5-1-2015

Effectively combining PBIS and the Nurtured Heart Approach

Erin Bremer
Winona State University

An integrated approach to a school-wide behavior system:

Effectively combining PBIS and the Nurtured Heart Approach.

Erin Bremer

A Capstone Project submitted in partial fulfillment of the

Requirements for the Master of Science Degree in

Counselor Education at

Winona State University

Spring 2015

Winona State University

College of Education

Counselor Education Department

CERTIFICATE OF APPROVAL

_____

CAPSTONE PROJECT

_____

An integrated approach to a school-wide behavior system:

Effectively combining PBIS and the Nurtured Heart Approach.

This is to certify that the Capstone Project of

Erin Bremer

Has been approved by the faculty advisor and the CE 695 – Capstone Project

Course Instructor in partial fulfillment of the requirements for the

Master of Science Degree in

Counselor Education

Capstone Project Supervisor: _____

Approval Date: _____

Abstract

This research examines two behavior programs that focus on the increase of positive self-concept: Positive Behavioral Interventions and Supports and The Nurtured Heart Approach. Schools are beginning to see an increase in behaviors that coincide with mental illnesses and emotional instability; moreover, schools are expected to prepare each student to be competent socially, academically, and emotionally. Through the integration of a school-wide behavior system, students within different tiers – academically or emotionally – are being reached at a greater level. Not only are students having their academic needs met, but they are also beginning to build a concept of self worth, which may not otherwise develop. Negative comments or punishments begin to disappear while positive comments, encouragers, and motivators reign throughout the school. Students surrounded in an environment of “you can’s” and “look at your greatness” begin to view themselves differently. This research begins to define the two approaches and looks at the integration of the two in a school-wide setting.

Contents

Introduction

According to Cook et al. (2015), mental health is a rising concern among children and adolescents. Research has indicated that roughly 1 in 5 children have a diagnosable mental health disorder; however, roughly 70% do not receive the needed services (Cook et al., 2015). Moreover, those receiving services are often provided inadequate care. Fitzgerald, Geraci, & Swanson (2014) have found 1-7% of students have significant emotional and/or behavioral problems, and roughly 5-15% of students are at-risk for developing some sort of emotional and/or behavioral problem. Since schools have been viewed as de facto mental health systems, effective systems need to be in place to foster positive relationships and behavioral changes (Cook et al., 2015).

There is increased pressured on the school system to ensure all students have the competency to succeed academically, socially, and emotionally; because schools represent a common setting, it is expected mental illness prevention and mental wellness promotion programs are in place (Cook et al., 2015). Problem behavior is an area of concern for students who suffer from mental illnesses. Best practice suggests implementing a continuum of behavior support including multitiered levels to reach the maximum amount of students possible (Cook et al., 2015). Through implementation of proactive strategies, it is the goal to catch students in the initial stages of problem behavior to prevent further escalation of the problem. Overtime, it would be expected to see a decrease in the severity of problem behaviors (Hawken, 2006).

Review of Literature

School counselors are beginning to play an important role in the functionality of a school-wide behavior system to support the academic, social, and emotional development of students. Along with creating an environment that reflects safety, social competence, and healthy school climates, multitiered systems of support must be in place to effectively provide mental health services that may be necessary within the school system (Cook et al., 2015). According to Cook et al. (2015), through the implementation of a multitiered system, schools are able to reach the academic needs as well as the social needs for the entire population within the building. It is crucial for school systems to develop an understanding of what programs would best support the needs of the district while determining how MTSS will be integrated school-wide. This research aims to identify what a multitiered system looks like with a school wide behavior system in place. With many different programs available, the intent of this research is to focus on two behavior systems: Positive Behavioral Interventions and Supports and The Nurtured Heart Approach.

Multitiered Systems of Support

Multitiered systems of support (MTSS) is an efficient and effective way to organize and deliver a continuum of mental health services in the school; hence the reason why researchers have embraced and advocated for MTSS to be integrated into the schools (Cook et al., 2015). This continuum of behavior support is built on the framework of least intensive to most intensive preventative actions (Hawken, 2006). Being built on evidence-based practices and data-driven decisions is one important aspect of MTSS. It is the mission of MTSS to prevent, reverse, and

minimize mental health problems in the school while encouraging positive academic, social, and emotional successes (Cook et al., 2015).

