School-Wide Positive Behavior Support and Response to Intervention[1]

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Schools are complex environments where the collective skills, knowledge, and practices of a culture are taught, shaped, encouraged, and transmitted. Teachers are challenged to provide effective and explicit instruction that maximizes students' acquisition of concepts, skills, and information, and students are challenged to remain attentive, responsive, and engaged to benefit from these instructional opportunities. These formidable goals are enriched and complicated by learners with diverse learning histories, unique strengths and limitations, and defining cultural influences. In addition, schools, families, and students continually must adapt to maximize benefits from the school experience.

In recent years, achieving these goals has required that schools (a) increase instructional accountability and justification, (b) improve the alignment between assessment information and intervention development, (c) enhance use of limited resources and time, d) make decisions with accurate and relevant information, (e) initiate important instructional decisions earlier and in a more timely manner, (f) engage in regular and comprehensive screening for successful and at-risk learners, (g) provide effective and relevant support for students who do not respond to core curricula, and (g) enhance fidelity of instructional implementation (Sugai, 2007).

In response, a general problem-solving framework, Response to Intervention (RtI), has evolved to address these need statements. Although not new or limited to special education, RtI initially appeared as policy in the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004), and it has conceptual and empirical foundations in, for example, applied behavior analysis, curriculum-based measurement, precision teaching, pre-referral intervention, teacher assistance teaming, diagnostic prescriptive teaching, data-based decision making, early universal screening and intervention, behavioral and instructional consultation, and team-based problem solving (Sugai, 2007). RtI has been described as an approach for establishing and redesigning teaching and learning environments so that they are effective, efficient, relevant, and durable for

all students, families, and educators (Sugai, 2007). Specifically, RtI is shaped by six defining characteristics (Brown-Chidsey & Steege, 2005; Christ, Burns, & Ysseldyke, 2005; Fuchs & Deschler, 2007; Fuchs & Fuchs, 2007; Fuchs, Mock, Morgan, & Young, 2003; Gresham, 2005; Gresham et al., 2005; Kame'enui, 2007; National Association of State Directors of Special Education, 2006; Severson, Walker, Hope-Doolittle, Kratochwill, & Gresham, 2007):

1. *Universal screening:* Learner performance and progress should be reviewed on a regular basis and in a systematic manner to identify students who are a) making adequate progress, b) at some risk of failure if not provided extra assistance, or c) at high risk of failure if not provided specialized supports.

2. ***Data-based decision making and problem solving:*** Information that directly reflects student learning based on measurable and relevant learning criteria and outcomes should be used to guide decisions regarding instructional effectiveness, student responsiveness, and intervention adaptations and modifications.

3. ***Continuous progress monitoring:*** Student progress should be assessed on a frequent and regular basis to identify adequate or inadequate growth trends and support timely instructional decisions.

4. ***Student performance:*** Priority should be given to using actual student performance on the instructional curriculum to guide decisions regarding teaching effectiveness and learning progress.

5. ***Continuum of evidence-based interventions:*** An integrated and linked curriculum should be available such that:

    a. A core curriculum is provided for all students;

    b. A modification of this core is arranged for students who are identified as nonresponsive, and

    c. A specialized and intensive curriculum is developed for students whose performance is deemed nonresponsive to the modified core. Elements of this continuum must have empirical evidence to support efficacy (intervention is linked to outcome), effectiveness (intervention outcomes are achievable and replicable in applied settings), relevant (intervention can be implemented by natural implementers and with high fidelity), and durable (intervention implementation is sustainable and student outcomes are durable).

6. ***Implementation fidelity:*** Team-based structures and procedures are in place to ensure and coordinate appropriate adoption and accurate and sustained implementation of the full continuum of intervention practices.

Although most RtI implementation efforts have focused on academic curriculum and instructional practices (e.g., early literacy and numeracy), applications of the RtI framework also are represented in the implementation of School-wide Positive Behavior Support (SWPBS) practices and systems (Sugai et al., 2000). A comparison of RtI applications in early literacy and social behavior reveals similarities within core RtI characteristics (see Figure 1).

