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Screening for Emotional and Behavioral Problems in High Schools

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ABSTRACT

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Screening for emotional and behavioral problems in youth is a well-validated process for elementary-aged children as notable and respected research has provided evidence that children at risk for behavioral and emotional problems can be identified and provided with targeted interventions, which prevent additional problems (Lane, Wehby, & Barton-Arwood, 2005). However, there is a lack of research offering evidence for a behavioral and emotional screening process for high school students. Identifying at-risk youth is a vital component in providing early-intervention services that can remediate problems before they become severe and require resource intensive interventions.

This research contributes to the development of a screening measure based on a validated multi-gated screening process for use in high schools. The new measure will be adapted from the Stage 1 of the Systematic Screening for Behavior Disorders (SSBD; Walker & Severson, 1992) used in elementary schools to identify students who are at risk for developing emotional and behavioral disorders. Descriptors of students at-risk for emotional and behavior disorders from Schilling (2009) and a review of items used from common behavior rating scales were used to create a teacher nomination form that will serve as a first gate in the multi-gated screening process. The appropriateness of the descriptors for the teacher nomination form was evaluated by teachers in high schools.

Keywords: screening, emotional and behavioral problems, high school, students, descriptors, teacher nomination, at risk

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Introduction

About 10-15% of youth in school may be at-risk for emotional, behavioral, and/or academic problems (Walker, Cheney, Stage, Blum, & Hoerner, 2005), while 10-20% of students encounter mental health difficulties (Mash & Dozois, 2002). Most of these youth fail to be identified or even screened to receive interventions (Vander Stoep, McCauley, Thompson, Herting, Kuo, Stewart, Anderson, & Kuschner, 2005). However, before intervention services can be provided, youth with social, emotional, and behavioral concerns must be identified to provide services. In 2008, emeritus President Cash of the National Association of School Psychologists wrote:

> Too often, students of all ages come to class struggling with life challenges that can interfere with instruction, impede achievement, and undermine the school climate. Preventing or remedying such barriers is critical to school success. Teachers cannot do this alone and it is counterproductive to expect this of them. (Cash & Gorin, "Ready to Learn, Empowered to Teach," para. 2)

When interventions are not implemented in a timely manner, this is deemed the wait-to-fail approach (Glover & Albers, 2007). However, there are many students struggling on their own without being identified as candidates of support services. As of 2010, researchers reported only 0.8% of students are classified under emotional disturbance (USDOE, 2011). Because about 20% of youth have social, emotional and behavioral needs, but only a small portion of these students are being identified for services in the schools, there appears to be additional, needed processes that can identify at-risk students and meet their needs. The Response to Intervention (RTI) model emphasizes early identification through screening. This involves a multi-tiered intervention approach (Glover & Albers, 2007). Using an early identification and

intervention process, students can be provided with services much earlier than the wait-to-fail approach. Early intervention saves critical time and focuses on delivering intervention services in a timely manner, before maladaptive behaviors and emotions become entrenched and before students experience severe distress.

There is general agreement that these screening approaches should meet various criteria to be effective. Some of these criteria include cost efficiency, accuracy, sensitivity and specificity, and the use of multiple methods and informants (Glover & Albers, 2007). The three most important aspects of universal screeners, according to Glover and Albers (2007), include the appropriateness of a screener for its intended use, technical adequacy, and usability. Following these guidelines, universal screening is a way to identify those students who are at-risk for academic, behavioral, and/or emotional difficulties (Glover & Albers, 2007). Other components of an effective screener include validity and reliability. The priority of these criteria depends upon the screener's purpose. This study will focus on developing one gate of a universal screening assessment for high school students to identify appropriate descriptors of high school students at risk for EBD.

Emotional and Behavioral Disorders

According to the Individuals with Disabilities Education Act (IDEA) of 2007, students classified under Emotional Disturbance in the education system (ED) exhibit one or more of the following characteristics over a long period of time and affect a student's performance. These characteristics could include depression, difficulty maintaining relationships, inappropriate behaviors and feelings, or a propensity to develop somatic complaints or fears over school or personal factors [Code of Federal Regulations, Title 34, Section 300.8(c)(4)(i)]. Under this federal regulation, schools are required to provide special education services to those students

who meet these criteria for the educational classification of ED (U.S. Department of Education, 2002). Cullinan and Sabornie (2004) expressed that these students typically experience a great amount of academic failure before they are identified with a disability.

Behavioral and emotional problems can be distinguished by "externalizing" and "internalizing" behaviors (Achenbach, 1978). Lane, Wehby, and Barton-Arwood (2005) have described externalizing behaviors to include noncompliance, defiance, and aggression. Externalizing behaviors also tend to be antisocial, disinhibited (Kovacs & Devlin, 1998), and described as the outward behavior of a child negatively acting out on the environment (Campbell, Shaw, & Gilliom, 2000; Eisenberg et al., 2001). Internalizing behaviors are often associated with depression, anxiety, social withdrawal, and somatic complaints (Merrell & Walters, 1998). These characteristics affect the child's internal world more than it does the external and are sometimes described as neurotic or overcontrolled (Campbell et al., 2000). Because these behaviors are often focused inward, they are typically not as visible as the external displays of students with externalizing behaviors (Reynolds, 1990). In another study that used teacher focus groups, teachers described internalizers as "flying under the radar" (Schilling, 2009, p. 45). Literature suggests teachers notice externalizing behaviors more because of their attention-seeking nature (Merrell, 1999).

Current Screening Methods for High Schools

Preliminary research has provided groundwork evidence for a screening process in junior high educational settings (Caldarella, Young, Richardson, Young, & Young, 2008), but this research did not include high school students who may express social, emotional, and behavioral difficulties differently than younger students. Because of these potential developmental differences, further research is needed to determine if different descriptive words and questions

are needed when screening. Caldarella and colleagues (2008) adapted a teacher nomination form developed by Walker and Severson (1992) from the Systematic Screening for Behavior Disorders (SSBD), which was intended for use in elementary schools.

Walker and Severson (1992) validated the use of teacher nomination as part of the SSBD, a universal screening instrument for elementary students at risk for EBD (Walker & Severson, 1992). When using the SSBD, teachers provide insight from classroom experience, and they can be valuable in the identification process of those students in need of extra support and resources. According to Severson and Walker (2002), teachers are an "underutilized resource with the potential to assist appropriately in the evaluation and referral of at-risk students for specialized services" (p. 36). With the SSBD, teachers examine all of their students at Stage 1 of the screening process, then nominate and rank ten students who display externalizing and 10 students who display internalizing behaviors (Walker & Severson, 1992). The top three students ranked for internalizing behaviors and the top three students ranked for externalizing behaviors are then further screened through a multi-gated process to determine the interventions necessary for their success.

Purpose of the Study

This current research aimed to modify the Stage 1 list of descriptors to describe externalizing and internalizing behaviors so that they are appropriate descriptors of externalizing and internalizing behaviors of students at the high school level. By modifying these descriptors, a screening instrument can be specifically designed to identify students who are at risk for EBD in high schools, meeting Glover and Albers (2007) criteria of specifically designing a screener appropriate for its intended use, being universal and usable, and technically adequate. Descriptors were used from a generated list of externalizing and internalizing indicators from

Schilling's (2009) study. Schilling held teacher focus groups with teachers of early adolescent students to discuss behaviors they have observed and believe are indicative of students at-risk for EBD. Additionally, the Behavior Assessment for Children (BASC-2; Reynolds & Kamphaus, 2004) and the Social Skills Improvement System (SSIS; Elliot & Gresham, 2008) were reviewed by Schilling for items that could contribute to the descriptive items on the teacher nomination form. Content from these behavior checklists that contributed to internalizing or externalizing scores were considered for inclusion in the list of possible descriptive terms for the teacher nomination form.