According to Hawken (2006), the majority of students come to school understanding the behavioral expectations and will respond well to a primary level, school-wide behavior plan. This school-wide behavior plan may consist of 3 to 5 core values to focus the attention on, and will then work to teach, encourage, and positively reinforce them (Hawken, 2006). The foundation of MTSS is the universal support provided and practiced by all students to prevent the emergence of negative behaviors and mental health problems (Cook et al., 2005).

Approximately 5-15% of a school's population will need additional support (Hawken, 2006). This support can be provided through secondary level, targeted interventions. Hawken (2006) further explained, 5-7% of the students may need tertiary level interventions, which requires formal assessments and individualized support plans.

The challenge with multitiered support systems is understanding the theoretical frameworks and complexity of the various universal programs. Several existing universal programs have been researched and implemented in standalone programs; however, if the goal is to meet the behavioral and mental health needs of all students, a standalone program may shortchange some. It is nearly impossible to provide a program to fit the needs of each individual, but there is potential of integrating more than one MTSS approach to best meet the unique needs of individual schools. It is vital to note the importance of ensuring the universal programs chosen are complementary to each other, rather than redundant (Cook et al., 2015).

PBIS defined

Positive Behavioral Interventions and Supports (PBIS) is based on a preventative-oriented framework. The focus of this approach is to create an environment that exhibits safety, social competence, and healthy school climate (Cressey, Whitcomb, McGilvray-Rivet, Morrison, & Shander-Reynolds). The premise of PBIS is built around the idea of improving the system – discipline, reinforcement, data management – of the school and procedures – office referral, reinforcement, training (Bradshaw, Koth, Bevans, Ialongo, & Leaf, 2008). With the number of students engaging in problem behavior increasing, implementing proactive strategies to catch students in the initial stages to prevent further escalation of the problem is vital (Hawken, 2006).

Due to the building of structure and ongoing collaboration among staff, PBIS has been found to improve the organizational health of schools (Bradshaw et al., 2008). When beginning to integrate PBIS school-wide, it is important to effectively engage as many stakeholders in the building as possible. Leadership teams need to be formed and communication needs to open (Cressey et al.). According to the research of Bradshaw, Koth, Bevans, Ialongo, & Leaf (2008), PBIS aims to prevent disruptive behavior while enhancing the overall organizational health of the school. In order to have success in these areas, primary, secondary, and tertiary systems of support need to be created and sustained.

A major emphasis in this program is the teaching of observable expectations to all students. The teaching should be purposeful and direct (Fitzgerald et al., 2014). Expectations should be specific, taught, and retaught as needed. This level of support is the Tier 1 prevention of PBIS. According to Mitchell, Stormont, & Gage (2011) and Reinke, Splett, Robeson, & Offutt (2009), the majority of students, approximately 80% to 90%, respond to this level of

support. Tier 1 follows a systematic process for acknowledging appropriate behavior while consistently re-teaching expectations to respond to inappropriate behavior (Mitchell, Stormont, & Gage, 2011). It is important to embed this instruction into daily classroom instruction as well as within non-classroom settings. Furthermore based on Mitchell et al. (2011), if implemented systematically, Tier 1 practices are effective in reducing office discipline referrals, school suspensions, and problem behaviors. Student perceptions of school safety, positive student behavior, and academic outcomes all increase (Mitchell et al., 2011).

Tier 2 is identified as a specialized group designed for students considered at-risk (Mitchell et al., 2011). According to Reinke et al. (2009), 10% to 15% of students will not respond to universal school-wide interventions and will need an increased structure. These students may respond to simple and effective group interventions (Reinke, Splett, Robeson, & Offut, 2009). Tier 2 interventions are designed to include more explicit instruction in the needed skills of improvement. Explicit prompts may be needed for desired behavior and frequent feedback must be given on student performance (Boyd & Anderson, 2013). The goal of these interventions is to reduce current cases of problem behavior and/or academic failure; moreover, preventing student problems from escalating into more intense, high-risk behavior (Mitchell et al, 2011). Interventions at this level of support will also consist of initial and on-going coaching, team-based development and implementation, and data analysis to monitor progress for all students within this tier (Boyd & Anderson, 2013). Existing Tier 2 interventions have a design primarily for students with problem behavior maintained by adult attention; therefore, relationship development is a major component of this level of support. Programs offering this support include – but are not limited to – Check-In/Check-Out (CICO), Check and Connect,

Check, Connect, and Expect, First Step to Success, social skills instructional groups, and academic supports (Mitchell et al., 2011 & Boyd & Anderson, 2013).

