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The Inclusion of Students with an Emotional and Behavioral Disturbance (EBD) in
Regular Education Classrooms: A Survey of School Psychologists in the United States

Graduate Thesis

Submitted to the Faculty

Of the School Psychology Program

College of Liberal Arts

ROCHESTER INSTITUTE OF TECHNOLOGY

By

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And

Larry Scott

In Partial Fulfillment of the Requirements

For the Degree of

Master of Science and

Advanced Graduate Certificate

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May 5, 2003

Approved: _____
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Abstract

Current literature suggests that among students with disabilities, students with emotional and behavioral (EBD) disturbances are the most challenging to include. This study surveyed the perceptions of school psychologists and other professionals nationwide regarding this issue. Respondents indicated that students with EBD are still spending a large amount of their day outside of the regular education classroom. Rural districts reported a significantly higher amount of students with EBD being included in regular education, compared to urban districts. Individual student needs and “district vision, beliefs, and philosophy” ranked as the most important factors influencing attempts to educate students with EBD in a least restrictive environment. To enhance the inclusion of students with EBD, respondents reported the need for effective training, systematic support, and modification of the perceptions of regular education teachers. Urban and rural district respondents ranked the availability of grant money when making placement decisions as significantly more important than suburban districts. As years in practice decreased among the respondents, the reported need for effective training significantly increased. However, the importance placed on dedication, a clear vision, and philosophy/belief of district significantly decreased with fewer years in practice.

Under the Individuals with Disabilities Education Act of 1997, all children, ages 3 to 21, are entitled to a free and appropriate public education. These children are to receive this education to the fullest extent possible, in an age-appropriate regular education classroom, and with non-disabled peers (IDEA, 1997). Within the last ten to fifteen years, the US has seen substantial movement towards the inclusion of these students. The current trend of inclusion for students with disabilities is reflected in the data provided in the *Twenty-second Annual Report to Congress* (US Department of Education, 2000). Although the statistics in this report showed that the overall population of disabled students is included more often, the population of students with an emotional or behavioral disturbance (EBD) continued to receive most of its education outside the regular classroom. This may be due to the exceptional academic, social, and behavioral needs of these students (Brigham & Kauffman, 1998; Handwerk & Marshall, 1998; Hendrickson, Smith, & Frank, 1998; Kauffman, 1993; Lloyd & Kauffman, 1995; MacMillan, Gresham, & Forness, 1993), as well as how they have effected teachers (Gunter, Jack, Depaepe, Reed, & Harrison, 1994; Kauffman, 1993; Macmillan, Gresham, & Forness, 1996; Long, 1994; Nelson, Maculan, Roberts, & Ohlund, 2001). Supporters of the inclusion movement believe that students with EBD could benefit from being included (Cheney & Harvey, 1994).

According to the U.S. Department of Education (2000), in 1998-1999, the number of children ages 6 to 17 served under IDEA increased to 5,259,430. Children ages 6 to 17 with EBD accounted for approximately 8.65% of these students. Secondary students

with EBD (ages 12 to 17) accounted for 65.43% of the EBD population, while elementary age students with EBD (ages 6-11) accounted for 34.57%.

During the 1997-1998 school year, 97.78% of all elementary age students with disabilities attended a regular education placement, while 2.22% of these students attended separate facilities (i.e. public or private separate facilities, residential facilities, or hospital home environments). Similarly, 94.65% of all secondary age students with disabilities attended a regular education school, while 5.35% attended separate facilities. Among all elementary and secondary age students classified with a disability, the largest percentage spent less than 21% of their day outside the regular education classroom. Among children classified specifically as EBD, 88.82% of students ages 6 to 11 attended a regular education school. Almost 40% of these students spent 60% or more of their day outside the regular education classroom. In addition, 11.19% of children with EBD ages 6 to 11 were served in separate facilities. For students ages 12-17, 78.7% attended a regular education school, although over 30% of these students spent more than 60% of their day outside the regular education classroom. Furthermore, 21.3% were served in separate facilities.

These statistics revealed several trends. First, a greater percentage of all students with disabilities attended regular education schools than did the EBD population, and many students with disabilities were outside the regular education classroom for 21% or less of their day. Within the EBD population, although 88% of elementary age students remained in a regular education school, a large percentage of them spent 60% of their day or more outside the regular education classroom. Almost twice as many secondary students (21.3%) than elementary students (11.9%) with EBD attended separate facilities.

