the opportunity to ask open-ended questions and probe

responses with each participant. In this case, focused interviews were used to address

interviewee's experiences or understanding of specific aspects of PBIS implementation. To do

so, the researcher ensured that questions were framed objectively to avoid leading interviewees.

Interview questions were formulated and created by using The School-wide Positive

Behavior Support: Implementers' Blueprint and Self-Assessment to derive information (Sugai et

al., 2005). This document was designed to support organizations in the assessment, development,

and execution of PBIS and assess fidelity with the framework's practices. In addition, questions

were informed and guided by a document written by George and Martinez, (2007) which

expanded on the PBIS blueprint and illustrated its practices. Interviews were also guided by the

current study's questions and field tested by professional educators familiar with the PBIS

framework. Although interview data is highly susceptible to bias, it was important for the context

of the present study. It offered "inside" perspective from staff members and depicted the school's

interpretation of PBIS use. The current study not only used interview data as an additional source

of evidence, but also as a means of corroboration for information collected in other areas. All

participants interviewed completed an informed consent (see Appendix B) form before being

interviewed. The interviews lasted approximately 60 minutes and were audio-recorded to allow

the researcher to record fieldnotes throughout the interview session. Interviews were then

transcribed and provided with a pseudonym to ensure protect confidentiality before the contents of each were stored on an encrypted flash drive.

Participants

In qualitative research, participants are usually selected due to their connection with the phenomenon being studied (Hays & Singh, 2012). The current study aimed to investigate the phenomenon of PBIS implementation at an alternative educational setting for students classified by their IEP as ED. Blue's faculty and staff are expected to deliver special education services that helped students manage their behaviors, improve their academics, and enhance their socioemotional wellbeing. To achieve these goals, Blue incorporates an evidence-based framework known as PBIS within its systematic components and practices. Although PBIS has been associated with improved outcomes for students with ED in the public-school setting, little research focused on its use within an AE context. Equally, studies that examined PBIS in AE settings offered minimal insight as to how the framework could and should be adjusted for this population. Thus, it was imperative that the case-study's participants were be able to provide a thick, rich description of the PBIS implementation process. The larger sample of faculty and staff members of Blue were undoubtedly able to contribute vital insights and information. However, the researcher narrowed the participant pool from this larger sample to strengthen the data and evidence needed for the study. A purposeful sampling method of participants was used to allow the researcher to intentionally select those that could provide information or context to the phenomenon that may have been difficult to gather elsewhere (Creswell, 2005). Therefore, the participants were deemed appropriate after meeting the following inclusion criterion: (a) must have been employed as a full-time staff member of Blue for at least one school year (b) must be currently employed as a member of the school's administrative team, (i.e., principal, assistant

principal, etc.), or as a therapist, teacher, or as a mental health technician at Blue (c) must be identified as a member of the PBIS team as indicated by the PBIS team leader at Blue.

The Case Study Team

Creating a case study team can prove beneficial for many case-studies (Hays & Singh, 2012; Yin, 2014). They offer the researcher with additional support to collect, interpret and analyze data which can be especially helpful for cases with multiple sources of evidence (Hays & Singh, 2012; Yin, 2014). In addition, establishing a case study team can improve the trustworthiness of the study by helping researcher moderate to their bias and manage reflexivity (Hays & Singh, 2012). The researcher thus selected two individuals for this team to support in the transcription and coding of data. Both team members received a PhD in Counselor Education and were unrelated to the case-study's institution. This allowed the team members to bring an objective perspective research process and the data set. In addition, both individuals completed and participated in various research studies of their own and were qualified to serve as case-study members due to their experiences in teaching and participating in qualitative research courses throughout their academic histories.

Direct and Participant Observations

Case-study research should take place its natural setting or context (Yin, 2014). Accordingly, researchers can capitalize on their direct observations of the setting as an additional source of data. The present study included evidence collected through formal and informal methods, such as witnessing the day-to-day activities or recording aspects of the physical environment. The observations made during such fieldwork practices provided additional insight about the case and was combined with other sources to substantiate evidence further. The strength and reliability of such evidence was increased given that the present study utilized

members of the case-study team as additional observers. Equally, participant-observation

evidence was needed given that the researcher assumed a variety of roles within the case-study.

This ranged from having casual or social interactions with study's participants to actively

participating in events or proceedings of the case as they transpired. Participant-observation data

also offered access and insight data that otherwise may have been difficult to obtain. This

allowed for the researcher to collect direct and participant-observational evidence of the setting

in its natural context as the researcher was employed at the case-study's location, such

observations of case-study provided anecdotal evidence for the study. The researcher recorded

and collected PBIS related field-notes on the innerworkings, dynamics and execution of PBIS at

the site and used this information as the final source of triangulation.

All data collected throughout the study was blinded. For example, the researcher removed

identifying information from all documents and records as well as used neutral third parties to

transcribe interviews. In addition, all evidence, records, and documentation, including any forms,

recordings, transcriptions were stored in a password encrypted flash drive. All materials will be

destroyed five years after the study. These measures will help to ensure anonymity and protect

confidentiality of study's participants.

Data Analysis

In qualitative research, data analysis involves a repeated cycle of categorizing and

recategorizing key words (Hays & Singh, 2012). This process, called coding, connects words

that are similar or related in some way. Throughout the research process, the case-study team

continuously reduced, separated, combined, and merged the data into further clusters and worked

to assemble or dissemble categories as evidence was collected. These groupings, or codes were

used to identify themes and patterns that emerged from the data and was a major component of

analysis. To support researchers in organizing their thoughts and this process, Hays and Singh (2012) suggest the use of a codebook. Codebooks can be created to systematize codes, sub-codes, and patterns as well as meanings or explanations of each code. In the current study, the researcher reviewed pieces of data previously mentioned, such as educational archival records, transcripts of interviews, and field-work notes and created a codebook to record the themes and patterns that emerged. The creation of the codebook began as soon as the coding process was initiated and was continuously revised or updated through the process. The case study team met routinely to update the codebook and refine the data. This ensured that the codebook reflected and provided a thick, rich description of the PBIS phenomenon to interpret for analysis.

To analyze and interpret codes and data, the case study team used Braun & Clarke's (2006) thematic analysis. According to Braun and Clarke (2006), thematic analysis allows for flexibility within the theoretical frameworks while providing thick, detailed, and rich description of the data set. This type of analysis is widely used in qualitative studies to support researchers in identifying, analyzing, and reporting patterns found within a data set. It clearly outlines six steps to ensure clarity and rigor in the analysis process. Thus, it aligned with the purpose of the study primary researcher's level of experience. The following section will describe Braun & Clarke's Thematic Analysis in connection to the current study.

Braun & Clarke's Thematic Analysis

Braun and Clarke (2006) outline six steps to thematic analysis. These steps are nonlinear and provide novice researcher with guidelines to help interpret qualitative data. Given the detailed procedures and guidelines of this analysis, the current study utilized a case study team to support the researcher in this process. The first step was to familiarize oneself and the team with the data. This included transcribing or recording the collected evidence and reviewing the data

for initial codes with the team. The case study team read and re-read data and annotated any initial thoughts to become fully immersed within all aspects of the set. The current study used members of the case study team to transcribe and record the pieces of evidence so that the researcher was able to record field notes before the first review of the transcriptions or recordings. The case study team then examined these pieces of evidence and recorded additional notes as they reviewed. The next step entailed the generation of the initial codes. This required the researcher to identify noteworthy aspects of the evidence and arrange them in a systemic fashion. These preliminary codes provided context for the data so that the researcher could transition to the third step and begin to search for initial overarching themes. Once the researcher determined potential themes, the related data was then organized by these patterns and categorized even further by subthemes that emerged. The researcher utilized members of the case study team to help code and organize all data collected in the present study. The case study team then moved to the next step, which was to review the categories. The team refined, combined, and separated the data so that each theme was indicative of the evidence that it represented. Themes were reviewed to ensure that was coherent and distinctive before being discarded of any that seemed irrelevant. It was important that the researcher then reviewed the themes to ensure that they were related to the coded extracts before mirroring this same process for the remainder of the data set. In the current study, members of the case study team also helped to facilitate this process so that the researcher could create a thematic map that provided codes for the relevant evidence and accurately reflected the significance of the themes. The fifth step required the team to name and define each of the previously identified themes. This ongoing process of analysis allowed the researcher to refine the specifics of each theme and describe the evidence at its core. The description of each established a connection to other themes and identified its relation to the

original research question. Members of the study's case study team also helped the researcher to

ensure that the identified relationships were valid and supported by the collected evidence.

Finally, the researcher was able to create a written report that discussed the study's findings. This

account provides examples and excerpts of the data that were related to the research question,

themes, and literature. It was important that the researcher provided supporting details and

empirical evidence that justified the research process and validated the study's results.

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Criteria of Trustworthiness

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Strong qualitative research entails both a research design and implementation process that

is trustworthy. It is essential that all aspects of the qualitative inquiry meet the criterion for

trustworthiness. The following sections will review four of the major criteria used for

trustworthiness in the present study and as outlined by Hays and Singh (2012).

Credibility

Credibility is one major aspect used to establish trustworthiness in a study (Hays &

Singh, 2012). It refers to other's ability to believe in the study and its connection to the results.

In the present study, the researcher attempted to promote credibility by using member checking,

and maintaining an audit trial. Interviewees or other participants in the study were provided the

records or transcriptions of their participation to ensure that the evidence reflected their

experience. This is important given that the researcher's role and connection to the participants

could have interfered with her ability to record information accurately and unobjectively. An

audit trial was also used to review the research process. This included documentation, fieldnotes

and codebooks that provided physical evidence of the work and promoted rigor.

Transferability

Transferability refers to the extent that a study's findings can be transferred to other contexts, situations, or scenarios (Hays & Singh, 2012). It is the degree to which the study can provide enough detailed information so that the audience is able to determine and select their own applicable findings. Providing a thick, rich description of the research context, process and findings promoted broader transferability for qualitative studies. In the present study, the researcher provided these types of descriptions through the utilization of a codebook, fieldnotes, and other forms of data that incorporated direct interviewee quotes. The triangulation of data is another method used to increase transferability. In the present study, the design used multiple sources of evidence, i.e., interviews, documentary information, observations, to triangulate data and to compare findings. This helped the study to illuminate features of the underlying phenomenon from various perspectives and promoted additional transferability.

Dependability

Dependability of a study refers to its ability to produce consistent results across time and context (Hays & Singh, 2012). A dependable study will produce similar findings when conducted in various situations. To improve dependability, the present study used triangulation of the data and maintain an audit trial of the research process.

Confirmability

To achieve confirmability, a study's findings must be genuinely representative of its participants' voices (Hays & Singh, 2012). This requires the researcher to have had minimal interference over the data to ensure that they reported the evidence is as objective as possible. Other researchers should be able to conclude similar findings of the same study. To account for confirmability in the present study, the, the researcher explicitly outlined all steps in the audit trial reflexive journal. In addition, the researcher and case study team recorded all evidence and

data by using audio-recordings or transcriptions in physical formats to provide to detail the study's path.

Summary

This chapter presented the rationale and research questions behind the present qualitative case-study. The researcher outlined the research's design and methodologies used to guide the process. In addition, she summarized the data collection strategies and cited multiple sources of evidence. The chapter concluded with a discussion on thematic analysis and how it was used to interpret findings as well as the criterion needed to ensure trustworthiness of the study.

CHAPTER FOUR

RESEARCH FINDINGS

Chapter 4 will outline the qualitative findings of the present study that examined how single alternative education setting adapts and implements the PBIS framework for its students with ED. This chapter will review the data collection and analysis methods used to record data from multiple sources of evidence and interpret themes that emerged. The researcher will also provide direct interview quotes and other supporting evidence to strengthen the reliability of the study's findings. This chapter will conclude with a summary and justification for the final consensus codebook.

Review of the Data Collection and Analysis

In an attempt to better understand how the PBIS framework can be modified and adjusted to fit the needs of students with ED, the researcher collected and triangulated evidence from multiple sources of data within one alternative education setting. To begin, the primary researcher first interviewed five of the educators that worked at the school using a semi-structured format. These participants were provided pseudo-names (Educator 1-5 or E1, E2, etc.), then they were asked 15 open-ended questions. Additionally, at the end of the interview, each participant was given the opportunity to expand on any contextual information that was not addressed previously. The researcher audio-recorded and transcribed responses before storing them on an encrypted flash drive to protect confidentiality. Transcriptions were sent to each respondent for member-checking, which allowed for the contents to be edited for clarification and thus depict a more accurate reflection of response. Following the completion of the member-checking process, the three members of the case study team met to conduct the first research committee meeting and to outline the subsequent research process.

During the first case study team meeting, the members agreed upon a schedule and reviewed the method of data analysis, Braun and Clarke's (2006) six-step approach to thematic analysis. The group was then provided the transcription of the first two interviews to review before the next meeting. During the second meeting, the members discussed emerging themes and sub-themes found within these documents, then they were provided the transcriptions of the third, fourth, and fifth interviews. The team repeated this process in the following meeting and discussed strategies for potential data collection from other sources of evidence. This process allowed the team members to familiarize themselves with the data and generate initial codes. The interim of the third and fourth meeting was used to review and update the codebook according to evidence found in documentary information, archival data, and direct observations before again coding this data set as a group. This process allowed the group to search for themes and review themes frequently. The final, or fifth meeting concluded by defining and naming themes and thus, the finalization of the codebook.

Participant Demographics

Each participant completed a demographic form (see Appendix C) before beginning their individual interview with the primary researcher. The five interviewees had all been employed as a staff member of the case-study site for at least one year and had experience implementing PBIS within the student population of ED for at least one year as: an administrator (two participants), a teacher (one participant), or a mental health associate (two participants). Each participant had been operating under the PBIS framework within their current role for at least two years. According to the demographic form, the findings represented responses from: one self-identified Black/African American female, one self-identified Black/African American male, and three self-identified White females. Their ages ranged from 31 to 65-years. Even though all five

participants had been working within the field for at least five years, only three of these individuals had a graduate degree in special education.

Themes

The case-study team identified three overarching themes during the data-analysis phase. The themes emerged from the data collected during the interviews of five educators who adapted and modified the PBIS framework for students with ED in an alternative education setting. The primary researcher also collected data through the examination of archival data, documentary information, and direct observations. This data was used for triangulation purposes and supported the themes and sub-themes that had emerged in the interviews. The first theme was identified as *Strategies and Practices* and included three subthemes. The second theme was categorized as *Data Tracking: Measuring Progress and Outcomes* and included three subthemes. The third theme was identified as *Systems and Structure* and included three subthemes.

