

SCHOOL BEHAVIOR SUPPORTS: SPECIAL EDUCATORS WITH STUDENTS WHO
EXHIBIT CHALLENGING BEHAVIORS

by

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Abstract

Special education teachers who work with students who exhibit challenging behavior rely on frequent and effective school behavior supports. The school system's lack of behavior support not only impacts the teacher's ability to teach the student exhibiting challenging behavior, but also the student's safety and access to education. This study identified 1) the frequency and effectiveness of school behavior supports, and 2) factors that correlate with the frequency and effectiveness of school behavior supports. We utilized a national survey to gather the responses of 621 special educators, each of whom had at least one student with a Behavior Intervention Plan on their caseload. A section of our survey required special educators to rate the frequency and effectiveness of school behavior supports (i.e. professional development, paraprofessionals, administration, ed. specialists, and BCBA's). Two main findings emerged; first, special educators were only infrequently provided the five school-behavior supports, but, when present, most teachers found them to be effective to some degree. Second, the frequency of school behavior supports related to teaching in private/special schools and teaching lower grades, being more prepared for behaviors from one's training program, having fewer students with a BIP on caseload, and higher intensity levels of challenging behavior. Higher effectiveness of school behavior supports is related to working at a private/special school vs. public school, feeling more prepared from teacher training programs, having greater numbers of students on caseload, and having greater numbers of students with BIPs. Implications for researchers and practitioners are discussed.

School Behavior Support: Special Educators with Students Who Exhibit Challenging Behaviors

In their everyday professional lives, teachers must provide high-quality academic instruction to all students, including those who exhibit challenging behavior(s). Challenging behavior includes behaviors that are harmful to the individual, challenging for those providing care, or considered objectionable by the public (Emerson & Einfeld, 2011). On average, a special education teacher can expect to have over half of their students exhibit at least one challenging behavior (Nicholls et al., 2020). These expectations bring to light the need for behavioral support in special education settings.

When students exhibit challenging behavior, teachers and service providers often develop a Behavior Intervention Plan (BIP). BIPs are legal documents individualized to reduce targeted problem behaviors and increase replacement behaviors (IDEA, 2004; Collins & Zirkel, 2017). Procedures that are included in a BIP create additional responsibility for special education teachers. To meet these additional responsibilities, teachers need extra resources (Killu, 2008).

Some of these supports concern practices teachers implement themselves, while others come from the school district. School behavior support can come from other professionals in the school (Miller, 2014), the administration (Horner et al., 2004), additional service providers (Gregg, 2016), support staff (Friedman, 2020), and professional development. When these supports are not in place, children who exhibit challenging behavior receive fewer instructional opportunities (Horner et al., 1999). Yet we know little about how often (frequency) or how helpful (effective) school behavior supports are.

The first type of school behavior support involves professional development. Professional development, generally defined as training experiences not directly linked to college credit, has

been suggested to improve the quality of childcare (Morgan, 2003). Training increases a teacher's use of preventative and positive strategies to support their students with challenging behavior (Pham et al., 2021). A lack of training adds to behavioral misunderstanding and impedes the correct management of such behaviors (Simó-Pinatella et al., 2021). Although teachers have expressed a desire to learn more in the best interest of their students (Kamens et al., 2003), we know little about the need for more training, and the role of other professionals, when it comes to students with challenging behavior.

Another type of support concerns paraprofessionals and school administration. The Individuals with Disabilities Education Act (IDEA) Amendments of 1997 Part B, section 612 (a)(15) allows paraprofessionals who are adequately trained and supervised to assist in the delivery of special education and related services. In their role, paraprofessionals assume a variety of responsibilities, including the implementation of behavior management programs (Carter et al., 2009; Fisher & Pleasants, 2012). During the school day, paraprofessionals spend a significant amount of time supporting students with challenging behavior (Carter et al., 2009). In the absence of support from paraprofessionals, teachers seek more input from their administration (Chitiyo & Wheeler, 2009). When working well, administrators learn what teachers need to feel supported when working with students with challenging behavior (Strain & Joseph, 2004).