Teacher Perceptions

Empirical studies, which adequately and consistently indicate whether self-contained classroom or regular classroom placements are more beneficial for students with EBD, do not exist (Detterman & Thompson, 1997). Many existing studies suggested that regular education classrooms and teachers are unprepared to meet the needs of students with EBD (Cheney & Barringer, 1995; Harvey 1996; Heflin & Bullock, 1999; Martin, Lloyd, Kauffman, & Coyne, 1995). Teachers have indicated that a lack of support, training, and time to make curricular modifications and to collaborate with team members are barriers to successful inclusion of students with EBD (Heflin & Bullock, 1999). In addition, some teachers have indicated that they have little say in placement decisions and that administrative processes interfere with appropriate service (Martin, Lloyd, Kauffman, & Coyne 1995).

Many teachers agreed that placement and intervention planning should be done on an individual basis (Cheney & Barringer, 1995; Harvey, 1996; Heflin & Bullock, 1999; Martin, Lloyd, Kauffman, & Coyne, 1995); however, teachers believed that individualized instruction and behavior management plans are less developed in regular classrooms (Harvey, 1996). As a result, teachers indicated that all students with EBD might not be able to receive the individualized education they need in regular classrooms (Heflin & Bullock, 1999). Based on these findings (Cheney & Barringer, 1995; Harvey, 1996; Heflin & Bullock, 1999; Martin, Lloyd, Kauffman, & Coyne, 1995), inclusion in a regular classroom might not be the most appropriate placement for all students with EBD (Heflin & Bullock, 1999). More or better available resources and more effective teaching

methods may help self-contained classrooms to be better prepared to meet the needs of these students (Harvey, 1996).

Many interactive factors can determine whether a student with EBD will succeed in a regular classroom. These include individual student characteristics, administrative views and policies, teacher training and support, adequate and appropriate staff, parental support, adequate resources, and time. Teachers have stated that instructional support, training in collaboration, and careful intervention planning and implementation are necessary for the successful inclusion of students with EBD in regular classrooms (Heflin & Bullock 1999). Evidence indicated that direct consultation is essential to enhance successful inclusion (Heflin & Bullock, 1999; Summer et al., 1999). Summer et al. (1999) found that interventions for students with EBD in regular classrooms were successful only after consultative support was provided to staff. An intensive inservice for students alone that included training in self-management, social skills, problem solving, peer tutoring, and cooperative learning was unsuccessful in serving most students with EBD (Summer et. al., 1999). When consultative support was included, 70% of the students in the study maintained or increased time in regular classrooms (Summer et. al., 1999). Clearly, training and resources alone are not enough to serve students with EBD in the regular classroom; consultative support services are a crucial ingredient for successful inclusion.

Possible Motivating Factors for Inclusion

Some educators believe the purpose of the inclusion movement is to enhance social development for those students with EBD (Macmillan, Gresham & Forness, 1996). Other educators have stated that the real goal of the inclusion movement is to reduce

funding by eliminating special education services (Long, 1994). Students with EBD are in need of more services than typical students; therefore, the inclusion of these students should not be a means to reduce funding but a reallocation of funding (Cheney & Harvey, 1994). Eliminating or reducing the services and support that students with EBD will decrease the chance that these students will succeed in regular classrooms. Hallenbeck & Kauffman (1996) compared the elimination of special education services from students with EBD to taking intensive care units away from ill patients. (Essentially, patients in critical condition would not fair well in basic care units just as students with EBD would not fair well without special education services.) Unfortunately, the inclusion movement often appears to be enforced by administrative decisions that are motivated by political and financial factors. Decision-making has excluded the input of educators (i.e. teachers, school psychologists, social workers, teacher aides, etc...) in careful planning and restructuring therefore decreasing the likelihood for appropriate placement and services for students with EBD (Martin, Lloyd, Kauffman, & Coyne 1995).

Overall, students with EBD present an immense challenge to schools.

Determination of appropriate placement and services for these students is daunting. Limited empirical research that reliably addresses the challenges of including students with EBD in regular education classrooms has been published. Most current studies focus on single school districts or include small and disproportionate sample sizes (Cheney & Barringer, 1995; Harvey 1996; Heflin & Bullock, 1999; Martin, Lloyd, Kauffman, & Coyne, 1995). Specifically, research that examines national and state trends involving barriers that limit successful inclusion, and in contrast, strategies that enhance successful inclusion of students with EBD, are few in number.