For this research project, these descriptors were examined by high school teachers via a survey. Teachers provided feedback about the social validity and accuracy of these descriptors in the externalizing and internalizing categories. During this study, one important research question was examined to develop these appropriate descriptors for an EBD screening instrument in high school settings:

> What is a short, but comprehensive, list of words that describe the behaviors of at-risk internalizing students and at-risk externalizing students in high schools?

The completion of this study was instrumental in the development of a screening instrument for EBD in high school settings. By identifying descriptors that appropriately identify externalizing and internalizing behaviors in high school students, teachers will be able to more quickly and more effectively nominate those students at-risk for behavioral and emotional problems, providing further screening and intervention services to help prevent future difficulties.

Method

This study is part of a larger research project that is currently being conducted by Ellie Young and her research team, in an effort to create a modified version of the Systematic Screener for Behavioral Disorders (SSBD, Walker & Severson, 1992) that can be used with adolescent students. A screening measure that is part of a validated multi-gated screening process will be developed for use in high schools. This measure will identify youth who are at risk for developing emotional and behavioral disorders. We specifically adapted a model used in elementary populations, which provides several increasingly specific "gates" through which students are screened. The modified SSBD will mirror the original SSBD teacher nomination form. A teacher nomination form will be the first gate that will be evaluated in the multi-gated procedure for screening.

Measure Development

One study performed by Schilling (2009) at Brigham Young University (BYU), used teacher focus groups to discuss descriptors of behaviors that students who are at risk for EBD might display. As groups, middle school teachers discussed the EBD descriptors and determined whether or not these were consistent with their experiences in the classroom. If they did not, teachers shared descriptors they believed were indicative of their students at risk for EBD. The resulting descriptors were documented by Schilling to be used in future research.

In addition, two commonly used instruments, the Behavior Assessment System for Children (BASC-2; Reynolds & Kamphaus, 2004) and the Social Skills Improvement System (SSIS; Elliott & Gresham, 2008), were reviewed for items that contributed to internalizing and externalizing scores. For items that contributed to externalizing and internalizing content areas, the item wording was adjusted to fit the structure of a revised teacher nomination form. A

preliminary survey was completed with graduate students who were enrolled in education programs in the McKay School of Education; they were invited to review the survey descriptors, identify those they felt were clearly written, that best described emotional and behavioral disorders, and suggest edits in items that appeared repetitive or awkward. Open-ended questions were also asked to clarify any suggestions or concerns. The results of the pilot survey were used to compile the descriptors for externalizing, externalizing non-examples, internalizing, and internalizing non-descriptors (see Appendix A). Ultimately, seventy-four items were chosen to be used in the survey; twenty-one items were adapted from the SSBD, fifty-two items adapted from the BASC-2, and twenty-five items were adapted from the SSIS. Twenty-four of the seventy-four items were similar items on the SSBD, BASC-2, and SSIS, and were adapted to create descriptors for the survey.

Setting and Participants

The present study was conducted in a local school district in the Intermountain West. The school district was comprised of generally mid-sized to smaller cities. As of October 2012, at the first target high school, 30.84% of enrolled students received free and reduced lunch. At target high school number two, 20.89% of enrolled students received free and reduced lunch and target high school number three, 24.15% of enrolled students received free and reduced lunch (USOE, 2012). Adult teachers (34 women or 45.3%, and 41 men or 54.7%, *M*age= 40.1 years, age range: 22-63 years) were recruited during faculty meetings in the school district.

Of the 75 teachers involved, 74 or 98.7% identified themselves as White/Caucaisan while 1 or 1.3% identified themselves as Hispanic American/Latino. Under the demographics portion of the survey, each teacher reported the number of years as an educator, and highest level of education. The average number of years as an educator was 12.6, while experience ranged from

1 year to 36 years in education. Thirty-nine participants, or 52.0% reported their highest level of education as a Bachelor's degree, 22 or 29.3% reported a Master's degree, 13 or 17.3% reported a Master's+30, and 1 or 1.3% reported other (see Table 1).

Procedures

In collaboration with BYU and local school districts, data was collected during winter of 2013 that focused on the appropriate descriptors of high school students who teachers believed were at risk for EBD. The survey distributed to teachers evaluated the quality and accuracy of descriptors of their students at-risk for EBD (see Appendix A). The survey included a list of generated descriptors used in the pilot study previously described, and required teachers to choose the seven best descriptors of externalizing and also internalizing students. Researchers conducted the survey during faculty meetings at the target schools after teachers received a brief presentation on the purpose and value of this research and the need for their cooperation. Those teachers not present at the faculty meeting were invited individually to participate by electronic correspondence. Not all teachers attended the faculty meetings or participated in the survey, either because they were absent or part time faculty, or they chose not to participate in the survey. Overall, there was a response rate of 41.67% from the three target high schools, or 75 participants from a sample population of 180.

After obtaining consent, teachers at three target high schools were asked to identify the top examples and non-examples of externalizing and internalizing behaviors. General educators were involved since they have direct contact with students and are able to interact with them in a variety of situations. Each teacher took approximately ten to fifteen minutes to read the survey and choose seven descriptors from each category of examples and non-examples of externalizing and internalizing behaviors. Their surveys were collected and returned to the researchers. One

teacher was randomly selected from each of the three high schools for a $50.00 gift card. Participants at three target high schools completed a survey on emotional and behavioral descriptors of high school students that they believed were at-risk for developing emotional and behavioral disorders, specifically those with externalizing and internalizing behaviors. Participants were invited to participate in a drawing for a $50.00 gift card at each of the three schools. General educators were involved since they have direct contact with students and are able to interact with them in a variety of situations.

Data Analysis

Using SPSS, the responses from the teacher surveys were analyzed and summarized using descriptive statistics. This included the demographic characteristics provided on the surveys and the examples and non-examples of externalizing and internalizing behaviors of high school students who may be at-risk for emotional and behavioral concerns. To identify the items that were most frequently endorsed by teachers, descriptive statistics included the ranking of the frequency and percentages for each item on the survey. Other data collected included demographic information. Demographic data analyzed gender, age, ethnicity, number of years as an educator, and level of education. Demographic data analyzed frequency and percentage of gender and ethnicity, while the mean and standard deviation was calculated for age, number of years as an educator, and level of education.

Results

From the initial descriptors provided, teachers identified the following top seven descriptors in each category: externalizing descriptors, externalizing non-descriptors, internalizing descriptors, and internalizing non-descriptors. Responses were rank-order by percentage.

Externalizing Descriptor Results

The results of the externalizing domain are included below in Table 1. The most frequently endorsed item, "seeks attention through negative behaviors," was chosen as a top seven descriptor by fifty-six of the seventy-five teacher participants, or by 74.7% of participants. The second most frequently endorsed item was "aggressive towards people or things." This item was endorsed by 53.3% of the high school teachers. Other items that were ranked highly included, "acts without thinking," "annoys others on purpose," "talks back to adults," "is easily distracted," and "argues when doesn't get own way." The lowest ranked descriptor, "cheats" was only chosen by two teachers, or 2.7% of the survey population.

Externalizing non-examples were chosen by teachers as well, most frequently endorsing "has good self-control" by sixty-one participants or 81.8% of the survey population. "Behaves appropriately when not supervised" was endorsed by 60 participants, or by 80% of participants. Other highly endorsed items as non-examples of externalizing behaviors included "resolves conflicts with peers appropriately," "is courteous to others," "follows teacher directions," and "follows classroom rules." The descriptor least chosen by participants was "asks to use other's things," chosen by 13 or 17.3% of participants (see Table 2).