Two other people from whom special educators receive support are related service providers and Board-Certified Behavior Analysts (BCBAs). Related service providers include those who provide speech-language pathology services, physical therapy, occupational therapy, school health services, school psychology, school social work, assistive technology, audiology, and transportation (Evidence-Based Practices, 2022), while behavior therapists include Board-

Certified Behavior Analysts (BCBA), (Frederick et al., 2020). When challenging behavior is prevalent, teams of service providers determine if the behavior impedes learning (or other students learning), assess the problem behavior, and develop a plan that reduces problem behaviors and increases socially acceptable behaviors (Drasgow & Yell, 2001). Specifically, to support teachers during challenging behavior, BCBA's develop interventions that can be successfully applied in the classroom (Shriver, 2019).

Beyond the frequency and/or effectiveness of these school behavior supports, we also know only generally about what relates to such help. It may be that behavior supports are provided more often to teachers; who received more instruction in their training programs (Stormont & Young-Walker, 2017), who are older, male or female, who teach different grades, or are more experienced (Lohrmann & Bambara, 2006). School and classroom demographics (i.e. type of school, classroom level, number of students) and/or aspects of challenging behavior (types, frequency, duration, intensity; Emerson, 1995) might also be important to consider when assessing the frequency and effectiveness of school behavior supports. In short, little information exist about which characteristics—of the teacher, school classroom, or challenging behavior—relate to teachers receiving or benefiting from helpful school behavior supports.

This study, then, examines the school behavior supports and teacher reflections on such supports. It has two main goals, 1) to identify the frequency and effectiveness of school behavior supports, and 2) potential correlates of the frequency and effectiveness of school behavior supports.

Method

Participants

This study included 621 special education teachers who had at least one student with a BIP on their caseload. Most participants were white females, ranging in age from 20-50+. Most

teachers taught in a public elementary, middle, or high school (93.6%) in rural, urban, and suburban areas. Most participants either had a bachelor's (33.4%) or master's degree (50.5%) and had six or more years of teaching experience (55.6%). On average, teachers had five students with a BIP on their caseload (average caseload= 12 students) varying in disability diagnoses (autism spectrum disorder, other health impairments, and intellectual disability were most prevalent). Most participants indicated having two or more behavior-focused courses as part of their training programs. During these programs, teachers differed on the extent to which they had opportunities to work directly with students who exhibited challenging behavior. As a result of their teacher training programs, few respondents felt strongly prepared to work with students who exhibit challenging behaviors (11.7%). See Table 1 for details.

To be included in this study, teachers had to be certified special education teachers with one or more student(s) with a BIP on their caseload. All 51 states (including Washington D.C.) were represented in our sample, with California (8.2%), Colorado (6.9%), and Alabama (4.6%) most often represented.

Procedures

An anonymous, web-based national survey was used to assess the experiences and thoughts of special educators who work with students who exhibit challenging behaviors. The survey was developed in collaboration with experts in special education and applied behavior analysis. Before data collection began, five special education master's candidates and four doctoral candidates took the survey, providing feedback on the survey questions and response options, identifying any practical problems for the user, and verifying the length of time needed to complete the survey. Their feedback was incorporated before submitting the study to the

university's Institutional Review Board (IRB). Upon approval from IRB, the distribution process began.

Through the collaborative efforts of the University Center for Excellence in Developmental Disabilities (UCEDD) of each state and of Vanderbilt Special Education alumni, we distributed our survey. To reach across the U.S., we randomly selected five counties from all 51 states (including Washington D.C.). Once a county was selected, the internet allowed us to identify the number of districts in that specific county. If there was more than one district, we then randomly selected a particular district within the previously selected county. Once a district was selected, we used public contact information to contact the special educators in the district.

A contact list with the educator names and email addresses was then used to distribute our IRB-approved flyer and email script. Educators were given information regarding the purpose of our study, and a link to the survey (See Appendix A). Dissemination of the survey began on October 15, 2021 and concluded on December 15, 2021. To record all participant responses we used REDCap, a secure web-based platform used for survey management and data collection (Harris et al., 2009).

After completing the survey, all respondents were automatically taken to a separate survey where they had the option to enter a raffle survey to win one of ten \$25 gift cards. Since the link to the raffle survey was not connected to our original survey if teachers entered the survey the privacy of their answers were still protected. Ten raffle winners were randomly selected, and their \$25 gift card was mailed to them, in late December 2021. Participants' survey responses were collected regardless of whether they chose to participate in the \$25 gift card raffle.