List of Themes and Subthemes

1. **Strategies and Practices**
   - 1.1 Prevention Strategies
   - 1.2 Teaching Strategies
   - 1.3 Intervention Strategies

2. **Data Tracking: Measuring Progress and Outcomes**
   - 2.1 The Development of Behavioral Tiers
   - 2.2 The Points and Levels System
   - 2.3 PBIS Plans & Meetings

3. **Systems and Structure**
   - 3.1 Rec., Non-Rec. & Owes Work
   - 3.2 The Use of Common Language & The BARKS Matrix
   - 3.3 Staff Member's Role

Theme One: Strategies and Practices

During the interview process, participants were asked about how they adapted or modified the PBIS framework within their current educational practice of working with students

with ED. Each participant indicated that their primary goal was to create and implement PBIS interventions and strategies that promoted positive behaviors. These practices were also meant to replace the student behaviors that were typically more problematic. While participants were in a variety of roles, three common sub-themes emerged from participant answers and were supported by triangulated data. However, as noted by three participants, "PBIS is not a one-size fits all" approach and relies on "individualization for each student" to be successful. The following section will describe the how these educators utilized and tailored prevention, teaching, and intervention strategies as well as the use of common language to educate their students with ED from a PBIS approach.

Prevention Strategies

> *Let's say that I am on a diet and that candy is my favorite thing in the world. Whenever I see it, I just can't help myself…I have to eat it! Even if I know it's bad for me…even if I know that it's going to give me a cavity…even if I know that it's going to give me a tummy ache…even if I know that it's certainly not going to help my diet! Now, knowing that, where's the last place you should take me? To Willy Wonka's Chocolate Factory…that's for sure! Prevention strategies are kind of like that. -E1*

All five interviewees referenced their reliance on positive and proactive PBIS strategies. In particular, prevention strategies referred to the practices that were preemptive in nature and attempted to prevent problematic behaviors before they occurred. This stems from the idea that students are more likely to use behaviors that they have practiced, so extinguishing the need for students to practice problematic behavior will ultimately decrease the chances of using them in the future. The following section will describe how the alternative education setting utilized PBIS to implement prevention strategies to proactively address problem behaviors and educate their population of students with ED.

E4 stated that, "Our students are classified under the ED disability category. By the time they are placed here, they usually have a long and repetitive history of problematic behavior. This usually manifests in school." E5 claimed that "their backgrounds usually make them more likely to become combative, argumentative, defiant or oppositional, especially toward authority." Three out of four participants stated that without their help, their students would be more likely to engage in these behaviors and were at risk of negative long- or short-term consequences as a result. "That's why our first step is prevention…and it's incorporated throughout every facet of the day." E1 continued:

> In fact, I think the most important part of us using PBIS and it being effective with our students is that we have the structures in place to prevent problem behaviors before they occur. It's difficult to learn in that type of environment…the one where things are always at odds and you're against yourself as well as everyone else around you. It doesn't set the stage for student success. If we eliminate problems before they occur, we can make sure that we are proactively educating our students instead of just putting out continuous fires and reacting to situations as they occur.

Other participants echoed this sentiment about the place of prevention in the school environment. For example, E3, along with two others, indicated that the school's first prevention strategy was to create a positive and nurturing environment. E3 believed that it was mandatory and foundational for students with ED to first feel as though they were in a setting that was conducive for them to learn:

> We want to set them up for success. I feel that a lot of these students have never experienced success before…or maybe rarely so. So, if you set it up so that it's hard for them to fail, it lets them experience that success and that confidence we all need to keep the ball rollin.

E4 discussed how this type of atmosphere helped teachers to proactively address problematic behaviors in the classroom. This participant felt that PBIS related prevention strategies provided

the opportunity for students to implement and practice more positive behaviors, as well as

optimize their ability to learn:

> For example, when I am in the classroom, I might ask a response to a question and say, 'Who can raise their hand and tell me the answer to number 1?' Even though the procedures are posted all over, students with ED can be impulsive and this way the students are reminded to raise their hand first which avoids me having to redirect them for blurting out…avoids them arguing with each other for calling out…which ultimately avoids the escalation of these situations into major problems. Or, I might tell a student, 'I'm going to call on you to answer number 5 and you for number 6.' Which like I said before, makes it so the students don't have to call out because they know that they have an assigned number and that will be their turn to respond. It also helps because if students are randomly called upon, they might act out to avoid doing work or having to answer because they may not know it or they may not have been paying attention…but this this keeps them engaged, which is a positive and helps decrease the chances of problems stemming from these types of situations.

To support teachers during instruction, each classroom was staffed with at least one

mental health associate (MHA). According to Educators 1, 3, 4 and 5, MHAs were equally

responsible for implementing PBIS and the corresponding system of behavioral management. E5

noted that in his role as an MHA, he relied on prevention strategies, "just as much as the

teachers." During his interview, he recalled the first time he recognized the importance of using

prevention strategies, "before students even enter the classroom." He described a previous

student that presented as withdrawn and avoidant and displayed the characteristics consistent

with more internalized ED behaviors. E5 noted that the student's behavioral progression was

marked with periods of "high-highs and low-lows" but noticed that a certain prevention strategy

seemed to help his students begin the day in "more positive space." He described this process as

the student matriculated throughout the year:

> I noticed that this student's behavioral improvements were more likely to be on the same days that he was able 'check-in' with his favorite staff in the morning. Does this mean that he has to see that staff or he has a bad day? That his whole day should be based on whether or not he gets to see this person? Of course not. But, this student had an extensive trauma history and what it might say is that this student feels safer knowing the person that he has established a safe connection with is in the building. Knowing this

might help him feel a little more equipped to take on the day and if a brief 'check-in' is going to prevent some behaviors from occurring, or set the stage for him to be able to try new things and implement positive behaviors knowing that safety net is there…I'm all for trying that.

Data collected throughout the interview process suggested that staff members relied heavily on prevention strategies to provide a basic foundation for their students to learn and grow. This belief was also supported in non-interview related data. Evidence found while the case study team reviewed documentary information and archival records suggested that staff members received training on how to implement tiers of behavioral management according to the PBIS framework. The guides, workshops, and trainings found within these sources emphasized the importance of providing proactive strategies as the primary and universal tier. This means that the prevention mindset was interwoven into every facet of the day, including how staff members were trained to educate or interact with students and structure their curriculum in alignment with PBIS. Although prevention was the school's initial method of PBIS implementation, data from all sources suggested that it was equally important to teach students about their problematic behaviors and how to replace them more positively. The following section will describe the teaching strategies utilized by the school to incorporate PBIS and meet their population of students' needs.

Teaching Strategies

Our students may be identified as ED, but they are really no different than us in that way. We do what we know to get what we need…then, like Maya Angelou says, 'When you know better, you do better'. Our students just need a little extra help with the 'know better' part. -E2

Throughout their interviews, all five educators suggested that their population of students struggled to implement the "positive behaviors" that the PBIS acronym referred to. Interviewees attributed these gaps and deficits in typical development to various factors and aspects of their

circumstance. However, evidence collected during the research process recognized that an important part of working with the PBIS framework at this intersection is promoting the use of positive behaviors. "But to do this, students must first learn what it is we mean by that," admitted E1. The following section will examine the teaching strategies used by the alternative educational setting to educate its students with ED using the PBIS approach.

E1, E4, and E5 recognized that students exhibit problematic behavior for a multitude of reasons. However, all five participants noted that their student roster shared certain experiences within their backgrounds that likely contributed to their development of their ED. E1 suggested that students' initial use of problematic behaviors was likely due to reasons beyond their control and were then reinforced as they gained their wants and needs. This prevented students from learning and applying more positive behaviors throughout their childhood which eventually manifested as the behavioral symptoms of ED. E5 explained how the school's application of PBIS helped students stemming from these types of situations:

> If I am a student that is commonly tasked with being the 'adult' in the house, I may not have gotten the opportunity to watch how an adult should act when they are happy, mad, or sad. Or, if I am a student raised in a family that doesn't practice using 'positive coping strategies' when I am feeling mad or sad, then I still don't know what to do" explained E5, "we have to assume that our students don't necessarily know how to implement these positive behaviors that we preach and teach them how to do things that are aligned with that. After lunch everyday, I spend 30 minutes teaching my students about positive and even sometimes negative behaviors. We do things like read socio-emotional learning stories, act out role-plays, update our sensory areas and coping skills cubes (they love making new cool down jars). This way, my students are repeatedly learning and processing various types of 'positive behaviors' and how to implement in a variety of ways.

This mentality was echoed by three other interviewees, E1, E2, and E3. These participants suggested that to compensate for this area of limitations, students must first be taught the behaviors that staff members expect to see. Teaching behavioral expectations can then later provide the foundation for students to engage in these actions and replace previously

negative behaviors with those more positive. "That's why it is so important that we continuously teach, re-teach and reinforce," stated E1. E3 illustrated reflected a similar sentiment in the following statement:

> Alternative schools, historically speaking, have been a place used for kids that were acting out in more traditional school settings. It's almost even like it was as a punishment or punitive…kids get kicked out or act up in the community and get sent to schools like this with people who can 'handle' their behaviors. You'll even hear kids say, "so, what got you here?" almost like they're in locked up somewhere. Which to me, seems like they believe that they are 'bad' and that school is now their punishment. Think about that…school is a 'punishment.' Imagine the type of message that sends to kids about themselves and about their education. "If a baseball coach never taught you how to hold the bat, you'd never learn how to swing. If he yelled, 'Don't hold it like that!' instead of showing you, 'Here's how you should hold it.' you'd never learn. As you got older, even if you did learn how hold the bat…the coach would eventually need to tell you how to hold the bat differently for different pitches. If he didn't, you'd be hitting ground balls the same way you hit curveballs because it's what you knew how to do. If he took you out of the game, out of the stadium every time you messed up (despite not being coach better)…you'd never hit a homerun.

Non-interview and interview related data suggested that there were some situations, factors, or behaviors that were unable to be prevented before they occurred. Equally, teaching advantageous behaviors did not necessarily eradicate the existence, presence or use of those that were mor problematic. In these events, staff members needed to be able to intervene and meet the needs of their students while still operating under the PBIS approach. The following section will describe how the school applied the PBIS framework to intervene at during these times.

Intervention Strategies

> *The importance of positive intervention is often overlooked in this population. Educating some of the most defeating kids, it'd be easy to rely on negative forms of punishment. You know, these kids are, the ones that call you out your name, are physically aggressive, go out of their way to make your day miserable. ...and at times, there's a whole class of them. But hurt people, hurt people. These kids are screaming for help…help with their confidence, their self-esteem. It's a perfect opportunity to build people up. So you look for things about them that are positive, things that they can build off of and you build off that. – E3*

The five participants interviewed for data collection addressed the use of positive

intervention strategies throughout their interview. As opposed to prevention strategies that aimed

to prevent problems before they occurred, intervention strategies described those in which staff

members relied upon to intervene when negative behaviors occurred. The interviewees described

that the purposes of intervention methods were two-fold: to promote the use of positive

behaviors and decrease the need and use of those more negative. The following section will

review the various intervention strategies used by the alternative educational setting in order to

educate students with ED from a PBIS approach.

Throughout participant interviews, all staff members described a variety of intervention

strategies that they used to reinforce positive student behaviors throughout the day. Interventions

at the school were designed to meet the needs of each students as well as those that were specific

to the population. In addition, participants indicated that interventions were most likely to

reinforce positive behaviors when they were delivered in a manner that was consistent and

positively based. E2 connected the rationale their approach to the needs of the student

population:

> We might know that a student struggles to follow most rules, in most occasions, in most
> settings. So, if he's raising his hand so we are going to take the reinforcement philosophy
> and apply it immediately. In my experience in other settings if the student raises his hand
> and then calls out, the positive reinforcement might not exist because he still called out.
> But from a PBIS approach, we are working on the behaviors that we want to increase…
> raising your hand is something positive if you've rarely done it before. So, we are going
> to immediately reinforce you raising your hand and address the calling out separately.
> This isn't to say we ignore everything, but a positive reinforcement could be something
> small like, 'I love the way you raised your hand before calling out.' If the student is just
> calling out all day everyday and never raises his hand, when he finally does, he's going to
> get frustrated and might give up if when he raises his hand the teacher doesn't call on him
> or starts redirecting him about calling out without even acknowledging that he at least
> raises his hand, which is something he never does, you know?

Given that the school uses rewards, incentives, and positive reinforcement to instill

behavioral change within students, it is important that interventions are individualized to the

preferences of each student. In fact, non-interview data collected from the school's PBIS archival

records indicated that staff members frequently utilized preference sheets to determine their

students wants and needs. Archival records indicated that these sheets were distributed to each

student in the beginning of the year and at least once throughout each semester. PBIS treatment

plans and related documentary information suggested that these preferences and motivators were

then incorporated into the individual intervention strategies used for each student to strengthen

their effectiveness. E1 described how the school can create intervention strategies by providing

an example of a student that was incentive by candy:

> I think of it like this, if I do the right thing, I get rewarded for that. I get this M&M and I like candy, so, I continue to do it because I'm getting something out of it." I think kids behave in a certain way because they're ultimately 'get something out of it.' The problem behaviors are must be getting them more of what they want than what they'll lose. So in the beginning, that's, that's what they're doing it for a tangible item for an incentive that's okay. I'll give you all the M&Ms you want as long as you keep raising that hand or whatever the goal.

The importance of individualizing PBIS intervention strategies for each student was

discussed by all five participants. However, participants explained how similar preferences and

motivators of behavior can be applied to the entire population of students. E3 described a class

that shared similar preferences and manifestations of ED consistent behaviors. This participant

explained how the preferences of the group was incorporated into her application of intervention

strategies that reinforced positive behavior in the classroom:

> I remember one year, I had a class that was just…just all over the place. A group of about eight high-school boys that all needed the same English credit. Now, all of them had their own behavioral problems, but collectively it was a nightmare for me. They called out…constantly which was what caused even more problems. They would argue that the other called out and didn't give them a chance, or the quieter ones would just withdraw and refrain from engaging all together. We spent so much time on redirecting behaviors. So, I realized they all had a sweet tooth and the next day, I put little dixie cups on their desk if they followed the rules of the classroom appropriately, like raising their hand, me or the MHA came to their desk and dropped off an M&M. If a student called out, I

simply gave an M&M to everyone that raised their hand. I wasn't punishing, I wasn't engaging in a power struggle, but that really worked for that group and it was positive for us all because the class wasn't spent on negative behaviors and the kids that just wanted a reward were able to take control of their own behaviors in a tangible way.

