

**Title of Session:** Special Education Forum

**Moderator:** Paul Bohac

**Title of File:** 20090713spedese

**Date:** July 13, 2009

Room: Special Education Group

**BJB2:** tell me what your interest is in Special Ed?

**TaniyaO:** I am a special education teacher... I have been doing Special Education for about 6 or 7 years... I just transferred to an elementary LD position for the next school year and it will be new for me to be working with elementary (I have not done that since my first year teaching) so, I am going to need lots of "little people" resources and help..

**BJB2:** Sounds good, Taniya...I have some suggestions for you...

**BJB2:** one is to visit the Tapped In archives at [www.tappedin.org/transcripts](http://www.tappedin.org/transcripts)

**BJB2:** most calendar events are archived there and are a wonderful resource

**BJB2:** you've already taken care of my second suggestion and that is to join the K-3+ Resource group

**BJB2:** you will also find that there are many resources in this group room

**TaniyaO:** Yes... Jeff was a huge help last night when I first logged on and he showed me how to join specific groups!

**BJB2** smiles. Terrific!

**BJB2:** Did he show you Professor Garfield?

**TaniyaO:** When the forums actually begin... will there just be communication from everyone as we are communicating now... or is there somewhere else I need to Tap into?

**PaulDB** joined the room.

**BJB2** hugs Paul!

**PaulDB:** I am so sorry to be late!

**BJB2:** all communication is real time text chat like we're having now, Taniya

**TaniyaO:** Okay... Thanks

**SuwanaR** joined the room.

**BJB2** waves hi to Suwana

**PaulDB**: Hello Suwana

**BJB2**: are you here for the Special Ed discussion, Suwana?

**SuwanaR**: sure

**BJB2** . o O ( see, Paul, you're not late at all ;- )

**DavidW** joined the room.

**PaulDB**: That is good!

**BJB2**: since we now have what constitutes a crowd, let's get started...

**DavidW** waves to Paul

**PaulDB**: Hello David

**DavidW**: Hi, Paul. Good to see you

**BJB2**: we usually start all Tapped In discussions with introductions.

**BJB2**: Please tell Paul what you teach and what brings you to this discussion

**PaulDB**: I am a retired Correctional Education administrator with a background in Special Education.

**SuwanaR**: Hello Paul I am not a teacher. I am actually an Elementary School Counselor who is in charge of IEP's, Child Study referrals, and eligibility meetings.

**BJB2**: I'm also a retired correctional ed person...taught art and communication to adolescents

**TaniyaO**: This coming year I will be in my 7th year teaching and it will be special education (LD) at an elementary school... My background is special education.. specifically ED/BD at the middle/high level ... so this will be a new experience for me

**DavidW**: I'm one of the HelpDesk volunteers for Tapped In and I support math teachers using technology

**PaulDB**: What a diverse group tonight!

**BJB2:** glad you could join us, Suwana...counselors are so important in working with teachers

**SuwanaR:** no problem

**PaulDB:** We started last month talking about mental health issues within the ESE population.

**BJB2:** ESE = ?

**PaulDB:** Do we want to continue with that topic or is there something more pressing among the forum members this evening?

**PaulDB:** ESE Exceptional Student Education

**BJB2:** Thanks, Paul.

**SuwanaR:** I have nothing pressing so I opt to continue with the ESE

**TaniyaO:** That sounds great to me also.

**BJB2:** One issue that I find very important re: mental health issues is that more data is being presented that shows that the correctional population consists largely of mental health cases

**PaulDB:** Among the more common mental health issues within that population, depression and anxiety are among the most common.

**BJB2** nods to Paul....any glaring reason for the depression and anxiety?

**PaulDB:** You will also find that mental health issues are also prevalent among the students who are assigned in alternative education/dropout prevention programs.

**SuwanaR:** Ironically depression and anxiety often go undiagnosed so teachers misread their behaviors

**PaulDB:** You are so correct Suwana!

**BJB2:** what behaviors should teachers be looking for?

**PaulDB:** That is one of the reasons I wanted to raise the issue.

**PaulDB:** Suwana, will you answer that for BJ?

**SuwanaR:** Depression and anxiety often resemble a student who is withdrawn and inactive thus they are usually students who are regarded as not paying attention or

disruptive to instruction

**BJB2** . o O ( I know that homelessness and unemployment of guardians is a big problem right now )

**BJB2**: thanks, Suwana.

**SuwanaR**: no problem

**BJB2**: this is applicable to Taniya's elementary students as well?

**TaniyaO**: For the past three years I have worked in a juvenile detention center and I noticed that the number of mental health issues (such as depression and anxiety) climbed so rapidly we had to hire a full time therapist this last year that I was in the center

**PaulDB**: However, what makes it difficult to determine a possible explanation for the passivity or withdrawing is the absence of an assessment approach by the teacher.