Upon the conclusion of data collection, all records were exported from REDCap into Statistical Package for the Social Sciences (SPSS), a statistical software program (IBM, 2019). To ensure all records transferred over from REDCap to SPSS, records were examined and compared. The records were evaluated for the inclusion criteria: 1) the respondent was a certified special educator who had one or more student(s) with a BIP on their caseload; 2) respondents agreed to participate in the study. Records not meeting both inclusion criteria were removed from the dataset, as were instances of duplicated responses, defined as the word-for-word repetition of responses in the first two qualitative questions. The final resulting dataset consisted of 621 participants. SPSS was then used to conduct statistical analyses.

Survey Instrument

The survey included 114 questions that related to one of the following sections: Participant Demographics, Professional Satisfaction, School and Classroom Demographics, Behavior Supports, Professional Burnout, and Reflections (i.e., open-ended responses). All questions on the survey were optional and participants could opt not to answer any questions. The open-ended questions did not have a character limit, allowing the respondent to provide extra details and information.

Each section began with a short description of what the corresponding section would be surveying. Response options included multiple choice, select all that apply, Likert scales, text entry, and open-ended responses. REDCap's branching logic feature allowed for further information to be gathered on some questions. Using branching logic, some questions only appeared if the participant responded a certain way (e.g., if a participant indicated they receive support from a behavior specialist, an additional question appeared on the effectiveness of that support). See Appendix B for the full survey.

School behavioral supports were surveyed in two sections: 1) Frequency related to the use of school behavioral supports and 2) Effectiveness of school behavioral supports when provided. Additionally, the reflection section was included to provide special educators with a space to reflect and share more information about their experiences. The open-ended questions included: 1) “What behavioral supports have been most helpful in your classroom?” 2) “What behavioral supports would you want to see implemented in your classroom?” along with motivations and advice for future educators.

Outcome Variable

As the main outcome variables related to behavioral supports, the survey’s school behavioral support section will be introduced first.

School Behavior Supports. The school behavioral supports section was divided into two subsections: 1) Frequency related to the use of school behavioral supports and 2) Effectiveness of school behavioral supports when provided. The five school-behavior supports were provided alongside a brief description. A Likert scale ranging from (1) “Never” to (6) “Daily” measured the frequency to which educators used the following school behavior supports: 1) behavior-related professional development training; 2) paraprofessionals; 3) BCBAs; 4) administration; 5) ed. specialists. An identical Likert scale measured the effectiveness of the five school-behavior supports when challenging behavior occurred from (1) "Never effective" to (5) "Always effective". Respondents were also asked if they have enough paraprofessional support (41.4% indicated no) and whether they’d like more assistance from BCBAs (80.9% indicated yes).

Potential Predictor Variables

Participant Demographics. Demographic information about the participant included basic personal information such as gender, age, and ethnicity. We also asked about the

respondents' educational degree(s) and their teacher training program. Teacher training program questions related to how many of their classes substantially focused on behavior management (range = 0 to 5+); the extent of opportunities they had to work directly with students who exhibited challenging behavior (1 = Not at all, 5 = A great deal); and how prepared they felt to work with these students because of their teacher training program (1 = Not at all prepared, 5 = strongly prepared). This section also asked about the participants' teaching experience, such as the number of years teaching special education, years in their current school district, and years in current placement.

School and Classroom Demographics. School and classroom demographic information identified the state in which the respondent's school resided; whether the school was in an urban, suburban, or rural area; and whether teachers taught at a public, private, or special school. Demographic information about the respondent's classroom and caseload included the age group taught (i.e., preschool, elementary, middle school, high school, transition); the disability categories represented on their caseload; and the number of students – as well as how many of those students had BIPs. See Table 1.

Information about the participants' student(s) with BIPs indicated the frequency, duration, and intensity of the challenging behaviors exhibited by their student(s). The following challenging behaviors were determined as the most frequently observed on BIPs: self-injurious behaviors, physical aggression, property destruction, verbal aggression/threats, elopement, noncompliance, and tantrums (crying, screaming, flailing).