Whether the school is attempting to promote positive behaviors from an individual student or group, these methods also aim to mitigate the frequency, intensity, or severity of problem behaviors. E5 provided the following anecdote to illustrate how intervention strategies were used in this way:

> Let's say a student walked out of the room during a test. After processing with the student, you find out they got so overwhelmed with the material and not knowing the answer they walked out instead of flipping the desk or throwing their stud. Keep in mind, many of our students have learning disabilities as well…. so now a punishment mentality of intervention might suggest that since the student walked out when they weren't supposed to, they must get punished by sitting in the Breakroom all day. It sends the message that students aren't suppose to leave the classroom, but is that really productive? Now, a consequence mentality of intervention might suggest that the student can't return to the class period that the other students are taking the test. It's more constructive to reinforce that at times, we all need a break…but we all don't walk out of class. So, I might approach it like, 'You said you walked out cause you needed a break…so let's give you a break. Then, then we will makeup the test later during lunch or during brain break. Which of those two would you prefer?' A logical consequence is that when you walk out of a room, you can't just return when you please but, I'm not going to punish you for it by removing your opportunity to learn and grow…you just may not be able to say when and how. The consequence aims to reinforce the fact that he is going to take that test and that he cannot avoid difficult situations in life this way and that he is going to have to take the test at one point or another. We want to help him break down what happened so that he can avoid doing it again. We also want to reinforce that we are all humans that make mistakes and provide him the humility to recover.

Although interventions were used to decrease the use of negative behaviors, three out of five participants indicated they utilized PBIS to apply negative reinforcement instead of punishment. This is because PBIS intervention strategies are not punitive, or punishment based, according to all five participants. Equally, non-interview related data indicated that staff member trainings and corresponding training documents outlined the difference between negative reinforcement, consequences, and punishments. E5 stated that during a PBIS training, one

document described how the goals of each of these methods was different. This helped E5 better

conceptualize how interventions included this lesson, as explained in the following statement:

> The goal of a consequence is for students to recognize that they did something wrong and
> learning the logical process of that. Our intervention strategies allow us to work through
> it with the kids and help them come up with different strategies for next time. To me, it is
> more process focused.

Educators E2 and E3 credited the same training with a better understanding of how these

goals of these intervention strategies related to PBIS. The following statement was the

recollection of one participant from that training:

> For example, we call it redirection or intervention so that students and staff in the mindset
> of, "How can we direct these behaviors away from the negative and toward the positive?
> How can we intervene to support the students during these times? How can we prevent
> their use and therefore, their continued practice further which really strengthens them to
> begin with?" When we we're offering redirection, it shouldn't be in an embarrassing
> shameful manner. You're not shaming them into compliance.

 In conclusion, data collected and analyzed from interviews, archival records,

documentary information, and student files suggested that the school organized its adaptations

and modifications to the PBIS framework in three ways. These practices were used to promote

the positive and decrease the negative behaviors of students with ED to provide an effective

education. In addition, the school's prevention, intervention, and teaching strategies were used to

proactively address problematic behavior and replace them with those that were more conducive

to their learning. However, it is difficult to determine whether these strategies were effective

without a measure of progress and growth. The following section will describe the manner in

which the school ensured that these practices were effective in providing the desired student

outcomes.

Theme Two: Data tracking, Measuring Progress and Outcomes

> *The PBIS framework is good as just that…a framework. Different things need to be*
> *added or adjusted to meet the needs of a diverse population. In our case…our modified*

framework should be effective for at least 80% of the population. Our modified framework with supplements should be effective for another 15%. But, our more serious resources should be reserved for the last 2%-5% of our students. When this isn't the case, when we are relying on the interventions and supports that we've reserved for the smallest percent of the population, then it is an "us" problem that's not accounted for. E5

Each of the five participants used a variety of interventions and strategies to implement PBIS within their setting and role. These practices were used to meet the needs of individual students as well as those consistent with the population of ED. To determine the effectiveness and appropriateness of these individualizations, interviewees relied on PBIS-related data recorded throughout the year. "We want to know about their growth just as much as they do and support them as much as we can. We need effective and accurate data to do that." The following section will describe the data-related process used by the school to measure progress and track the behavioral growth of their students.

The Development of Behavioral Tiers

I think at our core, everyone wants to feel like they belong. We want to feel accepted and important. With the help of PBIS, we are able to provide a positive, nurturing and loving climate and culture despite their past. My hope is that all students feel welcomed and supported here and eventually, that they'll trust us enough to help them with their goals. Some students thrive in this type of environment and we see that. Other students take a little more work to convince but they come around. A small few just don't buy in that's one of the most disheartening things to see. But, I try to think of statistics and that normalized bell curve…there will be outliers but no matter what, you don't give up. -E4

E1 and E5 identified that to begin collecting data for PBIS implementation, baseline data must be collected. E1 stated:

We use the first month of the traditional school term (September) to observe the students, their respective behaviors and their needs. Of course, we have information about them from previous years if they've been here, but even with new students we have access to their IEPs, case workers' reports, and things like that. But, we want to be able to observe the behaviors independently from a PBIS perspective. We can start to observe the aspects of the program they're responsive to, what they are less responsive to or any motivators. This will help us formulate their baseline level of behavior and their corresponding treatment plans.

While reviewing the non-interview data collected for analysis, the case-study team found a completed functional behavioral assessment, or FBA for each student. These assessments seemed formatted to help guide the observations of student behavior and support staff members in identifying underlying intentions or a root cause. The case-study team noted that each FBA concluded with a theory or hypothesis of each student's behavior that were then used to formulate their treatment plan goals. The completion dates of each FBA suggested that they were completed within their first month of enrollment and validated through the correlation of each student's initial paperwork. During interviews, E1, E2, and E5 referred to their use of the FBAs to collect baseline data. E5 summarized their use:

> The MHA in the student's homeroom can complete a functional behavioral assessment or analysis on each student. This helps determine the functions of some of their more problematic behaviors, ultimately gaining or avoiding something, and make corresponding PBIS plans behavioral treatment plans that they will more likely respond to.

E2 suggested that by observing the students' behaviors and interactions for a month, staff members are better able to assess their level of need:

> The data on those students along with our personal experiences we separate each student into tiers of need. The first tier should include majority of students. This tier is the tier that our school-wide PBIS interventions are working for. These students are buying into the program, the rewards, the level system with minimal resistance or difficulty. The next tier of students are the ones that are continuing to exhibit problematic behaviors but are able to demonstrate positive behaviors with more individualized or additional interventions and supports. They are responding to more personalized incentives, interventions opportunities, things like that. Then, the tier three students are the ones at the top of the triangle and are our most severe problem areas. They are demonstrating a high instance of things like Breakroom use-age, restraints, secured holds…things like that. These are the students that we need to take time to develop serious plans for and even maybe the PBIS team lead can set up meetings with the program manager to get support further. This should only be about three to five students out of the 50 on each side. We expect our students with ED and more specifically, conduct disorders to go out of their way to not comply with framework, but categorizing the students in this manner helps us visual the type of support certain students need. Once we've organized this pyramid, we re-evaluate and discuss it at least twice during a semester. We come up with

interventions to use with some of the students who aren't finding success within the global framework. Except at this time, we are comparing our tiers to the previous ones to search for any problem areas or students that are moving up or down tiers, in a negative or positive way.

E1, E2, and E3 noted that the development of behavioral tiers also helps them to remain accountable. E1 indicated that:

If our tiers are over or under-represented, we know that the responsibility lies within us. We shouldn't be applying tier 3 interventions and supports to all of our students, we would be drained, burned-out, over-extended. It would say that whatever we are doing at the school-wide level …it isn't working our culture and climate and we'd need to fix that.

In fact, the importance of staff member's accountability was identified by all participants. Four out of five of these individuals suggested that without it, it was difficult to accurately assess or measure student growth. This statement was corroborated during the examination of non-interview related data that showed staff members were expected to complete accountability checks throughout the year. This was evidenced in the form of the school's archival records and documentary information that showed staff members were evaluated annually on their fidelity to the PBIS program. Equally, the school itself was evaluated on its ability and fidelity to provide PBIS from a programmatic and systematic approach. According to this data, the school's method of behavioral management, or the Points and Levels System was a major consideration in the evaluations. The following section will examine this system and discuss how it is used to track progress and monitor student growth.

The Points and Levels System

But I've seen what having confidence, what instilling success and what feeling that sense of accomplishment can do for kids like this. That's really what we are trying to do with PBIS if you think about it, give students the opportunities, motivation and tools to experience success until they can do those things for themselves. -E4

The points and levels system was described by all interviewees as the school's system of behavioral management. This system of points is a numerical strategy used to account to help

staff and student's measure and track individual progress. During each class period of the day, students worked to "earn" as described by all participants, a set of points that coincided with their behavior based on the BARKS matrix. E4 explained:

> That's the thing with PBIS, the students are always working to earn so it's a positive. We don't take away for negative or punish, you just earned a set of points based on your ability to demonstrate the behaviors. But that's why I appreciate this philosophy, it helps the students remain accountable because they earned their points instead of the staff members taking them away, which helps them avoid responsibility and place blame elsewhere. At the time, it empowers the students that they are in control, which, in my experience they appreciate.

Students' points are reflected by a 0–3-point value system for each letter of BARKS for each period of the day. For example, there are 15 points possible for each block of their academic day, including lunch. Given that there are 7 periods of the day, including lunch, a student can earn up to 105 points daily. The weekly averages of these points help students become promoted up through the level system and provide their behavioral standing within the school. Evidence of the points was collected during observations of the school and examinations of student files as well as PBIS related records. These sources corroborated the participant's statements about its application and use. In addition, student enrollment records and behavioral progress notes indicated that all students enter the school as a Level 1 but become promoted to Level 2, 3, 4 and "Off- Level" by earning a certain number of points for their daily and weekly averages. Each level tier must earn a minimum number of points daily to "make their day" and earn a "blue day." Each level tier also has a certain amount of "blue days" to "make their week," which allows them to put in an application for a level promotion. If the students earn a certain number of "red" days for a certain amount of weeks, they are placed on a "freeze" and are at risk of "losing their level" if behaviors continue. During observations of the school, the case-study team noted that each classroom displayed their student's behavioral points, red and blue days,

current level on a whiteboard in the front of the classroom. Training records examined during the

non-interview data collection process indicated that this placement was used so that students can

track their own progress and help one another remain accountable. These averages and

percentages are determined based on the student's level and grow increasingly more difficult as

the students become promoted up the system. "One motivation for maintaining or earning your

level," stated E5, "is the incentives or privileges that are associated with each." E5 also shared

felt certain rewards and privileges were more motivating than others:

> I think one of the big things for Level 2 is that it is one step up from the base level, so I think Level 1s are more motivated to get to Level 2 because that's where most of the rewards start and what most of their friends are on. You know, all the rec. activities have a component that are only for Level 2s and higher. You have to be on Level 2 to participate in physical sports or activities, to leave the building for recreational field trips or activities…use the microwave. Level 3s and higher are the ones that are starting to take on leadership roles. I think the big Level 3 motivator is that they can use staff keys with their permission. This means they can use the restroom or get water without an escort. They can have lunch in another room. They can visit with another class. You have to be at least a Level 3 to use the video game systems for rec. I think the Level 4s like being able to have access to snacks or drinks that are for staff or order out with them at lunch the most. Oh and use the lounge. Off-Levels don't even have to carry a point-sheet, but usually only about two or three students are off-levels so that's definitely our hardest level to maintain.

When asked about other motivations to maintain their levels, three of the participants

identified the sense of belonging, leadership, and confidence that came with being a higher level.

E2 stated:

> I think we really make a big deal out of the levels. The have a club, they can run for student office, they can wear staff shirts, they even go on separate field trips. So, we try to make the following the rules and doing what you're supposed to do the 'cool' thing, so it needs to be motivating for the kids to become interested in doing what it takes to get there. Then, once they earn this status, we celebrate it. I think this helps give the kids the sense that they belong to something. They have a group of people that is similar to them where they can feel accepted. In my opinion, this helps with accountability and lets them experience success and how it feels to be doing something positive. Hopefully, that's something that keeps them bought in.

PBIS Plans & Meetings

I think about it like this: the two worst types of people on a road-trip are the guy that falls asleep and the backseat driver. The best is the one that picks good music and reads the roadmap to you for directions. In this scenario, the kids are learning how to drive their own car and we are riding shotgun with the PBIS plans on the dash. -E5

The development of behavioral tiers occurs during the last week of September and is reviewed throughout the year. However, the first month of baseline data is not only used to formulate the behavioral tiers, but also to create PBIS plans. "We use the baseline data to create two PBIS plans for each student. This plan will influence and determine of use of positive behavioral interventions and supports, so they are vital to our work with each student," stated E2. "Each PBIS plan has a PBIS goal. If IEPs are to academics, then PBIS plans are to behaviors. In my opinion, although they are different, a good PBIS goal will align with an IEP or at the least, support it." E3 stated that "PBIS treatment plans and goals outline the behaviors we want to see them do. These are the things we are trying to promote." Examples of PBIS goals found in treatment plans were being able to comply with school policies and procedures, developing positive coping skills, engaging in respectful interactions with staff and peers, and implementing productive study habits. E5 explained that "PBIS goals are dependent on the function of the behavior as well as the problem behaviors we are observing." The MHA also identifies an objective that the student is working on to reach their goal. Examples of objectives found in PBIS plans were complying with staff redirection upon first prompt, using replacement or substitution words for profane language, utilizing a previously identified emotional regulation strategy and engaging in didactic activities with a peer partner. Each plan also outlines specific intervention, prevention, and teaching strategies that are conducive for the individual student. This portion is continuously revised and updated as certain information becomes apparent. For example, a student's intervention strategies might include the use of choice theory. A student's prevention strategy might state that he is to check-in with his preferred staff upon his arrival to

school. A teaching strategy might outline how the staff is expected to teach the student about the

plan using role-play. The final portion of the plan provides a space for each month's progress

and a key to indicate student's growth toward these goals. E2 explained:

> It's important that these plans are worded in a positive frame. For example, instead of saying that a student will not fight his peers, we must say something like he will be able to engage in conflict-resolution skills, or implement anger management strategies, just depending on the function of his behavior. It's all about the things we are implementing to take steps toward that goal. Each plan is then finalized and approved by the therapist within the first week of October, so the students and staff can begin to get to work.

The therapists, PBIS leader, and MHA's attend a meeting at least twice a week to report

on PBIS progress and updates. The high school staff meets on Tuesdays and Wednesdays and the

lower school staff meets on Wednesdays and Thursdays. On Fridays, the remaining staff

members of each side meet respectively, to collaborate on the content discussed during the other

meetings, although PBIS is not its sole purpose. E4 elaborated on the purposes of these meetings:

> We use PBIS meetings to discuss the PBIS treatment plans, goals, and updates. The MHA will read the student's PBIS goal and the objective and ask for staff's feedback on the student's progress. I think it's helpful because not everybody sees the same students all the time or sees them in the same way. The MHA's are tasked with the upkeep of their student's PBIS plans, but I think it's helpful to discuss the students and their goals as a group. For example, if there is a student who uses classroom disruption to avoid challenging work or asking for help, I may not be able to accurately report on his goal if I never seen him in that environment because I only see him during lunch and his favorite subject of science.

