Aligning and Integrating Family Engagement in Positive Behavioral Interventions and Supports (PBIS)

Concepts and Strategies for Families and Schools in Key Contexts

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Increasingly, staff and leaders from all youth serving systems including education, mental health, child welfare, juvenile justice, disabilities, primary healthcare and others are recognizing the paradigm of professional “experts” telling children, youth and families what they should be doing is not effective (Brandt et al., 2013; Hill & Tyson, 2009; McDaniel, Schiele, Taylor, Haak, & Weist, 2014; Reschly & Christenson, 2012). This directive, hierarchical model suggests superiority of the professional over the student or family member, promotes distance in the relationship and negative reactions and feelings, and decreases the likelihood of positive change occurring (see Bickham et al., 1998; Fette et al., 2009). Yet, these models perpetuate as in reality children, youth and families have little voice about what happens in the systems they participate in (see Hart, 1997; Smit, Driessen, Sleegers, & Teelken, 2008).

However, a new paradigm is emerging and gaining strength, characterized by equal partnerships among children, youth, families, and youth-serving staff and leaders, and the research base is growing and documenting that when these partnerships are in place positive educational, health, mental health, social and occupational outcomes for youth are promoted (see Brandt et al., 2014; Reschly & Christenson, 2012). This is true for the field of Positive Behavioral Interventions and Supports (PBIS) and related Multi-Tiered Systems of Support (MTSS; both defined and reviewed in more detail in the next two chapters) and efforts to bring more comprehensive mental health services to children and youth, where they are, in
one of the most universally encountered environments of schools.

This e-book, supported by the Technical Assistance Center for PBIS funded by the Office of Special Education Programs comprehensively reviews reasons for and ways to significantly enhance family engagement in schools, toward improved tiered systems involving promotion/prevention, early intervention, and intervention for students, contributing to removed and reduced academic and non-academic barriers to learning, and improved academic, social, emotional, behavioral, and occupational outcomes for them. Following the example of other e-books and monographs the center has supported (see Barrett, Eber, & Weist, 2013; McIntosh, Girvin, Horner, Smolkowski, & Sugai, 2014), the intent of this e-book is to broadly disseminate and make accessible a free, downloadable resource (on www.pbis.org) that can be used by families, schools, collaborating staff from other youth-serving systems, policy makers, educators/practitioners, government officials, advocates, university staff and others to advance family engagement in PBIS/MTSS in realms of policy, research, and practice, and to promote linked progress across these realms.

Please note that in preparing this e-book, we did not identify a universally accepted definition of family engagement, but dimensions and elements of family engagement are available. For the purposes here, we define family engagement as an active, interactive, dynamic, and ongoing process in which family members and key stakeholders engage as equal partners in decision-making, planning, and implementation to support children and adolescents across settings (see Fette et al., 2009; Sheridan, Knoche, Kupzyk, Edwards, & Marvin, 2011; Chapters 2, 3 and 7, this volume). Contrary to prior descriptions of family involvement, which emphasized family participation and one-directional (school to home) communication, family engagement focuses on supporting and empowering family members to engage as equal partners, and using culturally responsive strategies and multidirectional communication that facilitate equal access and opportunity (Mapp & Hong, 2010).

Please also note that a variety of terms are used throughout the e-book to refer to foundational frameworks, including Positive Behavioral Interventions and Supports (PBIS), School-wide Positive Behavior Supports (SWPBIS), Multi-tiered Systems of Support (MTSS), School Mental Health (SMH), and other variations (e.g., PBIS: MTSS). Rather than prescribing terms for the e-book, we recognize that language will vary, and that is the nature of scholarship and efforts to improve systems for children and youth.

Following this introductory chapter, the e-book includes information on foundations of family engagement (FE), review of FE in relation to PBIS/MTSS, strategies for application of ideas in local sites, moving toward interconnected approaches across systems, promoting FE across student developmental levels from pre-Kindergarten through high school, and addressing the unique needs of particular populations of students and emphasizing the critical theme of cultural competence. Voices of family members are prominent throughout the e-book, with family members providing ideas and guid-
 ance on each chapter, and a concluding chapter
by a family member with significant experience
with PBIS/MTSS. Key themes from each of the
chapters are briefly reviewed here.

In Chapter 2, on Foundations of Family
Engagement, Andy Garbacz, Amanda Witte
and Sadie Houck review literature that power-
fully documents benefits of families being truly
engaged in the work of schools, emphasizing the
importance of family-centered practices that are
active in seeking and honoring family voice and
guidance in all aspects of planning, treating fam-
ilies with respect and dignity, and actively break-
ing down barriers and promoting proactive and
flexible strategies to make genuine FE a reality.
There are evidence-based frameworks to increase
the likelihood of these processes, but signific-
ant work is needed to increase the application
of these frameworks and address commonly
encountered problems such as the negative spi-
raling that occurs for families with students with
challenging emotional and behavioral problems,
which contributes to reduced family engage-
ment, and worsening emotional and behavioral
challenges (and reduced family engagement
and so on). Families desire more support from
schools than they are receiving and the chapter
concludes with powerful recommendations for
increasing this support.

In Chapter 3, PBIS National Center
Directors, Tim Lewis, Rob Horner, and George
Sugai, along with Barbara Mitchell review funda-
mental concepts of school-wide positive
behavior supports and family engagement. The
chapter underscores the public health signifi-
cance of this work with challenging student emo-
tional and behavioral problems associated with
many negative outcomes for them (e.g., dropout,
underemployment, incarceration), their families
(e.g., very high levels of stress, at times having
adversarial relationships with schools) and the
schools (e.g., contributing to teachers leaving
the field related to feeling unsupported). In real-
ity, in schools, most efforts to engage families
occur in relation to students being assessed for
or receiving special education services, with sig-
ificant gaps in family engagement for students
in general education. Authors review strategies
for using data, implementing evidence-based
practices, and having systems to support effec-
tive universal practices at Tier 1, prevention and
early intervention at Tier 2, and intervention
at Tier 3, with guidance on involving families
(defined broadly) in all of these processes.

In Chapter 4, Devon Minch, Don Kincaid,
and parent leaders Veronica Dominguez and
Regina Thomas review strategies to increase
family engagement in local sites. Increasingly,
research documents that genuine family engage-
ment in schools helps to close achievement gaps
and turn around under-performing schools, yet
“schools continue to struggle to move beyond
random acts of engagement” (p. 43). Building
on decades of research, the authors present keys
for maximizing the impact of effective family
engagement in schools. Critical factors include
assuring coherence and consistency between and
within school environments, support by educa-
tors for family members to communicate their
educational expectations and aspirations for their
children, and emphasizing quality vs. quantity
of genuine two-way interactions between fami-
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Aligning and Integrating Family Engagement in Positive Behavioral Interventions and Supports (PBIS): Concepts and Strategies for Families and Schools in Key Contexts

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International Science Education Research Conference (ISER)...

Chapter 5 reflects work of a national workgroup focused on interconnecting PBIS with more comprehensive mental health services (e.g., involving community mental health clinicians) in schools. Kelly Perales, Lucille Eber, Susan Barrett and colleagues from this workgroup review strategies for family engagement within this context of education, mental health and other youth serving systems working purposefully and collaboratively together. Based on an Interconnected Systems Framework (ISF, see Barrett, Eber, & Weist, 2013) efforts challenge limited “co-located” approaches toward mutually supportive and blended teams of school and community staff and family members implementing evidence-based programs within the tiered systems. Training and implementation support involves systematic “onboarding” of families, mental health staff and staff from other youth-serving systems (e.g., child welfare, juvenile justice) to orient them to the culture of schools toward the vision of these families and staff becoming a part of the school (vs. being viewed as outsiders). In this collaborative approach, exemplifying the “shared agenda” of school and community staff and families working together, layered and connected interventions are implemented and matched to student needs toward achieving a broader set of academic, social, emotional, and behavioral health outcomes for students and families.

In Chapter 6, Lise Fox and Judy Swett present ideas for partnerships with families to promote social and emotional competence of young children, describing the Pyramid Model. Systematic guidance and a wealth of examples are presented at every tier for strategies to “welcome and support diverse families…learn from them…partner with them…and provide the supports they need to optimize their child’s development.” (p. 86). Families serve as active members on leadership teams, and partnerships with them are characterized by “respect, equity, and inclusion.” Schools will often exclude families for invalid reasons (e.g., families are too busy, would not be interested in more involvement, cannot be involved in reviewing data), and in the Pyramid Model, teams work to counter these objectives and overcome common barriers (e.g., family needs for childcare, language differences) to assure authentic family engage-
ment. Innovative ideas for involving families in programming within tiered systems at each level of prevention (Tiers 1, 2, and 3) are presented, including having photos of family members and images of various cultures in classrooms, having an “open-door” policy for family visits, developing parent information centers, training parents and having them wear “ask me about PBIS” buttons, and having meetings with families in their homes and community settings.

Reflecting work of a federally funded national center for school mental health (at the University of Maryland, see http://csmh.umd.edu), in Chapter 7, Rebecca Fix, Ashley Mayworm, Nancy Lever, Sharon Stephan and colleagues review approaches to enhance family engagement for students in elementary and middle schools. They provide a definition of family engagement from the work of a Community of Practice focused on this theme by Fette et al. (2009), and review key cross-cutting themes such as: the importance of positive expectations for family engagement, purposeful efforts to reduce stigma of behavioral health services, and moving beyond persisting problematic practices, such as most communication from schools to homes being negative (i.e., in relation to a student academic or behavioral problem). Ideas from a program of research by Becker, Buckingham and Brandt (2015) are presented that inform family engagement at all levels in tiered systems. For example, through “accessibility promotion” emphasis is placed on rapidly getting relevant information and resources (using an array of media and formats) to families at specific times and in locations that are convenient for them.

As in prior chapters, family members are equal collaborators in this work, involved in open discussion with staff from schools and collaborating community agencies on strengths, success, challenges and barriers and ways to overcome them and to improve tiered systems, informed by the family perspective.

Jennifer Freeman, Christopher Vatland, Janet VanLone and Terry Mitchell-Morgan present strategies for promoting family engagement in high schools in Chapter 8. After presenting literature on the critical importance of high school graduation for the individual and society, they present the challenge that family engagement clearly promotes academic success and graduation, yet typically declines in the high school years. Other challenges in the high school setting include typically large sizes of schools, significant academic pressure on students, and a structure characterized by different departments, that reflect different content areas and in some cases, cultures. For family engagement to advance in high schools, it is essential for it to be a priority for the district and for school leadership teams that include family members. Freeman and colleagues present step by step guidance on enhancing family engagement in high schools including articulating clear short- and long-term goals, developing “antecedent strategies” that increase the likelihood of family engagement, using validated data systems, building communication approaches to reflect multiple perspectives, and supporting effective practices at all tiers within tiered systems. For youth in high schools in need of Tier 3 services, the work can be even more challenging, underscoring the need for high
fidelity measurement and intervention implementation, with high school youth and family as partners in these efforts.

In Chapter 9, Bob Stevens, Mitch Yell, June Jenkins and colleagues present ideas to assure that strategies to promote family engagement help to promote cultural competence, reduce disproportionalties and address needs for students who may present elevated needs, such as students in special education, experiencing bullying, and/or identifying as Lesbian Gay Bisexual and Transgender (LGBT). Increased family engage can increase the ability of schools to prioritize culturally competent environments and efforts as a “non-negotiable responsibility” and to promote linked progress in enhancing family engagement and culturally competence together requires “intentionality and persistence.” The increasingly accepted vision is for schools, families and students to be equitable partners in decision making about ways to promote student achievement and wellness, but in reality most schools do not live out this vision. There are compelling needs to move away from approaches that “tokenize” students and families and “continuum approaches” that help to move away from these practices are presented. Relevant legislation, such as the recently enacted and groundbreaking, Every Student Succeeds Act, and resources, such as Statewide Family Engagement Centers provide authority, guidance and support for supporting the needs of diverse students and ideas are provided to leverage these opportunities toward genuine family engagement and positive change.

The concluding Chapter 10 in this e-book by Amy Murphy, an educator and family advocate provides compelling and pragmatic recommendations for building family engagement in schools. Creating support for family engagement is essential, and for this to occur, communication among school leaders, staff, family members and community partners should be transparent and focused on tangible programs and strategies and how they connect to positive outcomes for children and the school. Challenges will always be encountered, but there are often common-sense solutions for overcoming them, such as using plain language, broadly training staff and stakeholders in key concepts, using clear measurement strategies, and communicating evaluation findings clearly. Leaders should demonstrate commitment to the work, and create cultures characterized by shared decision making with families and stakeholders, including willingness to challenge the status quo of people not liking change. School leaders set the tone for success of family guided PBIS by repeatedly emphasizing positive impacts, providing meaningful support for implementation, and providing positive feedback and recognition of accomplishments. Leaders should also clearly and concisely describe and reinforce the family role in PBIS and create opportunities for families to work alongside staff in implementing programs across tiers within tiered systems. Simple recommendations for making families feel welcome should also be followed such as having calendars and clear signage for family events, having open invitations for families to visit the school through-
out the day, and actively giving them “a voice and place at the table.”