The frequency of challenging behavior was measured on a scale ranging from 1 = Never to 6 = Hourly. If the behavior was exhibited by a student, participants then indicated the duration and intensity of that behavior using similar scales. If a participant selected "Never" for any

behavior, they were not asked about the duration and intensity of that behavior. In addition, if participants said they “Never” saw a form of behavior in the frequency section, we computed a zero for duration and intensity. Essentially, we assumed that if a behavior did not occur, it must have a duration of zero minutes and an intensity score of zero. A zero variable for the duration and intensity changed the scales from 1-5 to 0-5. Participants were only asked duration and intensity questions if they indicated that they had a student who exhibited that behavior, which led to fewer survey responses for the duration and intensity items. Adding in a zero-responses resulted in the same number of responses for frequency, duration, and intensity, therefore allowing for comparison.

Analyses

Analyses followed the three main goals of the study. Our first goal related to the frequency and effectiveness of school behavior supports. To analyze the first goal, we identified the frequency that respondents were provided with school behavior support. For respondents who indicated receiving school behavior support(s) to any degree, we also determined the degree to which they felt them to be effective.

In addition to the frequency and effectiveness of school behavior supports, we examined how all five supports went together as two “support help” variables (one for frequency, the other for effectiveness). We performed Cronbach’s alphas and factor analyses on each of these supports. These analyses were used to calculate an overall summed score for the frequency of school behavior support, and another summed score for the effectiveness of school behavior support. The new scores were used in later analyses of the correlates of school behavior support frequency and effectiveness.

The second goal examined the correlates of school behavior supports frequency and effectiveness. First, we conducted a series of univariate analyses to identify characteristics of schools, and/or students (e.g., challenging behaviors) that might relate to the overall frequency and effectiveness of school behavior supports. All quantitative survey items were included in the univariate analysis. When applicable, we used factors (summed score of items) rather than individual items. For categorical data, we conducted t-tests and one-way ANOVAs with the outcome variable being the continuous variable (i.e., the school behavior supports summed scores). For continuous items, we used correlations. To simplify the presentation, the univariate table presents analyses by categories, for all continuous variables, analyses are shown in Quartiles (e.g., comparison of 1st, 2nd, 3rd, and 4th Quartiles for intensity of challenging behavior).

We then proceeded to identify the independent predictors, one set for school behavior support frequency, and another for effectiveness. We performed two multiple linear regressions, with only those potential predictors found to have p-values less than .01 during the univariate analyses entered into a hierarchical linear model. Thus, the two linear regressions were performed with frequency and effectiveness of school behavior support total scores as the dependent variables, potential predictors identified in univariate analysis (at $p < .01$ level) as predictors. When examining the linear regression results, we interpreted only those variables that had p-values of less than .05, identifying these as the independent predictors of frequency and effectiveness of school behavior supports.

Results

Frequency and Effectiveness of Behavior Supports

Of these supports that were reported the most common behavior support provided by their school was administration, with 84% of respondents reporting it, followed by professional development (80.2%), ed. specialists (76.8%), paraprofessionals (76.6%), and BCBAAs (73.7%).

Most teachers only infrequently received any of the five school-behavior supports. Roughly a quarter of teachers reported never receiving any type of school behavior support, and when teachers did report receiving support, the frequency with which the support occurred was low. Overall, 16-26% of teachers reported never getting each of the five school-behavior supports. Examined individually as well, most teachers reported never receiving any support from BCBAAs (26.3%), followed by support from paraprofessionals (23.4%), and ed. specialists (23.2%). Conversely, over three-quarters of teachers did not receive daily support from any of the five school-behavior supports. Daily, teachers most frequently received support from paraprofessionals (24.8%), whereas less than 6% of respondents received daily support from professional development, BCBAAs, and or ed. specialists.

Even though infrequent, school-behavior support could still be effective. Thus, the effectiveness of the school behavior supports was examined for those respondents who indicated receiving the support at least annually (N = 597). Only 2-6% of teachers reported support(s) to be ineffective. For each of the five supports, over 65% of teachers reported that the support was effective at least some of the time or often. The most effective school-behavior support was from paraprofessionals (97.6%), with about half of respondents reporting paraprofessional support as often or always effective. See Table 2.