School psychologists are the professionals who typically serve as consultants for students who display emotional and behavioral problems in the classroom. The current study surveyed the perceptions of a random sample of school psychologists nationwide on the inclusion of EBD students. This study was designed as a follow-up to the Costenbader and Mattoon study (2000) that surveyed special education administrators from Western New York State. The objective of the survey was to gather school psychologists' perceptions about factors that influence the inclusion of students with EBD, the types of services or information that enhance inclusion, and the factors that are significant barriers to successful inclusion. We also sought to gain information regarding the placements of students with EBD in the districts of the respondents surveyed. Finally, this study looked for possible differences in the perceptions of respondents at the secondary and elementary levels, as well as differences by gender, urbanicity of school district, and number of years in practice.

Method

Participants and Procedure

Participants surveyed were 500 randomly selected members of the National Association for School Psychologists. Most were employed as school psychologists; however, some were employed in other related roles such as Director of Special Education, Director of Special Services, Director of Pupil Personnel Services, and Associate Professor. A cover letter was attached explaining the purpose of the survey, as well as the voluntary and confidential nature of participation in the study. A stamped return envelope was included, as well as a blank slip of paper on which the respondent

could elect to write his or her name to enter a drawing to win one of three Best Practices IV Books. Two weeks later, a second mailing was conducted to participants who had not responded.

Instrument and Analysis

The survey had 12 questions. Questions one through eight requested demographic information from the school psychologist. Questions nine through eleven presented a Likert scale and asked participants to rank eight alternatives from most important to least important (1= most important, 8=least important). For each of these three questions, seven options were provided with space for the respondent to add other comments. Question nine focused on factors that school psychologists thought most influenced the inclusion of EBD students; question 10 asked what types of services or training school psychologists believed were most helpful to successfully include students with EBD; question 11 asked what factors school psychologists believed to be the biggest barriers to providing full inclusion for students with EBD

The results were analyzed to determine whether the level of employment (i.e. elementary school vs. secondary school), urbanicity of district, number of years in practice, and gender of the respondents were related to perceptions of including students with EBD. Question 12 asked the respondents to provide information regarding the number of students in their districts with EBD in particular educational placements (a list of possibilities were provided from least to most restrictive).

Results

The Sample

Responses were received from 43 states, with California and New York having the highest representation, at 8.7% and 6.8%, respectively. The sample distribution for remaining states is provided in Table 1. A total of 166 responses were received, for a return rate of 35%. Sample information is provided in Table 2. Of the 166 respondents, 125 (78.6%) were school psychologists, while 34 (21.3%) were employed under a different title, including Director of Special Education, Director of Special Services, Director of Pupil Personnel Services, and Associate Professor. On average, respondents had been in practice 16.83 years, and in their current placement 9.37 years.

The sample had a total of 110 females (68%), and 51 males (31.7%). A One-way ANOVA revealed no significant differences on any question by gender; indicating that perceptions about including students with EBD among male and female respondents was relatively similar. The respondents were almost evenly represented by urbanicity of district: rural (25.8%), urban (31.3%), and suburban (36.2%). Almost seven percent of the respondents served in multiple locations.

A majority of respondents (53.6%) were employed or served at multiple school levels or placements (i.e. elementary and secondary). The remainder of the respondents were identified by level of employment as follows: preschool (1.8%), elementary (15.7%), junior high or middle school (4.8%), high school (9.6%), residential (1.8%), and other (12.0%). Because most respondents served multiple levels, a comparison between elementary and secondary level could not be completed.

Analysis

After providing demographic information, the respondents completed a four-question survey. The first question asked respondents to rank factors that influenced their school district's attempts at including students with EBD in a least restrictive environment. Table 3 presents the mean ranking of each factor. Respondents indicated that individual student needs were the most important factor they considered when making placement decisions for students with EBD. District vision, beliefs, and philosophy ranked second, and parental preferences ranked as the third most important factor. The least important factors influencing placement decisions for students with EBD were vocal community task forces and availability of grant money. A one-way ANOVA revealed significant variance in importance placed on the availability of grant money between urban, suburban, and rural districts ($F(2, 124) = 3.451, p < .05$). LSD post-hoc tests revealed that respondents from suburban districts ranked the availability of grant money (average ranking of 7.08) as significantly less important than did respondents from either rural (average ranking of 6.26) or urban districts (average ranking of 6.28) ($p < .05$).