The authors and editors of “Aligning and Integrating Family Engagement in Positive Behavioral Interventions and Supports (PBIS): Concepts and Strategies for Families and Schools in Key Contexts,” hope the contents of this e-book will inspire and encourage families, schools, and collaborating staff from other youth-serving systems to make meaningful and authentic family engagement a natural part of our systems’ commitment to truly improve academic, social, emotional, behavioral, and occupational outcomes for all children and youth. We also hope policy makers, educators/practitioners, government officials, advocates, university staff and others will prioritize the advancement of family engagement in tiered systems of support (e.g., PBIS and MTSS) such that future policy, research, and practice fully supports an active, interactive, dynamic, and ongoing equal partnership to support all students in home, school, and community contexts.

REFERENCES


Family engagement refers to active, interactive, and dynamic (Sheridan, Knoche, Kupzyk, Edwards, & Marvin, 2011) processes and practices that family members use to engage as equal partners (Christenson & Sheridan, 2001) with educators and other key stakeholders to support their children’s development. Since families often wait for schools to initiate contacts (Davies, 1991), schools and school staff frequently provide the impetus for families to engage (Christenson & Reschly, 2010). For example, school staff may provide invitations to attend meetings and school events, tips for supporting homework (Walker, Wilkins, Dallaire, Sandler, & Hoover-Dempsey, 2005) and collaborating on support plans (Sheridan & Kratochwill, 2008). The primary aim of family engagement is to bring families and school staff together as equal partners (Reschly & Christenson, 2012) in a school’s tiered systems to support students. In this way, families and school staff collaborate and share responsibility for school-wide plans and procedures as well as individual problem solving and evaluation (Christenson & Sheridan, 2001).

Family engagement models (e.g., Manz, Fantuzzo, & Power, 2004), suggest families engage in schoolwide positive behavioral interventions and supports (PBIS) at school, help educators identify ways to extend the evidence-based positive behavior supports to the home, use positive behavior supports at home, and communicate consistently with educators to support consistent implementation across home and school (Garbacz et al., 2016). In addition to using positive behavior supports at home, families can support their child’s development in other ways, like participating in community activities, helping with homework, and seeking appropriate mental health services. School engagement involves PBIS, but it can also include volunteering at the school and participating as an equal member in a Tier III problem-solving meeting.

An important dimension of family engagement is to work with educators to develop school-
wide systems to support students across home and school, and address needs for individual children and adolescents through mutual planning and problem solving (Sheridan & Kratochwill, 2008). For example, in PBIS families and educators can work together to develop Tier I systems and link school and home practices. When concerns arise for individual students, the foundation in terms of relationship-building and use of positive behavior support can be used as a foundation to build individual support systems.

**Theoretical Underpinnings**

Several relevant theories provide support for engaging families in PBIS. A prime foundation for family engagement in PBIS was built in Bronfenbrenner’s (1977) ecological theoretical model. Ecological theory identifies key systems that influence children’s development. The microsystem concerns proximal environmental settings, such as home and school. The mesosystem reflects interactions among those key microsystems. For example, in the mesosystem families and educators engage together to develop and implement positive behavior supports. Through connecting proximal environmental settings in the mesosystem (e.g., by engaging families and school staff as partners) strong connections and supports can be built across and within settings to prevent problems that arise from disconnects and inconsistent expectations (Bronfenbrenner, 1979, Crosnoe, 2015). When families and educators have different expectations for children and adolescents, home and school will be experienced as inconsistent. The goal of family engagement is to bring families and educators together to align expectations around evidence-based practices to support children and adolescents. In fact, recent experimental research has identified the importance of improving parent-teacher relationships and establishing consistency across home and school to support children (Garbacz, Sheridan, Koziel, Kwon, & Holmes, 2015; Sheridan et al., 2012).

Whereas the ecological theoretical model identifies and describes key systems, settings, and interactions among them, transactional theory (Sameroff, 2009) suggests children, individuals (e.g., parents), and environments (e.g., home, school) have bidirectional and interdependent influences on each other. These transactional processes vary across families and cultures (Sameroff, 2009) and suggest that child behavior is best understood through the interplay among settings and individuals as well as the practices and behavior supports used in each setting (Gutkin, 2012). In PBIS, families and educators collaborate to agree on school systems that can be easily transferred to the home setting. For example, evidence-based positive behavior support practices used at school can be embedded within a family’s existing home routines (e.g., identify, teach, and reinforce expectations). Ecological and transactional models point to the importance of family engagement, but they also support the assertion that the goal of family engagement is to create engaged partnerships (Reschly & Christenson, 2012) that are characterized by joint and mutual planning (Christenson & Sheridan, 2001). Family engagement also integrates family culture so that school systems and practices are equally acceso-
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possible by all in the school community (Mapp & Hong, 2010). Thus, when engaging families in the development of PBIS systems, explicit discussions focus on family culture, values, and expectations so that these components can be integrated in the school systems. In addition, identifying all native languages used by families in a school community as well as family preferred communication methods will help school staff know how to best reach their families.

A critical conceptual influence on family engagement is the concept of family-centeredness. Family centeredness identifies beliefs and practices that are respectful, flexible, and responsive, and espouses the notion that families should be treated with dignity and completely informed so they can make choices about how to support their child (Dunst, 2002). Family centeredness integrates a practice-based theory of helping that includes two dimensions: relational and participatory (Dunst, Trivette, & Hamby, 2007). Relational helping identifies the importance of using good clinical practices (e.g., compassion, empathy, active listening) and using a strengths-based view of family capabilities (Dishion & Stormshak, 2007). Participatory helping refers to tailoring practices to meet family needs (Dunst et al., 2007; Sheridan & Kratochwill, 2008). Family centeredness, including relational and participatory helping, is a bridge from the theoretical underpinnings of family engagement to the approach we take with families that informs actions we use (Christenson & Sheridan, 2001). PBIS leadership teams espouse these tenets by treating families as equal partners. Families are brought in to the development of PBIS systems, given a vote in decisions, and involved with any modifications. Since family members may not have experience with the educational system or PBIS, it is incumbent on the PBIS leadership team to describe to the family member her/his role on the team. Furthermore, for families to engage, they need to have appropriate opportunities. This means providing resources and communication options in the family’s native language and providing multiple opportunities to engage that considers various work schedules and religious observances.

Policy and Legislative Considerations

Several federal educational policies integrate family engagement as a key priority and important component of educational practice. The No Child Left Behind Act (NCLB, 2001) identified families and educators as partners in children’s education. The 2004 reauthorization of the Individuals with Disabilities Education Act (IDEA) emphasized family members as important decision makers in their children’s education and identifies the critical connections among key settings. The Every Student Succeeds Act (ESSA, 2015) calls for refining family engagement efforts and specifically indicates that support plans should be created in partnership with families. In addition, ESSA indicates families, school staff, and students share responsibility for school-level plans, and that families are involved in the creation and evaluation of policies. There are frequently logistical barriers to engaging families (e.g., different work schedules). ESSA
identifies the importance of addressing these barriers by, for example, holding meetings at different times, conducting in-home conferences, and providing child care.

**Current policy investments.** Many federal and state early childhood programs have prioritized family engagement efforts as part of their ongoing programming through performance and operating standards. For example, Head Start and Early Head Start programs implement the Parent, Family and Community Engagement Framework (Administration for Children and Families, 2011). This Framework establishes guidelines for programs to support and encourage the active engagement of families enrolled in Head Start and Early Head Start; it creates an opportunity for programs to embellish and enhance efforts to develop and encourage family engagement. Another example includes the Early Childhood Program Standards set forth by the National Association for the Education of Young Children (NAEYC); one of ten Standards mandates that early childhood programs establish and maintain collaborative relationships with families to support children’s healthy development (NAEYC, 2008). Additionally, state pre-kindergarten standards and early learning guidelines put forth by state educational agencies encourage and mandate the involvement of families in early childhood programming. State departments of education can align with the National Standards for Family-School Partnership that encourage collaboration between families and schools; these standards have been established by the National Parent Teacher Association (PTA), an organization dedicated to the educational success of children and promotion of parent involvement in schools (National PTA, n.d.). Finally, the Accountability for a Quality Education System, Today and Tomorrow (AQuESTT) was launched in Nebraska in fall of 2015 as an accountability system designed to track a comprehensive set of tenets. One tenet of AQuESTT is Positive Partnerships, Relationships and Student Success, which reflects the Nebraska State Board of Education’s investment in student, family, and community engagement (AQuESTT, 2015).

**Support for Family Engagement**

Family engagement is associated with positive academic and behavior outcomes for children (for a review see Fan & Chen, 2001). When families and school staff work together, students benefit emotionally, academically, and behaviorally. Using qualitative, case study data to evaluate the value of home visits by school social workers, Allen and Tracy (2004) found students with strong home-school connections simply liked school more. In a study of preschool students in Hong Kong, researchers found that students who received a paired reading program at home were more motivated to read and demonstrated greater increases in word recognition and reading fluency than their control group counterparts (Lam, Chow-Yeung, Wong, Lau, Tse, 2013). A meta-analysis of family literacy interventions found that parent involvement had a positive effect on children’s’ reading acquisition (Senechal & Young, 2008).

**Child outcomes.** Interventions that engage family members contribute to reductions in chil-
dren’s disruptive behaviors, such as fewer mal-adaptive emotional outbursts in a small group of students identified with various mental health difficulties (e.g., bipolar disorder, attention-deficit/hyperactivity disorder, oppositional defiant disorder, depression, autism spectrum disorder; Pearce, 2009), and significant decreases in elementary and middle school students’ attention deficit hyperactivity disorder (ADHD) symptoms (Owens, Murphy, Richerson, Girio & Himawan, 2008). A family-school partnership intervention, called Preschool First Step has two components: classroom-based and home-based. In the classroom-based component a First Step coach works with participating children and their teachers to use a behavioral intervention designed to promote adaptive behavior patterns. In the home-based component a First Step coach works with participating parents to develop their children’s communication and sharing, cooperation, limit setting, problem solving, friendship making, and self-confidence skills. Preschool First Step also serves as a communication bridge between the parent and school. In a study of Preschool First Step, Feil et al. (2014) found that relative to a control group, children who received the intervention demonstrated statistically significantly higher social skills and fewer behavior problems as reported by parents and teachers. Effect sizes for teacher reported outcomes ranged from medium to large and for parent reported outcomes effect sizes ranged from small to medium (Feil et al., 2014).

The Getting Ready intervention uses an ecological, relationship-based approach to school readiness for low income families with young children (birth to 5 years of age) who are participating in home- and center-based early education programs. A primary emphasis of the Getting Ready intervention revolves around promoting parent engagement, defined in terms of parental warmth and sensitivity, support for a child’s emerging autonomy, and active participation in learning. In a study investigating the effects of Getting Ready, Sheridan, Knoche, Edwards, Bovaird, and Kupzyk (2010) found that in comparison to students in a control group, students who received the intervention showed greater improvement in interpersonal competencies.

Early Head Start is a federal program for low-income pregnant women and families with infants and toddlers. Early Head Start promotes family engagement through parenting, education, and family support. It emphasizes warm and supportive parent-child relationships, positive parent-child interactions, and creating home environments that are supportive of both children’s learning and development. A study investigating the effects of Early Head Start 3-year-old children, found that children who received the intervention showed better cognitive and language development, and lower aggressive behavior compared with controls (Love et al., 2005).