Check-In/Check-Out (CICO) has become a successful Tier 2 intervention (Boyd & Anderson, 2013). This program is designed to identify a targeted intervention in which the student needs extra support and provide outcomes for the student that are defined objectively and monitored frequently. Students may be referred to this system when they are not responding to school-wide, primary prevention efforts (Hawken, 2006). CICO uses school-based contingencies to guide the intervention and student outcomes. The basic structure for a CICO consists of the following: (a) a brief, positively focused meeting at the beginning of the day with the leader of CICO where goals are set for the day and discussed; (b) a point-system card with predetermined times for the teacher to briefly meet with the student and provide feedback regarding the points earned with reason for them; (c) a short meeting at the end of the day to review the student's point card and discuss the day (Campbell & Anderson, 2008). Tangible or intangible rewards may be awarded for meeting the goal. This system has shown to decrease classroom behavior while increasing academic achievement for many elementary and middle school aged children (Campbell & Anderson, 2008).

A smaller number of students, 1% to 5%, will enter school with significant deficits in specific skills and will not respond to the Tier 1, universal system supports (Reinke et al., 2009). These students will also require more intensive interventions than the Tier 2 supports will provide. According to Reinke et al. (2009), tier 3 practices are specifically specialized and individualized for students with high-risk behaviors. Typically, support systems within Tier 3 involve the use of functional behavioral assessment (FBA) (Mitchell et al., 2011). A functional analysis may also be used to determine patterns across the antecedent and behavior. The goal of

this Tier is to reduce the severity and intensity of the chronic, high-risk behavior that may or may not be associated with academic failure (Mitchell et al., 2011).

Students receiving Tier 3 supports should also have had the foundation and structure provided by the other two tiers; tier 3 supports are layered upon those foundational and structural tiers for students to build from (Michigan Department of Education, 2010). Individual needs require more intensive interventions, and Tier 3 will provide those interventions based on the student's specific needs and circumstances. Research completed by the Michigan Department of Education (2010) supports instruction of replacement behaviors, individualized positive reinforcement, planned consequences designed to decrease reinforcement for problem behavior, and home/school collaboration as examples of Tier 3 interventions.

Research regarding family involvement in one's education has been strongly supported (Reinke et al., 2009). There are many benefits from family involvement including higher academic achievement, increased support of teachers and the school system, improved behavior, and an increased likelihood of students enrolling in postsecondary education programs (Reinke et al., 2009). According to Reinke et al. (2009), collaborative relationships are vital at the universal level whether it be in the planning, implementing, or evaluation of school-wide supports. The home-school relationships create greater continuity between home and school environments and social supports are provided for families with struggling students. Family involvement may be more widely practiced at certain levels; however, a systematic approach to integrate family systems as targets of intervention is necessary to truly prevent and decrease the disruptive behavior problems children are bringing to our society (Reinke et al., 2009).

The development of PBIS was in response to the many challenges proposed by students with problem behavior; therefore, a proactive approach addressing the wide array of behavioral challenges made it's way to implementation in many schools (Reinke et al., 2009). Parents have the knowledge about the social, emotional, and behavioral development of their children at home and in other areas within the community. Parents also possess the information regarding their child's preferences, strengths, communication skills, and any medical concerns. Pairing this knowledge with the information from school staff a comprehensive understanding of problem behaviors can be determined. Moreover, by recognizing, respecting, and accommodating the availability of families, creating a context for family participation through discussion of family priorities and goals, developing and maintaining a team partnership where the family understands the support is ongoing, and creating – with the parents – a home expectations matrix, parents are more encouraged to collaborate with the school (Michigan Department of Education, 2010).