Table 1

Externalizing Descriptors Frequency Table

Externalizing Descriptors	Frequency (N=75)	Percent
Seeks attention through negative behaviors	56	74.7%
Is aggressive towards people or things	40	53.3%
Acts without thinking	34	45.3%
Annoys others on purpose	29	38.7%
Talks back to adults	28	37.3%
Is easily distracted	28	37.3%
Argues when doesn't get own way	28	37.3%
Defies adults	25	33.3%
Disobeys rules	23	30.7%
Threatens to hurt others	22	29.3%
Has difficulty forming positive relationships with teachers	20	26.7%
Disrupts others	19	25.3%
Fights with others	18	24.0%
Has temper tantrums	17	22.7%
Does not following teacher directions	17	22.7%
Is often in trouble	17	22.7%
Calls other students hurtful names	16	21.3%
Tries to sleep or does sleep in class	15	20.0%
Lies	14	18.7%
Has difficulty staying in her/his seat	11	14.7%
Steals	11	14.7%
Teases others	11	14.7%
Interrupts others	9	12.0%
Frequently uses profanity	8	10.7%
Has difficulty taking turns	7	9.3%
Cheats	2	2.7%

Table 2

Externalizing Non-Example Descriptors Frequency Table

Externalizing Non-Example Descriptors	Frequency (N=75)	Percent
Has good self-control	61	81.3%
Behaves appropriately when not supervised	60	80.0%
Resolves conflict with peers appropriately	52	69.3%
Is courteous to others	45	60.0%
Follows teacher directions	43	57.3%
Follows classroom rules	42	56.0%
Completes tasks without bothering others	39	52.0%
Is attentive in class	37	49.3%
Cooperates and shares	35	46.7%
Has friends who are good role models	35	46.7%
Completes task assignments	28	37.3%
Rarely gets in trouble at school	24	32.0%
Asks to use others' things	13	17.3%

Internalizing Descriptor Results

The results of the internalizing domain are included below in Table 3. The most frequently endorsed item, "seems sad or depressed," was chosen as a descriptor by fifty-three of the seventy-five teacher participants, or by 70.7% of participants. The second most frequently endorsed item was "avoids social situations." This item was endorsed by 64.0% of the high school teachers. Other internalizing items that were ranked highly included, "seems lonely," "does not easily talk with other students," "seems excessively shy," "is teased, neglected and/or avoided by peers," and "often says negative things about self. The lowest ranked descriptor, "complains of not having friends" was only chosen by four teachers, or 5.3% of the survey population.

Internalizing non-examples were chosen by teachers as well, most frequently endorsing "participates easily in classroom discussion" by fifty-three participants or 70.7% of the survey

population. "Quickly joins group activities" was endorsed by 45 participants, or by 60.0% of participants.

Table 3

Internalizing Descriptor Frequency Table

Internalizing Descriptors	Frequency (N=75)	Percent
Seems sad or depressed	53	70.7%
Avoids social situations	48	64.0%
Seems lonely	43	57.3%
Does not easily talk with other students	35	46.7%
Seems excessively shy	34	45.3%
Is teased, neglected and/or avoided by peers	34	45.3%
Often says negative things about self	33	44.0%
Shows low energy or seems lethargic	29	38.7%
Is pessimistic	29	38.7%
Acts anxious or worries	25	33.3%
Worries what others think	25	33.3%
Has a low or limited activity level	21	28.0%
Often seems helpless	20	26.7%
Does not stand up for himself or herself	19	25.3%
Has frequent physical complaints	16	21.3%
Is easily embarrassed	15	20.0%
Appears fearful	14	18.7%
Seems nervous	13	17.3%
May cry easily	9	12.0%
Complains of not having any friends	4	5.3%

Other highly endorsed items as non-examples of internalizing behaviors included "encourages others," "easily starts conversations with other students," "seems to enjoy working in a group," and "makes friends easily." The descriptor least chosen by participants was "makes suggestions without offending others," chosen by 20 or 26.7% of participants (see Table 4).

Table 4

Internalizing Non-example Descriptor Frequency Table

Internalizing Non-example Descriptors	Frequency (N=75)	Percent
Participates easily in classroom discussion	53	70.7%
Quickly joins group activities	45	60.0%
Encourages others	44	58.7%
Easily starts conversations with other students	43	57.3%
Seems to enjoy working in a group	41	54.7%
Makes friends easily	40	53.3%
When greeted by others, responds positively	32	42.7%
When involved in conflict with peers or teachers, resolves the conflict appropriately	31	41.3%
Is eager to help in the classroom	30	40.0%
Shows interest in others' ideas	30	40.0%
Offers to help peers	30	40.0%
Is often chosen by others to join in group activities	30	40.0%
Recovers quickly when criticized or teased	29	38.7%
Compliments others	24	32.0%
Makes suggestions without offending others	20	26.7%

Discussion

The main purpose of this study was to identify pragmatic behavioral descriptors that could be used in the development of a universal screener in high school settings. Teachers were invited to participate in a survey to rank descriptive items of externalizing and internalizing examples and non-examples. Items were ranked by percentage of teachers that endorsed an item to determine what descriptors of at risk student behaviors were developmentally appropriate. The rankings of behavior descriptors in each category (e.g., internalizing and externalizing) provide a developmentally appropriate list for students in the high school setting. These descriptors were analyzed by the researchers in comparison to other screening measures to determine implications for practitioners and future research considerations.

Descriptor Comparisons to Other Screening Measures

Only one of the top seven ranked descriptors from this study was the same as a descriptive term on the original SSBD, which was intended for students in grades K-6, the phrase, "aggressive towards people or things," was the same for both age groups. This item was endorsed by 53.3% of the high school teachers surveyed as one of the top seven descriptors of externalizing behaviors. The other six items, however, are not behaviors included on the SSBD. The most frequently endorsed item under externalizing was "seeks attention through negative behaviors" was marked by 74.7% of high school teachers. Other items that were ranked highly included, "acts without thinking," "annoys others on purpose," "talks back to adults," "is easily distracted," and "argues when doesn't get own way." Non-descriptors also suggested high school aged students show "good self-control," and "behave appropriately when not supervised," which were not included on the original SSBD.

Internalizing items were also somewhat different from those used on the SSBD. The endorsed items that differed from the elementary screener, or SSBD, included, "seems sad or depressed," "seems lonely," "is teased and/or neglected by peers," and "often says negative things about themselves." Highly endorsed items similar to those found on the SSBD included "avoids social situations," "does not talk easily with other students," and "seems excessively shy." Non-examples described students who "participate easily in classroom discussion" and "quickly join group activities." Overall, these differences suggest the descriptive differences between an externalizing and internalizing student who is elementary aged versus high school aged. This appears consistent with research that has noted changes in physical development, social circles, same-gender to mixed-gender relationships and/or romantic relationships, and cognitive development that affect adolescents developmentally (Wigfield, Eccles, MacIver, Reuman, & Midgley, 1991).

Davis (2012) examined the same list of descriptors, as part of Ellie L. Young's research team at BYU, presenting these descriptors to middle school and junior high school teachers for analysis of their top descriptors of externalizing and internalizing examples and non-examples. The results were used to create the Teacher Nomination Form (TNF) for middle school and junior high settings. Prior to this study, it was discussed by the research team whether or not there was a need for a screener specifically designed for high school students rather than adolescents in middle school or junior high and high school. While there were many similarities on items endorsed by teachers, there were some differences. On the externalizing section, high school teachers did not rank "disobeys rules" and "defies adults" as high as middle school and junior high teachers. Items, such as, "talking back to adults," "is easily distracted," and "argues when doesn't get own way" were endorsed more frequently (see Table 5).