**Outcomes for diverse populations.** Quality connections between families and schools such as parent support of school expectations and trusting parent-teacher relationships are associated with positive outcomes for students regardless of ethnicity, language, disability status, socioeconomic status (SES) and community type. In a study of 90 African American
youth between the ages of 9 and 12, maternal school involvement, measured by teacher rating of mother’s general involvement at school, teacher report of mothers’ attendance at parent-teacher conferences, visits to school and interactions with the teacher as well as mothers’ self-report on visits to school and interactions with the teacher was linked directly to academic competence (e.g., reading and math grades) and mediated the relation between low education and SES and students’ self-regulation and academic skills (Brody, Stoneman, & Flor, 1995). Similarly, a longitudinal investigation of 50 rural migrant, primarily Hispanic families revealed that family involvement training that consisted of up to 25 one-hour training sessions over the course of the school year and included modeling ways to support their children’s learning, opportunity for supportive practice, and resource materials to support learning at home, resulted in higher language scores for children whose families received the training relative to students in the control group (i.e., families not participating in the parent involvement training program; St. Clair, Jackson, & Zweiback, 2012). Moreover, in a study examining factors of rural Appalachian students’ college enrollment, successful school efforts to involve parents such as encouraging parents to attend post-secondary informational events and workshops by extending personal invitations, providing food and mentors to offer technical assistance on specific tasks (e.g., FAFSA completion), were identified as among most influential factors in students’ decisions to attend college (King, 2012).

School outcomes. Documented positive effects for schools are evident when family engagement is infused into school policies and procedures. For example, data from an examination of 300 United States (U.S.) schools’ practices revealed that schools with higher quality family engagement programs had more parent volunteers and participation in school decision-making committees relative to schools with lower quality family engagement programs (Sheldon & Van Voorhis, 2004). Family engagement programs were examined based on implementation (i.e., include action plans, regular meetings of a family engagement team, regular evaluation of progress, and report plans and progress to stakeholders), types of involvement used (i.e., parenting, child and adolescent development knowledge; communicating, effective two-way communications; volunteering, support for school programs and student activities; learning at home, help students at home with homework and curricular-related decisions and activities; including parents in school decisions; collaborating with the community to strengthen and support schools, students, and their families), and systemic promotion of family engagement as part of typical school practices (Sheldon & Van Voorhis, 2004). In addition, schools with family engagement programs demonstrate greater levels of student performance and achievement relative to schools without family engagement programs. For example, an examination of data from 113 urban elementary schools serving primarily low-income student bodies uncovered a significant positive relation between efforts to build relationships with all
families in the school (e.g., use clear communication with families, provide families with information when they are unable to attend school meetings, offer opportunities to volunteer at school) and student scores on standardized tests of reading, writing, language usage, math, science, and social studies (Sheldon, 2003). Furthermore, in an investigation of 47 elementary and secondary schools’ family and community involvement practices demonstrated a positive link between high quality home-school connections (e.g., involving parents and community members in decisions about school policies), fewer disciplinary problems (i.e., a lower percentage of students sent to principal’s office), and decreases in detentions and in-school suspensions (Sheldon & Epstein, 2002).

Parent-teacher relationships. Building on the strong foundation of correlational and experimental research examining family engagement, investigations have turned to uncovering for whom, and under what conditions family engagement is most effective (Pomerantz, Moorman, & Litwack, 2007). One outgrowth of this line of research has examined the parent–teacher relationship. Recognizing the importance of high quality home-school connections, educators often take steps to foster strong relationships with the parents of their students (Warren & Quintanar, 2005). Perhaps in part due to often cited barriers to building parent-teacher relationships (Christenson, 2004), teachers have called for increased attention to practices to foster positive parent-teacher relationships in teacher preparation programs (Warren, Nofitle, Ganley, & Quintanar, 2011). One facilitator to building positive parent-teacher relationships with parents of early elementary children is for teachers to conduct home visits (Meyer & Mann, 2006).

High-quality parent–teacher relationships exert a positive influence on student and parent behavior. When parents and teachers both perceive their relationship to be positive, teachers tend to rate students higher in social skills and lower in behavior problems compared to teachers with incongruent or non-positive congruent parent–teacher relationships (Minke, Sheridan, Kim, Ryoo, & Koziol, 2014). A study of students with behavior problems found a significant negative correlation between parent–teacher relationship quality and student externalizing problems, and a significant positive association between parent–teacher relationship quality and student adaptive skills (Kim, Sheridan, Kwon, & Koziol, 2013). Parent–teacher relationships also mediated the connection between parents’ motivation and competence for helping their child succeed in school and students’ behaviors. Furthermore, teacher perceptions of parent-teacher relationship quality partially mediated the effect of conjoint behavioral consultation, a structured, indirect intervention with a dual focus on reducing problem behaviors that impact learning and promoting family-school partnerships to support student behavior outcomes. In other words, high-quality relationships between teachers and parents provide a likely causal explanation for the positive effects of behavioral interventions (Sheridan et al., 2012). Thus parent–teacher relationships may be one mechanism through which parents’ desires to support their children is transmitted to children (Kim et al., 2013).
Key Family Engagement Themes

In recognition of the importance of family engagement for parents, teachers, and students, Christenson and Sheridan (2001) proposed a family engagement framework characterized by four prerequisite family engagement conditions -- approach, attitude, atmosphere, and actions, which when instituted by schools are thought to optimize student outcomes. The system, referred to as the four A’s for partnering with parents, adopts promoting family engagement as its anchor philosophy. For successful family-school partnerships to occur the four A’s consider: (a) the manner in which educators approach families, (b) the attitudes educators hold regarding family involvement, (c) the atmosphere created by educators, and (d) actions and practices with families that are collaborative, partnership-oriented, and focused on relationships between families and schools. Each of these four conditions: approach, attitudes, atmosphere, and actions are described in the sections that follow.

The first condition, approach, is designed to foster family engagement is one in which the overarching perspective contends that both schools and families are essential for student success, there is a shared responsibility for educating and socializing children, and an emphasis is placed on building and maintaining positive relationships. A family engagement approach lays the groundwork for family-school interactions and facilitates continuity across home and school. By embracing parents as an essential resource and teammate, schools can promote consistent messaging across children’s primary learning environments, home and school, resulting in positive outcomes for students.

The second condition within this framework is a positive attitude for developing effective family engagement. Attitudes, or the perceptions that parents and school personnel have of one another and of working together, colors all home-school interactions. When stakeholders share the firm belief that teachers and parents working together is more effective than working alone the result is often more positive communications and relationships. Teachers and school administrators who have an empowerment-oriented attitude believe all families have strengths, and parents can help their children succeed. This attitude leaves no room for blame and no one is at “fault” and the result is increased family engagement and healthy home-school relationships.

Atmosphere is the third condition of the framework, which refers to the climate in and around schools, also plays a role in establishing positive and robust family engagement. Atmosphere includes the physical signs that convey interest in families such as family-friendly bulletin boards, welcome signs in several languages, and pictures of students and families. The atmosphere also includes the affective climate (the “vibe”) that is established through home-school interactions, messages and communication, and feelings of trust and respect within the school community. A family engagement atmosphere conveys genuine interest in all children and families, promotes warm, inviting communication, and recognizes the value of family input. To promote a positive atmosphere
schools can establish a variety of two-way communication methods, invest time and effort in building trust with families, and create opportunities for parents and school personnel to learn from one another.

Actions are the fourth condition of the framework and refer to strategies and practices used to promote family engagement. Family engagement actions include all practices (e.g., assessment, consultation) that are delivered via a family-school partnership lens. These actions are intentional and reflect a general way of doing business. They are complementary and connected family-school experiences. They are student-focused, but relationship-based. Examples include effective two-way communication, checking in early and often, collaborating around goals and solutions. However, there are many possible actions schools can take to promote family engagement; the key is to identify a package of strategies that best meet the needs of individual students and families.

**Changes in Family Engagement across School Levels**

**Early childhood and kindergarten.** In early childhood and kindergarten there is an opportunity to establish a foundation for family engagement and family-school/service provider relationships. Particularly for children with disabilities (e.g., Autism Spectrum Disorder), families may be working with a service provider when their child is under three years old (Friend, 2014). Thus, when children enter kindergarten, family members have already developed a history developing connections with professionals to promote their child’s development (McIntyre & Garbacz, 2016). School staff supporting children in kindergarten have an opportunity to create conditions (e.g., through their approach and classroom atmosphere) to engage families and develop partnerships. As a first step, it is helpful to discuss with families their experience in other professional settings and their expectations for partnering. Next, it is helpful to orient families to kindergarten and its emphasis on instruction (Rimm-Kaufman, Pianta, & Cox, 2000), social and behavioral expectations (Rimm-Kaufman & Pianta, 2000), as well as the development of early literacy (Roseth, Missall, & McConnell, 2012) and numeracy (Missall, Mercer, Martinez, & Casebeer, 2012). Finally, school staff and families should discuss expectations for engagement. For example, families, particularly with families for whom it is their first time experiencing the educational system with a child, benefit from clearly describing role responsibilities and expectations (e.g., What should be communicated to school? How often should families and teachers meet? When should families contact the school?). Findings suggest, family engagement decreases and changes from preschool to kindergarten, which may reflect a change in school outreach to families (Rimm-Kaufman & Pianta, 1999). Preschools often have coordinated efforts and the capacity to engage in outreach to families (e.g., through home visits); such capacity is rare in kindergarten (Rimm-Kaufman & Pianta, 1999). It is helpful for school staff and families to clarify for each other their expectations, desires, and needs. For example, families may have received several home visits each year while...
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their child was in an early childhood program than they will receive in kindergarten. Clarifying the kind and amount of family engagement can be beneficial for all parties.

Elementary school. As children move through the elementary school grades, several academic and social changes (Eccles, 1999) have implications for family engagement. For example, as children learn to read different demands are placed on families and educators to collaborate. In addition, as children develop social skills and peer connections, families may need to engage with educators to seek support (e.g., social skills training). Findings suggest common forms of family engagement (e.g., home-school communication) change as children proceed through the elementary school years (Garbacz, McDowall, Schaughency, Sheridan, & Welch, 2015). In addition, school staff practices (e.g., invitations to parents; Walker et al., 2005) can inform the ways in which families engage. Thus, it is important for family members and school staff to have ongoing discussions about expectations for family engagement and the best ways to work together to support each child. Family engagement with the PBIS leadership team can build schoolwide practices across school grades to identify and differentiate expectations for engagement as children proceed through school. For example, as children develop autonomy for certain school activities, like managing homework, school staff and families can support their growing autonomy by proving support and encouragement to children for effectively managing homework, seeking support when needed, and completing work accurately by the due date. Finally, for children who display challenging behavior, there is evidence to suggest family members may reduce their engagement when faced with these challenging circumstances (Dishion, Poulin, & Medici Skaggs, 2000), which in turn may lead to deviant peer processes (Dishion, Nelson, & Bullock, 2004). Thus, it is important to families and school staff to maintain positive relationships and discuss ways to use positive behavior supports in a consistent manner across home and school.

Secondary school. School routines and structures continue to change through secondary school (Eccles & Harold, 1996) along with biological and social changes (Eccles et al., 1993; Erikson, 1963). In addition, during secondary school, growth in problem behavior (Dishion & Patterson, 2006), substance use (Wang, Dishion, Stormshak, & Willett, 2011), and deviant peer affiliations (Dishion & Owen, 2002) call on families and school staff to be vigilant in their collaboration in support of youth (Garbacz et al., 2016) and guard against reduced engagement due to challenging circumstances. Findings support the important role family engagement has in increasing positive behaviors (Dishion, Nelson, & Kavanagh, 2003; Stormshak et al., 2011) through high school (Stormshak, Connell, & Dishion, 2009). Due to the changing landscape of secondary schools and the unique tasks (e.g., transition planning) that must occur for some students, conceptual models of family engagement (Hirano & Rowe, in press) and measurement suggestions (Hirano, Garbacz, Shanley, & Rowe, in press) for secondary schools are available. These models and
approaches outline how school staff and families can navigate changing circumstances and youth needs to maximize success during and after formal schooling. Two specific challenges that emerge in secondary school are (1) growth in behavior problems and (2) secondary special education and transition planning.

Growth in behavior problems, substance use, and deviant peer affiliations pose substantial challenges for families. An evidence-based approach for addressing these concerns with families is the Ecological Approach for Intervention and Treatment (EcoFIT; Connell, Dishion, Yasui, & Kavanagh, 2007; Dishion & Stormshak, 2007; Stormshak et al., 2011). EcoFIT is a multilevel model that includes school components, like a family resource room and family-centered elements delivered through the Family Check-Up. In the Family Check-Up, families participate in three meetings that identify goals and concerns, assess ecological factors of the home and family relationships, and discuss feedback from assessments. The feedback meeting is designed to motivate change, and identify appropriate resources for families to engage in to support their child or adolescent. The model is strengths-based and integrates positive behavior support. EcoFIT has recently been embedded in middle school PBIS systems (Fosco et al., 2014) and can be used by PBIS leadership teams to support and encourage family engagement.