RtI Application Examples

	EARLY READING/LITERACY	SOCIAL BEHAVIOR
TEAM	General educator, special educator, reading specialist, Title I, school psychologist, etc.	General educator, special educator, behavior specialist, Title I, school psychologist, etc.
UNIVERSAL SCREENING	Curriculum based measurement	SSBD, record review, gating
PROGRESS MONITORING	Curriculum based measurement	ODR, suspensions, behavior incidents, precision teaching
EFFECTIVE INTERVENTIONS	5-specific reading skills: phonemic awareness, phonics, fluency, vocabulary, comprehension	Direct social skills instruction, positive reinforcement, token economy, active supervision, behavioral contracting, group contingency management, function-based support, self-management
DECISION MAKING RULES	Core, strategic, intensive	Primary, secondary, tertiary tiers

Figure 1: Comparison of RtI in Literacy and Social Behavior

SOURCE: Sugai, G., (August 1, 2007). *School-wide positive behavior support and responsiveness-to-intervention.* Keynote presentation to and paper for the Southern Maryland PBIS Summer Regional Conference. Waldorf, MD. Reprinted with permission.

A particularly important feature of SWPBS and RtI is an emphasis on prevention (see Figure 2), which has its roots in public health and disease control and occurs at three levels:

1. Primary tier prevention: All students are exposed to a core social behavior curriculum to prevent the development of problem behavior and to identify students whose behaviors are not responsive to that core.

2. Secondary tier prevention: Supplemental social behavior support is added to reduce the current number and intensity of problem behavior.

3. Tertiary tier prevention: Individualized and intensive behavior support is developed to reduce complications, intensity, and/or severity of existing problem behavior.

This three-tiered prevention logic has direct application to both academic and social behavior supports (Kame'enui, 2007; Lane et al., 2007; O'Shaughnessy, Lane, Gresham, & Beebe-Frankenberger, 2003; Sadler & Sugai, in press).
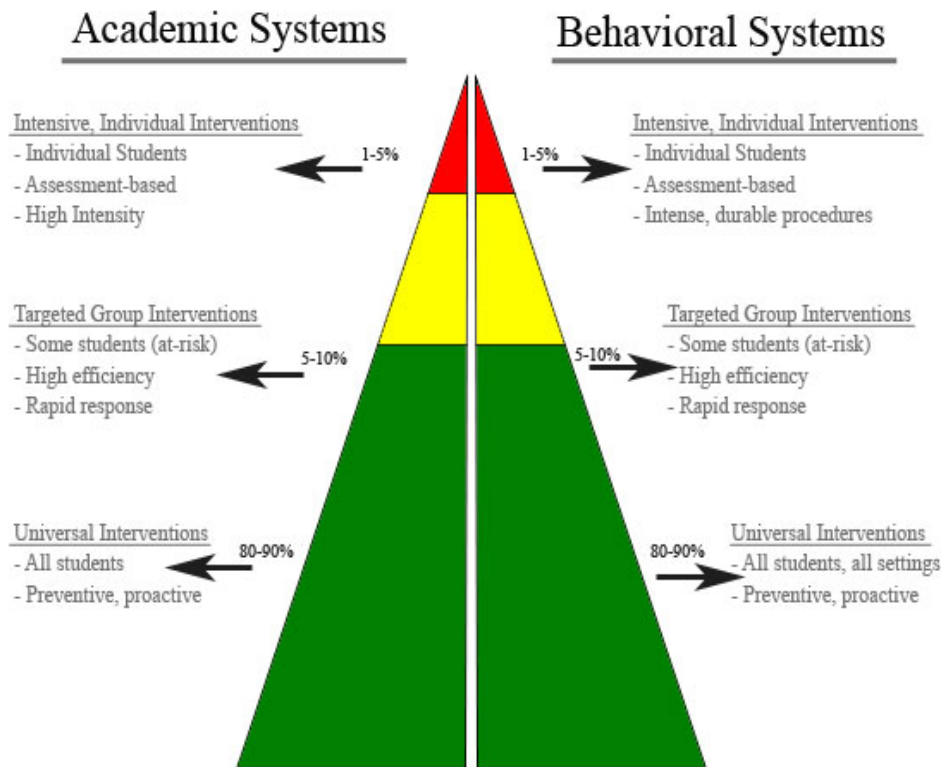
Academic Systems

Intensive, Individual Interventions
- Individual Students
- Assessment-based
- High Intensity

1-5%

Targeted Group Interventions
- Some students (at-risk)
- High efficiency
- Rapid response

5-10%

Universal Interventions
- All students
- Preventive, proactive

80-90%

Behavioral Systems

Intensive, Individual Interventions
- Individual Students
- Assessment-based
- Intense, durable procedures

1-5%

Targeted Group Interventions
- Some students (at-risk)
- High efficiency
- Rapid response

5-10%

Universal Interventions
- All students, all settings
- Preventive, proactive

80-90%

Figure 2: Integration of Academic and Social Behavior Three-Tiered Continuum of Behavior Support

SOURCE: Sugai, G. (June 23, 2001). *School climate and discipline: School-wide positive behavior support.* Keynote presentation to and paper for the National Summit on Shared Implementation of IDEA. Washington, DC. Reprinted with permission.