E1 indicated that the PBIS meetings are particularly helpful for collaboration amongst

staff members:

> Sometimes, I struggle to create and identify different interventions or supports that might work. It's nice to be able to come to the meetings with others that might offer different perspectives or objectives. I think it makes it better for the students because they strategies from a team of individuals versus one person. Although we discuss each student monthly, any student can be brought up at any time during a meeting because it is our job to monitor our student's progress daily. If their points, their interactions, and their behaviors are not indicating that there is no change in their behavior, or even a regression, it's our job bring these to the meeting's attention and pose the student's plan for discussion.

One of the ways in which staff members can do this, is by evaluating the school's

systems and structures that are in place. In fact, assessing these factors is essential to ensure that

the methods of tracking student progress and measuring behavioral outcomes are reflecting

accurate assessments of the program. The following section will discuss the systems and

structures that the school used to facilitate and sustain PBIS implementation for its population of

students with ED.

Theme Three: Systems and Structure

> *When I was first introduced to PBIS, I think I was a little hesitant…maybe even resistant. I remember sitting in the trainings thinking to myself, 'We already do this. Of course, we are positive and believe in the kids. Of course, we are putting things in place for the students to be successful. That's a basic goal of special education. Why am I sitting here being trained on things I already know?' But, the more I listened, the more that I realized that we didn't actually embody the full concept of the program. We didn't have the core components of the approach. PBIS isn't just a philosophy with lofty ides where everything's rainbows and butterflies, there's actual evidence-based research to support and guide its practices. Once I realized that, I knew we were going to have to make some changes,…not only in the way we were structured, but in the way we worked.- E5*

Data collected through the research process indicated that the school required certain

systems and structures for successful PBIS implementation. The following section will describe

the changes made to the school's programmatic components and organizational structure. It will

also identify subthemes that emerged as participated described their ability to provide effective

education and maintain fidelity to the PBIS program.

Rec., Non-Rec., & Owes Work

Every week, staff and students participate in what interviewee's called, "Rec." for the last

two and a half hours of every Friday. This event seemed to be the culmination of the schools

PBIS strategies in practice. "This where we try to like incorporate outside activities, technology-

based programs, work-based learning opportunities," discussed E1:

We have video games systems and a room that is used to watch movies, usually a group that is playing a sporting game like football, kickball basketball, outside. These are fun activities that students can choose to engage in, it's the culmination of their weekly work. We have daily incentives, of course. But I think Rec. is the idea that we are rewarding you for the consistent practice of your positive behaviors. We are acknowledging that it's hard, but that hard work pays off.

During interviews, participants referred to a "rec. sign-up sheet." This sheet was used so that students were able to preview their choices for the upcoming rec. and select the choice that was most rewarding to them. Non-interview data corroborated the use of this sheet and suggested that it was distributed weekly for staff to make necessary changes. The case-study team found evidence of this document during their examination of archival records and PBIS-related documentary information. Archival records indicated that this sign-up sheet also provided a schedule for a special rec. snack to increase the motivation for this incentive. Equally, the case-study's examination of this physical document revealed that students were provided the opportunity to change their selection one time after attending the designated rec. activity. E3 stated, "For certain students, the activity is less important than the staff and students present. If we don't allow them to make changes, then we risk the motivational factors for those who just want to be social." In particular, E1 noted that this event tries to account for various types of factors that students find rewarding:

They like being able to pick the activity that they do, one because they like to have control and it makes it more of a reward if you're getting to do what you want instead of being forced to do something that everyone thinks is fun that you don't. Again, we really try to hype it up and make it a positive experience, so the fact that they can see which of their staff and peers will be there is helpful to. For students more motivated by that quality time, they can choose it based on that. They also are able to switch the activity to a different room within the first few minutes so that it really is motivating. We are trying to prevent problem behaviors, so this system also gives us the chance to let the students be with their select peers, in a positive way. We can also see if there are students or situations that increase our chance for problems or conflict and try to do what we can to prevent it.

E4 believed that this weekly activity provided implications and lessons that students could

apply inside and outside of school:

> Rec. is helpful because and our students know that they have to make a certain amount of their percentage points every week to make it. I like when the kids will try to convince us to do something for rec. because that shows me they are starting to believe in themselves. They're bought in and looking forward to it. It seems like they're more motivated to make because they came up with the idea, and in a way, it's reminds me of setting a goal. There's something you want to do and you have to work at it daily to get it. We will support you throughout the week, and then, when you get it we'll be here to celebrate that too. To me, it's a direct parallel to life and I love being able to process this later on with them. Sometimes, it's evidence that they need to see to know they can accomplish something when they put their mind to it.

Given that students with ED have behavioral issues that transcend outside of school, three participants noted that applications to other scenarios was particularly important for this population. E2 discussed how the school applied PBIS to builds the tools needed for both situations:

> The trick is to find something fun that they want to so that they can continue to practice the use of behaviors we want to see. During rec., staff is also providing the opportunity to build their social skills in a positive and engaging way. Things taking turns, sharing, interacting with others are all things that our population of students struggle with. This is the chance to use real-life application of the behavioral intervention and supports we've been teaching, modeling and learning.

E3 explained the how this event incorporates the basic tenets of PBIS to reinforce positive behaviors for students with ED:

> I love when we are able to take the students to equine therapy or to volunteer. It's always crazy to me how this population of students becomes drawn to these opportunities. With their behaviors, it's amazing to see them grow and become invested and motivated by positivity. In these situations, they're choosing to spend their hard-earned time helping themselves and others. I mean, these are things that they are signing up to do. Even if they are originally just doing it to spend time with select students or staff, these events are still increasing their chances of practicing positivity, something they are rarely used to. It's invaluable.

E5 noted the interpersonal characteristics that this process facilitated within this population:

This helps foster resiliency and tenacity…you know, grit. The students learn that, much like life, you don't always have to be perfect, but a string of mistakes is a choice. They learn you can't give up doesn't get you what you want and that one day doesn't equal a bad week, but even small negative choices add up.. However, you are in control and it's only up to you. You might fall down, that's part of life…but, do you get back up?

The reinforcement of resiliency was also built into the student's opportunity to earn rec. According to non-interview related data found in PBIS trainings, it was important to show students that their mistakes "do not define them" and that "every day is a new opportunity." E1 stated that this mindset factored into the student's ability to re-earn rec. weekly. Equally, if students had missing work or did not earn the points needed, participants and non-interview data indicated that students spent this time in "non-rec." or "owes work." This was to encourage each student's resiliency and build on positive factors when present. E5 described the underlying concepts behind these alternatives:

I think that's what makes this tool so successful. The fact that students did not earn rec. is not treated as a punitive punishment. It's a cumulative consequence and allows the ownership more with the student. In non-rec, the students don't get to pick their activity like outside or video games. They can't pick the staff or peers they want to be with. They don't get the special rec. snack. But, we don't expect the students to sit in the corner and face the wall silently the whole time. That's counterproductive. I've seen staff play cards or a game in non-rec. and that's not seen as a bad thing. Sometimes, they all process about why each student is there that week like, 'What went wrong? I know you want to be able to go to rec., so what can we do next week to make sure you're getting to do that?' PBIS is using this as an opportunity to work closer with students and build the relationship. This processing is important part of PBIS and I think distinctively so here, because we aren't using non-rec. as a 'non' opportunity to start some change.

Although students were placed in owes work and non-rec. when they did not earn rec., the goals of these events were perceived differently. Non-interview data collected during reviews of the school's files, student records, and PBIS related documents corroborated these differences in perspectives and reflected of the school separated the two from a PBIS approach. Interview data from E2, E3, and E4 also referred to how the school accounted for these differences to meet

the needs of this population from a proactive standpoint. E3 provided the following explanation

and theory behind non-rec.:

> In theory, the concept of non-rec. is the 'punishment', so making it miserable and worse for our type of students is only going to fuel their desire to defy our and start any type of power struggle. However, PBIS consequences are different than punitive forms of punishment, which is why with things like 'owes work' are more successful in my opinion. Students in owes work did not earn rec. solely because of their missing or incomplete academic assignments. Otherwise, behaviorally, they have made their points. A contingency of rec. is that students are not able to attend if they have missing work, regardless of their behaviors. So, students in owes work are still having to receive the consequences of not being able to go to rec. initially or on-time. However, they can attend rec. once all of their work is completed and approved by the staff assigned to that room.

> E2 provided the rationale behind this approach and described how PBIS accounted for

these events respectively:

> Although the points reflect students' behavior, it doesn't always account for the 'why'. We know our students have emotional disabilities that directly impact their academics so it is reasonable to consider that although they may be doing everything they can to keep it together, emotionally, this may not translate in their academics. At the same time, we want to help them take accountability for their actions. So, if their points indicate that they've earned rec., but have missing work, it's reasonable to allow students to attend rec., once they've completed their work. It may have been one day's worth of work, or maybe one assignment or maybe a whole week. But, in my experience, the kids respond more favorably to these type of consequences rather than, 'You're not doing this. We're taking this away. Forget it, you're never going to XYZ' or whatever the case. By allowing this, we can help our students re-frame to take accountability and responsibility for their actions rather than someone else in control.

To empower students to take more control, accountability, and responsibility the school

utilized a system of common language to outline student's behaviors. This common language

helps uses language that helps students take ownership of their behaviors and ensures

consistency throughout the school. In fact, behavioral expectations that outline behaviors

necessary to earn events such as rec., owes work, or non-rec. are clearly outlined in a behavioral

matrix that is visible throughout settings. The following section will discuss how the school

utilized a common language and behavioral matrix to implement and maintain the PBIS

framework for students with ED.

The Use of Common Language The BARKS Matrix

> *The BARKS matrix is posted everywhere, and I mean everywhere. This is so that students are constantly aware and reinforced about the behavioral standards. Each letter represents a different aspect, characteristics or trait that the students aim to align their behavior with. We call 'common language' the practice of using standardized language throughout out building This helps staff and student ensure they have the same understanding of what's expected of them. -E5*

Throughout interviews, all five participants identified the BARKS Matrix as one of the

main interventions and strategies to implement PBIS. The term "BARKS" is an acronym that

refers to each one of the core-values of the program. As E3 described, "The BARKS matrix is

core to our program." There are five rows down the side of the matric to specifically identify

behaviors that are conducive for positive personal and academic growth. For example, The 'B'

row symbolizes, "Be there, Be ready" behaviors. These are behaviors that the students should

use to indicate preparation and preparedness. The other letters represent the following

expectations: A, accept responsibility; R, respect self and others; K, kindness; S, strive to learn.

There are five columns across the top of the matric to identify the settings or contexts that these

behaviors are expected. For example, the matrix dedicates one column to all general settings, as

well as specifies behaviors between the hallways, the classroom, and the bathroom. The cross-

section of each column or row provides details on how the students should behave. For example,

one-way students can demonstrated *respect for self and others* in the *bathroom* is to *wash their

hands.*

The BARKS matrix is posted in each classroom, bathroom, hallway, office, and location

of the school. Each participant indicated the importance of its visibility at all times. Interviewees

noted the use of common language in the matrix as well. E4 explained:

I would say the development and use of common language is essential to using PBIS. Developing a common language for the school ensures that staff and students are clear and at a mutual understanding of several aspects of the program. It creates continuity, clarity, and consistency throughout our interactions. We use common language to teach, model and reteach the standard set of procedures, policies that are consistent with our expectations. For example, we use the term 'Breakroom' instead of time-out. We provide 'consequences' not punishment. We want to make sure that our language emphasizes the things we want kids to do, instead of focusing on what we don't want.

Common language was embedded through most aspects of the setting. This included the school policies and procedures. As E3 described:

It is so embedded within our program that we use it throughout the school in most all situations. A 'Three S Line' stands for a line that is single, straight, and silent when transitioning from room to room. All of our students know that so if I say, 'I need a 3-S, they know what's expected of them. We use common language to teach, model and reteach standard procedures consistent with expectations, which are three factors of PBIS at its core.

E4 described how PBIS allows for the school to incorporate a consistent, common language into its framework so that it meets the needs of students with ED:

Using a common language also helps us to communicate our messages from a PBIS approach and put us in that mindset. With our population, we have a lot of redirection….which is what we call it our students are engaging in problematic behaviors and we want to redirect their actions to something more positive. Again, with our students that have ED, there are numerous acts of problematic behaviors that require constant intervention. But, if my students and I are talking and out of their seat in the classroom and I'm just yelling at them to 'Stop' or 'Quit', they might not know what I am specifically referring to on top of their predisposition for noncompliant and defiant behaviors. However, if I'm thanking my students for 'Being there and Being ready' they know I am referring to the fact that they need to return back to their seats and have their materials ready.

Given these factors, PBIS implementation depends on staff's ability to modify, adapt, and provide these systems and structures effectively. The following section will outline how staff members at the alternative educational setting played a major role in providing PBIS to educate students in their population.

Staff Member's Role

When it comes down to it, PBIS implementation is more about the staff and less about the students. There's a difference between educating students in alternative education, educating students with disabilities in alternative education and educating students with ED in alternative education. Then, when you add in PBIS it's the same thing. Using PBIS is not the same as using PBIS with students with ED, and it's not the same using PBIS with students with ED in alternative education, so you need training of course. But no amount of training is going to be helpful if the staff members don't believe in it's ability to work. -E1

The collection and analysis of data indicated that PBIS implementation largely relies on the staff. All five participants indicated that their ability to provide trusting relationships and a positive school climate sets the foundation of their setting and potential work. E1 described how PBIS facilitates and utilizes these types of relationships between staff and students:

The act of building rapport, developing trusting and nurturing relationships, and creating an alliance with the students is the what the rest of our interventions and supports build upon. It's a major contributor of the learning environment. Students with ED typically have some sort of conflict with authority figures, that's something that is already working against us so we need to be able to get students to a place where they work with us, not against us so that they want to learn and grow.

Four out of five participants identified that the school's morning arrival procedures were inherent to creating a nurturing school environment and setting a positive tone within the program. E5 explained, "We want to be able to implement PBIS right off the bat and this gives us the opportunity to do that." E1 provided the following illustration of this process:

We have a team of staff members that greet the kids outside immediately as they arrive from transportation. They give hugs, praise, play music so that it's consistently starting with a warm and welcoming environment right off the bat. Then, as the students enter the building every staff member lines the hallway so we can give morning greetings. PBIS attempts to prevent problems before they can occur so this process is serves several purposes. It creates the type of environment our students need to feel supported.

E5 identified additional benefits of this process and exemplified how the staff were able to modify their procedures to incorporate PBIS and meet students' needs: were specific to the school's population of students:

If a student enters the building and maybe is not clean or seems down, we can respond immediately. Their preferred staff would probably come check-in so that they can address the problem. We have showers, laundry machines, etc. and if this is the case, we might offer the student to shower or wash their clothes. We want our students to be set them up for success. We want you to feel confident and capable and that we are on your side, we aren't going to make these types of things a negative because they don't need more of that. Some of our students have such chaotic homelives. They come hungry or tired often. Here, we want to support our students, so maybe they're hungry and need breakfast or maybe they had a long night and need some quiet time or to vent. We will help you succeed if you let us.