Nurtured Heart Approach defined

The Nurtured Heart Approach is defined as a way of thinking with a set of strategies that are particularly useful for difficult, intense children (Ahmann, 2014). This approach emphasizes the opportunity to energize crucial traits of a whole person while staying within the structure of clear and consistent boundaries. The goal of this approach is to help children create a new level of "inner wealth" that will inspire them to make positive choices rather than negative choices (Glasser, Bowdidge, & Bravo, 2013). Balance with using strong positives and demonstrating excellent limit setting is an important aspect of this approach. Glasser, Bowdidge, & Bravo (2013) found typical parenting methods were not working because negative behavior was accidentally being rewarded. The Nurtured Heart Approach is designed to help parents direct

their attention in the right direction to help create greatness among their children. This is done through limiting the amount of attention given to negative or undesirable behaviors while recognizing small positive behavior, naming them, and placing value to the occurrence. By doing these things, parents are energizing their attention in a positive way towards their children (Ahmann, 2014).

With the Nurtured Heart Approach, children with serious emotional and/or behavioral disorders are referred to as "energy-challenged" or "intense" children (Hektnar, Brennan, & Brotherson, 2013). According to Hektnar, Brennan, & Brotherson (2013), Glasser and Easley assume these children have a greater need for social connection, relationship, and response, which creates the need for energized attention. Much of the research regarding the Nurtured Heart Approach represents the parent training model and the effectiveness within the home environment; however, informal research has indicated this approach has value and effectively impacts children in a variety of settings including Head Start programs, schools, foster care agencies, treatment centers, and pre-adolescent diversion programs (Ahman, 2014).

By using the Nurtured Heart Approach, basic strategies are used to "take a stand" and maintain a belief in an unbending and courageous way (Glasser et al., 2013). This approach is centered around the stands, or principles, and are defined as being consistent, resolved, and committed to specific and targeted strategies. These stands are as follows: (1) refusing to energize negativity; (2) purposefully and relentlessly energizing success; and (3) establishing and applying clear rules and genuine consequences (Hektner et al., 2013). Elements of behavioral and relational approaches are blended together to provide these stands and the explanation of the purpose. If change is the end goal, these three stands need to be an area of focus (Glasser et al., 2013).

Nurtured Heart Stand One: Refuse to Energize Negativity

This idea of refusing to energize negativity contradicts the conventional approach to parenting (Glasser et al., 2013). Typically, parents address rules and values through instruction, lessons, and lectures. Often times the lessons are being taught through on the spot correction of a "negative" behavior. This behavior has lead to a rule being broken or a child failing to demonstrate an important value of the family. According to Glasser et al. (2013), this type of parenting, in regards to the Nurtured Heart Approach, is known as "energizing negativity" – parental energy, attention, and intensity is highlighted on the problematic behavior of the children. Children with challenging behaviors are often left experiencing negativity and sense of failure. This may result in damaged self-esteem and eroded self-confidence. The Nurtured Heart Approach takes the stand of refusing to energize negativity; instead, it provides parents with the opportunity to explore the balance of negatives and positives in their parenting style (Ahmann, 2014).

Nurtured Heart Stand Two: Energize the Positive

Instead of following the conventional approach of focusing on the negative behaviors in an effort to extinguish them, the Nurtured Heart Approach encourages the positive to be energized (Ahmann, 2014). Energizing success creates positive relationship through the frequent positive interactions. These positive interactions may happen when a child is demonstrating a wanted behavior and the parent, or educator, gives attention and praise due to the shown behavior (Hektner, et al., 2013). Energizing success may occur differently with four specific techniques: active recognition, experiential recognition, proactive recognition, and creative recognition (Ahmann, 2014).

Active recognition is a detailed description from observations of the child's behavior. This is specific without judgment or evaluation; it is strictly factual observation. This technique is very similar to taking a photograph. Active recognition is a "snap-shot" like description of what is taking place (Ahmann, 2014). Experiential recognition is very similar to active recognition with an emphasis of attaching a value to the snap-shot picture that was taken and described. This provides the child with something to begin evaluating his/her experiences and/or behavior (Hektner et al., 2013).

Even though parents and educators are encouraged to make an effort to notice, mention, and energize the positive behaviors in which children are engaging in, sometimes children show very few opportunities to be celebrated. Proactive recognition is a technique that encourages parents and educators to create an environment for success so active and/or experiential recognition can take place (Ahmann, 2014). Creative recognition involves using commands or providing specific requests for certain tasks to be completed. These requests are followed by enthusiastic, positive feedback. If the child does not want to comply, the commands need to be strategically refocused on a task that would be preferred. As compliance begins to be more prominent, the tasks become more complex. This process allows parents and educators to shape the desired behavior (Hektner et al., 2013).