Table 5

Comparison of High School Survey Externalizing Results and the TNF

Top Externalizing Examples for High Schools	TNF Externalizing Examples for Junior High/Middle Schools	Top Externalizing Non-examples for High Schools	TNF Externalizing Non-examples for Junior High/Middle Schools
Seeks attention through negative behaviors	Seeks attention through negative behaviors	Good self-control	Good self-control
Aggressive towards people or things	Aggressive towards people or things	Behaves appropriately when not supervised	Behaves appropriately when not supervised
Acts without thinking	Acts without thinking	Resolves conflicts with peers appropriately	Follows teacher directions
Annoys others on purpose	Annoys others on purpose	Courteous to others	Is attentive in class
Talks back to adults	Disobeys rules		
Is easily distracted	Defies Adults		

Under the internalizing section, the somatic concerns were not ranked as high in the high school survey as well. These items included, "has frequent physical complaints," "acts anxious or worries," "shows low energy or seems lethargic," (see Table 6).

Table 6

Comparison of High School Survey Internalizing Results and the TNF

Top Internalizing Examples for High Schools	TNF Internalizing Examples for Junior High/Middle Schools	Top Internalizing Non-examples for High Schools	TNF Internalizing Non-examples for Junior High/Middle Schools
Seems sad or depressed	Seems sad or depressed	Participates easily in classroom discussions	Participates easily in classroom discussions
Avoids social situations	Avoids social situations	Quickly joins group activities	Seems to enjoy working in a group
Seems lonely	Seems lonely	Encourages others	Makes friends easily
Does not talk easily with other students	Acts anxious or worries	Easily starts conversations with other students	Recovers quickly when criticized or teased
Seems excessively shy	Shows low energy or seems lethargic		
Is teased, neglected and/or avoided by peers	Has frequent physical complaints		

The different results between the two studies suggest differing behaviors between students in middle school or junior high and students in high school. Overall, the results of this research provided descriptors that are developmentally appropriate, from the perspective of high school teachers. These descriptors contribute to a teacher-nomination form similar to the first gate of the SSBD, providing a means of universal screening designed for high school students at-risk for emotional and behavioral concerns.

Implications for Practitioners

The results of this research will contribute to the final version of a screening instrument to be used in high school settings as a screener for emotional and behavioral disorders. Several important factors to consider in developing these items included succinct yet comprehensive descriptors that may be used in a universal rating system for high school students (Glover & Albers, 2007). Instruments that involve universal screening have been adequately recognized as means of identifying students at-risk for developing further difficulties (Elliott, Huai & Roach, 2007). Researchers have cited educators' reluctance with universal screening as concerns of effective yet efficient means of supporting identified students and the fear of "stigmatizing kids" (Walker, Cheney, Stage, Blum, & Hoerner, 2005). However, a universal screener to identify students at-risk for social, emotional, and behavioral concerns may provide the support necessary to reduce intensive interventions later on in a students' academic career (Walker Cheney, Stage, Blum, & Hoerner, 2005).

Using these items for a universal screener would provide a means of identifying students as a preventative measure to provide interventions that may decrease the current behaviors or minimize the development of new problem behaviors, prevent worsening behaviors, promote pro-social behavior, and re-design environments to eliminate triggers of problem behaviors

(Walker, Hoerner, Sugai, Bullis, Sprague, & Bricker, 1996). The intervention process in turn will provide these students at-risk for EBD to develop stronger relationships with school staff, likely increasing academic performance, positive social relationships, self-esteem, parent relationships, work completion, and sense of safety and security in the school environment (Hawkins, Catalano, & Arthur, 2002). As schools move away from the reactive "wait-to-fail" model, they will be able to take a more proactive stance and provide more means to serve those with longstanding need (Glover & Albers, 2007; Severson, Walker, Hope-Doolittle, Kratchowill, & Gresham, 2007). Enhancing the screening process of students to provide interventions that match their needs will greatly reduce the number of difficulties students may experience, while reducing the necessity of resource intensive interventions that a wait-to-fail model may require (Kaufman, 1999).

Implications for Future Research

While similar research has been done by Ellie L. Young, Ph.D. and her research team at BYU in examining descriptors and the development of a Gate1 and Gate 2 screener for junior high and middle schools, there is still the need to develop a Gate1 and Gate 2 screener for high school students. Specifically, there is the need to examine the ability to examine those items for internalizing students on these screeners, as previous research by Davis (2012) suggested limitations in the internalizing identification process at the junior and middle school levels. Several teachers in this study responded with concerns that not enough questions regarded internalizing students and BASC-2 BESS scores were significantly lower in the internalizing categories.

Other considerations would be to design appropriate descriptors and screeners designed for self-report and parent report for second and third gate interventions. These reports could

provide a good comparison of scores to teacher reports to determine risk factors and accuracy of identification.

Limitations

Due to the largely homogenous population surveyed, questions may be raised as to the validity of the results and the ability to generalize the descriptors to other settings. Over 98% of the teachers surveyed described themselves as White or Caucasian, while only one individual described themselves as Latino. Also, research was only conducted in one school district in the rural intermountain west. These factors may influence the results of this research and should be examined in the future to see if these descriptors may be consistently generalized across other areas that include more ethnic diversity and location.

Summary

This study was able to identify various descriptors in internalizing and externalizing dimensions as well as non-examples of externalizing and internalizing that may be used in the creation of a universal screener for high school settings. In general, this is a lack of universal screeners that specifically identify students with emotional and behavioral disorders beyond elementary school, and limited screeners beyond universal interventions that are specifically designed for students in high school. As this is part of a larger study being completed by Ellie L. Young, Ph.D., and her research team, future research may include the validation of the survey in high school settings using the BASC-2 BESS for statistical comparison and alignment. Future research may also include the modification of this instrument to develop a second and third gate in the identification or at risk students.

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Appendix A: Teacher Nomination Form Survey

Overview

Social, emotional, behavioral concerns among adolescent students tend to be identified in two categories, which are **externalizing** and **internalizing**. Youth with **externalizing** behaviors tend to display behavioral excesses (e.g., too much of some behaviors) that teachers and other adults find troublesome and inappropriate. Students with **internalizing** concerns tend to have behaviors that are directed inwardly. Their behaviors tend to include avoiding social interactions and are targeted at the self rather than others.

We are developing a school-based screening instrument to identify students who are at risk for emotional and behavior disorders (EBD). We need your opinions about words that best describe youth who have behavioral and emotional concerns. Please read the instructions carefully at the top of each page.

Externalizing Dimension

Please read the following list of words, then mark the **7 terms** that you believe best describe the behaviors of students who are at risk for social, emotional, behavioral concerns in the externalizing dimension.

- ☐ Has temper tantrums
- ☐ Is aggressive towards people or things
- ☐ Fights with others
- ☐ Has difficulty forming positive relationships with teachers
- ☐ Disobeys rules
- ☐ Talks back to adults
- ☐ Acts without thinking
- ☐ Does not follow teacher directions
- ☐ Is easily distracted
- ☐ Has difficulty staying in her/ his seat
- ☐ Lies
- ☐ Steals
- ☐ Tries to sleep or does sleep in class
- ☐ Cheats
- ☐ Annoys others on purpose
- ☐ Threatens to hurt others
- ☐ Is often in trouble
- ☐ Has difficulty taking turns
- ☐ Seeks attention through negative behaviors
- ☐ Teases others
- ☐ Defies adults
- ☐ Argues when doesn't get own way
- ☐ Frequently uses profanity
- ☐ Calls other students hurtful names
- ☐ Disrupts others
- ☐ Interrupts others

Please mark the 7 items that you believe would **NOT** be examples of externalizing behaviors.