In fact, all participants indicated that an essential component of their PBIS implementation was their ability to make students feel that they could be successful. E1, E2, and E4 insisted that without this genuine support, students might not buy into the PBIS framework. E2 explained the importance of staff members communicating a feeling of genuine staff support throughout the day:

We all have a morning routine for our homerooms to start off the day with a positive. Every morning, the MHA in my room and I write each of our students a quick note on their desk. It's nothing major, just maybe a quick, 'Good to see you' or something like that. I know some classes start with a 'rose and thorn, high and low, peaks and pits' type of thing. Here as alternative education we know that no learning, or I guess I should say little learning, can take place with problem behaviors, as long as they're exhibiting behaviors that impedes not only their learning, but the whole learning of the entire classroom. So we're very much aware of that and we approach it as though there are needs that are unmet. If I'm equating it to math, I see it as though there is a negative, a deficit when their needs are unmet we need to give them some positives to offset that.

This is why it is imperative that staff members are able to incorporate PBIS systems throughout the school's setting. In fact, all five participants noted that it was particularly important that staff members are able to apply the PBIS framework in the classroom. E1 and E2 described how the classes that they teach have created roles and responsibilities to support incorporate PBIS and support students in implementing positive behaviors. E1 described the ability to do this while approaching a student's problematic behaviors in the classroom:

The student had ADHD which manifested as him becoming super hyper in class and I'm thinking to myself, 'What do I do?' Well, I could have sent him out for a break every

time he felt hyper…but that would be so often and might possibly make him feel like he's alone or isolated. I want him to feel like he fits and belongs. If I try to get him to control his behaviors at the desk, well that might work but it probably takes so much energy for him to do that. And, I don't want him to be so focused on controlling his energy that he then isn't focusing on learning. But PBIS is helpful because it says, 'Okay this student has ADHD. What is positive about this? How can we use this? Well students with ADHD have excess energy so let's use that to welcomed something he loves about himself, not hates.' So, I started letting him be the classroom or teacher helper. I let him pass out the materials to students every morning. I also let him lead us during our daily walk. That extra energy isn't going away, but my goal was to show him how he can use parts of himself that others may condemn him for to help him by letting him experience some success as a result.

Other participants indicated that it was important to work with the student's behavioral symptoms of their ED diagnosis instead of against them. As explained by one participant:

The student's here have emotional disabilities that have at one point, impacted their academic performance. I'm not expecting those factors to just go away because they entered this school. But, I am expecting that as an alternative setting, we can adjust ourselves and our educational strategies to meet the needs of the students so that they are responsive. PBIS is also about that, individualizing interventions and supports so that we are able to meet the student's where they're at. It's about doing what needs to be done and meeting the student's where they're at so we can move forward to the ultimate goal, which is their ability to learn.
E3 related this to a previous experience with a student needed who required additional

support to remain in the classroom before even beginning to work on in the classroom. The

following anecdote described this situation:

This student exhibited behaviors that were consistent with ED, but not typical way. He never completed his work. He never wanted to be around his peers. He never wanted to be in the classroom, so people began to see him as oppositional and defiant which caused him to come to our school. But, the more I got to know him, the more I believed the root of his issues were actually internal. He would yell… scream as a matter of fact, 'Take me to the break room! Get me out of here!' all day, every day. When we didn't …he would amp it. He screamed, kicked the walls, flipped his desk, threw stuff across the classroom. Eventually, he became such a disruption that the staff would have to escort him to the Breakroom because he nobody was able to learn, even him.

This participant later identified the systems and structures that she used to address this

situation from the PBIS approach, The following explanation described how this manifested

within the classroom approach the student and meet his learning as well as behavioral needs in

this situation:

> One day, I was observing him and realized that he always requested to be in there by himself with the lights off and the door closed. So…I went to Home Depot and bought these giant refrigerator boxes for each of my students. I spent about a week decorating the inside with pictures or paintings of some of their favorite things. This student in particular loved cartoons and comics from the newspaper, so I clipped some and put those in there but I also cut a giant hole out of each side. The whole big enough so that you could sit in there but still see out of it. I gave one to each of my students and explained how they were to utilize the box as a safe space when they were feeling overwhelmed, frustrated, or anxious. We discussed expectations and how to use the box in an way that was appropriate, respectful and safe way. Of course, they were in third grade so I used language that could understand, but they knew that they could go inside their box so long as they were respectful, paid attention and completed their work. Of course, it took us a while to work out some kinks but after a little, it was really helpful with my class. He was not singled out, but still able to get some isolation when he was feeling over-stimulated. This helped him and his classmates learn with because he was less disruptive and able to remain in the classroom. Gradually, he started to feel safer in the and began to use the box less and less. People who don't understand PBIS or things like this would say that he would have eventually learned that the classroom was safe and that he needed to remain to learn. And that may be true. But, using the box was a positive way to get his needs met. Because he was provided a way to feel 'safe' and remain in class, he actually begin to process the information that we were learning, instead of just focusing on how to get himself out of the room or mitigate his anxiety. By meeting him where he was at, he was able to actually begin to have fun and enjoy learning.
>
> These situations were corroborated by the MHA and teacher lesson plans found during the

data collection and analysis phase. Overall, these systems and structures help staff implement the

PBIS related modifications and adjustments to meet their students' needs and incorporate the use

of positive behaviors.

Summary

The present study interviewed five individuals of an alternative educational program to gain

insight on their experiences regarding PBIS implementation. In addition, the case-study team

analyzed data from non-interview sources such as archival records, PBIS-related documentation,

and student files to corroborate this information. From this evidence, the case-study team

identified the following three overarching themes: *strategies and practices, data tracking:*

measuring progress and outcomes and systems and structures. These themes as well as the

corresponding nine subthemes reflected the adaptations and modifications that were made by the

school to educate its population of students with ED. In the next chapter, the researcher will

summarize these findings as well as provide conclusions and implications for future research.

CHAPTER FIVE

DISCUSSION

Chapter five will discuss the findings, implications, and future recommendations based on an analysis of the current case-study. To begin, the researcher will reintroduce the initial purpose of the research and questions that guided the process. Next, the researcher will summarize the themes and sub-themes that emerged through a thematic analysis of interview and non-interview data. This will allow the researcher to then discuss these themes in connection to the related literature outlined previously in this study. The researcher will then conclude this chapter by outlining the implications for future practice and research on PBIS implementation in alternative education for students with ED.

The Current Study's Purpose, Methodology, and Results

PBIS is a proactive, three-tiered, systematic approach toward problematic behaviors. It has been most notably used within the general education context and has shown promise within its findings. For students with ED, school-wide implementation has been linked with improved socioemotional, academic, and behavioral outcomes. However, research on its use within nontraditional settings is limited. In the few studies that examine the PBIS framework in this context, its implementation has been associated with an increase in prosocial behaviors and a decrease in problematic behaviors for students with EBD in alternative education. Although the research is limited, this suggests that PBIS framework can be effectively modified to fit the alternative education student population. Current gaps in the literature pose question as to the specific programmatic practices and components that are necessary to support PBIS in being effective for this population. Therefore, the purpose of the current research was two-fold. First, to contribute to the growing body of knowledge and related literature that focused on students with emotional disabilities. Second, to address the gaps and limitations in the current research

that failed to identify efficacious educational strategies and intervention methods used to educate this population. The following research questions were formulated to guide this process:

(1) How does a therapeutic educational program implement or apply PBIS within its population and setting structure?

(2) From the perspectives of the staff members, why is PBIS implementation successful or useful in this setting?

A qualitative, social-constructivist design was used to conduct this research. The current case-study gathered evidence from multiple sources and refined, combined, or separated data by the themes and subthemes that emerged. This included data that was collected from the contents of five participant interviews as well as information collected during an examination of school's direct observations, archival records, PBIS-related documentation, and student files. The case study team identified three overarching themes after using Braun and Clarke's (2006) thematic analysis to interpret findings. The first theme was identified as *Strategies and Practices* and included three subthemes. The second theme was categorized as *Data Tracking: Measuring Progress and Outcomes* and included three subthemes. The third theme was identified as *Systems and Structure* and included three subthemes. The next section will discuss these findings in connection to the current literature.

Discussion of Findings

Research on PBIS indicated that its implementation can contribute to a more positive learning environment, advancements in academic achievement and improvements in prosocial behaviors (Bradshaw et al., 2009; Bradshaw et al., 2010; Horner et al., 2009; Reinke et al., 2013). Given these findings, select studies suggested that PBIS could lead to similar results in AE settings with certain adjustments and modifications to its framework (Simonsen et al., 2011;

Simonsen & Sugai, 2013). However, this highlights several gaps and deficits in the current literature. In fact, most research on PBIS exists in the context of the general education system with the traditional student population. In the studies that do reference the use of PBIS in non-general education programs, little context is offered about the of specific use of programmatic components that are associated with positive outcomes for each program. In the current study, data collected from non-interview and interview sources were analyzed to address these limitations. The following section will discuss how findings of the current research were supported by those in the literature and how they compared to themes that emerged.

Strategies and Practices

According to Sugai and Simonsen (2012) PBIS was first introduced in the 1980's to help improve the social, emotional, behavioral, and academic functioning of students. Since this time, several studies have been conducted to support the use of PBIS-related prevention and intervention strategies in conjunction with research-based practices to educate non-traditional students (Bradshaw & Pas, 2011; Horner et al., 2010; Lane et al., 2007; Lewis et al., 2010; Reinke et al., 2013; Ross et al., 2012; Sugai & Simonsen, 2012). Equally, the findings of the present study indicated that staff members used the PBIS framework to create and implement educational strategies that promoted social, emotional, behavioral, and academic improvements for their population of students with ED. The following section will discuss how this setting applied PBIS prevention, teaching, and intervention strategies in comparison to the previous research.

Prevention Strategies

Research on PBIS and efficacious practices in alternative education agree on the importance of incorporating prevention strategies to address problematic behaviors for students

with ED (Coffey & Horner, 2012; Dunlap, 2006; Sugai & Simonsen, 2012). Literature related to

PBIS suggested that in order to decrease problematic behaviors, faculty and staff must attempt to

prevent these situations before they can occur (Coffey & Horner, 2012; Lewis et al., 2010;

Morissey et al., 2010; Ross et al., 2012; Simonsen & Sugai, 2013). Sugai and Simonsen (2013)

suggested that doing so can mitigate the opportunity for students to engage in situations that

could reinforce their problematic behaviors. Findings of the current research echoed the

importance of using prevention strategies to educate students with ED. In fact, non-interview

data and interview data suggested the interweaving prevention strategies was foundational to

their approach toward PBIS implementation. Each five staff members identified their use of

positively based, proactive strategies when asked about their respective methods of PBIS

implementation, despite being employed in different roles. The contents of these interviews were

corroborated by evidence found in non-interview data, such as training modules and

documentation, that informed staff members on how to provide preventative strategies using a

PBIS approach. These strategies taught teachers, mental health associates, and other faculty

members of the school how to deliver educational services within their role that were preemptive

in nature and attempted to prevent problematic behaviors before they occurred. The following

sections will compare, and contrast prevention strategies mentioned in the research and found in

in the findings of the present study.

Interview data illuminated a difference between prevention strategies found in the

literature and those identified within the current study's findings. Although previous research

suggested that PBIS can result in a more positive school climate, little evidence specifically

identified that establishing this type of environment could serve as a preventative approach

(Kelm & McIntosh, 2012; McDaniel et al., 2012; Sugai & Simonsen, 2012). In findings of the

present study, staff members of the school identified that providing a positive and nurturing learning environment was their primary and foundational method of prevention. This was so students were able feel as though they were in a setting that was conducive for them to learn and establish an atmosphere that helped staff members to proactively address problematic behaviors inside and outside the classroom. This would require that alternative settings anticipate the needs of their specific student population and include these factors in the establishment of their environment as a result.

Non-interview data analyzed from the case-study provided training materials and documents that informed staff members of the theory behind providing prevention strategies. According to these documents and learning modules, students are more likely to use behaviors that they have practiced, so extinguishing the need for students to practice problematic behaviors will ultimately decrease the chances of using them in the future. These sources reflected how the prevention mindset was interwoven into every facet of the day, including how staff members were trained to educate or interact with students and structure their curriculum. Similar findings were evidenced in a study by Simonsen et al., (2008) that suggested prevention strategies were effective for students with ED because they helped staff proactively anticipate and prevent situations where students might rely on problematic behaviors to meet their needs. For example, Simonsen et al., (2008) proposed that providing academic instruction that is relevant, engaging and appropriately paced could prevent students with ED from using disruptive behaviors out of boredom or frustration. Evidence in the current research as well as those found in the literature both highlighted the use of cues and gestures as prompts to prevent problem behaviors before they occur. This was evidenced in the present study's findings from anecdotes of staff members providing verbal expectations of assignments or activities before they began and paralleled

suggestions made by Simonsen et al., (2011) which also indicated that behavioral cues could be used to pre-correct behavior before delivering services. Although the initial method of PBIS implementation at this school was prevention, data from all sources suggested that it was equally important to teach students about positive and negative behaviors. The following section will describe the teaching strategies utilized by the school to incorporate PBIS and meet their population of students' needs in comparison to those found in the literature.

Teaching Strategies

Research on PBIS that specifically referred to the concept of teaching strategies when working with students in alternative education or those with ED was limited. Although it often suggested that staff members developed standards for teaching positive behavioral expectations, it rarely provided further context (Bradshaw et al., 2008; Horner & Sugai, 2015; Morissey et al., 2010; Simonsen & Sugai, 2013; Sugai & Horner, 2002). In fact, while PBIS related literature referred to the importance of teaching positive behaviors and promoting social skills, it did not directly correlate to these strategies in the context of the present study's findings. Instead, current literature on this topic typically referred to the need for students to practice the behaviors in a manner that was appropriate and clearly defined by each setting (Austin & Soeda, 2009; Carr et al., 2002; Dunlap, 2006; Horner & Sugai, 2015). Other research alluded to the fact that students might need to be taught the expected behaviors that are consistent for a given context, but also failed to specifically address how (Evanovich & Scott, 2016; Horner & Sugai, 2015; Irvin et al., 2004; Swain-Bradway et al., 2013). The following section will examine the teaching strategies used by the alternative educational setting to educate its students with ED using the PBIS approach in comparison to those found within the literature.