The four techniques described to energize the positive all assist in strengthening the relationship between the child and adult and lead to long-term development of inner wealth (Hektner et al., 2013).

Nurtured Heart Stand Three: Provide and Uphold a Perfect Level of Limits

Through the implementation of the previous two stands in the Nurtured Heart Approach, time and energy is shifted away from a child's negative behavior to recognition of the positive behaviors the child is displaying (Ahmann, 2014). These two stands pave the way for the third stand in which timely, simple, non-punitive consequences can be introduced. Communication with the child should take place in a neutral manner. This approach suggests using "reset" – a brief time-out for the child to regain self-control. Resetting can be very effective if the groundwork is already in place (Hektner et al., 2013).

It is with the intentions of helping children feel great about who they are, creating successes that would not otherwise exist, and becoming adept at identifying what is right with the behaviors being observed that parents and educators are encouraged to integrate the three stands of the Nurtured Heart Approach (Glasser et al., 2013).

Approaches to Integrating Multiple Approaches

According to Cook et al. (2015), nearly all of the universal supports have been researched and implemented as stand-alone prevention programs. However, if the goal is to address the diverse mental health needs of students, a stand-alone support system may be short-sighting the purpose of the chosen prevention program. Through the integration of complementary universal supports, schools are provided with a broader range focus on mental health needs that are relevant to students' academic and life success (Cook, et al., 2015).

Very little literature provides guidance on how to approach the integration of universal programs; however, two different conceptual ways of approaching integration have been explored. Based on the research of Cook et al. (2015), one approach is to implement the

interventions of each universal support in a parallel manner. This is accomplished by implementing the interventions side-by-side with limited to no attention paid to how the theories may link together, what core practices may be redundant, or how certain practices from one universal program may complement or enhance the other universal program. An alternative approach is to systematically blend the interventions by determining the differences between the interventions and exploring any theoretical overlap. This process identifies how specific practices from each universal support could potentially complement or enhance the practices from the opposite universal support (Cook et al., 2015).

Universal programs have the opportunity to benefit students through school-wide implementation of specific interventions. It is important to understand the universal supports being used and how the integration of more than one may benefit students with mental health needs.

Discussion

Schools are beginning to identify a larger number of problematic behaviors throughout grade levels. The make-up of students entering our school systems is continually changing. The norms our society is bestowing upon our young children have seemed to evolve into a social media, video game, and instant gratification mindset. Compare this to the make-up of our children many years ago and one would see the need for our education system to adapt and make changes to fit the needs of our forever changing students.

Many students with problematic behavior may have a mental health diagnosis or may be at-risk of developing a mental illness. Often times schools have the opportunity to support these

students and provide the care one may need as they progress through the school day. However, the percentage of students affected by mental health issues is increasing along with a rising concern in the effectiveness of services being provided. Students who come to school with a mental health concern may be receiving inadequate care. This may be due to a number of reasons: lack of support within the staff, negative recognition for behaviors, lack of education in mental health issues, or misdiagnosis of behavior problems.

Being the de facto mental health system many think school systems are, the findings of this research emphasize the importance of implementing an effective multitiered system of support. Even though many mental health issues overflow into the home environment, research within this paper has validated the importance of providing multitiered systems of support to best meet the needs of all students, including those with mental health concerns, needs, or diagnosis. Much of the research validates the effectiveness of school wide programs involving positive intervention and behavior supports. Students with mental health needs or concerns may be reached through positive, nurturing approaches, which benefit the entire student population and work to enhance the education of each student at different levels; therefore, this study attempts to integrate two approaches built on the foundation of positive recognition and creating greatness among all students.

There are limitations with this process of integrating two approaches together. One issue that may occur is the way in which the approaches are woven together. Schools may choose to integrate the approaches in a parallel format while other schools may find blending the approaches to be a smoother method. With very little research to solidify the specific way of integrating two approaches, school systems must work through the process to see what works best within their school setting. Another limitation may be with the follow through of each

approach. Once the approaches are integrated into the school system, it is important the aspects of each approach are carried through. If students are to be rewarded through a token system for positive behavior, the token system must be in place and available. If students are to be separated into levels to appriopriately assign tasks, the levels must be clearly defined and organized to best meet the needs of the students. The foundation must be laid, but the innerworkings must be in place for longstanding effects.