For children in special education, secondary school can pose specific challenges. Hirano and Rowe (in press) describe specific considerations for family engagement in secondary special education. First, Hirano and Rowe suggest that school systems espouse a positive climate in support of family engagement. Second, Hirano and Rowe recommend families have roles as (a) decision makers and evaluator, (b) collaborator, (c) instructor, (d) coach, and (e) advocate. To support families as decision-makers and evaluators, schools provide all information necessary to families so they can evaluate options and make informed decisions (Dunst, 2002). In assessing options and making decisions, families collaborate with school staff as well as their child to determine the best fit. For example, when considering components of an intervention plan, school staff could provide families with information about the assessment that guided the selection of components, families might share their experience using certain components, and the child could describe her/his preferences. Together the team can leverage their unique experiences and knowledge to decide on components for the intervention plan. In this scenario, each party is viewed as a co-equal. To support families as instructors, school staff, like PBIS leadership team members, can provide workshops for families about how they can use positive behavior supports at home. Families can also support, collaborate with, and coach their adolescent about daily living skills and social skills. Finally, families advocate for their adolescent or young adult in educational systems and transition planning. PBIS leadership teams can work with other school staff to educate families about community organizations and transition planning, support families in their development of advocacy skills, and connect families to community agencies.
Cultural Considerations

A primary focus of family engagement programs is to create systems that value and celebrate family and school community culture. Definitions of culture and cultural diversity often refer to values, attitudes, beliefs, and behaviors (Matsumoto, 1994; Trimble, 2003). Language, religious practices, and interpersonal styles are examples cultural diversity (Ortiz, Flanagan, & Dynda, 2008). Cultural diversity also includes values about education, beliefs about role responsibilities for educating children and contributing to their healthy development. Schools in the U.S. often use a specific approach to instruction and behavior management that may not be consistent with a family’s culture (Hill, 2010), particularly families whose “backgrounds and experiences differ significantly from that reflected by the U.S. mainstream” (Ortiz et al., 2008; p. 1725). Through engaging families in partnership, we have an opportunity to learn and understand the cultural diversity reflected in each school community, and apply what we learn in meaningful and authentic ways so that all families and children have equal access and opportunity (Mapp & Hong, 2010).

Four guiding questions to facilitate understanding and integrate cultural diversity in family engagement initiatives include (1) Who will facilitate? (2) What do we learn? (3) How do we learn? (4) What do we do? Grounded in their knowledge of school and data systems, behavior supports, and individual differences, the PBIS Leadership Team is equipped to braid priorities under a common framework to maximize student outcomes (Bohanon, Goodman, & McIntosh, 2009). Thus, including family engagement and integrating cultural diversity can be key priorities for the PBIS Leadership Team (Garbacz et al., 2016). If a team believes that they lack knowledge or skill to effectively integrate cultural diversity, they can seek out training. For example, a school team could collaborate with the school district’s cultural broker. The cultural broker can help the team bridge PBIS with family preferences and needs. In addition, a team could seek out training through a state or regional organization (e.g., through a university-community partnership). When integrating cultural diversity into practice, it is important to keep in mind that building knowledge and skills in cultural responsive practices is not a onetime activity, but rather a continual process of evaluation and re-evaluation.

To learn about the cultural diversity of a school community, it is important to collect data about (a) family systems, (b) school staff attitudes and beliefs, and (c) the intersection of family systems and cultural diversity with school practices (Christenson & Sheridan, 2001; Ortiz et al., 2008). In addition, self-assessments are critical for school staff to understand the influence of their own culture (Ortiz et al., 2008). Multi-method, multi-source assessments should guide data collection to inform a comprehensive understanding of cultural diversity. For example, focus groups, school community events, surveys, school newsletters, and social media are mechanisms that can be considered to learn from families and school staff. In addition, family members (immediate family and extended
family), school staff (teachers, paraprofessionals, support staff, administrators), and children can contribute information. Guiding principles for collecting data may be to emphasize equal representation, inclusive practices, and the use of strategies all families can access.

After data are collected, the PBIS Leadership team can review, summarize, and present and discuss themes and recommendations that emerge. Using data, the PBIS Leadership Team can create an action plan that identifies goals to create an inclusive and supportive school community that is sensitive and responsive to its cultural diversity. For example, a finding may be that families find the behavior expectations in the PBIS systems incongruent with their values and beliefs. In response, a town hall meeting could be held to invite feedback from families about behavior expectations and engage in a back-and-forth dialogue with families. After the town hall meeting, family members could be invited to participate in a workgroup tasked with co-creating a plan for modifying practices so that they are aligned with family values and beliefs.

**Positive Behavioral Interventions and Supports (PBIS) and Family Engagement**

As briefly reviewed in the introductory chapter, PBIS is a comprehensive and systems-wide framework for preventing and addressing social behavior (Sugai & Horner, 2002) implemented in over 23,000 schools across the United States (McIntosh, 2016). PBIS establishes systems (e.g., data management) and procedures (e.g., leadership and staffing) to implement and sustain behavior management (Bradshaw, Mitchell, & Leaf, 2010). Similar to family management, PBIS establishes behavior expectations, teaches and monitors behavior expectations, and rewards expectations. Implementation of PBIS is associated with decreases in student behavior problems at school (Bradshaw et al., 2010; Bradshaw, Waasdorp, & Leaf, 2015), and in school behavior risk (i.e., schools are perceived as safer; Horner et al., 2009).

Interventions to support family management may be multilevel (Dishion & Stormshak, 2007), but are frequently implemented at the individual level (Sheridan & Kratochwill, 2008). Parents report they want support to help their children follow expectations at home and school (Garbacz & Megert 2015) and desire more support from schools than they receive (Dauber & Epstein, 1989). Coordinated and systematic procedures to engage families in evidence-based family management strategies are through existing service delivery systems are needed (Spoth, Dishion, & Kavanagh, 2002). PBIS is an existing service delivery system that presents an opportunity to extend evidence-based positive behavior support strategies to the home and establish environmental congruence (Crosnoe, 2015) so children are exposed to consistent and predictable positive environments within and across their primary settings. Furthermore, implemented at Tier I, engaging families in PBIS could provide equitable access to evidence-based positive parenting strategies and facilitate family educational engagement (Mapp & Hong, 2010).
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Summary and Key Recommendations

Family engagement has strong theoretical underpinnings and a foundation of research, including correlational studies, meta-analyses, and randomized controlled trials. Conceptual models provide approaches to family engagement along with considerations for family engagement across child development from early childhood programs through high school. PBIS provides a unique and important opportunity to embed family engagement into a multi-tiered system of support framework to extend evidence-based practices to the home setting, strengthen the home-school connection, and maximize outcomes for children and adolescents. Based on theoretical frameworks and conceptual models as well as lessons learned from the extant family engagement literature the following core values school staff may adopt to foster family engagement in PBIS emerge.

1. Interact with authentic integrity. When school staff have positive attitudes about family engagement and interact with authentic integrity, openings are created for productive home-school interactions. Guiding principles might include practicing mindfulness, active listening, and being fully present. As well as instilling an aptitude of hope and service.

2. Be transparent in words and actions. Opaque practices, unclear goals, methods, and motivations limits parents’ ability to promote consistent messaging across settings and may contribute to home-school conflict. Guiding principles include responsive communication that is considerate of timing, mode, and accessibility.

3. Value and foster relationships. Family engagement hinges on positive working relationships. Investing time in building relationships early and often is critical to family engagement. Guiding principles include honoring the norms and culture of the community and presuming positive intentions while building open, honest, and genuine relationships.

4. Communicate respectfully and open mindedly. Guiding principles include celebrating diverse perspectives and encourage placing all ideas on the table and valuing everyone’s voice.

5. Articulate student focused priorities. Placing emphasis on shared student-focused goals promotes efficient actions and communication.

6. Use data to inform evidence-based positive behavior support practices that can be used in homes and schools consistently.

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McIntosh, K. (2016, August). *What does it take to sustain PBIS?* Keynote presentation at the Wisconsin PBIS Leadership Conference, Wisconsin Dells, WI.


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One on-going challenge within education is preventing and responding to problem behavior. Educators continue to report responding to and managing behavioral challenges across school settings consumes a significant amount of their time and is a leading reason why they leave the field (Miller-Richter, Lewis, & Hagar, 2012). Behavioral challenges range from minor disrespect and non-compliance to physical assault. For example, the Centers for Disease Control reported that 1 in 4 high school students were involved in a physical altercation with another student (David-Ferdon & Simon, 2014). Behavior problems within schools have existed for decades, and unfortunately educators continue to use non-instructive exclusionary practices (i.e., removal from the classroom or school) that are typically ineffective for students at-risk (Losen, Ee, Hodson, & Martinez, 2015). For example, Robers, Kemp, and Truman (2013) reported that 39% of public schools used multi-day exclusionary discipline practices in response to school behavioral code violations. Robers and colleagues further noted that 74% of public schools reported one or more violent crimes across the school year. For students who also are identified with a related disability such as emotional/behavioral disorders (EBD), the impact of their behavioral challenges within school and after leaving school are well documented. For example, students with EBD often display low school engagement, poor attendance, low academic achievement, conflicts with adults and peers, disruptive behavior, mental health issues, failing grades, school suspension and expulsion, dropout, substance abuse, incarceration, chronic unemployment, and suicide at higher rates than “non-disabled” peers (Bradley, Doolittle, & Bartolotta, 2008; Lane, Carter, Pierson, & Glaeser, 2006; Merrell & Walker, 2004; U.S. Department of Education, 2008; Wagner et al, 2005).

Unfortunately, behavioral problems are not limited to school settings, presenting parents and
families with a double challenge. First, families also must contend with behavioral problems in the home and community (Garbacz, et al., 2016; Kutash, Duchnowski, Green, & Ferron, 2013). Second, families are often placed in an adversarial position with schools due to the frequent behavioral reports sent home and use of exclusionary discipline practices (Lucyshyn, Horner, Dunlap, Albin, & Ben, 2002). Compounding both of these challenges are families who themselves are also at risk due to living in poverty or parent/guardian mental health and substance abuse issues (Singer, Goldberg-Hamblin, Peckham-Hardin, Barry, & Santarelli, 2002).

To date, most efforts on the part of educators to engage families have occurred through the Individual Education Plan (IEP) process, at the pre-school level, and among students with more severe disabilities (Kutash et al., 2013; Lucyshyn, Dunlap, & Albin, 2002). Less is known about engaging families across a continuum of positive behavior supports (Garbacz et al., 2016; Lewis, 2009).

Faced with high rates of challenges as noted above, research over the past two decades has focused on developing comprehensive systems to prevent problem behavior and intervene at the first signs of student risk as well as support students who display intense and chronic behavior problems (Lewis, Mitchell, Brunemyer, & Sugai, 2016). As reviewed in earlier chapters (and referred to as PBIS), School-wide Positive Behavior Supports (SW-PBS) is a school-based framework that emphasizes the use of data to guide decision making on identifying and selecting evidence-based practices across a continuum of student need. Research to date has shown that schools who implement SW-PBS with fidelity can reduce overall levels of problem behavior, improve academic outcomes, improve classroom and non-classroom management, improve overall school climate and reduce specific behavioral challenges such as bullying behavior (Lewis et al., 2016). The remainder of this chapter will provide an overview of school-wide positive behavior support and recommendations for increasing family participation within the SW-PBS framework to support both students and their families who face challenging behavior in school and home.

**Essential Features of School-wide Positive Behavior Support**

School-wide Positive Behavior Support (SW-PBS) is not a package, curriculum or program. SW-PBS is best characterized as a problem-solving framework whereby teams of educators, and family partners, select practices to support all students’ social and emotional success (see Figure 1; Horner & Sugai 2005).

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**Figure 1.** The Problem-Solving Framework of School-wide Positive Behavior Support. *(OSEP Center on Positive Behavioral Interventions, www.pbis.org)*
School teams are made up of at least one building administrator and teacher representatives across grade, team, or content areas. Schools are also encouraged to recruit a parent to join the SW-PBS team. The first step in the problem-solving process is to review data to identify behavioral challenges across the school. Based on school data, evidence-based practices are identified, implemented, and monitored for student progress. The final element of the SW-PBS problem-solving framework is to guide educators to implement positive behavioral supports with fidelity, such as professional development and technical assistance, and the development of common implementation processes and procedures.

The second critical feature of SW-PBS is building a continuum of supports to match student need (see Figure 2). The first tier of supports are universal supports that focus on all students, all school settings, and involve all staff (Horner & Sugai, 2005). Once universals are implemented with fidelity, school teams design Tier 2 or small group supports to assist students who are showing continued behavioral challenges or signs of risk. The logic of Tier 2 supports is to catch the student early to lessen the likelihood the behavioral problems become chronic and more intense. Tier 3 supports, or intensive individualized supports are put in place for those students with clear patterns of intense and chronic problem behaviors. The key within the SW-PBS...
framework is to connect all behavioral supports to universal expectations to promote generalization of skills across settings and maintenance of use over time.

