ENERGY INTO ACTION

Behavior Action Team Recommendations The Why

Introduction

The mission of OPTIMISE is to build, support, and sustain a new education system that can enthusiastically attract, prepare, and retain an effective and diverse special education workforce to serve individuals across Michigan. To accomplish this work, it was important first to develop a robust list of barriers to attracting, preparing, and retaining special educators. Student behavior quickly surfaced as a key barrier to teacher preparation and retention. For example, a survey from the American Psychological Association (APA) found that 1/3 of teachers reported that they experienced at least one verbal harassment or threat of violence from students during the pandemic. In Michigan, an MEA Educator Survey from September 2023 also found that 81% of respondents experienced verbal outbursts by students that significantly disrupted learning, 59% reported verbal aggression or threats from students, and 49% reported evacuating students due to unsafe behavior. Couple these statistics with the increasingly low teacher efficacy in addressing behavior challenges, and it is clear why student behavior has become a focus in OPTIMISE work.

Contributing Factors

Teaching has always been a demanding job, but the demands of teaching have intensified as teachers are being called upon more than ever before to support sharply increased mental health needs and behavioral challenges of students. According to Leeb and colleagues, in 2021, pediatricians, child psychiatrists, and children's hospitals declared a national state of emergency for youth mental health. Suicide is the second leading cause of death for youth ages 10 to 24, and even before the pandemic, over 1 in 8 youth reported at least one major depressive episode in the past year. "Our youth are struggling with their mental health, and it's profoundly affecting their lives in schools, at home, and in their community." (HF-ASMHRC pg 6)

Survey data collected in the RAND study by Steiner et al. (2022) confirm that teacher and principal well-being is also a matter of "immediate concern." Nearly three-fourths of teachers and 85 percent of principals in this national survey are experiencing frequent job-related stress compared to a third of other working adults. Fifty-nine percent of teachers and 48 percent of principals report burnout. Poor teacher mental health is linked to lower-quality learning environments and student outcomes.

"It's high time we start putting mental health in schools at the forefront. By taking simple steps, ...we can set the example for how American schools should provide for their students." (Izzie House, A junior at East High School in Denver, CO - Hopeful Futures Campaign: 2023 School Mental Health State Legislative Guide)

Given the backdrop of decreased mental wellness for an increased number of students and staff, the broad recommendations of the OPTIMISE Behavior Action Team include:

• Large-Scale Required Professional Learning & Coaching, which will provide educators (preservice and in-service) with the skills and support they need to meet the needs of all students

- Cross-Agency Connections, which will provide intentional and systematic coordination and communication with all stakeholders across the educational, clinical, and medical domains by breaking current barriers to important partnerships
- Funding Barriers, which will address the existing funding structures across agencies/systems that
 often impede efficient and effective support to staff and students and impact the continuum of
 support for all students regardless of insurance coverage, eligibility, or diagnosis.

Several relevant factors contributing to increased student behavioral needs and a decrease in attracting, preparing, and retaining teachers and educators are discussed below and are addressed within the broad recommendations of the Behavior Action Team.

CHRONIC ABSENCE

An <u>abundance of research</u> has made clear that students who miss more days of school demonstrate lower academic performance and feel more alienated. According to Gottfried & Ansari, 2022, as the percentage of absent classmates increases, individual student performance worsens consistently across achievement and executive functioning domains. Nationally, 14.7 million students, 27% of the 54.2 million student population, were chronically absent in 2021-2022, almost doubling from the 8 million+ pre-Covid rate. Chronic absence refers to missing 10 percent or more of school days due to absence for any reason.

What about Michigan?

According to the Center for Educational Performance and Information (CEPI) report from the 2022-23 school year, *almost one-third* of Michigan students (30.8%) are chronically absent. This group of students has an average attendance rate of 78.8%. With regard to students with disabilities in Michigan, 39.5% are chronically absent, with an average attendance rate of 77.5%. Two-thirds of students in Michigan have an average attendance rate of 95.5%.

Attendance Works identifies four root causes of chronic absenteeism. One is an aversion to school, which includes struggling academically and/or behaviorally, biased and punitive disciplinary and suspension practices, and negative educational experiences. A second is barriers, including inequitable access to needed services. Critical strategies to address the challenge of chronic absenteeism include limiting ineffective punitive responses and coordinating community resources; these strategies are embedded within the OPTIMISE Behavior Action Team recommendations.

USE OF EXCLUSIONARY PRACTICES: SUSPENSION AND EXPULSION

Nationally, the <u>data trends</u> are long-standing and clear: children with disabilities, particularly children of color with disabilities, are disciplined with exclusionary practices at far greater rates than their peers without disabilities, and these trends start as early as preschool and extend throughout high school. For example (<u>OSERS Discipline Discussions: The Impact and Harm of Exclusionary Discipline</u>):

- Preschool students served under IDEA accounted for 22.7 percent of total preschool enrollment, but 56.9 percent of preschool students expelled.
- School-age students with disabilities served under IDEA represented 13.2 percent of total student enrollment but received 20.5 percent of one or more in-school suspensions and 24.5 percent of one or more out-of-school suspensions.
- During the 2019–20 school year, Black children with disabilities made up 17.2 percent of children with disabilities aged 3–21 served under IDEA, yet 43.5 percent of all children with disabilities aged 3–21 served under IDEA who were suspended out of school or expelled for more than 10 school days.