Correlates for School Behavior Supports

Frequency

Through univariate analyses of the frequency of school behavior supports, we identified nine potential correlates (at $p < .01$). These included respondents' age ($p = .003$), more courses on behavior management ($p = <.001$), greater opportunities to work with challenging behavior during an internship or field experience ($p = <.001$), higher feelings of preparedness to work with behavior because of a training program ($p = <.001$), younger classroom levels ($p = .007$), fewer students on caseload ($p = .009$), more students with BIP on caseload ($p = <.001$), greater intensity of challenging behavior ($p = <.001$), and type of school (public vs. other) ($p = <.001$). See Table 3.

The relation between the feeling of preparedness from a training program and the frequency of the five school-behavior supports was further examined by multiple chi-square tests. Specifically, monthly or more BCBA support was reported by almost 63% of respondents who were strongly prepared and by less than 29% of respondents who were not prepared at all, $X^2(4, N = 605) = 19.78, p <.001$. The relation between feelings of preparedness and the frequency of professional development support was also significant, $X^2(4, N = 611) = 60.96, p <.001$. Monthly or more professional development support was reported by over half (52.1%) of respondents who were strongly prepared and by less than 5% of respondents who were not prepared at all.

A chi-square test was performed to examine the relationship between respondent age and the frequency of the five school-behavior supports. The relation between respondent age and frequency of BCBA support was significant, $X^2(3, N = 567) = 24.37, p <.001$. Monthly or more BCBA support was reported by 55% of respondents ages 31-40 and only by 28% of respondents over the age of 50. Similarly, the relation between respondent age and frequency of professional development support was significant, $X^2(3, N = 573) = 38.43, p <.001$. Professional

development support that occurred monthly or more was reported by 32% of respondents ages 31-40 and by less than 3% of respondents over the age of 50.

For the type of school, the univariate analysis varied, with public schools low and private/special schools high. Another chi-square test of independence was performed to examine the relation between the type of school (public vs. private/special) and the frequency of the five school-behavior supports. The relation between the type of school (public vs. private/special) and frequency of BCBA support was significant, $X^2(1, N = 607) = 30.12, p < .001$. Monthly or more BCBA support was reported by 60% of respondents who worked at a private/special school and by 36% of respondents who work at a public school. Similarly, monthly or more professional development support was reported by more than half of respondents who work at a private/special school and by only 12% of respondents who work at a public school, $X^2(1, N = 607) = 30.12, p < .001$.

After conducting a linear regression, five potential correlates emerged as separate, independent predictors. Working at a private/special school ($p = < .001$) or in a younger classroom level ($p = .007$) related to the increased frequency that a teacher received school behavior supports. A higher frequency of school behavior supports also occurred when respondents felt more prepared to work with students who exhibit challenging behavior because of their teacher training program ($p = .009$). Respondents also reported a higher frequency of support when they had greater numbers of students with a BIP on their caseload ($p = < .001$), and when they reported greater levels of intensity of challenging behavior ($p = .006$). See Table 5.

Effectiveness

We again used univariate analyses and identified eight potential correlates (at $p < .01$) to the effectiveness of school behavior supports: respondent age ($p = < .001$), more courses on

behavior management ($p = <.001$), greater opportunities to work with challenging behavior during an internship or field experience ($p = <.001$), higher feelings of preparedness to work with behavior because of a teacher training program ($p = <.001$), more years teaching special education ($p = .002$), fewer students on caseload ($p = <.001$), more students with BIP on caseload ($<.001$), and type of school (public vs. other) ($p = <.001$). See Table 4.

Again, chi-squares were performed to illustrate how several of these correlates operated. The relation between the type of school (public vs. private/special) and the effectiveness of BCBA support was significant. With BCBA support never effective for 41% of respondents who worked at a public school, but for only 11% of respondents who worked at a private/special school, $X^2(4, N = 607) = 74.01, p <.001$. Similarly, professional development support was never effective for only 6% of private/special school educators but was never effective for over 30% of public school teachers. Lastly, the relation between the type of school (public vs. private/special) and the effectiveness of ed. specialist support was significant, $X^2(4, N = 610) = 62.75, p <.001$.

A second linear regression revealed four correlates as separate, independent predictors. Working at a private/special school compared to public schools ($p = <.001$) positively impacted the effectiveness of school behavior supports. Also, respondents reported that school behavior support was more effective when they felt more prepared by their teacher training program ($p = <.001$) when they had fewer students ($p = <.001$), and when a greater number of students with a BIP ($p = .008$), they reported the school behavior supports they used to be more effective. See Table 6.