- ☐ Behaves appropriately when not supervised
- ☐ Follows teacher directions
- ☐ Completes tasks without bothering others
- ☐ Follows classroom rules
- ☐ Completes class assignments
- ☐ Has friends who are good role models
- ☐ Is courteous to others
- ☐ Cooperates and shares
- ☐ Is attentive in class
- ☐ Resolves conflict with peers appropriately
- ☐ Has good self-control
- ☐ Rarely gets in trouble at school
- ☐ Asks to use others' things

Internalizing Dimension

Please read the following list of words, then mark the **7 terms** that you believe best describe the behaviors of students who are at risk for social, emotional, behavioral concerns in the internalizing dimension.

- ☐ Is easily embarrassed
- ☐ Seems lonely
- ☐ Often says negative things about self
- ☐ Shows low energy or seems lethargic
- ☐ Seems sad or depressed
- ☐ Acts anxious or worries
- ☐ Has a low or limited activity level
- ☐ Does not easily talk with other students
- ☐ Is pessimistic
- ☐ Has frequent physical complaints
- ☐ Seems nervous
- ☐ Avoids social situations
- ☐ Appears fearful
- ☐ Does not stand up for himself or herself
- ☐ Complains of not having any friends
- ☐ Worries what others think
- ☐ Seems excessively shy
- ☐ Often seems helpless
- ☐ Is teased, neglected, and/or avoided by peers
- ☐ May cry easily

Please mark the 7 items that you believe would **NOT** be examples of internalizing behaviors.

- ☐ Is eager to help in the classroom
- ☐ Participates easily in classroom discussion
- ☐ Seems to enjoy working in a group
- ☐ Easily starts conversations with other students
- ☐ Recovers quickly when criticized or teased
- ☐ When involved in conflict with peers or teachers, resolves the conflict appropriately
- ☐ When greeted by others, responds positively
- ☐ Shows interest in others' ideas
- ☐ Makes suggestions without offending others
- ☐ Encourages others
- ☐ Offers to help peers
- ☐ Makes friends easily
- ☐ Quickly joins group activities
- ☐ Compliments others
- ☐ Is often chosen by others to join in group activities

Information for Research Purposes:

Please answer the following questions:

Gender:

☐ Male

☐ Female

Age: _____

Ethnicity:

☐ Black/African American
☐ Native American/Alaskan Native
☐ Hispanic American/Latino
☐ Asian American/Pacific Islander
☐ White/Caucasian
☐ Other _____

Number of years as an educator: _____

Degree(s) earned:	**Year earned:**
☐ Bachelor's	_____
☐ Master's	_____
☐ Master's +30	_____
☐ Specialist	_____
☐ Doctorate	_____
☐ Other: _____	_____

Appendix B: IRB Approved Consent Form

Appendix E- Consent Form

Consent to be a Research Subject

Introduction

This research study is being conducted by Nichole Soelberg, graduate student, and Dr. Ellie Young, Associate Professor, at Brigham Young University. Our research team is developing a screening instrument that can be used by teachers to identify high school students who may be at risk for social, emotional, or behavioral concerns. Early screening helps school teams to identify and serve students before problems become severe. We need your help in identifying behaviorally descriptive words that can be used in a screening instrument. You were invited to participate in this study because you are a teacher in a high school and have many opportunities to observe and interact with students who may be at risk for emotional and behavioral disorders (EBD)

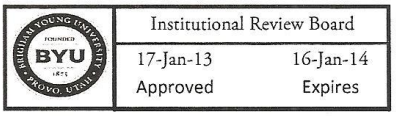
Procedures

If you agree to participate in this research study, the following will occur:

- This study should take approximately ten to fifteen minutes of your time.
- You will listen to a brief script describing the overview of this study.
- You will complete a three page pencil-paper survey that takes approximately 6-8 minutes.
- The first two pages of the survey will ask you to identify words that you believe describe high school students that are at risk for emotional and behavioral disorders.
- The third page of the survey asks that you share some basic demographic information about yourself, including age, gender, ethnicity, number of years as an educator, and degree of education.
- On a separate form you may write your name and e-mail address to be part of the drawing for a $50 VISA gift card, whether you do or do not participate in this research study.
- The survey will be completed during this faculty meeting at the high school, and will be collected immediately by the researchers.

Risks/Discomforts

There are minimal risks for participation in this study. If at any time you feel embarrassed about answering a particular question, you may choose to decline or excuse yourself from the study.



Benefits
There will be no direct benefits to you. It is hoped, however, that through your participation researchers may learn more about emotional and behavioral disorders and improve identification procedures of at risk students.

Confidentiality
Each survey will be assigned a unique ID number to protect any identifying information. The research data will be kept in a locked filing cabinet and on a password protected computer. Only the researchers will have access to the data. At the conclusion of the study, all identifying information will be removed and the data will be kept in a locked filing cabinet in the office of Ellie Young, PhD, Associate Professor at Brigham Young University for two years. After which, it will be shredded.

Compensation
One participant from each school will be randomly selected to receive a $50 VISA gift card. Participants who want to be included in this drawing will be given a form to complete that will be separate from their survey responses. For those who do not wish to participate in the research, you may still enter your name in the drawing for a $50 VISA gift card. This form will only include your name and phone number. Assuming there are approximately 50 teachers in each school that participates, the possibility of winning a gift card is about 2%. Compensation will not be prorated, but surrendered entirely upon completion of the survey.

Participation
Participation in this research study is voluntary. You have the right to withdraw at any time or refuse to participate entirely without jeopardy to your employment or standing at the school and district.

Questions about the Research
If you have questions regarding this study, you may contact Nichole Soelberg , graduate student at Brigham Young University and principal investigator, (209) 247-4896, at nichole.soelberg@nebo.edu, or Dr. Ellie Young, associate professor at Brigham Young University, (801) 422-1593, at ellie_young@byu.edu, or at 340-P MCKB, Brigham Young University, Provo, UT 84602 for further information.

Questions about Your Rights as Research Participants
If you have questions regarding your rights as a research participant contact IRB Administrator at (801) 422-1461; A-285 ASB, Brigham Young University, Provo, UT 84602; irb@byu.edu.

Statement of Consent
I have read, understood, and received a copy of the above consent and desire of my own free will to participate in this study.

Name (Printed): _____ Signature _____ Date: _____

Institutional Review Board	
17-Jan-13	16-Jan-14
Approved	Expires

Appendix C: IRB Approved Script

Script to be used in emails or other correspondence with possible research participants.

Early identification or screening of students with behavioral and emotional disorders (EBD) helps educators provide timely interventions, before the concerns become resistant to interventions.

Ellie L. Young, an associate professor at Brigham Young University, is working with a research team to develop a process for screening emotional and behavioral disorders in high schools.

We are inviting you to participate in this research, which is a short 6-8 minute survey. You will be asked to mark words that you believe describes students who are at-risk for EBD. Participating in this research will help the research create a form educators can use to screen for EBD.

Those teachers that participate will be entered to win a $50 VISA gift card. One gift certificate will be awarded at each school that participates.

Appendix D: IRB Approved Flyer

Flyer

Teachers Needed to Participate in a 6-8 Minute Survey

Who: Teachers from high schools

What: Complete a 6-8 minute survey that asks which words describes students with behavioral and emotional concerns

When: TO BE DETERMINED BY EACH SCHOOL

Why: Help develop a process that can be used to screen for emotional and behavioral disorders in high school students.