Previous studies tasked administrators and faculty with creating opportunities for students to demonstrate and experience success (Evanovich & Scott, 2016; Horner & Sugai, 2015; Irvin et al., 2004; Pinkelman et al., 2015; Swain-Bradway et al., 2013). However, research on students with ED suggested that many academic structures could unintentionally be applying a concept known as the "curriculum of non-instruction" (Maggin et al., 2011; Markelz & Taylor, 2016). This is where school staff members focused on merely containing students with ED and the minimization of disruptive behaviors such as classroom disruption, destruction, and acts of aggression, instead of teaching the how to use behaviors that were more positive. In the current study, staff members attempted addressed this gap by using their philosophy of "teach, re-teach and reinforce" to guide their curriculum and instruction. This is where staff members believed that students should first be educated on the potential spectrum of positive behaviors then provided an opportunity to practice these behaviors before being assessed for those that needed to be relearned. According to interviews, this was consistent with findings of the present study which indicated that staged opportunities were provided for students to demonstrate and experience success when implementing positive behaviors were implemented and allotted additional time for staff to re-teach those that were not learned. This mentality was also evident in non-interview data, such as academic lesson plans, daily schedules and student records which indicated that each student was required to attend mandatory social skills lessons which included opportunities for staff to stage situations where students could practice what they learned. These periods followed a curriculum of PBIS related topics that corresponded to limitations of students in the ED population that were consistently identified in the previous research (Harvard Education, 2009). This was similar to research conducted by Simonsen et al., (2011) which suggested that students be taught about socially appropriate behaviors and societal norms during

PBIS implementation in alternative education. Topics found in the literature as well as those within the present study included several aspects of healthy adaptive functioning such as, emotional regulation, conflict resolution, problem-solving, coping skills, bullying prevention, relationship building and how to engage in mutually respectful interactions (Anastasiou & Kauffman, 2011; Gresham et al., 2001; Harvard Education, 2009; Landrum et al., 2003; Van Acker, 2010). Although teaching and prevention strategies were often used in conjunction, a third sub-theme emerged during the data analysis process. The current study's findings and previous literature also identified the use of intervention strategies to target problematic behaviors. The following section will describe the PBIS intervention strategies utilized by the alternative school in relation the current setting's context and those found in the previous literature.

Intervention Strategies

Current literature on PBIS and students with ED suggested that that certain methods and practices were more effective in reinforcing or motivating behavioral change than others (Austin & Soeda, 2009; Carr et al., 2002; Dunlap, 2006; Horner & Sugai, 2015). Results of single case study designs have also shown PBIS interventions specifically targeted for students in AE settings promoted behavioral growth and advances (Ennis et al., 2012; Swoszowski et al., 2012). For students with ED, these intervention strategies tended to be those that were applied in a consistent manner and targeted toward a specific a behavior. The strategies used to promote desired behaviors should include the opportunity for students to receive positive feedback from staff in ways that are both social and tangible (Lewis et al., 2010; Morissey et al., 2010; Sugai & Horner, 2002). In fact, ensuring that students are recognized and rewarded for their use of more positive or appropriate behaviors is a key feature of the PBIS program (Christofferson &

Callahan, 2015; Houchens et al., 2017; Marthur & Nelson, 2013). In turn, this positively impacts

students' behavioral challenges by providing motivation to demonstrate more acceptable

behaviors and decrease the use of problematic behaviors further (Houchens et al., 2017; Lewis et

al., 2010)., Non-interview and interview data in the present study paralleled the previous

research's interpretation and implementation of these how these PBIS philosophies can are used

as alternatives to more punishment-based interventions. The following section will compare

these strategies in relation to those found in the previous PBIS literature.

The purpose of intervention strategies, as defined in the current research and related to

the previous literature, were two-fold: to promote the use of positive behaviors and decrease the

need and use of those more negative (Bradshaw et al., 2008; Lewis et al., 2010; Morissey et al.,

2010; Reinke et al., 2013; Sugai & Horner, 2002). As opposed to prevention strategies that

aimed to prevent problematic behaviors before they occurred, intervention strategies were used

to address problematic behaviors as they occurred. PBIS related research suggested that

consistent and clear interventions could contribute to sustained changes for students in the

academic and learning environment (Evanovich & Scott, 2016; Horner & Sugai, 2015; Morissey

et al., 2010; Simonsen & Sugai, 2012). This paralleled interview contents of the current study

that indicated staff members believed interventions were most likely to reinforce positive

behaviors when they were delivered in a manner that was consistent and positively based.

Equally, current and previous research also suggested that effective interventions were those that

were individualized and appropriate for the context of the given setting and situation (Bradshaw

et al., 2008; Reinke et al., 2007). This was evidenced in non-interview data collected from the

school's PBIS archival records indicated that staff members frequently utilized preference sheets

to determine their students wants and needs. PBIS treatment plans and related documentary

information suggested that these preferences and motivators were then incorporated into the individual intervention strategies used for each student to strengthen their effectiveness. However, in the present study, individualization was also achieved by the distinction between individualized interventions and those that were specific to the student population. Interview data corroborated these findings and described how staff members were able tailor interventions to meet the needs of groups of students, or classrooms, with similar manifestations of behaviors consistent with ED.

In conclusion, the findings of PBIS literature as well as those found in the present study suggested that the importance of prevention, teaching, and intervention strategies when providing an effective education to students with ED in alternative settings. However, efficacy of these methods cannot be determined without a measure of progress and growth. The following section will describe the manner in which the school ensured that these practices were effective in providing the desired student outcomes in comparison to those identified by the research previously.

Data Tracking: Measuring Progress and Outcomes

According to research, PBIS implementation required constituents to collect data across several platforms to evaluate its effectiveness and determine appropriate interventions or supports (Carr et al., 2992; Dunlap, 2006; Horner & Sugai, 2015). In fact, the ability to collection data that measure outcomes and inform practices was identified as a critical pillar of this framework (Sugai & Horner, 2002; 2008). However, Sugai and Simonsen (2012) highlighted a need for more PBIS related practices and approaches toward education that were evidence-based and supported by research on student outcomes (Sugai & Simonsen, 2012). Research showed that although the PBIS literature valued the importance of being able to collect data that tracked

student progress and measured outcomes, limited evidence examined the methods in which

schools chose to do so. This was particularly true for alternative settings that that were comprised

of a majority of students with ED in their population. The current study attempted to address

these gaps and limitations in PBIS related research. Non-interview and interview data collected

during this time indicated that three subthemes of the school's data tracking processes had

emerged. The following section will discuss these processes in relation to those identified in

previous research.

The Development of Behavioral Tiers

Literature on PBIS stated that it used three-tiers system or framework to provide specific

interventions and supports (Krach et al., 2017; Reinke et al., 2013; Swain-Bradway et al., 2013;

Upreti et al., 2010). This tiered system provides students with the opportunity to receive services

based on their level of need and their responsiveness to intervention (RTI; Kaufman et al., 2009).

While these systems remained consistent in throughout situations identified in the

previous literature, non-interview and interview data indicated that the development of the

behavioral tiers were revised and discussed at least twice during a semester. This ensured that

students were categorized in the appropriate level of need and that interventions and supports

were being distributed effectively. In fact, participants indicated that this system was used to

promote accountability within the school's PBIS implementation adjustments and modifications.

This highlighted a difference in the use of tiers the results of previous studies versus those found

in the current research. The following section will compare the development and structure of the

tiered system utilized in the school and within the previous research.

According to previous research, the first tier of supports is comprised of universal

intervention and prevention strategies that are conducive for all students across all educational

settings (Reinke et al., 2013; Simonsen & Sugai, 2013; Sugai & Horner, 2009). This level aimed

to improve the learning environment and proactively address behavioral or academic limitations

successfully for approximately 80% of the student population (Horner & Sugai, 2015; Muscott et

al., 2008; Reinke et al., 2013). However, findings of the present study noted that Tier 1 included

not only the identification of universal preventions and supports, but identified specific of the

school that were observed to have responded to these types of interventions. These students were

those that were buying into the PBIS program, the rewards, the level system with minimal

resistance or difficulty. This determination was made by staff members after observing student

behaviors and interactions following their first month of enrollment in order to assess their level

of need more accurately. Although research indicated that the level to which students are

exposed to Tier 1 depended on the school's discretion, findings of the present study indicated

that each student are provided access to Tier 1 interventions and supports with the same level of

exposure (Bradshaw, 2013; Horner & Sugai, 2015).

Previous research also discussed that students were only exposed to Tier 2 when they

were not responsive to the universal and school-wide behavioral supports in Tier 1 (Bradshaw,

2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009). According to

this literature, students in this tier, were those with at-risk behaviors and were provided services

through smaller group settings to receive more directive and intensive support (Bradshaw, 2013;

Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009). Students appropriate

for Tier 2 also required interventions that were specifically designed for those with academic

and/or behavioral challenges (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006;

Sugai & Horner, 2009). Tier 2 addressed approximately 15% of students of the population of

students in both findings of the current study as well as those in the previous literature. However,

given that the students were sent to the current study's school because of their behavioral or academic challenges related to their special education diagnosis of ED, qualifications of this level of need tended to differ from those in the research. Instead, Tier 2 interventions outlined in the previous literature more accurately aligned with those of Tier 1 of the present study. Interview and non-interview data collected during the current research indicated that Tier 2 included specific students were those that were continuing to exhibit problematic behaviors despite Tier 1 interventions and supports but were able to demonstrate positive behaviors with more individualized or additional interventions and supports. Tier 2 interventions and supports collected from the evidence in the current case-study included more personalized incentives, that attempted to include rewards, trips, and opportunities on outlined by their preference sheets. Comparatively, Tier 3 interventions outlined in the previous research were provided for the remaining 2-5% of the population of students at this level that demonstrated the need for more resources and specialized support due to the previous resistance of their behaviors (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009). This was consistent with findings of the present study that suggested students and supports in this tier were the most severe and intensive in the setting. However, Tier 3 interventions and supports were less severe in comparison to those in the same tier in the current setting. This was due to the fact that students in the current study demonstrated a high instance of problematic behaviors that lead to situations that required specific interventions such as, breakroom usage, physical restraints, and secured holds. In addition, staff members were required to create formalized plans and have routine meetings that specifically focused on the students in tier 3's progress and behavioral growth. Although monitoring the student's level of fluctuation throughout the tiers was one measure used to determine the effectiveness of PBIS implementation, evidence suggested that

schools used an additional strategy to measure behavioral management. This the Points and Levels System was a major consideration in the evaluation found during findings and will be examined in the following section.

The Points and Levels System

PBIS related documentation and student records collected during present case-study indicated that the school also used a system of numerical points help staff and student's measure and track student progress. Interview data corroborated this finding as all five participants interviewed described the school's Points and Levels Systems as their primary method used to manage behaviors and track outcomes or progress. Previous research on PBIS related literature were similar to these findings in that they suggested that schools should set and define a system that will encourage positive behavior and prevent the need to use those more negative (Bradshaw et al., 2008; Lewis et al., 2010; Morissey et al., 2010; Reinke et al., 2013; Sugai & Horner, 2002). It suggested that this system should be organized and provided along a continuum that ranges in severity (Bradshaw et al., 2008; Lewis et al., 2010; Reinke et al., 2013;). However, limited research provided further context of how schools can implement these suggestions, especially for those in alternative settings that serve students with ED. The following section will describe how the current setting utilized this Points and Levels System in comparison to the previous research.

Findings of a study conducted by Flower et al., (2011) suggested that PBIS should be implemented more frequently for students with ED in alternative settings. This was because the PBIS framework suggested that schools offer a system that accounted for consistent reinforcement of behaviors and the delivery of contingencies based on student performance, which was beneficial for students with ED (Flower et al., 2011). Although limited research

provided specific evidence of how to specifically include these factors into a setting, these findings were evidenced within the Points and Levels System described by the school. For example, staff members were responsible for contributing to the establishment and maintenance of this system, which was shown to increase their ability to implement PBIS framework with fidelity in previous research (McDaniel et al., 2012). In addition, this system related to the previous literature that included establishing a set of procedures and hierarchies of consequences that address both minor and major rule infractions was important for this population (Bradshaw et al., 2008; Bruhn et al, 2014). Findings of the current study indicated that during each class period of the day, students worked to "earn" an amount of points for each component of the rules, guidelines, and expectations that were outlined in their expected behaviors, policies, and procedures. This was paralleled research conducted by McDaniel et al., (2012) that suggested faculty and staff should agree on a system of rewards for complying with school-wide behavioral expectations, as well as a contingency management strategy focused on individualized behavioral objectives.

Research suggested that these systems should provide incentives, motivations or rewards that increased in frequency, intensity, and duration in order to be most enticing for students in this population (Bradshaw et al., 2008; McDaniel et al., 2012; Reinke et al., 2007). This was evidenced in the schools point system that determined their behavioral standing within the school based on daily and weekly point averages. These averages correlated to a student's "level" which corresponded to their access of certain privileges or rewards and determined whether they became promoted through the level system. Findings of the present study also suggested that the school attempted to account for varying levels of motivations and rewards for different individuals through this system. For example, some students were motivated by physical or

tangible rewards that were associated with the status of each level, others seemed motivated by verbal praise or recognition that came with students' names being displayed by their corresponding level, and a third potential source of motivation stemmed from the sense of belonging, leadership, and confidence that came with being a higher level and student's abilities to be permitted to certain clubs or activities. Equally, if students were not able to earn their points for their level, they were at risk of being demoted and accessing fewer privileges or rewards. This was connected to previous literature that stated an ideal PBIS behavioral management system would also include preventative strategies that incorporated a range of aversions for negative behavior (Bradshaw et al., 2008; Bruhn et al., 2014). However, the individualization of these factors required that student's behaviors be monitored individually to determine their adherence to the program and structure. The following section will discuss how the school used plans and respective meetings as the final way to monitor student progress and track outcomes.

PBIS Plans & Meetings

Sugai and Horner (2002) necessitated the importance of schools to develop a system of record-keeping and documentation strategies that would effectively monitor and evaluate the PBIS implementation efforts of the program. Ideally, these authors claimed that these systems would include procedures for important decision-making strategies as well as cultivate the opportunity for routine feedback and collaboration amongst staff. Findings of the present study suggested that the school's weekly schedule of PBIS treatment team meetings addressed both needs previously identified by the research. The following section will discuss how the school was able to make modifications to their record keeping and documentation strategies to monitor and track student's progress from a PBIS approach.

Previous research suggested that PBIS is conceptualized as a process or approach rather than a curriculum, intervention, or practice when incorporating into an alternative educational program (Sugai et al., 2000; Sugai & Horner, 2009; Sugai & Simonsen, 2012). This is so that adjustments and modifications can be made to suit the needs of the environment and student population (Simonsen et al., 2011). Given these adjustments and modifications, findings of the present study indicated that the school utilized PBIS treatment team meetings to ensure effectiveness and fidelity of their program. This was consistent with previous literature that indicated alternative settings should work collaboratively to collect, analyze, and interpret data that will formulate setting-specific applications of the PBIS framework (McDaniel et al., 2012).