According to the CEPI report (2022-23), Michigan's total number of expulsions by incident type is 1396. Two hundred eighty of those students have IEPs. In addition to the "Other" category, which includes 608

expulsions, physical violence without injury (194), physical violence with injury (170), other weapons [not including gun] (162), and drugs (157) were the top incidents resulting in expulsion.

Bottom Line: We have long known that <u>out-of-school suspensions</u> do not deter future behavior challenges and contribute to chronic absenteeism and a high risk of school dropout. Exclusionary practices are frequently used as a default response to intensive behavior; the recommendations include required professional learning and coaching to empower educators to be fluent with effective preventative and response strategies.

USE OF SECLUSION AND RESTRAINT

Michigan's Public Act 394 of 2016 restricted the use of seclusion and restraint in schools. In March 2017, the State Board of Education adopted the Policy for the Emergency Use of Seclusion and Restraint as required by MCL 380.1307. In addition, the Michigan Department of Education developed guidance documents to assist school districts in implementing the law.

According to the Center for Educational Performance and Information (CEPI) data on the use of seclusion and restraint of Michigan students in the 2022-23 school year, students with disabilities make up 82% of the students who were reported as being secluded or restrained. Students with disabilities received 95% of the total number of seclusions (12,552) and 91% of the total number of restraints (10,010) reported. The impact of seclusion and restraint can be significantly traumatizing to students and staff and is disproportionately used with students with disabilities and students of color. Impacts of stress and trauma can disrupt a student's emotional and behavioral well-being and academic success. They may demonstrate increased behavior and decreased school engagement and academic performance. (APA, 2021). Numerous studies reveal that teachers report being underprepared for preventing and responding to behavioral challenges.

Prevention is the best alternative! Educators must understand that behavior is a form of communication and that all behavior serves a function. Students use their behavior to communicate that they want to get something (like attention or an activity) or avoid something (like escape an unpleasant or undesired situation). Therefore, when implementing more targeted or intensive prevention supports, educators must (a) teach students a replacement skill (i.e., more appropriate behavior) that effectively results in similar consequences and (b) make individualized adjustments to the classroom and school environment to set students up for success. Increasing the likelihood of student success reduces the likelihood of a crisis situation. (Preventing Restraint and Seclusion in Schools; OSEP Center on PBIS).

Just as discussed with regard to exclusionary practices, the recommendations of required professional learning and coaching to empower educators to be fluent with effective preventative and response strategies can effectively reduce the number of students who are secluded and restrained.

CONNECTIONS BETWEEN BEHAVIOR AND ACADEMIC OUTCOMES

There is also a long-standing relationship between student behavior and academic outcomes. Hinshaw (1992) suggested four possibilities for the relationship between academic achievement and behavior, including: (a) achievement affects behavior, (b) behavior affects achievement, (c) reciprocal relationships exist between academic and behavioral variables, and (d) some third variable mutually affects behavior and achievement. According to an Institute of Education Sciences study (Condliffe et al., 2022), participating districts that implemented a Positive Behavioral Interventions & Supports (PBIS) framework while receiving training and coaching found students with the most behavior needs saw both improved reading scores and decreased rates of disruptive behavior. Other important outcomes, including classroom management and school climate, also improved.

There is a significant and growing body of evidence that students with disabilities and extensive support needs demonstrate increased engagement and stronger behavioral and academic outcomes inside of general education. Teachers who do not work with special education students or do not have professional development opportunities in strategies to work with students who learn differently continue to have low self-efficacy when it comes to teaching students with special needs. (Di Maggio, 2020). The Behavior Action Team's recommendations include methods for building educator skills and practices.

SCHOOL AND BEHAVIORAL HEALTH PARTNERSHIPS

One of the best ways to get children the help they need is to provide mental health support where they are—in school. School-based mental health services reduce barriers to care, such as transportation and parents needing to take time off from work. School-based mental health services also normalize mental health care, reduce stigma, and minimize inequities - particularly for low-income families and historically underserved students. Yet, despite the need for school mental health services, six in 10 public schools (61%) report insufficient mental health staff to manage caseloads. (2023 School Mental Health State Legislative Guide)

To ensure students in crisis get behavioral health care instead of criminalization, there must be partnerships and connectivity between schools and behavioral health services. According to Dr. Sharon Hoover, co-director of the National Center for School Mental Health at the University of Maryland School of Medicine, "Students may not be aware that their behavior is a manifestation of an emotional or behavioral issue or trauma history, so that's not something they are likely to communicate to teachers or administrators." School providers (school psychologists, counselors, and social workers) and community mental health providers share the responsibility for student mental health.