One $50 VISA gift card will be randomly awarded to one participant at each school that participates.

Appendix E: IRB Letter of Approval

Institutional Review Board
for Human Subjects

Brigham Young University
A-285 ASB Provo, Utah 84602
(801) 422-3841 / Fax: (801) 422-0620

January 17, 2013

Dr. Ellie Young
340 P MCKB
Campus Mail

Re: E 130012
Screening for Emotional and Behavioral Problems in High School

Dear Nichole Soelberg

This is to inform you that Brigham Young University's IRB approval of the above research study is contingent upon the receipt of the following:

- Approval letters from the school districts where you will recruit participants.

The approval period is from 1-17-2013 to 1-16-2014. Your study number is E130012. Please be sure to reference this number in any correspondence with the IRB.

Continued approval is conditional upon your compliance with the following requirements.

A copy of the Informed Consent Document, approved as of 1-17-2013 is enclosed. No other consent form should be used. It must be signed by each subject prior to initiation of any protocol procedures. In addition, each subject must be given a copy of the signed consent form.

All protocol amendments and changes to approved research must be submitted to the IRB and not be implemented until approved by the IRB.

The enclosed recruitment advertisement has been approved. Advertisements, letters, Internet postings and any other media for subject recruitment must be submitted to IRB and approved prior to use.

A few months before this date we will send out a continuing review form. There will only be two reminders. Please fill this form out in a timely manner to ensure that there is not a lapse in your approval.
If you have any questions, please do not hesitate to call me.

Sincerely,

Allen Parcell, PhD., Chair
Sandee M.P. Munoz, Administrator
Institutional Review Board for Human Subjects

Appendix F: Literature Review

The following review will provide a general understanding of Emotional and Behavioral Disorders (EBD) and examine externalizing and internalizing manifestations of EBD. The outcomes of students with EBD will be discussed and the Response to Intervention (RTI) model will be introduced as a means of addressing EBD. A review of current screeners and their limitations will be provided to support the need for this project in the process of creating a better EBD screener for students in high school.

Emotional and Behavioral Disorders (EBD)

According to the Individuals with Disabilities Education Act (IDEA) of 2007, the classification of emotional disturbance (ED) is defined as exhibiting one of five characteristics to a marked level, over a long period of time, and that adversely affects a student's educational performance. These characteristics are:

> (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 factors. [Code of Federal Regulations, Title 34, Section 300.8(c)(4)(i)]

Walker, Ramsey, and Gresham (2004) have described EBD as reoccurring socially inappropriate or adverse behaviors. According to the Council for Exceptional Children, EBD:

> Refers to a condition in which behavioral or emotional responses of an individual in school are so different from his/her generally accepted, age-appropriate, ethnic, or cultural norms that they adversely affect educational performance in such areas as self-

> care, social relationships, personal adjustments, academic progress, classroom behavior, or work adjustment. (NICCYD, 2004, p. 1)

Without identification and preventive action, youth at risk for EBD or those with EBD may be eventually classified with an emotional disturbance (ED), a serious emotional disturbance (SED), or an emotional or behavioral disorder (EBD; Kauffman, 1999). For readability, these descriptors will all be referred to as EBD throughout this paper. These behaviors or descriptors of EBD typically fall into the categories of externalizing and internalizing behaviors.

Externalizing Behaviors. Based on The American Psychiatric Association's (APA) *Diagnostic and Statistical Manual of Mental Disorders-IV-Text Revision* (*DSM-IV-TR*), children that manifest externalizing problems may include diagnoses like attention-deficit/hyperactivity disorder, oppositional defiant disorder, conduct disorder, and disruptive behavior disorder (APA, 2000; Merrell, 2001). Walker and Severson (1992) described these behaviors as directed outwards and commonly involving behavioral excesses that are viewed as inappropriate. Some of the characteristics that they listed on the SSBD included, displaying aggression toward others or objects, arguing, forcing the submission of others, defiance, not complying with instructions or directives, being hyperactive, not following imposed rules, disturbing others, throwing tantrums, stealing, and being out of seat in the classroom. Externalizing behaviors of students are also predictive of conduct problems and other negative outcomes in adolescence (Stouthamer-Loeber & Loeber, 2002).

Internalizing Behaviors. Students with internalizing symptoms are often under-identified (Walker et al., 2004). This may be because many of their behaviors are directed inwards or away from the social environment (Walker & Severson, 1992). Behaviors that are

easily observed and noticeable are much more disruptive and noticeable than internalizing behaviors (Emmons, 2008). Internalizing behaviors often are seen as behavior deficits and patterns of social avoidance. As listed in the SSBD manual these characteristics may include limited activity levels, minimal conversation with others, appearing shy, timid or diffident, avoiding social situations, spending time alone, acting as though afraid, not participating in games and activities, unresponsive to social invitations by others, and not standing up for themselves (Walker & Severson, 1992).

Social and Emotional Concerns vs. ED

Students with emotional and behavioral concerns have many of the same concerns as those who have been diagnosed and/or classified with ED. Unlike a diagnostic tool, this research attempts to identify descriptors that would be used in the development of a universal screener in the identification of those students at risk for ED. The screener would identify potential difficulties rather than diagnose the symptoms of an individual (Young, Caldarella, Richardson, & Young, 2011). Students may be identified for emotional and behavioral concerns as a pre-emptive strategy that leads to intervention, potentially improving their social, emotional, and academic outcomes.

Outcomes for Students with EBD

IDEA 2004 policy is aimed to ensure equal opportunity for individuals living with disabilities. This includes helping them fully participate, being able to live independently, and establishing self-sufficiency. For young adults with EBD, achieving these outcomes can drastically affect their quality of life (Turnbull, Turnbull, Wehmeyer, & Park, 2003). However, the majority of youth with EBD face many short- and long-term difficulties with relationships, mental health, careers, and academics (Gresham,

MacMillan, & Bocian, 1996). Students with EBD are likely to experience "less school success than any other subgroup of students with or without disabilities" (Landrum, Tankersley, & Kauffman, 2003, p. 148). They are more likely to fail academically than other disability groups (Wagner & Camteo, 2004). Students with EBD often lack social skills and as a result they tend to impair relationships with peers and teachers and outcomes can include rejection, few friendships, and low expectations for performance (Cullinan & Sabornie, 2004; Nowicki, 2003; Walker, Irvin, Noell, & Singer, 1992). Overall, Cullinan and Sabornie (2004) described middle and high school students with EBD as having lower levels of overall social competence and higher levels of social maladjustment.

Another bleak observation notes that more than half of students with EBD drop out of school. Of those who continue, only 42% graduate with a diploma, and in general, have lower grades than other students with disabilities (U.S. Department of Education, 2002; Wagner et al., 2005). The lack of academic success also has high correlation to negative outcomes with employment (Bullis & Yovanoff, 2006). Zigmond (2006) found that after high school, many students with EBD are underemployed or unemployed and that very few go on to pursue post high school education. One reason suggested by Carter and Wehby (2003) is that young adults with EBD want for the social, vocational, and self-determination skills that are critical for obtaining and maintaining a job. Additionally, after their first year out of high school, 25% of students with EBD have been arrested, and 10% are in drug rehabilitation, shelters or jail 3 to 5 years later (Wagner & Davis, 2006).