Starting with universal systems of support, the first step in implementing SW-PBS is a comprehensive review of extant data and conducting a school-wide self-assessment on current features that are in place to support students. School teams typically review behavioral infraction data, or office discipline referrals (ODR), in- and out-of-school suspensions, attendance, achievement and any other data the school collects on an on-going basis. The goal through the data review is to identify type and severity of current behavioral challenges, locations across the building, predictable day or time patterns, and which students are frequent recipients of disciplinary action. Informal teacher and parent surveys about challenges they are observing within their classrooms and across the school, and in the case of parents, what their children are reporting at home, are also conducted. Once the school team has identified common behavioral challenges and the settings in which they are most likely to occur, the team identifies

### Benton Elementary School Expectations Matrix

<table>
<thead>
<tr>
<th>I am...</th>
<th>All Settings</th>
<th>Classroom</th>
<th>Hallways</th>
<th>Cafeteria</th>
<th>Bathrooms</th>
<th>Playground</th>
<th>Assemblies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe</td>
<td>Keep bodies calm in line</td>
<td>Walk...</td>
<td>Wash hands with soap and water</td>
<td>Use equipment for intended purpose</td>
<td>Walk...</td>
<td>Use a peaceful voice</td>
<td></td>
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<tr>
<td></td>
<td>Report any problems</td>
<td>Stay to the right on stairs</td>
<td>Keep water in the sink</td>
<td>Wood chips are for the ground</td>
<td>Push in chairs</td>
<td>Allow for privacy of others</td>
<td></td>
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<tr>
<td></td>
<td>Ask permission to leave any setting</td>
<td>Banisters are for hands</td>
<td>One person per stall</td>
<td>Participate in school approved games only</td>
<td>Place trash in trash can</td>
<td>Clean up after self</td>
<td></td>
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<td></td>
<td></td>
<td>Maintain personal space</td>
<td></td>
<td>Stay in approved areas</td>
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<td></td>
<td></td>
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<td></td>
<td>Keep body to self</td>
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<td>Line up at first signal</td>
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<td></td>
<td>Invite others who want to join in</td>
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<td></td>
<td>Enter and exit building peacefully</td>
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<td>Share materials</td>
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<td></td>
<td>Use polite language</td>
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<tr>
<td>Respectful</td>
<td>Treat others the way you want to be treated</td>
<td>Be honest...</td>
<td>Eat only your food</td>
<td>Line up at first signal</td>
<td>Invite others who want to join in</td>
<td>Be an active listener</td>
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<tr>
<td></td>
<td>Be an active listener</td>
<td>Take care of yourself</td>
<td>Use a peaceful voice</td>
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<td></td>
<td>Applaud appropriately to show appreciation</td>
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<tr>
<td></td>
<td>Follow adult direction(s)</td>
<td>Walk quietly so others can continue learning</td>
<td></td>
<td>Invite others who want to join in</td>
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<td></td>
<td></td>
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<tr>
<td></td>
<td>Use polite language</td>
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<td>Enter and exit building peacefully</td>
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<td></td>
<td>Help keep the school orderly</td>
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<td>Share materials</td>
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<td>Use polite language</td>
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<td>Learner</td>
<td>Be an active participant</td>
<td>Be a risk taker</td>
<td>Use proper manners</td>
<td>Be a problem solver</td>
<td>Raise your hand to share</td>
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<td></td>
<td>Give full effort</td>
<td>Be prepared</td>
<td>Leave when adult excuses</td>
<td>Learn new games and activities</td>
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<td></td>
<td>Be a team player</td>
<td>Make good choices</td>
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<td></td>
<td>Do your job</td>
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Figure 3. Sample Elementary School Behavioral Expectation Matrix
pro-social replacement behaviors that are observable and measurable (see Figure 3). The focus within the SW-PBS framework is on teaching appropriate social skills among all students instead of simply trying to reduce problems.

Once positive expectations for student social behavior are identified, the second step of the implementation process is to develop social skill lessons for each of the replacement behaviors and explicitly teach the skills across the school year. Universal social skill lessons should follow a “tell-show-practice” (Horner & Sugai, 2005; Lewis et al., 2016) format and embed the larger school expectations and specific replacement behaviors. Following instruction, educators should provide high rates of positive specific feedback about school expectations and skills when they see students displaying the targeted appropriate behaviors and skills. Unlike academic work, such as math homework, social skills do not result in a product that can be “graded” and returned to the student. Instead, social skills require the adults to provide meaningful, contingent positive feedback in developmentally appropriate ways. For example, at the elementary school level the teacher may give public verbal feedback (“thanks for being respectful and allowing everyone to have a turn looking into the microscope”) while at the secondary level feedback may be given privately.

To assist school teams in developing effective universal systems of support, staff are encouraged to participate in regular staff-wide self-assessments that provide data about implementation fidelity to insure key features of SW-PBS systems are in place. For example, the Self-Assessment Survey (SAS; Sugai, Horner, & Todd, 2003, available at www.pbis.org) invites all school staff to rate the degree to which essential SW-PBS features are in place and the degree to which each feature should be a priority for improvement. Outcomes are used for action planning to maximize student benefit. In addition to self-assessment, school teams are also encouraged to obtain a measure of implementation fidelity. The SWPBIS Tiered Fidelity Inventory (TFI; Algozzine et al., 2014, available at www.pbis.org) uses a combination of team ratings, product review, and staff and student interviews to determine implementation fidelity at each of the three tiers of support. Like the SAS, TFI results should be used in action planning to address missing or inconsistent implementation features.

Once school teams are implementing SW-PBS with fidelity and using multiple sources of data to inform practices and design systems, school teams develop and implement Tier 2 and 3 supports. The initial step in Tier 2 is the use of data-based decision rules to identify students who are not being successful with universal supports alone. Example decision rules may include a set number of office discipline referrals, a teacher nomination, or scores from a school-wide screening instrument that indicates heightened social, emotional or academic risk (Mitchell, Bruhn & Lewis, 2016). The SW-PBS team reviews data of students who meet one or more decision rules and determine whether a Tier 2 support should be provided. Tier 2 supports
typically consist of a self-management strategy such as “check in/check out” (Crone, Horner & Hawkins, 2010), placement in a social skill group (Lewis et al., 2016), or may be additional academic supports and accommodations.

For students who display severe or chronic behavioral challenges Tier 3 supports may be warranted. Tier 3 intervention incorporates the use of a functional behavioral assessment (FBA), which is a comprehensive data collection process, to design an individual student behavior support plan and, when appropriate, identify relevant mental health or other community based supports (Mitchell et al., 2016). In addition, as SW-PBS is increasingly connecting to more comprehensive school mental health (SMH) services (see Barrett, Eber, & Weist, 2013), at Tier 3 students may also receive evidence-based individual and family therapies such as cognitive-behavioral skill training to address anxiety problems. Essential to success are clear connections to the universal school expectations, lesson plans, and high rates of specific feedback across all settings to increase the likelihood of generalized social success over time.

SW-PBS Connections to Family Engagement

At present, there is no universally accepted definition of “family participation” or “family engagement” (Molina, 2013; however, please note parameters offered by Garbacz and colleagues in the preceding chapter of this e-book). Instead, applying the problem-solving logic of SW-PBS, schools are encouraged to identify measurable outcomes as a result of engaging families within their SW-PBS efforts and thereby define participation and engagement. Related to family engagement outcomes, school teams consider several factors (Lewis, 2009; Molina, 2013). First, “family” is defined in the broadest sense so as to create an inclusive environment that reflects the community culture within which the school resides. Second, administrators and staff understand the nature of family engagement and participation with school may vary across a continuum similar to what schools build for students. Third, educators work toward understanding family dynamics, stressors, and cultural customs of their students, especially in situations where school staff learning history is different from the families they serve (e.g., ethnicity, socio-economic status, cultural sensitivity). Likewise, educators also make efforts to inform and educate families about the limitations and realities of a typical school day as well as the expectations within the school culture (e.g., serving hundreds of students with a wide range of need, purpose and mission the school, shrinking resources). The goal is not to create excuses; but instead convey the message that in many cases comprehensive partnerships across school, families, and community agencies will be required to support children and youth with the most intensive needs.

Lewis (2009) considers three focal points toward enhanced family participation and identifying outcomes. First, the school works to build family “awareness” of SW-PBS efforts that support all students in the school. Equally important, school teams should be aware of local culture and context in which families
live as they shape their behavioral expectations through family and community leader input. Second, SW-PBS teams build in opportunities to “involve” families in school functions. As an example, many schools provide monthly or quarterly recognition ceremonies to celebrate the social and behavioral success of students and specifically invite families to attend. Although such celebrations are fairly common for recognizing student academic success, celebrating social success may be innovative. In some cases, families who have never previously participated in school functions find the behavioral recognition ceremonies to be one avenue that lets them in the door. Third, SW-PBS teams work toward building “supports” for families to assist in children’s success both at school and home. For example, after identifying expectations and rules across school settings many school teams host a family night during which parents and students work together to identify clear expectations and rules for home that will support students in a positive, proactive manner. Similar to the multi-tiered supports we build for students, the three focal points will vary in intensity and importance across a continuum.

**Universal**

The primary focus on engaging families at the universal level is to build “awareness” of the school’s behavioral expectations, teaching strategies and supports. In addition to the standard school board approved code of conduct, educators look for multiple opportunities to share their work in building a continuum of positive behavioral supports with families. For example, brief written overviews can be sent home with all students, reports on SW-PBS efforts shared at parent-teacher conferences and through the school’s Parent Teacher Association meetings. The use of school newsletters, websites and other social media also highlight SW-PBS efforts.

A secondary focus on engaging families at the universal level is to “involve” families in the SW-PBS development and implementation process. While sharing behavioral expectations to build awareness, educators can also invite families to provide input or feedback which insures school SW-PBS expectations are culturally sensitive and relevant (McWayne & Melzi, 2014; Yull, Blitz, Thompson, & Murray, 2014). Educators are also encouraged to invite a parent or guardian to serve on the SW-PBS team. The parent role is to provide input and feedback based on their perceptions of school through their child’s eyes. When parents do participate, school teams are encouraged to create working structures that insure confidentiality of information is not breeched such as excusing the parent member if individual student or teacher data will be discussed.

While less of an emphasis, family “supports” are also addressed at the universal level of implementation. Information on community services and family resources can be shared with parents. Educators are also encouraged to communicate universal expectation lesson plans and support strategies with parents to allow families to use similar behavioral expectation language at home and to allow an opportunity to discuss and prac-
practice what their children are learning during the school day.

**Tier 2**

The primary focus when providing Tier 2 supports for students is to “involve” parents and guardians during the planning and implementation process. In these cases, three key themes are considered. First, educators are encouraged to inform parents/guardians when their child meets the school’s data-decision rule to consider the need for additional support. This information is shared in a positive, constructive manner rather than by the typical phone call home reporting only on their child’s misbehavior and the prescribed consequence. Specifically, information about these supports is framed to indicate concern for the child’s success with the tier 2 process and is focused on providing additional assistance that will increase the likelihood their child is successful at school. Second, parents/guardians are invited and encouraged to attend planning meetings which allows them to provide input and talk with educators about how the family can support and participate in the tier 2 intervention. Finally, educators send home information about the child’s progress and provide simple strategies to that allow additional practice opportunities at home. For example, if the student is receiving additional social skill instruction through a small group, a summary of the skill, the lesson plan, and simple prompts or practice activities are sent home that allow families to engage in the lesson, give feedback to their child and support the student’s learning across settings. These additional practice opportunities increase the likelihood of skill mastery and maintenance.

Educators also make effort to insure “awareness” and “supports” are part of their tier 2 family engagement strategy. Awareness takes the form of simply providing an overview of the SW-PBS continuum logic along with the emphasis on catching challenges early. Support comes through the above described involvement activities along with other related resources families may want to access such as parent education and support centers, related district activities, and through home visits to review the child’s progress.