To begin collecting data for PBIS implementation, non-interview data analyzed from the present study indicated that baseline levels of behavior must be determined. This finding was corroborated by non-interview sources found in PBIS-related documentation. In particular, the case-study team found two completed functional behavioral assessments, or FBA for each student on the roster. Interview data indicated that each FBA was formatted to help guide the observations of student behavior and support staff members in identifying underlying intentions or a root cause. The case-study team noted that each FBA concluded with a theory or hypothesis of each student's behavior that were later used to formulate each PBIS treatment plan and corresponding goal. The completion dates of each FBA suggested that they were completed within their first month of enrollment and validated through the correlation of each student's initial paperwork. However, this was different compared to findings found in the previous PBIS related literature that suggested assessments on the functions of student behaviors were only provided to students after it was determined that they were nonresponsive to universal prevention

strategies (Bradshaw, 2013; Horner & Sugai, 2015; Lembke & Stitcher, 2006; Sugai & Horner, 2009).

Following this period, findings of the current study indicated that each student was created two PBIS goals that guided the creation and facilitation of their PBIS plan. This plan guided their behavioral adjustments and modifications in the same manner that each IEP guided accommodations to their academic instruction. Plans were then kept in the student's PBIS file and presented and examined at least once a month during PBIS meetings. Each plan included the student's goal and coinciding measurable objectives as well as documentation of the PBIS prevention, intervention, and teaching strategies that the student was responsive to. Findings of the present study indicated that therapist(s), PBIS leader(s), and MHAs attended PBIS meetings at least twice a week to report on PBIS related progress and updates. During this time, PBIS treatment plans were reviewed and discussed using anecdotal evidence, academic records, behavioral point sheets to measure improvements or regressions in student's monthly progress. Although the school's components were not specifically mentioned, this process was connected to findings in the previous literature that stated staff members must take continuous steps to ensure that reinforcements are appropriately selected and applied for on the contextual factors of the situation (Carr et al., 2002; Dunlap, 2006; Horner & Sugai, 2015). Interview data suggested that this process also promoted collaboration amongst staff members and allowed them to create, identify, implement PBIS from various insights and perspectives. The importance of this finding was evidenced in a research conducted by Ross et al., (2012) that suggested PBIS promoted collaboration amongst staff and helped faculty incorporate evidence-based strategies into their educational practice.

However, PBIS-related literature highlighted certain members of these collaborative teams that were unmentioned by the findings in the present study. This was the inclusion of caseworkers, social-workers, mentors, or other providers of treatment that shared decision-making responsibility within the services suited for the student given that many alternative education settings enroll those with an established team of support (Jolivette et al., 2014). This would mean that alternative settings must establish a routine system of collaboration and cooperation where members are educated or included on various components the student's individualized program, which was another suggestion missing from the findings of current study. Whether or not the systems are in place to include address findings is an important consideration when examining the PBIS implementation methods of any program. In fact, the absence of these systems and structures poses risks to reflecting accurate assessments of the program. The following section will discuss the school's organizational and structural components that contributed to the facilitation and maintenance of PBIS implementation.

Systems and Structure

School-wide PBIS implementation has been associated with benefits for students and staff alike (Houchens et al., 2017; Netzel & Eber, 2003; Ross et al., 2012; Sugai & Horner, 2009). However, Sugai and Simonsen (2012) suggested that schools must be prepared to make shifts in their current structures and be willing to implement systematic change in order to incorporate PBIS into their program. This is so the application of PBIS framework can include resources, efficacious practices, and data-driven interventions that are conducive for its setting and population (Horner & Sugai, 2015; Sugai et al., 2000; Sugai & Simonsen, 2012).

Similarly, data collected through the process of the current study indicated that the school made changes to its programmatic components and organizational structure that contributed their

ability to provide effective education and maintain fidelity to the PBIS program. The following section will describe the changes made to the school's programmatic components and organizational structure in relation to those suggested by previous literature.

Rec., Non-Rec. & Owes Work

Flower et al., (2011) suggested that PBIS was effective for students with ED in alternative education because its framework allowed for the consistent reinforcement of behaviors in a structured educational environment. In fact, delivering contingencies based on student performance was a strategy associated with behavioral improvements for this population of students. Similar research was conducted by Simon et al., (2011) and suggested that alternative systems utilize the PBIS approach to provide a system of consistent feedback and reinforcement of behavior for students with emotional or behavioral disabilities. However, limited studies provided specific examples of how to implement this type of system in context. The following section will discuss how the current setting implemented a system that would encourage the use of positive behaviors and discourage the use of those more negative from a PBIS approach, as evidenced in the previous literature.

Previous literature suggested that a key feature of PBIS, was the ability to recognize and rewards students for their use of more positive behaviors (Christofferson & Callahan, 2015; Houchens et al., 2017; Marthur & Nelson, 2013). This was evidenced in findings of the current study that outlined the student's ability to attend a weekly incentive called "rec." Although PBIS literature did not specifically detail the aspects of these rewards, the present study utilized previous findings to facilitate this system. In fact, this event seemed to be the culmination of the PBIS strategies in practice. For example, PBIS suggested that staff members should develop standards for teaching behavioral expectations, school policies and classroom procedures

(Bradshaw et al., 2008; Horner & Sugai, 2015; Morissey et al., 2010; Simonsen & Sugai, 2013; Sugai & Horner, 2002). In the present study, students were provided points which determined their eligibility for rec. and was based on their ability to comply with these teachings. Other research suggested that the strategies used to promote desired behaviors should include the opportunity for students to receive reinforcers of behaviors that were both social and tangible (Lewis et al., 2010; Morissey et al., 2010; Sugai & Horner, 2002). The current study allowed students to preview their choices for the upcoming rec. activity and determine a selection that was most rewarding to them. Students were also able to review the list of peers that signed up for each activity, as well as the staff member that was assigned to facilitate. In addition, students were allowed to change from the activity, one time upon entry and before the special snack was provided. Findings from the current study suggested that these factors helped increase the motivation for students to exhibit behaviors that would allow them to earn this incentive.

However, findings of the present study indicated that activities were also created in order to address the behavioral limitations of students with ED. For example, students could sign up for field trips outside of the building, volunteer services or play recreational sports and games that allowed them to practice behaviors and social skills that they typically struggled with in a positive and engaging way. Participant interviews indicated that these also allowed them to build on real life applications of the behavioral intervention and supports that they had been teaching, modeling, and learning.

According to previous literature these systems and structures should also include strategies that served as aversions to negative behavior (Bradshaw et al., 2008; Bruhn et al., 2014). This was evidenced in findings of the present study that described how students were not able to attend rec. when it was not earned. Similarly, previous research suggests that alternative

settings using the PBIS framework to establish a set of procedures and hierarchies of consequences that address both minor and major rule infractions (Bradshaw et al., 2008; Bruhn et al, 2014). This was evidence in the findings of the present study that indicated when students did not earn rec., they were either in owes work or non-rec. Although these were both alternatives to the weekly incentive, these events were perceived differently according to case-study evidence. Students in owes work did not earn rec. solely because of their missing or incomplete academic assignments. Otherwise, behaviorally, they earned the necessary points. A contingency of rec. is that students are not able to attend if academic assignments are incomplete, regardless of their behaviors. However, students in owes work can attend rec. once all their academic assignments are completed and approved by the staff assigned to that room. Unlike previous research, current findings suggested that this helped improve student resiliency and accounted for factors associated with this disability and other aspects of their specific student population.

Students in non-rec were not permitted to select their location, activity, staff or change their location based on other students. However, it was also not seen as a punitive form of intervention. During this time, the staff and students processed about the events that occurred leading up to that week and contributed to them not earning their points. Findings of the present study as well as those found in previous research indicated that PBIS implementation was more effective when staff members were able to create and develop strategies that informed students about behavioral expectations (Bradshaw et al., 2008; Lewis et al., 2010; Morissey et al., 2010; Sugai & Horner, 2002). It was important that these lessons on school-wide policies, procedures and routines should were consistently provided in a consistent manner. However, staff members noted that non-rec was also used as an opportunity to work more closely with students and build

the relationship, which was not discussed during the context of PBIS-related consequences in previous studies. The behavioral expectations that outlined behaviors necessary to earn events such as rec., owes work, or non-rec. were clearly outlined in a behavioral matrix that is visible throughout each areas of the school's setting and used a common language for consistency. The following section will discuss how the school used these factors to implement the PBIS framework for students with ED in the context of the current study.

The Use of Common Language & The BARKS Matrix

Sugai and Horner (2002) suggested that a feature of an effective PBIS program was the presence of a clearly defined set of rules, routines, policies, and procedural expectations that guided student behaviors within the program. Previous researched suggested that these behavioral expectations should be developmentally appropriate for students with ED and created in respective to each given setting throughout the school (Horner & Sugai, 2015; Reinke et al., 2013; Ross et al., 2012; Simonsen & Sugai, 2012). Similarly, it was important that these policies and procedures were phrased in a manner that is positive, specific, and comprehendible for students in this population. However, limited evidence exists to describe the specific strategies that were able to support students with ED and implement these standards from a PBIS approach. Evidence analyzed from the current study indicated that the school utilized a common language in conjunction with the use of a behavioral matrix to support the implementation of these findings and address these gaps or limitations. The following section will discuss how the school incorporated the use of a common language and the behavioral matrix in relation to previous findings.

Contents of interview data that were analyzed for the present study indicated that participants frequently referred to the use of the "BARKS Matrix" when discussing their policies

and procedures for student expectations. In fact, each participant noted that this was that matrix was one of the main structures that accounted for PBIS implementation. The term "BARKS" was an acronym used to refers to each one of the core-values of the program. This was consistent with previous research that suggested each school should develop a system that provided students with the expected policies, procedures, and routines for their setting (Simonsen et al., 2011). There are five rows down the side of the matric to specifically identify behaviors that are conducive for positive personal and academic growth. This was similar to previous research that suggested that students with ED will benefit the clear expression of attainable and expected behaviors that were being targeted (Austin & Soeda, 2009; Carr et al., 2002; Dunlap, 2006; Horner & Sugai, 2015). For example, The 'B' row symbolized "Be there, Be ready" behaviors. These are behaviors that the students should use to indicate preparation and preparedness. The other letters represent the following expectations and are all worded positively: A, accept responsibility; R, respect self and others; K, kindness; S, strive to learn. This paralleled previous literature that suggested behavioral guidelines must be developmentally appropriate for students in each respective setting and phrased in a manner that is positive, specific, and comprehendible for students in this population (Horner & Sugai, 2015; Reinke et al., 2013; Ross et al., 2012; Simonsen & Sugai, 2012). There are five columns across the top of the matric to identify the settings or contexts that these behaviors are expected. For example, the matrix dedicates one column to all general settings, as well as specifies behaviors between the hallways, the classroom, and the bathroom. The cross-section of each column or row provides details on how the students should behave. For example, one-way students can demonstrated *respect for self and others* in the *bathroom* is to *wash their hands.* This was consistent with previous research that

suggested each school specifically detailed and outlined the socially appropriate behaviors and social norms that were consistent for each setting (Simonsen et al., 2011).

In addition, research suggested that increased visibility and accessibility of these guidelines throughout the learning environment was another factor important for students with ED (Evanovich & Scott, 2016; Horner & Sugai, 2015; Reinke et al., 2013; Ross et al., 2012., Simonsen & Sugai, 2012). This was consistent with evidence collected during non-interview data of the present study that identified the presence of the BARKS matrix in each classroom, bathroom, hallway, office, and area of the school. This was corroborated when evidence of the present study was analyzed and indicated that each participant noted the importance of the visibility of the BARKS matrix for its students during each interview. However, previous research did not mention an additional finding evidenced during data collection in the present study which emerged a sub-theme of common language. In the present study, this indicated that the school utilized a set of language that referred to the various aspects and components of the setting from a PBIS perspective. Participants noted that words like "earned" or "Breakroom" helped them provide consistency, clarity and continuity throughout the school and enabled staff and students like to speak from a PBIS mindset. Evidence suggested that it was also used in order to meet the needs of its population of students, given that certain words or phrases were more likely to trigger problematic responses from students in this population. Findings from the current study suggested that common language helped staff members to teach, model and reteach the standard set of procedures, policies outlined in the BARKS matrix and aligned with their expectations. However, effectiveness of this system was largely dependent on staff's ability to consistently use this type of language throughout the school's structure. In fact, findings of the current research identified staff's ability to modify, adapt, and provide these systems and

structures effectively played a major role in PBIS implementation. The following section will examine how this was discuss this finding in context to the present study's results.

Staff Member's Role

Researchers have suggested that successful PBIS implementation largely relied on school administration and personnel's willingness and ability to implement the practices associated with this approach (Sugai & Horner, 2002; 2008). Faculty and staff must be able to replace previously learned traditional methods of education that may be outdated or unfounded with those that are more recently supported by the literature and coincide with PBIS framework. Similarly, findings of the present study identified that staff member play a vital role in the systems and structures that make PBIS implementation successful at the intersection of alternative education and students with ED. The following section will compare the role of staff members in the current research to those of previous literature.

Previous research indicated that administrators and faculty alike should be active participants in the implementation of the PBIS framework (Evanovich & Scott, 2016; Horner & Sugai, 2015; Irvin et al., 2004; Pinkelman et al., 2015; Swain-Bradway et al., 2013). In fact, similar findings suggested that successful PBIS implementation required the involvement and commitment of each individual working with students inside and outside of the classroom (Evanovich & Scott, 2016; Horner & Sugai, 2015; Irvin et al., 2004; Swain-Bradway et al., 2013). According to this research, staff members were responsible for providing students access to appropriate prevention, intervention and teaching strategies that would suit their needs and contribute to behavioral change. For example, Reinke et al. (2007) found that classrooms lead by staff members who provided rewards and acknowledgments for positive student behaviors demonstrated decreased levels of student disruption and aggression. These findings were

consistent with those of the present study. Evidence suggested that staff members must be able to apply the PBIS framework and incorporate various strategies and practices throughout the setting. This related to teachers being able to incorporate the PBIS framework during academic instruction as well as MHA's being prepared to include the specific factors of each student's diagnosis of ED into their behavioral management strategies. However, findings from the present study indicated an additional finding unmentioned in the previous research. Although the suggested that interventions are more successful when staff and students maintained a strong rapport and positive working alliance, it failed to provide further context (Houchens et al., 2017; Kalis et al., 2007; Morissey et al., 2010; Reinke et al., 2007; Stormont & Reinke, 2009). Findings of the present study addressed this gap and suggested that staff members aim to have students feel as though they are working with the staff toward success instead of against them. Staff members contributed to school routines and procedures that created a positive and nurturing school environment that was able to meet their independent, behavioral, and learning needs. This helped set a positive tone within the program and communicated the fact that students could be successful with staff support to compensate for the previously associated connections between figures of authority and students with ED. Evidence from the current research suggested that this genuine support was an essential component of the school's foundation that allowed them to implement PBIS throughout other settings and structures.