As IDEA (2007) states, a free and appropriate public education for youth with disabilities is to “prepare them for further education, employment, and independent living” (Sec. 602 (d)(1)(A)). As much of the research has shown, many of these students with EBD are not achieving

the goals of IDEA and the majority of outcomes are poor. To become functional adults who can live successfully in society and achieve these goals school services need to prepare them for this transition into adulthood, reinforcing the need for improved screening processes that lead to identification and interventions.

Response to Intervention

Screening provides an alternative to the reactive "wait-to-fail" approach (Glover & Albers, 2007). It is meant to be a proactive means of early identification and to create a more positive school experience. As a part of the positive behavioral support model (PBS), screening is a vital component in providing early-intervention services that can remediate problems before they become severe and require resource intensive interventions. Response to intervention models are commonly a three-tiered, data driven model of levels of intervention that match student needs with appropriately intense interventions. Students with fewer needs receive less intense services, while students with extensive, individual needs receive more intense services. School teams that are implementing RTI consider various systemic and individualized strategies to improve learning and social outcomes while preventing academic and behavioral problems (Horner & Sugai, 2000). This systematic approach provides three levels of prevention: Tier 1, Tier 2, and Tier 3 (see Figure1).

Within the primary level of prevention or Tier 1, this type of intervention is school-wide and uses universal screening. Based on the tiered model, about 80% of students school-wide should respond to these types of interventions (Horner & Sugai, 2000). School-wide data from these interventions and data from screening are then used to identify those students who need Tier 2 interventions. Tier 2 or secondary interventions involve 10-15% of students school-wide (Horner & Sugai, 2000). Tier 2 interventions are typically short-term and involve small group

instruction. While interventions may be somewhat individualized, they are designed for rapid response. If the Tier 2 interventions are insufficient based on student data Tier 3 or tertiary interventions are designed and implemented.

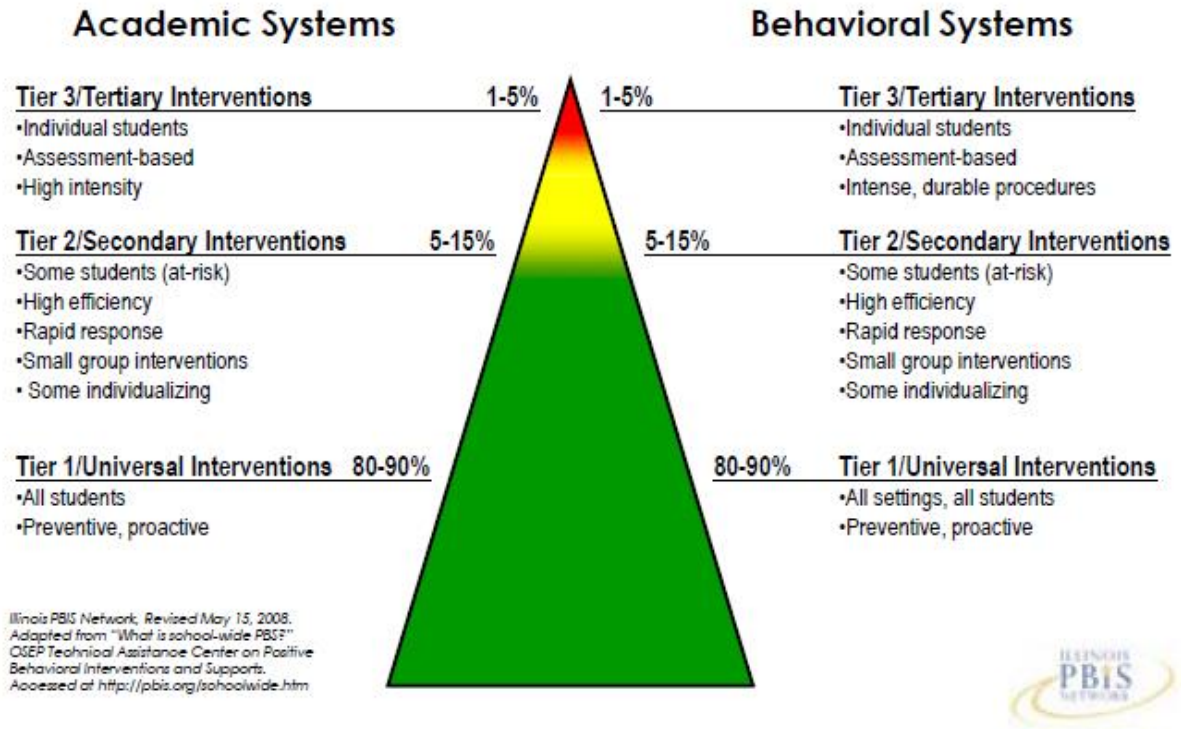


Figure 1. The Positive Behavioral Support Model Triangle. The Positive Behavioral Support model triangle indicates the estimated percentage of students needing interventions at school-wide, small group, and individualized levels. Retrieved July 2013from OSEP: https://www.osep-meeting.org/2011conf/presentations/Large_Group_Panels/Tue_AM-PromotPositBehav&MentHealth/eber.htm.

Tier 2 or secondary interventions involve 10-15% of students school-wide (Horner & Sugai, 2000). Tier 2 interventions are typically short-term and involve small group instruction. While interventions may be somewhat individualized, they are designed for rapid response. If the Tier 2 interventions are insufficient based on student data Tier 3 or tertiary interventions are

designed and implemented. Tier 3 interventions are much more individualized, intensive and focused; often involving functional assessment based interventions (Lane, Weisenbach, Phillips, & Wehby, 2007). This can include mental health services and curricular modifications. Tier 3 intervention should involve about 5-7% of students school-wide (Horner & Sugai, 2000).

Much research has been conducted to determine best practices for working with the three-tiered model. One study funded by the Office of Special Education Programs (OSEP) in 2004 found three approaches that were effective and greatly increased spontaneous teacher referral of students with behavior problems (Severson, Walker, Hope-Doolittle, Kratochwill, & Gresham, 2007). These approaches included multiple gating procedures, teacher evaluations and Likert ratings of all students in a classroom, and teacher nomination of students with behavioral problems. One tool stood out to the panel, having desired standardization, normative characteristics, and cost-effectiveness: the SSBD. Other desired characteristics found included the ability to identify externalizers versus internalizers and the multiple gates that cross-validate. The SSBD includes the three approaches of using multiple gates, Likert ratings, and teacher nominations.

Current Screening Measures for EBD

There is clear documentation in the research literature that many students with EBD have notable difficulties in education and life outcomes (Landrum, Tankersley, & Kauffman, 2003; Gresham, MacMillan, & Bocian, 1996; Wagner & Camteo, 2004; Turnbull, Turnbull, Wehmeyer, & Park, 2003; Bullis & Yovanoff, 2006; Zigmond, 2006). Identifying students at-risk for EBD before behaviors become maladaptive and entrenched would provide opportunity for responsive interventions to be implemented. Best practice would include the use of a universal screener in the identification process of students at risk for EBD. There are two

commonly used methods for the universal screening of EBD that involve multi-gate and rating scale approaches, Systematic Screening for Behavior Disorders (SSBD; Walker & Severson, 1992) and the Student Risk Screening Scale (SRSS; Drummond, 1993). While the SSBD was initially designed for elementary schools, initial studies have demonstrated reliability and preliminary evidence of validity for its use in middle and junior high school, research still is needed to address reliability and validity in high school settings (Caldarella et al., 2008; Richardson et al., 2009; Young, Sabbah, Young, Reiser, & Richardson, 2010). Also, the SSRS is limited in identification of students with internalizing concerns (Lane, Oakes, Harris, Menzies, Cox, & Lambert, 2012). To address this issue, an extension is being developed [SRSS:Internalizing and Externalizing (SRSS-IE)] to better identify internalizing concerns (Lane, Oakes, Harris, Menzies, Cox, & Lambert, 2012). Another scale that teachers have turned to, The Strengths and Difficulties Questionnaire (SDQ) has been validated for use in high schools. However, it is a time consuming process when all students complete the instrument, and it is not a multi-gated measure (Lane, Wehby, Robertson, & Rogers, 2007). Such practice raises questions about the practicality and appropriateness of such measures in high school settings. This supports the critical need for the development of such a screener.