According to the Hopeful Futures Campaign: America's School Mental Health Report Card (February 2022), nationally, Minnesota is notable for school-linked behavioral health grants that promote partnerships between schools and community mental health providers to provide an array of supportive mental health services to help students and their families. Michigan is one of 21 states extending their school Medicaid programs to include school psychologists and social workers as Medicaid billable providers. However, additional funding barriers exist that are addressed within the Behavior Action Team's recommendations.

STAFF SHORTAGES

School Mental Health Professionals

According to the <u>Hopeful Futures Campaign: America's School Mental Health Report Card</u> (February 2022), Michigan has 125,000 children with major depression (about 8% of the student population), and more than half are not receiving any treatment. The same is true for other mental health needs.

School psychologists, school social workers, and school counselors provide a range of mental health services in schools. Yet, overall, most states are underperforming the recommended ratios of provider to student ratios. Michigan currently ranks 30th in the country with one school psychologist for every 2,184 students (recommended ratio is 1:500). With regard to school social workers, Michigan has one school social worker for every 1,750 students; the recommended ratio is 1:250. Ranking 49th, Michigan has 1 school counselor per 691 students. The recommended ratio is 1:250.

Conversely, the District of Columbia and Idaho outperform the school psychologist-to-student ratio with 1:410 and 1:479, respectively. Vermont and New Hampshire are outperforming the school counselor-to-student ratio. No state is currently meeting the recommendation for school social workers, although the District of Columbia is close. Delaware's HB100 sets standards for ratios of mental health professionals for K-5 and included \$8 million in FY 2022 budget for more mental health support for young students.

Teaching Staff

The Education Policy Innovation Collaborative at Michigan State University reported 1,228 teacher vacancies for the 2021–22 school year. The report notes that this figure is likely underreported. The state's Annual Education Report indicated that 5,936 teachers were teaching in a subject or field they were not certified or licensed (out of field). Of these out-of-field teachers, 2,535 were using emergency or provisional credentials (*Michigan Teacher Shortage Study: Comprehensive Report Michigan Annual Education Report*).

Research has shown that teacher quality is among the most significant factors influencing student learning. Students who have highly qualified teachers tend to perform better academically. When schools cannot hire and retain highly qualified teachers, it can be more challenging for students to achieve academic success.

Certainly, the Behavior Action Team's recommendations of building the behavioral expertise of educators and specialized staff, such as school psychologists, school social workers, and school counselors, and enabling cross-agency connections support this need.

EQUITABLE STATEWIDE SYSTEM FOR TRAINING AND COACHING

Professional learning and coaching of educators is necessary to deepen understanding of behavior science, neuroscience, and trauma-engaged and neuro-affirming practices to support the behavioral and mental health of all our Michigan students.

There is a dearth of current training opportunities in Michigan for educators, with fewer opportunities for professional learning concerning preventing and responding to challenging student behaviors. Except for training in seclusion and restraint, professional learning relative to building an understanding of and skills to prevent and respond to behavior is largely optional and under local choice. IDEA requires Positive Behavioral Interventions and Supports to support student behavior before and in conjunction with any exclusionary practices or removals from school. The Model Code of Student Conduct in Michigan lists several practices to be implemented versus punitive measures, including PBIS, social-emotional-behavioral learning, and restorative practices. Yet, important training for these evidence-based practices remains at the choice of educators in many districts, while teachers and other educators report low efficacy for preventing and responding to behavior. While some districts access high-quality and relevant professional learning opportunities for their whole staff based on the district's needs and data, others do not. This results in inequities regarding access to effective training and coaching.

Nationally, for example, North Dakota requires a minimum of 8 hours of youth behavioral health training every 2 years for teachers and staff (trauma, SEL, resiliency, suicide prevention, bullying, evidence-based practices (EBP) to reduce risk factors for students, EBP behavior prevention or mitigation strategies). lowa provides annual, required evidence-based training on the identification of Adverse Childhood Experiences (ACEs) and strategies to mitigate toxic stress responses. This training complements their additional training on suicide prevention and postvention, mental health conditions, and substance use disorders. Connecticut is implementing a statewide, legislative (Public Act 22-47) Peer Support Program modeled after key components in existing programs, including Michigan. The recommendations of the Behavior Action Team to include required professional learning and coaching and cross-agency collaboration would go far in the empowerment of educators in Michigan to effectively support the behavioral needs of students.

Conclusion

The aforementioned factors negatively impact the attraction, preparation, and retention of not just special educators in Michigan but all educators. Continuing to do business as usual will result in the same results, including the disenfranchisement of both students and staff. We understand the challenges and barriers that exist, the evidence-based practices that work when implemented well, and the current practices in

use that do not. Students need and deserve equitable access to well-prepared, highly skilled-educators. We can do better, and the Behavior Action Team Recommendations will set Michigan up for success.