Discussion

Although a critical component of support in the classroom, school-provided behavior support has to date been the subject of only sporadic research attention. This study examined the

school behavior supports provided to a large group of teachers of students with BIPs. This study had two main findings, each of which has both research and practical implications.

Our first finding concerned the frequency and effectiveness of behavior supports. Teachers received school behavior supports in varying frequencies. The most common school behavior support was administration, closely followed by professional development. But most of the professional development support occurred only annually, and less than 1% received professional development support daily. Most teachers did not receive daily support for any of the five school-behavior support. When teachers did report daily school behavior support, they most frequently received it from paraprofessionals. Paraprofessional support occurred at least monthly for over half of the respondents.

At the same time, even the rarely provided school behavior support was still considered somewhat effective. Examining those respondents receiving support at least annually, special educators rarely ever found any of the five school-behavior supports ineffective. Professional development was rarely or never effective for only 30% of educators, while the rest of the respondents found professional development support to be effective at least some of the time. The most effective school behavior support was paraprofessional support. Among those receiving paraprofessional support, almost all participants found it to be the most effective. Most educators found it to be effective, with most educators reporting paraprofessional support to be effective sometimes or often. A comparable number of educators found support from ed. specialists to be equally as effective.

The second finding addressed school behavior supports and their potential correlates. Although, in our original univariate analyses, the frequency of school behavior support correlated with nine variables (at the $p < .01$ level), five came out in the ultimate regression.

These five separate, independent predictors included: 1) public school vs other types of school; 2) lower classroom level; 3) greater feelings of preparedness to work with challenging behavior during an internship or field experience; 4) more students with BIP on caseload; 5) higher intensity of behavior. Working at a private/special school or in lower grade levels was linked to a higher frequency of school behavior support. Similarly, more frequent school behavior support was tied to the teachers' feeling more prepared by their training program, greater numbers of students with BIPs, and higher intensities of challenging behavior.

Similar findings emerged for effectiveness (at $p < .01$), with the multiple regression analysis revealing four separate, independent predictors: 1) public school compared to other types of schools; 2) greater feelings of preparedness to work with challenging behavior during an internship or field experience; 3) fewer students on caseload; 4) more students with BIP on caseload. Working at a private/special school was linked to more effective school behavior support. Similarly, the effectiveness of school behavior support related to more prepared teachers, smaller caseloads, more students with BIPs, and higher intensities of challenging behavior.

The need for more frequent and effective school behavior supports has implications for research, training, practice, and policy. The first issue pertains to the need for future research on the aspects of training programs that help teachers to feel more prepared to manage challenging behavior. Current research in special education (e.g., Nougaret et al., 2005, Boe et al., 2007) shows that extensive and traditional teacher preparation produced more effective teachers. As demonstrated by our study, those teachers who have such preparation are more often reporting that they receive effective behavior support. The knowledge of evidence-based practices (Rahn et al., 2017) and, more specifically, the increase in opportunities to manage challenging behavior

(Simó-Pinatella et al., 2021), may expose teachers to the different school behavior supports that are available. Also, additional research should examine what traditional teacher training courses are required to identify potential holes in feeling prepared to manage challenging behavior.

But teacher preparation programs alone cannot provide special education teachers with all the knowledge and skills that they need to effectively serve students with disabilities (Brownell et al., 2010; Sykes et al., 2010). As students rotate in and out of classes year to year, the challenging behaviors change – which can be seen in the variety of disability categories reported in our study. Professional development and training are one way to address the need for continued learning to adequately use school behavior supports for a variety of challenging behavior.

Beyond research on teacher training, there is also a need for educators to be supported regardless of how prepared they are. Within the literature on inclusion, educators who rated themselves as extremely successful at including students with severe disabilities were more likely to have supports and resources they perceived as necessary (Lohrmann & Bambara, 2006). Challenging behavior may also be better managed by educators who have the supports that they need. These findings are reminiscent of the so-called “Matthew effect,” a line from the Bible that states that “For to everyone who has will more be given, and he will have abundance; but from him who has not, even what he has will be taken away” (Matthew 25:29, RSV). In this instance, those who felt more prepared received more frequent and effective support, whereas those who felt less prepared received these supports less and found them to be less effective.