The second question asked respondents to rank information and support that would be valuable to their districts when attempting to educate students with EBD in a least restrictive environment. Table 4 presents the mean ranking for each factor. Respondents indicated that effective professional training was the most important factor for educating students with EBD in a least restrictive environment. Personnel supports and effective models of teaching ranked second and third, respectively. The factors that were ranked as least valuable included the type of student disability and the age of

students. A Spearman's Correlation (two-tailed) revealed that as the number of years in practice increased, the importance that respondents placed on training decreased ($r = .321$, $p < .01$). (Please note, a lower ranking number represents increased importance; therefore, although this correlation is positive, it actually represents a decreased amount of importance placed on this item.)

The third question asked respondents to rank factors that were barriers to successful re-integration of students with EBD. Table 5 presents the results of this question. Respondents indicated insufficient professional training in behavior management of students with EBD was the greatest barrier to successful re-integration. The reluctance of regular education teachers to accept students with EBD in their classrooms ranked as the second largest barrier, while lack of support staff (i.e. psychologists, teacher aides, one-to-one aides, support or time-out room aides, counselors, social workers, consultant teachers, etc...) ranked third. Respondents ranked a lack of materials and educational supports (i.e. curricular modifications, financial resources, and community agency involvement), and a lack of time for planning, meetings, and consultations as the least influential barriers to successful re-integration of students with EBD. A Spearman's Correlation (two-tailed) indicated that as years of practice increased, the importance placed on sufficient dedication, a clear vision, and philosophy significantly increased ($r = -.174$, $p < .05$).

Finally, respondents provided either an estimate or the exact number of students classified EBD in their districts and their breakdown by placement. Table 6 presents these responses. Approximately half of the respondents provided estimations, while half provided exact numbers. Respondents reported on average that 2.58% of their total

school district enrollment was classified EBD, with a range from less than 1% to 8.33%. Respondents provided the placements of the students classified EBD. A one-way ANOVA revealed a significant difference ($F(2, 109) = 3.674, p < .05$) between the mean percentages rural, urban, and suburban respondents provided for the number of EBD students primarily placed in district regular education classrooms. LSD post-hoc tests revealed that respondents from rural districts reported significantly higher mean percentages of students (54.67%) whose primary placement is in district regular classrooms than respondents from urban districts (35.29%) ($p < .05$).

Discussion

According to statistics from the *Twenty-second Annual Report to Congress* (U.S. Department of Education, 2000), 0.93% of students (ages 6-17) were served under IDEA with a classification of emotional disturbance, in the 1998-1999 school year. In the 1997-1998 school year, 13.1% of students classified EBD were served in a separate facility, 33.5% were served in a regular classroom more than 60% of the day, and 25% were served in a regular classroom between 0% to 21% of the day (U.S. Department of Education, 2000).

In this study, about half the respondents estimated the information on educational settings for students with EBD in that district and thus a comparison is difficult. However, if the statistics provided by the *Twenty-second Annual Report to Congress* (U.S. Department of Education, 2000) are used as a frame of reference, the estimated average percentage of students classified EBD (2.58%) and the estimated average percentage of students with EBD who were served in a separate facility (17.65%) in our

study is comparatively high. Our respondents indicated that less than half of students classified EBD (42.75%) were primarily placed in a regular education classroom, and 30.25% of students with EBD spend more than 50% of their day in a district self-contained special education classroom. Clearly, students with EBD continue to spend a large amount of time outside of the regular education classroom.

Compared to urban districts, respondents from rural districts reported a significantly higher percentage of students with EBD whose primary placement is in a district regular education classroom. It is possible that limited placement options for rural school districts force them to include students with EBD in regular education more often.

Several respondents wrote in placements that were not included on the survey. These included a local school “gifted handicapped” program, partial day treatment/partial public school, correctional facility, and prison. Two respondents indicated that some students who were classified EBD were placed in a self-contained classroom for students with speech-language disabilities or language-learning disabilities. One respondent wrote: “We have many kids with EBD and BD who are discussed over and over. They are not, however, classified as such.”