**Tier 3**

As described earlier, the vast majority of children and youth who display problem behavior at school most likely also display similar patterns in the home (Singer et al., 2002; Vaughn, White, Johnston, & Dunlap, 2005). The primary emphasis at Tier 3 is on providing families with “supports” to both manage behavioral challenges and improve pro-social behavior in the home. Accordingly, the focus of school-based teams is to build tier 3 supports for children and youth who display intensive behavioral challenges through the use of individualized positive behavior support plans (Horner & Sugai, 2005) as most schools and school districts are not equipped to provide direct supports to the family. However, recent work on aligning community-based agencies, such as mental health through an integrated framework holds promise to fostering connections between school-based and home-based services (Barrett et al., 2013).
Equal attention is also paid to “involving” families in the design, implementation and progress monitoring of individualized behavior support plans. If the child is receiving special education services under the Individuals with Disabilities Education Act (IDEA) this provides a de-facto strategy to involve parents and guardians. Similar opportunities to meet with families and proactively plan for their child’s success are also developed in instances where the child is not being served under IDEA. “Awareness” activities also continue at the tier 3 level. For example, sharing resources such as parent center websites (e.g., www.pacer.org) or providing access to national organizations that focus on related issues (e.g., National Alliance on Mental Illness; www.nami.org) will assist families in finding information specific to their needs.

Conclusion

The intent of this chapter was to provide a brief overview of the problem-solving framework of school-wide PBS and to offer strategies for engaging families across the continuum of supports. Educators often understand the value of family engagement and participation with school and learning but may not have direct knowledge of how this can be encouraged and promoted. When schools are organized to use data in a problem solving manner they are better equipped to engage families across the continuum of supports through awareness, involvement, and support activities. As described, the emphasis across the three foci of family engagement will vary across the tiers of positive behavior support, but all are strategically factored into school team planning.

Recent work at a middle school focusing on Tier 2 social skills supports through a service learning opportunity provides an example of what is possible (Lewis, Guffey, Friesen, & Feeley, 2014). Using the students’ selected project to raise money for a classmate with medical issues, students learned a series of related social skills through direct instruction with mastery criteria set as a readiness marker to conduct the project (i.e., a chili dinner fund raiser). One of the students who participated was a young man with a history of social and behavioral challenges at school and home. Following his successful participation, his mother reported the following:

The most pronounced outcome that I saw with my son was him realizing how many people generally cared about him. For everybody, from the teachers, me, reaching out and having a team meeting. I think he realized that we were all on his side instead of against him. He even came to me and said thank you for caring. He has a lot of friends whose parents aren’t that involved in school and for him to see his parents and teachers and the principal involved really made him feel special and it really gave him that one on one that I think he needed.

Research to date on family engagement through the SW-PBS process is limited (Garbacz et al., 2016), but past work at the individual student level has demonstrated that mutually beneficial partnerships can be formed (Lucyshyn, Dunlap, & Albin, 2002). While on-going
research is clearly warranted on enhancing family engagement within SW-PBS, schools are encouraged to continue to use the problem-solving logic of the approach and the emphasis on development of pro-social behavior rather than simply attempting to eliminate problem behavior. An essential component of the problem-solving process is the careful review of data, including input from families and community members (Latunde, 2017). Again, from a parent’s perspective on what was the most beneficial aspect of her son’s school implementing SW-PBS and her recommendation to other schools:

I know for me personally, if I’m given advice, tools, examples that helps me with dealing with it at home. I’m a very black-and-white person so as long as I’m told not necessarily what to do but the recommendations or opinions then I will do it. Each parent will handle their own children in their own way. If we agree or not, it is ultimately up to them and unfortunately the children deal with the consequences at the end of the day.

REFERENCES


CHAPTER THREE


CHAPTER THREE


Decades of research have continued to support the notion that family engagement is important for student outcomes, with family engagement being accepted as a central practice for closing achievement gaps (Christenson & Reschly, 2010; Henderson & Mapp, 2002; Jeynes, 2010). Despite the rich evidence and support for family engagement in education, schools continue to struggle to move beyond random acts of engagement to systemic, integrated, effective, and sustainable family engagement practices that are central to school-based initiatives and improvement efforts (U.S. Department of Education, 2013; Weiss, Lopez, & Rosenberg, 2010). In 2013, the U.S. Department of Education (USDOE) published the Dual Capacity-Building Framework for Family-School Partnerships calling for increased focus and attention to the systems, strategies, practices and conditions that facilitate the implementation and integration of effective family engagement in large scale reform (Weiss et al., 2010; USDOE, 2013).

This chapter will review essential considerations for educators to aid in the translation of research to practice gleaning from implementation science theory and research (Fixsen, Naoom, Blase, Friedman, & Wallace, 2005), the educational systems change literature base (Fullan, 2010; Hall & Hord, 2006), and school improvement research. All of these knowledge bases continue to identify family engagement as an essential practice of schools that experience improved student outcomes (Haycock et al., 1999; McGee, 2004; USDOE, 2001). Of interest to this chapter is the integration and central importance of evidence-based family engagement practices in schools implementing Positive Behavioral Interventions and Supports: Multi-Tiered Systems of Support (PBIS: MTSS). PBIS: MTSS is often referred to as a framework that focuses on implementing the key features of school systems needed for effective and sustain-
able implementation of evidence-based practices and a proactive approach to supporting behavior to ensure all students are successful (Bradshaw, Mitchell, & Leaf, 2010; Jimerson, Burns, & VanDerHeyden, 2015; Sugai & Horner, 2010). This chapter will summarize key effective family engagement practices followed by a review of considerations from the systems change and implementation science fields that hold promise for ensuring local adaptations resulting in improved fidelity and sustainability of practices and ultimately improve student outcomes (Ferguson, Jordan, & Baldwin, 2010; Fixsen et al., 2005). Integrated throughout this chapter are suggestions and examples from two parents, Veronica Tremaine and Regina Thomas, whose combined experiences working with educators to support student learning span over 20 years and seven children, including children with special needs.

This chapter draws upon several connected but distinct areas of research so the reader may benefit from a review of terms and concepts that will be discussed throughout. Family, rather than parent, will be used to encompass nontraditional family structures and roles and emphasize the importance of a more inclusive perspective of families that represents many adults important to the child’s life. The term engagement will be used to emphasize the important role educators play in reaching out to and inviting families to engage in partnerships with educators (Anderson & Minke, 2007). Furthermore, the term family engagement will also be used to encompass broader collaboration and partnership activities that families and educators engage in together in order to support student learning.

Effective Family Engagement

Over four decades of research continue to further our understanding of features and characteristics of effective family engagement efforts and have provided some foundational themes and assumptions for the field moving forward (Carlson & Christenson, 2005; Cox, 2005; Henderson & Mapp, 2002; Shepard & Carlson, 2003).

Ecological systems theory. One central theme of family engagement research is the use of an ecological systems theoretical lens that provides the context to understand the importance of family-school connections and partnerships for student development and success. These partnerships work directly and indirectly, through their interactive and dynamic relationship between schools and families, to support student learning and development (Pianta & Walsh, 1996). Understanding that a change in one element of the system affects changes in all other aspects of the system can be beneficial in approaching areas for improvement in family-school partnership efforts and can prove helpful in reducing blame and empowering more effective practices (Reschly & Coolong-Chaffin, 2016). Coherence and consistency between and within environments, in addition to a developmentally appropriate evolution over time, is preferred to support student well-being (Pianta & Walsh, 1996). Notably, the field is shifting focus
from solely helping families create more school-like environments towards an approach that capitalizes on family strengths, knowledge, culture and expertise to create more responsive school-based learning environments (Ishimaru et al., 2016). Systems ecological considerations have implications for schools implementing PBIS: MTSS including implications for generalization and maintenance of behavioral skills (Valdez, Carlson, & Zanger, 2005) and reduced need for code-switching in response to differential behavioral expectations across environments.

**Effective practices and strategies.** A second central theme of family engagement research has been consistent support across many studies for a few key family engagement practices. Research has identified effective practices to support the connection and collaboration between home and school contexts for the purpose of improving student outcomes, even when controlling for demographic differences (Jeynes, 2005). Importantly, these practices are aligned with tiered behavioral interventions and supports (Reschly & Christenson, 2012) and reflect less traditional and more innovative approaches to family engagement and family-school partnerships that may require rethinking existing policies and approaches to family engagement (Jeynes, 2005, 2010).

One effective practice is the importance of educators supporting families’ communication of educational expectations and aspirations with students (Jeynes, 2005, 2010, Stewart; 2008). Notably, a review of family engagement strategies specifically looking at strategies that work best for minority families suggest family communication of educational expectations and support for student learning had the greatest effect size, greater than family attendance at school events (Jeynes, 2005, 2010). This contradicts educators’ frequent reliance on school-centric family actions and behaviors (e.g., family attendance at school events) that are observable to educators but often prove challenging for many families (e.g., low SES families with less flexible work schedules; Heymann & Earle, 2000). Furthermore, family attendance at school events is often predicated on one-way information exchanges from educators to families (e.g., student conferences, schools presenting information) rather than the engagement in collaborative planning and problem solving efforts as equal partners in supporting student learning (Barajas-Lopez & Ishimaru, 2016). Schools are encouraged to adopt broader conceptualizations of family engagement beyond a narrow focus on families’ attendance at school-based events.

A second effective family engagement practice is collaboration and communication between families and educators characterized by interactive, two-way exchanges of information regarding student performance, progress and interventions (Cox, 2005; Barajas-Lopez & Ishimaru, 2016; Guli, 2005; Henderson & Mapp, 2002). Quality, rather than quantity, of home-school communication is often identified as most important for sustaining positive relationships between home and school (Adams & Christenson, 2000) and should be considered when designing and implementing home-school communication and collaboration approaches. In an era of educational innovation and improve-
ment, stakeholder input to inform PBIS: MTSS implementation and ensure responsiveness to the needs of students, families and educators is encouraged (Sugai, O’Keeffe, & Fallon, 2012). Capitalizing on family input and expertise in the design of tiered behavioral systems of support offers the potential to increase family-school relationships (Bal, Schrader, Afacan, & Mawene, 2016) and the fidelity, effectiveness and sustainability of PBIS: MTSS efforts within schools (Sugai et al., 2012). The importance of effective communication and collaboration approaches expands to not only focus on relationships between educators and families in the school but improved relationships among families within the school to increase connectedness, networks and social capital (Ishimaru et al., 2016).

A third finding from research regarding family engagement practice is the effectiveness of inclusive and collaborative problem solving efforts, most often referred to as Conjoint Behavioral Consultation (CBC; Guli, 2005; Garbacz et al., 2008; Sheridan et al., 2004; Sheridan & Kratochwill, 2007), Learning Labs (Bal, Kozleski, Schrader, Rodriguez, & Pelton, 2014; Bal et al., 2016) and community-based and participatory research approaches (CBPR; Barajas-Lopez & Ishimaru, 2016). Consistent with best practices for PBIS: MTSS implementation (Todd et al., 2011), collaborative, inclusive problem-solving approaches utilize teaming structures, which include families and educators, in problem-solving discussions including data review and analysis of problems and goals, intervention development and implementation and evaluation (Bal et al., 2014; Bal et al., 2016; Sheridan et al., 2004). The alignment between inclusive and collaborative problem solving approaches for effective family-school relationships and for improved fidelity of PBIS: MTSS implementation holds promise not only for improving family-school relationships but also the fidelity of PBIS: MTSS implementation and equitable student outcomes (Barajas-Lopez & Ishimaru, 2016).

**Challenges.** Despite the research that suggests subtle (e.g., communicating educational expectations), interactive (e.g., two-way home-school communication), and active, participatory forms of family engagement (e.g., collaborative problem-solving) implemented within schoolwide prevention and intervention models are important for student success (Carlson & Christenson, 2005; Henderson & Mapp, 2002; Jeynes, 2003, 2005), these efforts are uncommon and lack effective implementation in practice (Hoard & Shepard, 2005; Valdez et al., 2005). Lack of time is often expressed as a common barrier to family engagement, suggesting schools may benefit from explicit exploration of the alignment between the conceptual frameworks, systems, structures and practices of schools implementing PBIS: MTSS and the effective and sustainable family engagement efforts (Sheldon, 2005; USDOE, 2013) including collaborative problem-solving efforts (Bal et al., 2014), team-based implementation planning (Sheldon, 2005), and positive school climate (Hoover-Dempsey et al., 2005). Empirical support for the relationship between family engagement and comprehensive PBIS: MTSS implementation is limited due to challenges iso-
lating the effects of family engagement efforts from other schoolwide strategies (Christenson & Carlson, 2005; National Research Council and the Institute of Medicine, 2004). With little guidance from research, schools continue to implement random and often event-based strategies for engaging families in PBIS: MTSS, rather than systemic and integrated efforts.

**A systems approach.** Most recently, a systems approach has been espoused to address the conditions, policies, and practices that allow for continual improvement and systematic reduction of perceived psychological and structural barriers to family engagement (Christenson, 2003; Kratochwill & Hoagwood, 2005; Reschly & Christenson, 2012; USDOE, 2013). A systemic approach to family engagement is encouraged to ensure families who are traditionally excluded from reform and improvement efforts are central to the implementation process, holding promise for ensuring improved and equitable outcomes for all groups of students (Bal et al., 2014; 2016; Barajas-López & Ishimaru, 2016; Sheldon, 2005).