**PaulDB**: For example, ABC can be very useful in the effort.

**PaulDB**: A-antecedent; B-behavior; C-consequence.

**SuwanaR**: Unfortunately since we are unable to recommend or refer them to a physician students end up being disciplined for behavior that could be controlled by counseling or medication

**PaulDB**: Or it could be "controlled" through cognitive intervention.

**BJB2**: Taniya, I think you were also seeing a lot of post traumatic stress syndrome also

**PaulDB**: For example, if a student demonstrates a particular pattern of behavior, it would be helpful if the teacher were to document the ABC sequence.

**SuwanaR**: ok I am familiar with the b and c so could you further explain the antecedent

**BJB2** likes cognitive intervention...medication is used too frequently

**PaulDB**: Antecedent refers to what happened "immediately" prior to the student's behavior.

**TaniyaO**: Is antecedent=trigger?

**PaulDB**: Say that the teacher was conducting a board activity (a math problem), as s/he works the problem on the board, the teacher asks questions of the students.

**PaulDB**: Yes Taniya!!

**SuwanaR:** ok I thought so and I agree with you BJ but parents for some reason prefer to give their children medication

**PaulDB:** Medication administration is a whole lot easier than actually spending time with the youngster!

**BJB2** nods sadly to Suwana...instant results if you take a pill!

**BJB2** . o O ( it's our current culture )

**DavidW** agrees with BJ

**TaniyaO:** I think in the regular school setting, in conjunction with guidance counselors and psychologists we used the ABC method, we just called it something different... when I was working with the ED/BD population... in order to formulate a behavior intervention plan

**SuwanaR:** School Counselors actually teach this for bully prevention and oddly enough giving a child a pill instead of having them attend a therapy session lets some parents off the hook because what goes on at home often adds to the triggers we see at school

**PaulDB:** You probably did Taniya as the approach has been around for a while but has not seen the level of use to which it could be applied.

**PaulDB:** Suwana, you also raise an important point and that is that teachers only see a child for a portion of the day.

**PaulDB:** Teachers may not know everything that happens at home or on the "streets".

**PaulDB:** Accordingly, it is critical that a degree of trust be established in the classroom.

**SuwanaR:** trust and mutual respect

**PaulDB:** Teachers may be the only adult that treats the child as a unique, one-of-a-kind individual.

**PaulDB:** But it is important that the teacher not misunderstand the child's behavior in the classroom.

**TaniyaO:** I know some ways to easily establish rapport and mutual respect with HS aged children, any suggestions for the little guys?

**PaulDB:** A couple of ideas. First, understand that elementary grades (pre-K, K-3) are socializing grades.

**PaulDB:** If confronted with a behavior problem in those age-grade levels, do not equate academic skill mastery with the behavior.

**PaulDB:** Instead, deal with the child as though the issue was a "misunderstanding".

**TaniyaO:** okay

**PaulDB:** Separate the child from the child's behavior.

**TaniyaO:** ahhhhh... like parenting!

**BJB2** smiles

**PaulDB:** Social skills can be difficult to develop.

**PaulDB:** Yes Taniya!!!

**PaulDB:** Partly that is due to children coming to school from different backgrounds.

**SuwanaR:** Small children are actually easy. They are looking to please. It just takes a little longer with some than others but the Counselor could definitely help!!

**PaulDB:** In some homes, talking out of turn, talking over another speaker may be common.

**BJB2:** Counselor's often have programs that they can bring to your classroom, Taniya

**PaulDB:** In a classroom, such behavior is not acceptable.

**BJB2** . o O ( There is a School Counselor's Resources discussion that you may want to join, Suwana and Taniya. The discussion will be back on the calendar in the fall. )

**PaulDB:** However, it is difficult for a child to understand that while something may be acceptable at home, it may not be acceptable in school.

**SuwanaR:** Remaining positive and always letting the student know that the behavior doesn't have an end helps. It's almost like redirecting them when they get off task during a lesson.

**PaulDB:** Hence, the idea of a "misunderstanding".

**PaulDB:** Good analogy Suwana!!

**TaniyaO:** ( Thanks BJ ..That sounds great! Perfect timing too...)

**SuwanaR:** thanks-always trying to create links for the brain

**PaulDB:** Remember though that a "re-direct" does not involve criticism or evaluation, merely a re-focus (misunderstanding?).

**PaulDB:** As long as the issue can be kept on the behavior, it is possible for the child to begin to understand that s/he is okay, just needs to learn a different set of skills.