Focusing specifically on school counselors, longetivity of positive school-wide approaches may be encompassed within their role. Many counselors bring a different viewpoint and positive awareness to the table of various educators. A counselor's knowledge of mental health issues, relationships built among the entire school building, and positive communication skills may be highly valuable when implementing positive school-wide approaches. Through research, conversations among coherts, and observations of effective programs, a school counselor could begin to have a solid understanding of how to best implement school wide programs to reach all students, including those with mental health concerns.

Due to lack of in-depth information and research of The Nurtured Heart Approach, future research could be focused to this approach and the effectiveness of using the 3 stands. The concepts and terminology used within The Nurtured Heart Approach are positive and motivating, so by researching the effectiveness of the entire approach would only validate the importance of finding the greatness in everyone. Future research could also focus on the methods to integrating multiple approaches to reach all the students within the school. By providing a process in which to follow, school systems may be attracted to the idea of using more than one approach. As school counselors, we have the privilage to create an environment in which all our students, mental health concerns or not, have the opportunity to grow as individuals and experience the

greatness within themselves. We can make the difference by creating positive realtionships with our students and by meeting them at the level of their needs.

References

Ahmann, E. (2014). Encouraging positive behavior in 'challenging' children: the nurtured heart approach. *Pediatric Nursing 40*(1), 38-42.

Boyd, J. & Anderson, C. M. (2013). Breaks are better: a tier II social behavior intervention. *Behavioral Education 22*, 348-365. doi: 10.1007/s10864-013-9814-2

Brahshaw, C. P., Koth, C. W., Bevans, K. B., Ialongo, N., & Leaf, P. J. (2008). The impact of school-wide positive behavioral interventions and supports (PBIS) on the organizational health of elementary schools. *School Psychology Quarterly, 23*(4), 462-473. doi: 10.1037/a0012883

Campbell, A. & Anderson, C. M. (2008). Enhancing effects of check-in/checkout with function based support. *Behavioral Disorders 33*(4), 233-245.

Cook, C. R., Frye, M., Slemrod, T., Lyon, A. R., Renshaw, T. L., & Zhang, Y. (2015). An integrated approach to universal prevention: independent and combined effects of PBIS and SEL on youths' mental health. *School Psychology Quarterly*, 1-18. Retrieved from http://dx.doi.org/10.1037/spq0000102

Cressey, J. M., Whitcomb, S. A., McGilvray-Rivet, S. J., Morrison, R. J., & Shander-Reynolds, K. J. Handling PBIS with care: scaling up to school-wide implementation. *ASCA: Professional School Counseling 18*(1), 90-99.

Fitzgerald, C. B., Geraci, L. M., & Swanson, M. (2014). Scaling up in rural schools using positive behavioral interventions and supports. *Rural Special Education Quarterly 33*(1), 18-22.

Glasser, H., Bowdidge, J., & Bravo, L. (2013). Transforming the difficult child workbook: an interactive guide to the nurtured heart approach. Tucson, Arizona: Nurtured Heart Publications.

Hawken, L. S. (2006). Special section: changing practice, changing schools. *School Psychology Quarterly 21*(1), 91-111.

Hektner, J. M., Brennan, A. L., & Brotherson, S. E. (2013). A review of the nurtured heart approach to parenting: evaluatioin of its theoretical and empirical foundations. *Family Process 52*(3), 425-439. doi: 10.111/famp.12030

Michigan Department of Education (2010). School-wide positive behavioral interventions & supports implementation guide.

Mitchell, B. S., Stormont, M., & Gage, N. A. (2011). Tier two interventions implemented within the context of a tiered prevention framework. *Behavioral Disorders, 36*(4), 241-261.

Reinke, W. M., Splett, J. D., Robeson, E. N., Offutt, C. A. (2009). Combining school and family interventions for the prevention and early intervention of disruptive behavior problems in children: a public health perspective. *Psychology in the Schools 46*(1), 33-43. doi: 10.1002/pits.20352