**A Systems Approach to Family Engagement in PBIS**

Family engagement is essential to the successful implementation of schoolwide innovations designed to improve student outcomes and close achievement gaps in traditionally low-performing schools (e.g., high minority, low SES; Borman, Hewes, Overman, & Browen, 2003; Guhn, 2009; Haycock et al., 1999; McGee, 2004; Rutherford, Anderson, & Billig, 1995; USDOE, 2001). The collective capacity of an organization to undergo comprehensive change has been touted as key for successful implementation of any initiative (Fullan, 2010). In 2013, the USDOE published the Dual-Capacity Building Framework for Family-School Partnerships to provide a conceptual framework for implementing family engagement practices integrated within comprehensive educational innovation and improvement efforts (Fixsen et al., 2005; Fullan, 2010; Hall & Hord, 2006; USDOE, 2013; Weiss et al., 2010). The Dual Capacity Framework outlines: (a) challenges for family-school partnerships, (b) process conditions, (c) organizational conditions, and (d) systems, educator, family and student outcomes (see Figure 1).

Simultaneously, federal policies have been promoting the implementation of PBIS (USDOE, 2014) and MTSS (Burns, Jimerson, VanDerHeyden, & Deno, 2016) in schools nationwide. The Florida Positive Behavior Interventions and Support Project, in collaboration with the Florida Problem-Solving/Response to Intervention Project, developed the Family and Community Engagement Innovation Configuration (FACE-IC) that outlines many of the same features of the Dual Capacity-Building Framework in order to help schools translate and integrate effective family engagement efforts into existing tiered systems of support, such as PBIS: MTSS (Hall & Hord, 2006; Minch, Vatland, Winneker, Gaunt, & Williams, 2015). The FACE-IC describes 6 domains of family engagement in MTSS and provides (a) a process by which teams can develop a common language and understanding of family engagement.
Figure 1. The Dual Capacity-Building Framework for Family-School Partnerships
in PBIS: MTSS, (b) a tool for gauging current levels of implementation of the essential features of effective family engagement, and (c) a process for ensuring responsiveness to local implementation contexts (Hall & Hord, 2006; Minch et al., 2015; Richardson, 2004; USDOE, 2013).

The FACE-IC extends what we know about effective family engagement strategies and interventions (e.g., positive partnerships and communication, collaborative problem-solving approaches) and integrates and aligns these strategies with effective, sustainable systems change principles that allow for local adaption, contextual fit and ongoing improvement (e.g., ongoing evaluation efforts, training and support). The FACE-IC begins with (1) leadership to establish the conditions necessary for effective family engagement and to ensure (2) stakeholder (family and educator) strengths, preferences, values, skills and needs are regularly assessed and used to inform family engagement goals and strategies, and finally (3-6) positive partnerships among families and educators characterized by mutual respect, trust and inclusive problem-solving conversations provide the foundation from which all approaches, practices and strategies for engagement are developed and implemented (see Figure 2). Ongoing evaluation and adjustments to plans and practices that are responsive to stakeholders is considered from the beginning to ensure sustained contextual fit and effectiveness (Ferguson et al., 2010; Fixsen et al., 2005; Hall & Hord, 2006; Sheldon, 2005).

Figure 2. Florida Family Engagement in MTSS Model
Table 1. Family Engagement Innovation Configuration Domains

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<th>Component</th>
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| Leadership                 | School-level leadership, including administrators and the school-based leadership team, establish family and community engagement (FACE) as a priority and include FACE in the vision, mission, and goals for continuous school improvement. Leadership ensures the school’s efforts are aligned with the district's vision and goals for FACE in Multi-Tiered Systems of Support (MTSS). Leadership provides professional development (PD) and ongoing coaching supports to build family and educator capacity to work together for the purpose of supporting student learning and positive student outcomes. | • Integrated into and aligned with schoolwide vision, mission, goals and strategic plans  
• Team has capacity for FACE and ensures PD and coaching for staff and families  
• Family input on FACE efforts, MTSS implementation  
• Families’ social capital and networks encouraged | Epstein, Galindo & Sheldon (2011)  
• Ferguson et al. (2010)  
• Sheldon (2002) |
| Data-based Goals and Outcomes | Desired goals and outcomes of family and community engagement efforts are identified and monitored with data. Families and educators establish goals and outcomes that focus on engaging in partnerships to support student achievement and student learning. Specific goals and outcomes related to educators’ and families’ knowledge, skills, practices, and actions are clearly identified and based on student outcome data as well as input from both families and educators. | • Collaboratively developed goals, outcomes and strategies for monitoring progress  
• Goals are comprehensive, responsive to needs  
• Data are used to engage in continual improvements | Spielberg (2011)  
• Westmoreland, Bouffard, O’Carroll, & Rosenberg (2009)  
• Westmoreland, Lopez & Rosenberg (2009) |
| Positive Relationships     | Relationships between educators and families are characteristically positive with educators recognizing families’ needs and cultural differences leading to greater understanding and respect among all involved. | • Relationships are authentic, respectful, positive, responsive, shared responsibility for decisions and student success | Ferguson, Jordan, Wood & Rodriguez (2006)  
• Mapp (2003) |
## Chapter Four

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<th>Component</th>
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| Multi-dimensional/ Multi-tiered Approach | Educators use multidimensional approaches to engage families in dialogue including virtual, telephone, video conferencing, and written communications, workshops, meetings, etc. Educators utilize multi-tiered approaches including tier 1 strategies for all families as well as more intensive, tier 2 and tier 3 approaches, for a smaller number of families. | • Schoolwide plans for engagement  
• Differentiated strategies are used for some families  
• All strategies are characterized by two-way communication  
• Community partners supplement school resources | • Weiss, Bouffard, Bridglall, & Gordon (2009)  
• Henderson & Mapp (2002)  
• Boethel (2003) |
| Empowering Families | Educators employ effective strategies to identify and encourage families’ knowledge, skills and efficacy for supporting student learning that results in empowered families who serve as leaders, advocates, supporters and partners in student learning. | • Value partnerships  
• Responsive outreach and supports  
• Families’ social capital and networks encourage | • Goddard (2003)  
• Chrispeels & Gonzalez (2004)  
• Chrispeels & Rivero (2001) |
| Collaborative Problem Solving | Families of children receiving Tier II (targeted, supplemental) and III (individualized, intensive) supports are effectively engaged in all steps of the Problem-Solving process | • Families are central partners in all steps and aspects of problem-solving meetings | • Garbacz et al. (2008)  
• Sheridan & Kratochwill (2007) |

Importantly, the six elements of a comprehensive approach to family engagement align with essential features of implementing multi-tiered systems of support (see SAM; Stockslager, Castillo, Brundage, Childs, & Romer, 2016), PBIS: MTSS (see BoQ, Kincaid, Childs, George, 2010), and Culturally Responsive PBIS (see CR-PBIS; Bal, Thorius, & Kozleski, 2012; Thorius, Rodriguez, & Ball, 2013). See Table 2 for a review of the alignment of these features. The structures and practices common to both effective family engagement and PBIS: MTSS implementation would suggest substantial improvements in student outcomes as a result of integrated and aligned efforts to encourage family engagement in PBIS: MTSS implementation.
### Table 2. Alignment between Family Engagement, PBIS, CR-PBIS and MTSS

<table>
<thead>
<tr>
<th>Family Engagement (FACE-IC; Minch et al., 2015)</th>
<th>PBIS (BoQ; Kincaid et al., 2010)</th>
<th>CR-PBIS (Bal et al., 2012)</th>
<th>MTSS Domains (Stockslager et al., 2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership</td>
<td>PBIS Team</td>
<td>Family voice and perspective included in teaming</td>
<td>Leadership</td>
</tr>
<tr>
<td>Data-based Goals &amp; Outcomes</td>
<td>Evaluation</td>
<td>Includes goals regarding equitable outcomes</td>
<td>Data Evaluation</td>
</tr>
<tr>
<td>Positive Relationships</td>
<td>Faculty Commitment</td>
<td>Emphasis on personal relationships among students, teachers and families</td>
<td>Communication and Collaboration</td>
</tr>
<tr>
<td>Family Empowerment</td>
<td>Implementation Plan</td>
<td>PD includes culture and self-awareness</td>
<td>Capacity Building Infrastructure</td>
</tr>
<tr>
<td>Multi-Tiered Approach</td>
<td>Expectations, Rule Lesson Plans/Teaching Reward Discipline Procedures Classroom Systems</td>
<td>Stakeholders central to the development of behavioral curriculum</td>
<td>Multiple Tiers of Support</td>
</tr>
<tr>
<td>Collaborative Problem Solving</td>
<td>Data Entry and Analysis</td>
<td>Includes review of disaggregated data</td>
<td>Problem Solving Process</td>
</tr>
</tbody>
</table>

### Stages of Family Engagement in PBIS: MTSS Implementation

The next section will outline the six domains of effective family engagement efforts situated within the stages of implementation (Fixsen et al., 2005) with references to systems change principles and considerations ensuring family engagement is central to PBIS: MTSS implementation (USDOE, 2013). Linearity and mutually exclusivity should not be assumed for these stages as schoolwide reform efforts are ongoing processes that consider leadership and contextual influences of the organization, including people and practices, and continued attention to the organization’s consensus and capacity for implementation with fidelity and sustainability (Hall & Hord, 2006). Leadership and staff turnover as well as changing federal, state and district policies and priorities requires simultaneous and ongoing attention to all stages of implementation (Fullan, 2010; Hall & Hord, 2006).

**Leadership support for exploration/adoption of family engagement in PBIS: MTSS.** During the exploration and adoption stage of change, family and educator beliefs, values, and needs are explored to determine stakeholder consensus for approaching family engagement in
PBIS: MTSS from a more inclusive and expansive perspective that emphasizes the importance of family voice for responsive PBIS: MTSS plans and practices (Ishimaru et al., 2016). Leadership (administration and leadership teams) plays a critical role in emphasizing and establishing the priority, expectations and opportunities for engaging families in PBIS: MTSS (Berg, Melaville, & Blank, 2006). Leadership ensures sufficient resources and capacity-building efforts, including the provision of professional development and coaching supports for families and educators, to reduce resistance and increase buy-in for family engagement (Epstein, Galindo, & Sheldon, 2011; Epstein & Sanders, 2006; Fixsen et al., 2005; Jordan, Orozco, & Averett, 2001). Although more subtle forms of engagement (e.g., family communication of expectations for learning) may be the most important for student outcomes, we still do not know if and how best to teach these subtle aspects of engagement and partnership strategies to educators and families (Jeynes, 2010). Without a strong evidence-base to support these capacity-building efforts, ongoing problem-solving and evaluation of outcomes in relation to goals is essential (USDOE, 2013). In the exploration/adoption stage, leadership can (a) explore family and educator beliefs, attitudes and perspectives about family engagement in PBIS: MTSS implementation, (b) ensure clear communication among staff and families regarding the benefits of a collaborative approach to PBIS: MTSS implementation including the time and support to make it work (Byrk & Schneider, 2002), and (c) provide opportunities for relationship-building and development of a shared understanding of school goals and approaches for PBIS: MTSS implementation.

Beliefs, values, consensus for family engagement in PBIS: MTSS. Due to differences in perceptions of practices among educators and families, it’s important to assess both educator and family perspectives of the relationship (Barnyak & McNelly, 2009; Lawson, 2003; Taliaferro, DeCuir-Gunby, & Allen-Eckard, 2009; Vaden-Kiernan & McManus, 2005;). Family beliefs and perceptions of their role in supporting student learning and success is highly influenced by school efforts to empower, engage, inform and involve families in all aspects of education (Cox, 2005; Hoover-Dempsey et al., 2005; Patrikakou & Weissberg, 2000; Seitsinger, Felner, Brand, & Burns, 2008). Data from all stakeholder groups can be collected and used to guide conversations about the best way for moving forward with family engagement in PBIS: MTSS implementation (see Family Engagement surveys in Castillo et al., 2013) and to determine effectiveness of outreach efforts for all subgroups of families.