Systematic Screening for Behavior Disorders (SSBD). The SSBD (Walker & Severson, 1992) is a universal screening tool that considers all students in a classroom for identification by the teacher. This instrument uses a multi-gated approach (i.e., students are screened through more than one stage) as guided by teacher judgments. Teachers are potentially ideal candidates for identifying students who are at-risk, since they spend a large amount of time working with youth. Walker and Severson also stated that teachers are an underutilized resource in the identification and referral of at-risk students for specialized services. However, this multi-

gate approach could take a notable amount of time and resources in high school settings, since the instrument is designed for use in grades K–6. Elementary school students typically have one teacher for most of the day, while high school students usually have at least seven teachers.

In elementary schools, the teacher completes the SSBD by nominating 10 students with internalizing behaviors and 10 students with externalizing behaviors, and then ranking those listed students in the respective category. Once the rank-ordered lists of students with internalizing behaviors and externalizing behaviors are generated, the top three students from each category are assessed more thoroughly in the second gate. The two rating tasks involved in the second gate process include a Critical Events Checklist that determines whether or not a student has displayed the internalizing and externalizing characteristics during the last six months, and the second task is a Combined Frequency Index that measures how often a student exhibits adaptive and maladaptive behaviors. Once the three highest ranked internalizing and externalizing students are ranked, the third gate can be completed for those students who meet normative criteria. The third gate involves academic and playground observations and it is recommended that a normative peer (same-sex and non-referable student recommended by the teacher whose behavior is considered to be in normal limits) also be observed for the observations to evaluate the teacher's perceptions and the academic and playground behavioral ecology. The Academic Engaged Time (AET) Observation observes the amount of time a student spends participating and attending to academic materials. The Peer Social Behavior Observation is the playground observation that measures the amount of social engagement, participation in structured games and activities, parallel play, and alone time (Walker & Severson, 1992).

While the SSBD is a useful tool in elementary settings, using all three gates for students in high school would be time consuming, difficult, and require developmentally appropriate descriptors of internalizing and externalizing behaviors. One study done by Lane, Robertson, and Rogers (2007) examined the accuracy of teacher nominations at the high school level by English teachers. Overall, results suggested teachers were better able to identify academic concerns versus behavioral concerns, unlike results found among elementary teachers, that teachers were much more accurate at differentiating between academic and behavior concerns (Lane, Robertson, & Rogers 2007; Lane & Menzies, 2005). Various factors may contribute to this difficulty in identifying behavioral concerns, including the student to teacher ratio. One high school teacher may serve hundreds of students in a day. Students in high school typically have multiple teachers for their courses, requiring all teachers to rank-order students for internalizing and externalizing concerns for a valid measure of behaviors. After comparing the response from each teacher, and if there is consistent nominations, a critical-items checklist would need to be completed by each of the student's teachers. Such a process would be timely, and difficult to complete consistently. The third gate which requires playground and academic observations fails to consider the developmental aspects of adolescents and the lack of playground or recreational time in school settings for observation.

Student Risk Screening Scale (SRSS). The *Student Risk Screening Scale* (Drummond, 1993), like the SSBD, was not initially designed for use in secondary schools. However, recent studies have validated its use in middle school (Lane, Bruhn, Eisner, & Kalberg, 2010; Lane, Parks, et al., 2007) and high school settings (Lane, Kalberg, Parks, et al., 2008; Lane, Oakes, Ennis, et al., 2011). The SRSS requires only about five minutes for each student. While it is relatively time efficient as a screening scale, the SRSS looks primarily at externalizing symptoms

such as stealing, lying, cheating, behavioral problems, peer rejection, negative attitude, and aggressive behaviors. However, an extended version is being developed [SRSS:Internalizing and Externalizing (SRSS-IE)] to better identify students with internalizing concerns as well as externalizing concerns (Lane, Oakes, Harris, Menzies, Cox, & Lambert, 2012). In the meantime, the SRSS is an excellent resource in the identification of students with externalizing concerns (Lane, Menzies, Oakes, & Kalberg, 2012).

Strengths and Difficulties Questionnaire (SDQ). The Strengths and Difficulties Questionnaire is the only instrument that has been validated for grades K-12. It is designed for students, ages 3-17, and it examines their strengths and weakness through teacher, parent, and student self-report forms (Goodman, 2001). These forms use a 3-point Likert scale (0 = not true, 1= somewhat true, 2 = certainly true) to rate emotional symptoms, conduct problems, hyperactivity, peer problems, and pro-social behavior. Negative items use a reverse scale. It is also available online at no cost. However, the length of the instrument has been reported as cumbersome to some teachers, containing 25 items on a page for each student in their class, and in one study it took an average of 60 minutes for teachers to complete the SDQ for their class (Lane, Wehby, Robertson, & Rogers, 2007). The subscales place students as normal, borderline, or abnormal.

Summary

Youth with behavioral and emotional concerns are a notable portion of the school population: about 10-15% of a school's enrollment may be at risk for developing significant emotional, behavioral, and/or academic difficulties (Walker, Cheney, Stage, Blum, & Hoerner 2005). Likewise, approximately 10-20% of students encounter mental health concerns (Mash & Dozois, 2002). Most youth with emotional or behavioral concerns are not evaluated or screened;

they will likely not receive any interventions (Vander Stoep et al., 2000). Interestingly, merely 1% of students are classified with an educational disability in the area of ED (Wagner, Kutash, Duchnowski, Epstein, & Sumi, 2005). Many of these youth exhibit internalizing behaviors or externalizing behaviors that greatly affect their social skills and life outcomes (Walker & Severson, 1992). This leads to the conclusion that it is likely that many students with emotional or behavioral concerns are not being identified and aided in a meaningful way. Many of these students would be much better served if they were identified and offered interventions before emotional and behavioral problems became serious enough that expensive, time consuming interventions were needed.

Historically, students with learning or behavior problems have needed to fail before being identified as students that need special education. The RTI model consists of three-tiers of intervention. By having three-tiers, various levels of interventions are provided in schools. Providing interventions with different levels of intensity in schools requires a means of identifying students with varying needs. This requires a universal screener that is efficient for educators. The psychometric qualities of general emotional and behavioral screening instruments has been thoughtfully evaluated and discussed in the research literature (Glover & Albers, 2007).

One established screener for EBD at the elementary level meets many of standards of a psychometrically robust screener, the SSBD. Many of its components involve best practices and are practical for implementation. However, because it is designed for elementary use, there is a need to develop a screener that is developmentally appropriate for high school students While studies have provided emerging, preliminary evidence for use of the SSBD at junior highs and middle schools (Caldarella, Young, Richardson, Young, & Young, 2008; Richardson et al., 2009; Young, Sabbah, Young, Reiser, & Richardson, 2010), there are still questions about the

developmental appropriateness and usefulness of current practices. This study contributes to the creation of a teacher nomination form, similar to what is used in the SSBD; Teachers were surveyed to identify what descriptive words are developmentally appropriate to describe the behaviors of high school students at risk for EBD. The words that teachers endorsed will be used to develop a teacher nomination form.

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