Perceptions

The most valuable data gathered by the current study is the perceptions of respondents regarding the inclusion of students with EBD in regular education. Perceptions of current respondents, NASP members, on the inclusion of students with EBD were similar to previous studies conducted with teachers. As in previous studies (Cheney & Barringer, 1995; Costenbader & Mattoon, 2000; Harvey, 1996; Heflin &

Bullock, 1999; Martin, Lloyd, Kauffman, & Coyle, 1995), individual student needs ranked as the most crucial consideration when determining the least restrictive placement of students with EBD. Given the challenging academic, social, and behavioral needs that students with EBD present, it is not surprising that this is the factor considered first. Each student with EBD presents a unique profile of characteristics; one student with EBD may appear dramatically different from the next, and consequently will respond differently to placement and to services.

The second most crucial consideration when determining the placement of students with EBD was reported to be “district’s vision, beliefs, and philosophy on education of students with EBD”. Likewise, previous studies found that teachers perceive administrative processes as interfering with the provision of appropriate service for students with EBD (Martin, Lloyd, Kauffman, & Coyne, 1995). The third most important consideration reported in the current study was parental preferences. This consideration was not reported in previous studies.

Respondents from rural and urban districts reported that available grant money influenced their placement decisions to a significantly greater degree than did suburban districts. The financial disparity that often exists between poorer rural and urban districts, compared to wealthier suburban districts, may explain this finding. Suburban districts are less dependent on external funding to pay for costly placement options or staff and material supports.

Some respondents provided additional written responses on factors that influenced their district to include students with EBD in a least restrictive environment. One wrote, “recommendations from an agency that conducted a year-long study on the

district's special education program." Another wrote that, " The school psychologist influenced" the placement of students with EBD in a least restrictive environment.

Respondents expressed the need for training of regular education teachers to enhance the success of educating students with EBD in a least restrictive environment. Other studies also suggest that regular education teachers feel unprepared to meet the needs of students with EBD in regular education classrooms (Martin, Lloyd, Kauffman, & Coyne, 1995; Cheney & Barringer, 1995; Heflin & Bullock, 1999, Harvey, 1996). It is interesting that the need for training was ranked as less important as years of practice increased, suggesting that respondents with limited experience value additional training significantly more than respondents with more experience.

Personnel supports (i.e. teacher aides, one-to-one aides, support or time-out room aides, psychologists, counselors, social workers, consultant teachers, etc...) and effective models of teaching (i.e. consultant teacher, resource room, blended classroom, etc...) were also ranked as important to successful inclusion. This suggests that teacher/staff training should be combined with ongoing systematic support, consistent with other studies (Heflin & Bullock, 1999; Summer et al.,). Heflin and Bullock (1999) found that teachers believed that instructional support, training in collaboration, and careful intervention planning and implementation were most necessary to enhance the success of students with EBD in regular classrooms.

Similar to previous studies, our findings suggest that intensive and systematic support is necessary to successfully educate students with EBD in regular classrooms. Because these students are among the most demanding, consistent planning and support for implementation is necessary across all settings and situations, and for all professional

levels: administrators, student support staff (i.e. school psychologists, social workers, etc...), teachers and aides.

Respondents provided written responses about what they believe would enhance the success of students with EBD educated in the least restrictive environment. One wrote, “support by agencies or mental health counselors for families, in conjunction with the school.” Another wrote, “community mental health resources for family interventions (including management of medications).”

The greatest barrier to successful re-integration of students with EBD, as ranked by our respondents, is insufficient training in behavior management for faculty and staff. This is consistent with the Harvey (1996) study: teachers believed that individualized instruction and behavior management plans were less developed in regular education classrooms than in self-contained classrooms. Regular education teachers who would be ready to accept students with EBD into their classrooms was the second most important barrier to successfully re-integrating EBD students. Increasing the willingness of regular education teachers to accept students with EBD presents a challenge. If regular education teachers have negative preconceptions about educating students with EBD, it is likely they will be less willing to accommodate these students, making it unlikely that the students will be successfully included in regular education. The third most influential barrier for re-integration, a lack of personnel supports, is consistent with the finding that personnel supports are crucial to enhancing successful re-integration of students with EBD.

Regular education teachers may not have special education training. Some may have chosen to be regular education teachers with the understanding that they will not

have to accommodate the needs of children in special education (Buell, Hallam, & Gamel-McCormick, 1999). This and previous studies (Martin, Lloyd, Kauffman, & Coyne, 1995; Cheney & Barringer, 1995; Heflin & Bullock, 1999, Harvey, 1996) suggest that several factors may influence the perception of regular education teachers about students with EBD including lack of effective training, and systematic support and services. A lack of training and support may create a sense of alienation, helplessness, and frustrations among regular education teachers when it comes to managing and educating a student with EBD in a regular education classroom. Providing effective training, systematic support, and ongoing collaborative consultation, may allow regular education teachers to feel more prepared to meet the needs of students with EBD and to develop and implement individualized education.