These findings also highlight under-explored issues concerning the accessibility of school behavior supports. Under IDEA, all students have the right access to such related services; speech-language pathology, audiology services, occupational therapy, physical therapy, and

psychological services. The collaborative team of professionals, teachers, and school behavior support professionals (e.g., paraprofessionals, administrators, ed. specialists, BCBAs) all work together to support students (Giangreco et al., 2021) – which includes identifying support for challenging behavior. But increasing caseloads for related service providers limit their availability for such collaboration (Syed, 2021). Our results, especially the school behavior support, highlight the issues, but future studies must better explain how school support might be better deployed. We also need to identify ways in which districts might limit the number of students that a provider can serve, thus creating more time and opportunities for them to be able to collaborate on potential supports for challenging behavior.

We also acknowledge this study's limitations. The responses were all self-reported. While self-reporting has its advantages, respondents may have certain biases or misinterpret survey questions. It is also difficult to determine whether all the participants' responses were true, as this study used an anonymous survey, and we could not follow up with participants. In addition, while the study featured a large, national sample, the web-based format may have precluded participation from respondents from low-income or minority backgrounds.

Still, even considering these limitations, this study provides a strong starting point to examine school behavior supports. By identifying the frequency and effectiveness of school behavior supports- as well as their teacher, school, and student correlates- we begin to understand what needs to happen for special educators to receive frequent and effective support from their school. These teachers need to receive such support, as challenging behavior affects the student, the teacher, and their environment. By taking action to increase the frequency and effectiveness of school behavior supports, we help teachers to provide high-quality academic instruction to all students, including those who exhibit challenging behavior.

Table 1. *Participant and Classroom Demographics*

	Mean (<i>SD</i>)	% (<i>n</i>)	<i>n</i>
Gender			618
Female		71.7% (443)	
Age			576
20-30		26.4% (152)	
31-40		34.0% (196)	
41-50		19.1% (110)	
51+		20.5% (118)	
Ethnicity			
White		85.5% (531)	
Native American		5.6% (35)	
Black		4.3% (27)	
Hispanic		3.7% (23)	
Asian/Pacific Islander		2.4% (15)	
Education			618
Bachelor's		33.5% (207)	
Master's		50.3% (311)	
6 Year Degree/Specialist		12.8% (79)	
Doctorate		3.4% (21)	
Number of behavior-focused courses in training program			618
0		6.5% (40)	
1		23.3% (144)	
2		35.1% (217)	
3		20.6% (127)	
4 or more		14.6% (90)	
Extent of opportunities to directly work with students who exhibit challenging behaviors during teacher training program			614
Little to none		33.6% (206)	
Somewhat		29.5% (181)	
Quite a bit		37.0% (227)	
Feeling of preparedness to work with students who exhibit challenging behavior as a result of teacher training program			614
Not prepared at all		14.4% (89)	
Slightly prepared		28.1% (172)	
Moderately prepared		27.9% (172)	
Mostly prepared		17.9% (110)	
Strongly prepared		11.7% (71)	
Years teaching special education			617
0-2		18.5% (113)	
3-5		25.9% (160)	
6-9		23.2% (143)	
10+		32.4% (200)	

Type of school		615
Public	69.7% (430)	
Private	14.3% (87)	
Special school	16.1% (98)	
Area		603
Rural	31.7% (191)	
Urban	36.7% (221)	
Suburban	31.7% (191)	
Grade level		616
Preschool	4.9% (30)	
Elementary	45.5% (280)	
Middle school	30.0% (185)	
High school	18.5% (114)	
Transition	1.1% (7)	
Disability categories represent on caseload		
Autism spectrum disorder	67.3% (418)	
Other health impairment	53.3% (331)	
Intellectual disability	49.3% (306)	
Developmental delay	42.7% (265)	
Multiple disabilities	34.9% (217)	
Visual or hearing impairment	25.3% (157)	
Orthopedic impairment	17.4% (108)	
Traumatic brain injury	13.4% (83)	
Number of students on caseload	12.7 (5.3)	616
Number of students with a BIP	5.0 (3.9)	595