In conclusion, the present study identified several themes and sub-themes that emerged during the research process. These overarching themes of: *Strategies and Practices, Data Tracking: Measuring Progress and Outcomes, and Systems and Structures* addressed how the school made adjustments and modifications to the PBIS framework in order to suit the needs of their population of students with ED. At times, these findings related to data found in the related

literature, however, the current study aimed to address gaps that were identified in previous studies on PBIS at this intersection. The following section will provide how the present study provided implications for potential constituents and future research.

Implications

Findings of the present study illustrated how an alternative educational setting modified and applied the PBIS framework to educate its population of students with ED. This suggests several implications for the alternative educational field and corresponding policies. The first is that there are proactive and preventative forms of behavioral management that can be used to educate this population. Historically, alternative schools have used punitive, punishment-based forms of discipline to target problematic behaviors. Given that alternative schools are being used to educate students with ED at an increasing rate, it is important that schools effectively address the behaviors of this population to meet their needs. However, limited research supports the use of reactive approaches toward behavioral management. In fact, systems that enforce strict or harsh consequences, such as zero tolerance policies, have been associated with limited behavioral improvements or academic advances in the literature. This study provided evidence that positive educational strategies and practices can be used to promote improvements in this population's socioemotional functioning and increase academic achievements as a result.

The second is that that alternative schools can effectively adapt and modify the PBIS framework to fit the needs of their organization's setting and structure. Previous research identified the advantageous use of PBIS in the general education system for students with problematic behaviors. This posed question as to whether this framework could demonstrate similar results when applied to nontraditional settings. In the few studies that examined and advocated for the use of PBIS at this intersection, limited data provided descriptions of the

programmatic components or efficacious strategies that contributed to results. Findings of the present study indicated that the school used PBIS as a framework to provide specific strategies, practices, systems, structures that contributed to improvements for its population of students. This provided evidence to suggest that alternative schools at this intersection can effectively adapt and incorporate the PBIS framework into its existing setting and structure to support students from this perspective.

A final implication relates to the advocacy, training and research related to the education of this field. Current literature on students with ED fails to outline the specific educational strategies and intervention methods that are efficacious in alternative education. Given that current findings and previous research outlined the potential benefits of including PBIS in these types of program, those working in the education field should better advocate for its use. For example, governing bodies and policies that inform the decision-making process for students with ED should include an assessment of the outcomes related to the behavioral management systems of their alternative education programs. These evaluations should determine whether schools are approaching problematic behaviors from a preventative or punishment-based perspective as well whether they are providing a positive system of interventions and supports. They should also provide resources and trainings that help constituents implement these types of framework with fidelity given that these frameworks, such as PBIS have demonstrated improvements with those they serve.

Limitations

There are several limitations to the current study. First, it utilized a single-case study design. This limited the ability to use a control group to examine results and mitigated the opportunity to compare findings. The current study also collected evidence from participant

interviews and direct observations. The participants had various levels of PBIS knowledge that might have influenced their responses. In addition, using self-report data potentially caused participant responses and interactions to reflect some level of personal bias, opinion, and experience. Similarly, the role of the researcher in context to the study and participants could have influenced the data collection and analysis process as well as the interpretations findings. The researcher utilized strategies to ensure trustworthiness such as member-checking and the triangulation of data to increase the study's reliability.

<div align="center">**Future Research**</div>

The lack of current and efficacious literature that focuses on the intersection of PBIS implementation for students with ED in alternative education suggests that further research would contribute to the knowledge and practices associated with this population. Future research could further expand upon the findings of this study by examining other alternative education settings that used this framework to educate in this specific population. These studies could include additional qualitative and quantitative data of the specific PBIS-related practices and programmatic components that contributed to positive outcomes for students in this population. Given that the current research analyzed data from a relatively shortened period of time, these studies might also consider examining longitudinal data and exploring the potential changes to the school, setting or context as a result. Findings of the present study as well as those found in previous research identify staff member participation and buy-in as essential to PBIS implementation. Research on the training and preparation required to facilitate and implement the necessary changes to the school's setting and structure would further build upon knowledge in this area. This could include an exploration of how staff members were trained, informed, and evaluated order to appropriately delivery PBIS implementation with fidelity. Finally, future

studies would benefit from the development and exploration of culturally responsive and appropriate practices associated with PBIS implementation. This area of research would benefit from these topics in connection to this specific population and intersection.

Summary

Chapter five discussed the current study's findings and examined them in context with the previous literature. This chapter also reviewed the potential implications for constituents of this research. It concluded with potential research areas that future studies can investigate and expand upon. The discussion of this content will hopefully contribute to the current body of knowledge and research regarding this intersection.

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Appendix A: Letter of Invitation

Dear_____,

My name is Kira Mari Candelieri Marcari and I am a Doctoral candidate in the Counselor Education and Supervision program at Old Dominion University in Norfolk, VA. I am conducting a dissertation on the Application and Implementation of the Positive Behavioral Interventions and Supports Framework for Students with ED/EBD in Alternative Education. If you have been a full-time staff member at Blue for at least one school year, are currently employed as a full-time staff member of the school's administrative team or as a therapist, teacher, or mental health associate, and are a member of the school's PBIS team, I would like to invite you to participate in the proposed study. Voluntary participants will be interviewed in person about their experiences when implementing and applying the PBIS Framework to their setting. Please let me know if you are willing to participate in the study so that I may provide you with a letter of informed consent as well as additional instructions. I appreciate your time and consideration.

Sincerely,
Kira Mari Candelieri Marcari, LPC, MA, CCMHC, NCC (Primary Researcher)
Doctoral Candidate
Department of Counseling and Human Services Old Dominion University
kcand001@odu.edu (757) 434-5344

Kristy Carlisle, Ph.D., (Research Supervisor)
Assistant Professor - Dissertation Committee Chair
Department of Counseling and Human Services Old Dominion University
kcarlisl@odu.edu (757) 683-6123

Appendix B: Informed Consent

OLD DOMINION UNIVERSITY

PROJECT TITLE: The Application and Implementation of the Positive Behavioral Interventions and Supports Framework for Students with ED/EBD in Alternative Education.

INTRODUCTION: The purposes of this form are to give you information that may affect your decision whether to say YES or NO to participation in this research, and to record the consent of those who say YES. This qualitative study's purpose is to gain knowledge about the manner in which the PBIS framework is conducted within alternative education for students with emotional disturbances and/or emotional disabilities.

RESEARCHERS:
Responsible Principal Investigator: Kristy Carlisle, PhD, Department of Counseling and Human Services; Darden College of Education & Professional Studies, Old Dominion University.
Primary Researcher: Kira Mari Candelieri Marcari, LPC, MA, CCMHC, NCC, Counseling PhD candidate.

DESCRIPTION OF RESEARCH STUDY: The proposed study aims to contribute to a growing body of research and knowledge on the use and implementation methods of PBIS in alternative education settings. In particular, this case-study will examine how a single alternative education setting adapts PBIS for its students with ED or EBD. PBIS implemented in the public-school setting has been associated with positive outcomes for traditional students. There are also studies to suggest that PBIS could be beneficial for general education students with ED or EBD. However, an increasing number of students with ED or EBD are being served in alternative education settings. The long and short-term consequences of ineffective education for students with ED or EBD can be detrimental for students' socioemotional health. Therefore, it is imperative to ensure that this population is receiving education that supports their personal and academic growth. While recent literature suggests promise for PBIS students in alternative education with ED or EBD, little research examines the manner in which it is modified to fit the setting structure. Current deficits in the literature include knowledge regarding how and why PBIS implementation is successful at this intersection. Therefore, the proposed study aims to address these gaps in the literature and provide a thick, rich description of PBIS implementation in alternative education with this specific student population. Studying this exemplary case may offer insights to future educational structures that are contemplating incorporating the PBIS framework into its system. Equally, this study may offer a reference point for educational leaders currently including PBIS into their programmatic approach. The proposed study will use a qualitative-single case study design of an exemplary, alternative educational program implementing PBIS for its students, ages 5-22, with special needs who have difficulty learning in a traditional school setting. The researcher will conduct interviews with the school's faculty and PBIS leaders as well examine the school's environment and related documents or records to collect and analyze data. The proposed study will use the following questions to guide the research process: (1) How does a therapeutic educational program implement or apply PBIS within its population and setting structure? (2) From the perspectives of the staff members, why is PBIS implementation successful or useful in this setting?

INCLUSION CRITERIA: Appropriate participants will meet the following inclusion criterion: (a) must have been employed as a full-time staff member of Blue for at least one school year (b) must be currently employed as a member of the school's administrative team, (i.e., principal, assistant principal, etc.), or as a therapist, teacher, or as a mental health technician at Blue (c) must be identified as a member of the PBIS team as indicated by the PBIS team leader at Blue.

RISKS AND BENEFITS:

RISKS: There are no known risks to your participation in this study. The researchers tried to reduce any risk by allowing you to choose not to answer any question that you do not feel comfortable answering. As with any research, there is some possibility that you may be subject to risks that have not yet been identified.

BENEFITS: There are no known direct benefits to your participation in this study.

COSTS AND PAYMENTS: Participants will be not be compensated for participating in this study.

NEW INFORMATION: If the researchers find new information during this study that might reasonably change your decision about participating, then they will give it to you.

CONFIDENTIALITY: Although the researchers cannot guarantee confidentiality, the information/data you provide for this research will be stored in a password protected file. Participant numbers will be used throughout the data analysis and coding process and in the final reports. Results of the research may be used in reports, presentations, and publications but the researchers will not identify you. In addition, your records may be subpoenaed by court order or inspected by government bodies with oversight authority. According to federal regulations, cases of suspected child abuse/neglect will be reported by the researchers to the local Department of Human Services. You have the right to review the results of this research if you wish to do so. A copy of the results may be obtained by contacting the researchers.

WITHDRAWAL PRIVILEGE: It is OK for you to say NO. Even if you say YES now, you are free to say NO later, and walk away or withdraw from the study at any time. The researchers reserve the right to withdraw your participation in this study at any time, if they observe potential problems with your continued participation.

COMPENSATION FOR ILLNESS AND INJURY: If you say YES, then your consent in this document does not waive any of your legal rights. However, in the event of any harm arising from this study, neither Old Dominion University nor the researchers are able to give you any money, insurance coverage, free medical care, or any other compensation for such injury.

In the event that you require any consultation about the nature of your participation in this project, you may contact:

Dr. Kristy Carlisle, the Responsible Principle Investigator at kcarlisl@odu.edu, Dr. Laura Chezan, current Chair of the Darden College of Education & Professional Studies Human Subjects Review Committee at lchezan@odu.edu, or the Old Dominion University Office of Research at 757-683-3460 who will be glad to review the matter with you.

VOLUNTARY CONSENT: By signing this form you are saying several things. You are saying that you have read this form or have had it read to you, that you are satisfied that you understand this form, the research study, and its risks and benefits. The researchers should have answered any questions you may have had about the research. If you have any questions later on, then the researchers should be able to answer them:
Kira Mari Candelieri Marcari, kcand001@odu.edu

And importantly, by signing below, you are telling the researcher YES, that you agree to participate in this study. The researcher should give you a copy of this form for your records.

_____ Subject's Printed Name & Signature	_____Date

Appendix C: Demographic Sheet
Demographic Form

1. If you feel comfortable, please identify your race.

2. Please describe your educational background/experience.

3. How long have you been working in the field of education?

4. What is your current job title at Blue?

5. How long have you worked in this role?

6. During this time, how long have you implemented PBIS?

Appendix D: Interview Protocol

Part 1: Introductory Protocol
Thank you for volunteering to participate in this study. The purpose of this research is to gain insight as to how "Blue" implements and adapts PBIS to suit its special population of students with ED/EBD. To do so, I will ask you a certain set of interview questions that are designed to help you reflect upon your personal experiences and perceptions related to this intersection. This interview will take approximately 45-60 minutes.. You may expand upon these questions or decline to answer any of those that make you feel uncomfortable. You are also free to withdraw from the study at any time. Your privacy and confidentiality are also of the upmost importance and I, along with my case-study team, will make every effort possible to ensure confidentiality. There are no foreseeable risks associated with participating in this study. Your responses to interview questions are vital to the present research. Therefore, I will be recording this interview's audio. You may also notice me or my colleagues taking notes throughout the interview. This is so that we can refer to your comments or responses during the subsequent data-analysis phase. Your audio file will may be transcribed by a professional transcription company. In this event, the professional transcription company will be required to sign a confidentiality statement and will only receive your pseudonym to maintain confidentiality. I would like to begin recording this session now. Is that all right with you? (Audio recording to begin) To meet our human subjects requirements, participants are required to read and sign the Informed Consent Form, which was provided to you earlier. This document, which you signed and dated on:_____, states that: (a) all information will be held confidential, (b) your participation is voluntary and you may stop at any time if you feel uncomfortable, and (c) I do not intend to inflict any harm. Do you still wish to participate in the present study? Do you have any questions or concerns about the interview process or this form? Do you have any other additional questions at this time?

Part 2: Interview Questions

1. How would you describe PBIS to someone that did not know about its approach?

2. Have you received training in the PBIS Framework?

    a. What factors of this training do you feel were the most helpful in implementing and applying PBIS to your current setting?

    b. What factors of this training do you feel were the least helpful in implementing and applying PBIS to your current setting?

    c. Did you make adjustments, modifications adaptations to the teachings of these trainings to better suit your setting, environment and population? If so, please explain.

3. Please describe a typical day of implementing PBIS within your role.

    a. What parts of PBIS do you implement on a daily basis regardless of what is occurring in the environment and why.

    b. What parts of PBIS do you implement on less frequently and why.

4. Which aspects of PBIS do you believe are most conducive for individual student growth? Why?

5. Which aspects of PBIS do you believe are most conducive for the school program, climate and culture? Why?

6. Which aspects of PBIS do you believe are most helpful in managing student behaviors? Why?

7. Which aspects of PBIS do you believe are least helpful in managing student behaviors? Why?

8. What type of behaviors are most responsive to the PBIS framework?

9. What type of behaviors are less responsive to the PBIS framework?

10. Tell me about how Tier 1 interventions are implemented and applied within your setting.

    a. Tell me about how *you* implement and apply Tier 1 interventions within your

        setting.

11. Tell me about how Tier 2 interventions are implemented and applied within your setting.

    a. Tell me about how *you* implement and apply Tier 2 interventions within your

        setting.

12. Tell me about how Tier 3 interventions are implemented and applied within your setting.

    a. Tell me about how *you* implement and apply Tier 3 interventions within your

        setting.

13. Tell me about a time PBIIS implementation was most successful within your setting and

    population.

14. Describe an instance when schoolwide PBIS worked well with one student and not

    another.

15. Is there anything else you would like to tell me that might help me better understand how

    PBIS is implemented and applied to this setting and population?