**SuwanaR:** exactly, staying positive is very important and is usually not something that they are used to receiving

**PaulDB:** Your insistence is heartwarming as you express the need to stay positive!

**PaulDB:** It is the "can do" attitude that we want to develop.

**TaniyaO:** I too, like that approach!

**PaulDB:** When kids see that that they can, then they will.

**SuwanaR:** It also helps to keep documentation of what was attempted so that you can easily tweak your "rewards" that they earn often times they respond better to things they like instead of the consequences that they receive for their slip ups

**PaulDB:** Where this becomes an issue is when the child is identified as a special education student.

**PaulDB:** Suwana, you are practicing the ABC approach.

**TaniyaO:** That will be the majority of my interactions as I will be the LD Special Education teacher for the school

**SuwanaR:** Well I was by no means saying to overlook extreme behaviors just those interactions that are annoying and hinder the continuance of instruction

**PaulDB:** Taniya, for the LD student, who typically has average or above average intellect, separating the behavior from the child will be critical.

**PaulDB:** Upper aged students are beginning to compare themselves with their peers.

**PaulDB:** An inability to complete the same assignments as their peers will be evident and can lead to the anxiety and depression previously identified.

**TaniyaO:** Is there a prevalence of mental health issues with students with learning disabilities? I know that the prevalence was high for students with emotional and behavioral disorders...?

**TaniyaO:** okay, that is good information

**SuwanaR:** I believe so because most of the students at my school also have been diagnosed with bipolarism

**PaulDB:** Suwana, behavioral extremes are very rare. it is the teacher's reaction to all those many annoyances that hinder instruction that sometimes creates those behavior extremes.

**PaulDB:** Along with mental health issues are substance abuse issues.

**PaulDB:** LD students seem to have a higher incidence of substance abuse problems than other types of Special Education students.

**TaniyaO:** even at the elementary age?

**SuwanaR:** Do you have any idea of why that is?

**PaulDB:** They are also more likely to suffer from depression because they "know" they can perform but cannot demonstrate.

**TaniyaO:** that makes sense

**PaulDB:** The substance abuse problem arises from their need to be competitive in the classroom. The LD student has a processing deficit in one or more of the psychological areas.

**BJB2:** does differentiating lessons help?

**PaulDB:** However, while they may have difficulty "reading", they usually can understand the material if it is presented in some other format.

**SuwanaR:** that always helps to some degree

**BJB2** nods

**PaulDB:** Yes it does BJ!!

**BJB2** looks at the clock on the wall. Wow! This hour has flown!

**SuwanaR:** Without differentiating the instruction a teacher will more time than not be attempting to teach at a child's frustration level and will get absolutely no progress from the student

**PaulDB:** For example, an LD student may not be able to "read" the chapter, but if the material is presented in a video, or on a CD or tape, the student can master the contents.

**TaniyaO:** I found that many of my students use auditory skills as a coping mechanism for the inability to read or comprehend written material!

**PaulDB:** You are correct Suwana, a change in instructional strategy does not mean a change in instructional content.

**BJB2:** same with assessment..allow the student to demo learning using the modality through which he can experience success

**PaulDB:** Taniya, there are auditory learners, visual learners and tactile/kinesthetic learners.

**BJB2:** The next SPED discussion will be August 10 if that is ok with Paul's schedule?

**SuwanaR:** By altering your lessons to include auditory methods will help increase your students confidence as well

**SuwanaR:** thanks for the information

**BJB2:** Suwana, you might want to join this group...

**TaniyaO:** yes, thank you!

**BJB2:** that way you will get an email reminder about the next meeting

**PaulDB:** Yes, I think so.

**SuwanaR:** ok will do

**PaulDB:** It has been a great session this evening!!

**BJB2** hugs Paul. Thanks so much for providing this discussion, Paul. I've enjoyed it

**DavidW:** Thanks for a good discussion, Paul

**TaniyaO:** Thanks so much, I also appreciated the information

**PaulDB:** I want to thank each of you for your involvement and contributions to the discussion.

**BJB2** . o O ( Tapped In's strength is in the collaboration that takes place during discussions )

**PaulDB:** I look forward to another, equally lively session next month!!

**DavidW** smiles

**BJB2:** me too!

**BJB2** waves goodnight. Suwana, let me know if you need help joining the group

**SuwanaR:** ok

**TaniyaO:** thanks, goodnight!

**SuwanaR:** goodnight

**DavidW** waves to Suwana and Taniya

**SuwanaR** left the room.

**PaulDB:** Good night all. I am truly appreciative for the discussion!

**BJB2:** thanks for being here, Paul!

**DavidW** waves to Paul