Several respondents wrote in additional barriers to successful re-integration of students with EBD that were not included on the survey. One respondent reported a lack of therapeutic counseling intervention in schools; another the ambiguity of the federal definition for EBD. Many respondents commented on severe and dangerous behaviors of students with EBD, and noted that disruptive behavior interferes with the learning of typical students. Lack of programming options, particularly at the high school level, was reported. Other respondents noted that logistical factors including lack of space in school buildings and large class sizes were barriers to inclusion of students with EBD. Respondents indicated that a smaller classroom and lower teacher/pupil ratios were needed to provide the structure and consistency that students with EBD demand.

Some respondents wrote that political and financial factors inhibit the successful re-integration of students with EBD. One wrote: "District and state failure to fund

appropriate programs coupled with a failure to offer training to regular education teachers; a means to reduce costs. They (district and state level officials) don't think about the students or teachers." Another respondent wrote: "Our special education departments run, in my opinion, as a business. The financial aspect dictates the services, or, in some cases, who one knows determines services." The belief that the "inclusion movement" is aimed at reducing costs by eliminating special education services has appeared elsewhere (Cheney & Harvey, 1994; Long, 1994). Using inclusion as a means to cut costs is not in the best interest of the students.

When analyzing responses to the question about barriers to successful re-integration of students with EBD, it was found that as respondents' years in practice increased, sufficient dedication, a clear vision, philosophy, and belief in least restrictive environment for all students of the district became significantly more important. This suggests that with more experience, school psychologists recognize the influential role of systems level factors.

The low return rate (35%) in this study is a limitation. In addition, differences among school psychologists who served elementary and secondary schools could not be determined, because the majority of respondents were employed at multiple levels.

Conclusion

Distinctive from previous research on the inclusion of students with EBD, this study surveyed school psychologists. Findings were consistent with previous surveys conducted with teachers. The current and previous studies (Cheney & Barringer, 1995; Harvey, 1996; Heflin & Bullock, 1999; Martin, Lloyd, Kauffman, & Coyne, 1995)

confirm the need for effective training and systematic support to successfully manage the challenging needs of students with EBD in regular education. The implementation of effective training and systematic support begins with the decision making at the federal, state, and district level, and should include the input of all levels of educators, in order to ensure that decisions regarding placement and services are being made in the best interest of each individual student with EBD.

When conducting further research on this topic, researchers may want to consider the following questions: By placing students with EBD in the regular classroom to enhance social development, might academic development be ignored? Does including students with EBD in regular education actually enhance social development? Can educators ignore academic development to promote social development or vice versa? When determining the appropriate placement for a student with EBD, decisions should be made with an attempt to enhance both the social and academic development of the student.

Specific types of training and systematic models that can be most effective in successfully including students with EBD in regular education need to be determined. Research is also needed to determine the placements and interventions that will benefit both the academic and social-emotional development of each student with EBD. Inclusion of students with EBD has shown some limited success. One respondent in this study wrote, "We mainstreamed all students about 14 years ago. The students with emotional impairments have been most successful because of good student models and high expectations. We have seen much more growth with these students. Also, having

child study meetings early has helped identify problems and find solutions before special education.”

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Table 1

States Represented in Sample

State	n	Percent
Alabama	2	1.2
Arkansas	2	1.2
Arizona	2	1.2
California	14	8.7
Colorado	3	1.9
Connecticut	4	2.5
Delaware	1	.6
Florida	5	3.1
Georgia	1	.6
Iowa	6	3.7
Idaho	1	.6
Illinois	5	3.1
Indiana	3	1.9
Kansas	3	1.9
Kentucky	2	1.2
Louisiana	2	1.2
Massachusetts	5	3.1

Table 1 (continued)

State	n	Percent
Maryland	7	4.3
Maine	3	1.9
Michigan	8	5.0
Minnesota	4	2.5
Missouri	1	.6
Montana	3	1.9
North Carolina	3	1.9
North Dakota	1	.6
Nebraska	3	1.9
New Hampshire	2	1.2
New Jersey	3	1.9
Nevada	1	.6
New York	11	6.8
Ohio	5	3.1
Oklahoma	3	1.9
Oregon	1	.6
Pennsylvania	6	3.7
Tennessee	3	1.9
South Dakota	1	.6
Texas	4	2.5
Utah	1	.6