Although conceptualized as a three-tiered framework, this continuum of evidence-based practices of RtI and SWPBS applications is best represented as a blended integration that has relevance and application across the range of teaching and learning environments that exist in schools and communities. In Figure 3, examples of specific school-based behavioral interventions are organized in the traditional three-tiered framework but also are aligned along this integrated curriculum. If done properly, each practice should have decision rules for determining movement up and down the continuum based on student performance. The specialized nature of interventions and breadth of the continuum will vary by developmental level (e.g., early childhood/preschool, elementary, middle, high school), environmental constraints (e.g., small vs. large school), alternative programming (e.g., correctional school, hospital setting), and so on. For example, an intensive program for students with significant emotional and behavioral disorders might have a structured level system and token economy for all students that involves hourly social behavior progress monitoring and feedback associated with school-wide social skills (primary tier); a peer- or adult-based individualized behavioral contracting system with continuous prompting, monitoring, and feedback (secondary tier); and

cognitive-behavioral counseling sessions every morning that are linked to psychopharmacological and person-centered process planning (tertiary tier).
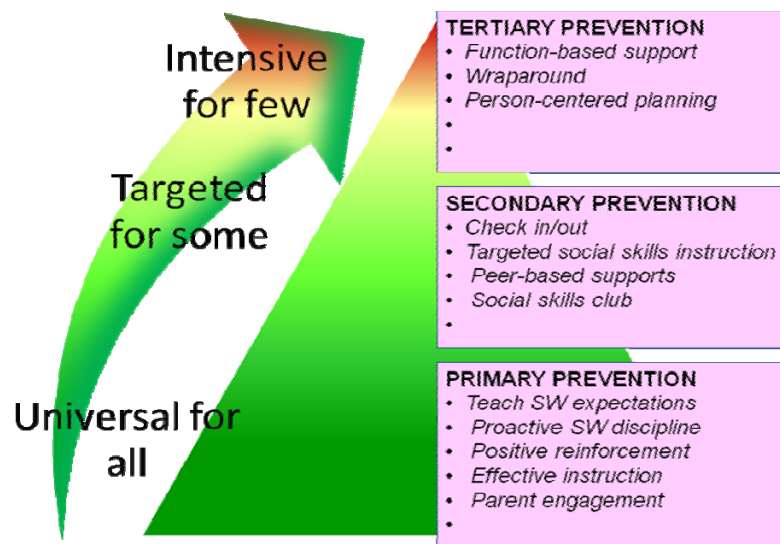

Figure 3: Integrated Continuum of Positive Behavior Support With Intervention Examples

SOURCE: Sugai, G. (2007, December). Responsiveness-to-intervention: Lessons learned and to be learned. Keynote presentation at and paper for the RtI Summit, U.S. Department of Education, Washington, D.C. Reprinted with permission.

Although applications of the RtI logic and SWPBS approach seem straightforward, research (Christ et al., 2005; Fairbanks, Sugai, Guardino, & Lathrop, 2007; Fuchs & Deschler, 2007; Gresham, 2005; Klingner & Edwards, 2006; Sandomierski, Kincaid, & Algozzine, 2007) has shown that school personnel need to continually rethink their practices in a number of areas.

1. How curriculum adoptions and instructional design decisions are made;

2. How special and general educators work together to address the needs of all students;

3. What assessment tools and procedures are used to make reliable and valid instructional decisions;

4. How high fidelity of implementation of best practices is assessed, evaluated, and supported;

5. What communications among students, teachers, and families look like;

6. How resources are organized to respond effectively and efficiently with students who do not achieve the desired outcomes in response to the intervention;

7. What criteria are used to determine whether a practice is evidence based;

8. How the practices and systems align with the social, cultural, and educational vision and values of students, family members, and school staff.

In conclusion, RtI is a good framework and logic for organizing and increasing the efficiency with which evidence-based practices are selected, organized, integrated, implemented, and

adapted. Examples and applications of the RtI logic are being developed, demonstrated, and tested in a number of academic content areas and in social behavior supports. As represented in SWPBS, RtI gives priority to the continuous monitoring of important student performance indicators in response to high-fidelity implementation of evidence-based practices. Timely screening and data-based decisions are encouraged so that more effective and efficient interventions can be provided for students whose behaviors are not responsive to core practices and interventions. Preventing the development and lessening the intensity of problem behavior must be a high priority of instructors seeking to maximize student learning and the impact of effective interventions. If done wisely in the context of other initiatives and interventions across classroom and nonclassroom settings, the possibility of improving student academic and social behavior outcomes can become a reality for all students.

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