Table 1 (continued)

State	n	Percent
Virginia	8	5.0
Vermont	1	.6
Washington	8	5.0
Wisconsin	8	5.0
Wyoming	1	.6
Total	43	100%

Table 2

Demographics of Sample (N=166)

	n	Percent
Occupation		
School Psychologists	125	78.6
Other:	34	21.3
Director of Special Education		
Director of Special Services		
Director of Pupil Personnel Services		
Associate Professor		
Gender		
Males	51	31.68
Females	110	68.32
Location		
Rural	42	25.77
Urban	51	31.29
Suburban	59	36.2
Multiple Locations	11	6.75

Table 2 (continued)

	n	Percent
School Setting		
Preschool	3	1.8
Elementary	26	15.7
Jr. High or Middle School	8	4.8
High School	16	9.6
Residential	3	1.8
Multiple	89	53.6
Other	20	12.0

Table 3

Mean Ranking of Factors Influencing Integration of Student with EBD in Least Restrictive Environment (N=154)

Responses	Mean Rank
Individual student needs	2.84
District vision/beliefs/philosophy of education for students with EBD	3.22
Parental Preferences	3.31
Inclusion initiatives coming from state and federal governments	3.42
Financial considerations (e.g. tuition charges)	4.89
Student initiated wish to move to a least restrictive environment	5.03
Vocal community task forces	6.41
Availability of grant money	6.59

Note. Respondents were instructed to rank responses on a scale of 1 to 8 (1 = most important, 8 = least important), including “other” responses.

Table 4

Mean Ranking of Information and Support that Would Be Most Helpful in Serving Students with EBD in a Least Restrictive Environment (N=162)

Responses	Mean Rank
Training that have proven to be most effective for staff that work with students with EBD	2.53
Personnel supports necessary to make LRE successful (e.g. teacher aides, one-to-one aides, support or time-out room aides, psychologists, social workers, consultant teachers, etc.)	2.97
Models of teaching that seem to be effective with students with EBD (e.g. team, co-teaching, consultant teacher, resource room, blended classroom)	3.27
Factors that affect teacher attitudes toward inclusion of students with EBD (e.g. training, experience, etc.)	3.66
Materials/educational support to make LRE successful (curriculum modifications and adaptations, community agency involvement, adequate financial resources, etc.)	4.01
Disability types that are most likely to be successful in LRE (e.g., etc)	4.90
Age groups that are most likely to be successful in LRE (e.g. elementary, middle, high school)	6.00

Note. Respondents were instructed to rank responses on a scale of 1 to 8 (1 = most important, 8 = least important), including “other” responses.

Table 5

Mean Ranking of Major Barriers to Successful Inclusion (N=161)

Responses	Mean Rank
Faculty/staff with sufficient training in behavior management of students with EBD	2.84
Regular education teachers who would be ready to accept students with EBD into their classrooms	3.39
Personnel supports (e.g. psychologists, teacher aides, one-to-one aides, support or time-out room aides, counselors, social workers, consultant teachers, etc.)	3.39
Sufficient dedication, a clear vision, philosophy/belief system that supports the integration of these students	4.22
Possibilities for providing faculty/staff with in-service training in behavior management, class room management for students with EBD	4.28
Available time in the school day set aside for planning, Building Level Team Meetings, consultations between school professionals, etc	4.45
Material/education supports (e.g. curricular modifications and adaptations, community agency involvement, adequate financial resources)	5.19

Note. Respondents were instructed to rank responses on a scale of 1 to 8 (1 = most important, 8 = least important), including “other” responses.

Table 6

Mean Percentages of Students Classified EBD and Placements (estimated or exact)

Responses	n	Mean Percent
Percent of EBD students in district that are classified as EBD	127	2.58
Percent of EBD students in a separate facility for EBD	121	17.65
Percent of EBD students in a district self-contained special education classroom for more than 50% of the day (include in this group students who are mainstreamed for part of the day)	121	30.25
Percent of EBD students whose primary placement is a district regular education classroom (include in this group students who are "pulled out" for part of the day for special education or related services)	121	42.74
Percent of EBD students who were on home tutoring for more than ten days of the 1998-1999 school year	121	3.52
Percent of EBD students in out of district residential placements	121	3.81
Other placements	121	.74