During the exploration phase, leadership focuses on diffusion of information with staff and families and ensures stakeholders have a clear understanding of the intended benefits as well as the need for change (Fixsen et al., 2005). Contrasting values and beliefs about family engagement efforts and research-based strategies can create opportunities to highlight areas for change. For example, are bidirectional, two-way forms of communication valued by educators and families alike or do beliefs reflect value in...
one-way (school-to-home) communication only (Eberly, Joshi & Konzal, 2007; Joshi, Eberly, & Konzal, 2005)? Do families and educators alike value authentic partnerships and collaboration in the development and implementation of PBIS: MTSS (Bal et al., 2014, 2016; Barajas-Lopez & Ishimaru, 2016)? Do educators and families alike value more subtle forms of family engagement that are found to be important for student outcomes (i.e., communication of educational expectations) or do beliefs and values reflect only observable, school-based forms of engagement (i.e., attendance at school events; Jeynes, 2010)? Do beliefs about frequent, ongoing forms of communication match reported and perceived practices by educators and families (Barnyak & McNelly, 2009; Epstein & Becker, 1982; Taliaferro et al., 2009; Vaden-Kiernan & McManus, 2005)? Inconsistencies in educator and family levels of satisfaction and perceptions of family engagement practices can be targeted for discussion and improvement (Epstein & Dauber, 1991).

Negative beliefs about the importance of family engagement should be further explored to determine areas for support moving forward and may be due to a perceived lack of capacity, skills or support for engaging families that can be included in family engagement plans (Epstein & Dauber 1991; García, 2004). Additionally, negative beliefs due to structural and organizational barriers (e.g., lack of time) can be problem-solved among school teams. Families’ perspectives regarding strengths, values, needs, questions, preferences and concerns should be obtained and utilized to guide goals and approaches that fit the stakeholders in the building (Bal et al., 2016). Family perceptions of current family engagement approaches can create a space for families and educators to identify more effective ways for partnering (Cox, 2005; USDOE, 2001).

**Communicating benefits of a collaborative PBIS: MTSS approach.** An essential purpose of the exploration phase is to determine need, match and benefits for engaging families in PBIS: MTSS efforts (Fixsen et al., 2005). Communicating the benefits of family engagement in PBIS: MTSS and clear expectations for educators and families reduces resistance to partnership efforts. Sharing research regarding the benefits of these approaches for ensuring equitable discipline and improving student outcomes can be powerful (Bal et al., 2016; Weiss et al., 2010). Existing data that reflect discrepancies between current status of family engagement in PBIS: MTSS and stakeholder goals and preferences along with disaggregated discipline data by subgroup can be used to assess priorities and needed changes. Leadership can organize the use of collaborative problem-solving teams that consist of equal numbers of families, community members and educators (also referred to as Learning Labs; see Bal et al., 2014, 2016) and encourage and expect early, active outreach to families before behavioral concerns arise as part of PBIS: MTSS implementation. Clarifying expectations for the practice, including resources allocated to support these efforts (e.g., time and support), and accountability for follow-through can prove valuable in reducing resistance and increasing implementation.
Opportunities for developing a shared understanding and collaborative approach to PBIS: MTSS implementation. Schools can invite and include families to play a central role in the development and implementation of PBIS: MTSS (Bal et al., 2016). Specific examples of this might include (a) cultivation of a team member role that specifically focuses on leveraging family knowledge, expertise and perspectives in the ongoing implementation of PBIS: MTSS, or (b) opportunities for regular and transparent data sharing that allow for collaborative discussions including both families and educators to develop a shared understanding of school goals, concerns and priorities (Bal et al., 2016). Inclusion of nondominant families (see Gutierrez, 2008) in these exploratory discussions of school based discipline data has potential to ensure equitable discipline outcomes and create opportunities for family engagement that is integrated, aligned and central to PBIS: MTSS implementation (Bal et al., 2014; 2016). To ensure teaming structures represent and include all important stakeholder groups, leadership teams can utilize guiding questions and teaming maps (Ferguson et al., 2010). Teaming maps can help organize roles and members and may be helpful to ensure voices from all key stakeholder groups are included and represented in the teaming process.

Finally, evidence suggests a reciprocal relationship between educators’ positive beliefs about family engagement and educators’ outreach and partnership efforts with families perceived as “hard to reach” (Vaden-Kiernan & McManus, 2005; Weinginger & Lareau, 2003). Providing incentives and flexible policies that allow educators to engage in creative outreach and partnership efforts may lead to more positive beliefs about diverse, less traditional families and increase buy-in among educators (NRCIM, 2004). This reciprocal relationship between beliefs and actions is also evident in the cultivation of trust between educators and families, a foundational characteristic of positive family-school relationships (Byrk & Schneider, 2002). Trust is developed over time through interactions between educators and families characterized by predictability, dependability and faith (Reschly & Christenson, 2012).

Psychometrically sound tools exist to assess family and educators’ beliefs, values, consensus and readiness for family engagement in PBIS: MTSS implementation (see Castillo et al., 2013). Additionally, the FACE-IC can be used to explore the school’s capacity for family engagement and clarify areas for improvement (http://flpbs.fmhi.usf.edu/pdfs/FACE School Level IC_8.21.15.pdf). Needs assessment surveys can be used to determine educator and family perspectives regarding family engagement in PBIS: MTSS (Ferguson et al., 2010). The exploration/adoption stage ends with a decision to move forward with family engagement in PBIS: MTSS and moves into development of a clear conceptualization and plan for the school. Leadership continues to play a central role in all stages of implementation.

Installation and development of data-based goals and outcomes. Once a school has decided to focus on family engagement in PBIS: MTSS, family input is central to the identifi-
cation and development of clear goals, existing resources and supports (Bal et al., 2014, 2016; USDOE, 2013). Concrete activities in this phase include (a) families and educators collaboratively exploring the resources, needs, and supports for engagement to inform goals and plans, and (b) ensuring the capacity and infrastructure exist for effective and successful family engagement in PBIS: MTSS.

Collaboratively developed data-based goals and outcomes. During the installation stage, teams of families and educators collaboratively develop shared goals for family engagement in PBIS: MTSS aligned with the school’s larger priorities. Goals for family engagement in PBIS: MTSS should reflect broader, more inclusive approaches to family engagement. Creating opportunities for families and educators to collaboratively develop shared goals for their work together communicates value and respect for both family and educator perspectives as well as increases personal meaning, relevance and ownership for both stakeholders (Ferguson et al., 2010; Fullan, 2010; Hall & Hord, 2006). Leadership should engage in the following in order to facilitate effective collaborative goal setting including creative relationship-building efforts, ensuring incentives for educators and families to participate in goal setting activities, and use of systematic cultural brokering at the organizational level to reduce structural and physical barriers (e.g., transportation, meeting time, use of live streaming and other technologies to promote remote participation; Bolivar & Chrispeels, 2011; Ishimaru et al., 2016).

Goal Setting. Often, schools move forward with implementing an engagement strategy (e.g., online gradebook to facilitate home-school communication) without full consideration of the strategy’s alignment with goals or of the ‘fit’ with needs, preferences and resources of educators (e.g., maintaining online records) or families (e.g., internet access) often leading to wasted resources and ineffective strategies. Beginning with a clear set of goals allows the school to rethink current and future practices for engagement to ensure appropriate resource allocation and clear alignment between goals and practices to achieve intended outcomes. Facilitating collaborative goal setting through questioning can prove beneficial. For example, asking the collaborative team to identify the changes they expect to see as a result of family engagement efforts as well as specific indicators from students, families and educators that reflect different (improved) beliefs, knowledge, practices and behaviors for engagement can help to facilitate expansive goal setting (Ferguson et al., 2010; Westmoreland, Lopez, & Rosenberg, 2009). Many schools lack goals or prescribe to narrowly defined school-based forms of family engagement (e.g., PBIS events, volunteer, conferences, etc.) which can be challenging for many families (e.g., transportation, inflexible work schedules, feelings of confusion or intimidation, Heymann & Earle, 2000; Jordan & Plank, 2000) and may be less influential for closing achievement gaps compared to more subtle forms of engagement such as family communication of educational aspirations and expectations for their children (Jeynes,
To encourage more expansive views of family engagement, facilitators can share research regarding effective family engagement strategies associated with equitable student outcomes and use open-ended questioning regarding the deeper purpose of more traditional, school-centric forms of family engagement (i.e., attendance at events, volunteering) as part of the goal setting process.

Once clear goals for family engagement in PBIS: MTSS have been established, teams of educators and families can explore preferred methods for monitoring progress towards goals. Ideally, if schools move to a more expansive vision for family engagement beyond attendance at school-based events, this will create new challenges for data collection and monitoring progress towards goals that are less observable by educators in a school building. Measuring families’ broader support for students’ education can take additional planning; however, by limiting efforts to those preferred by families and educators, there’s potential for additional resources that can be targeted for these ongoing evaluation efforts. At later elementary, middle, and high school there is evidence to support student ratings of families’ engagement, support and encouragement of education as useful and resource-efficient methods for monitoring more subtle aspects of family engagement goals (Wong, Wiest, & Cusick, 2002). As with goal development, including families and educators in the development of the monitoring plan can increase feelings of ownership and relevance for families and educators potentially leading to increased participation in survey completion and focus groups that might be used to gauge progress towards family engagement goals (Ferguson et al., 2010; Westmoreland, Lopez et al., 2009).

**Capacity and infrastructure for effective family engagement in PBIS: MTSS.** Based on educator and family needs and goals, teams engage in action planning outlining their commitment to ensure the following: (a) the development of positive relationships among educators and families, (b) family empowerment opportunities and social connections (Sheldon, 2002), (c) the use of a multi-dimensional and multi-tiered approach for family engagement opportunities, and (d) collaborative problem-solving approaches to ongoing improvement efforts at both the schoolwide (Bal et al., 2016) and individual student levels (Sheridan & Kratochwill, 2007). Plans for providing capacity-building opportunities for educators and families ensure the “4C”s of effective engagement are supported including family and educator capabilities (skills and knowledge), connections (networks), cognition (beliefs and values) and confidence (self-efficacy; USDOE, 2013). With the emphasis on collaborative problem-solving opportunities for educators and families to co-create PBIS: MTSS implementation plans, it may be beneficial for leadership to ensure creative use of resources (e.g., incentives), meeting times and locations to increase and encourage participation of families and educators (Ishimaru et al., 2016).

The next section will review the remaining elements of effective family engagement aligned with PBIS: MTSS implementation. These elements include: (3) positive relationships, (4) multi-dimensional/multi-tiered approach, (5)
family empowerment, and (6) collaborative problem-solving as part of the initial implementation stage as these components reflect the strategy-based aspects of the model that require actionable implementation informed by leadership and data-based goals and outcomes.

**Initial implementation of comprehensive, integrated family engagement in PBIS: MTSS.** At this stage, efforts to more fully develop the school’s infrastructure are implemented including increasing the organizational capacity, knowledge, and skills to carry out the plans developed. During this stage, it is important to capitalize on initial successes to maintain implementation momentum and to ensure educators and families feel supported to carry out the plans created (Berg et al., 2006). As strategies are attempted, consensus for family engagement and initial goals and plans may change to ensure continued responsiveness to the needs of staff, families, and students throughout all stages of implementation. Efforts to develop positive relationships, empower families, and use multi-dimensional/multi-tiered and collaborative problem-solving approaches should be considered as part of every strategy, event and resource developed to encourage family engagement in PBIS: MTSS. Maintaining a focus on positive relationships reflecting trust, bi-directional communication and information sharing, and shared goals for student learning as the foundation for all engagement strategies increases the likelihood of success.

**Positive relationships.** Increasing communication and collaboration between home and school contexts is essential and foundational to all family engagement efforts. Increasing transparent, consistent, and meaningful communication between families and educators has the potential to increase trust and social capital, as both are essential for family engagement and student outcomes (Adams & Christenson, 2000; Byrk & Schneider, 2002; NRCIM, 2004). Educators can build trust with families through being responsive to questions and concerns, engaging in ongoing communication through daily notes, and updates and invitations to ‘pop in’ whenever families see fit. Ensuring families feel as though their child’s educational needs are met and as though their child is loved through the process is at the heart of building trust and ensuring families know they are valued and respected. As schools begin implementation of engagement plans and practices, maintaining focus on ensuring invitations for family engagement are welcoming, respectful, genuine, and positive will increase the likelihood that any engagement strategy is more effective (Hoover-Dempsey et al., 2005) as the personal qualities of relationships (e.g., respect, communication, and trust) have been identified as more important than observable practices of educators for improving the relationships and connections between home and school (Jeynes, 2010).

As part of PBIS: MTSS implementation, there are many ways that leadership can encourage, incentivize and support families and educators by providing opportunities to work together to develop positive relationships and discuss strategies that communicate value and respect for one another. Obtaining family needs and input regarding engagement efforts and using
that to inform strategies expresses value and respect and offers great potential for building positive connections between home and school (Lopez, Scribner, & Mahitivanichcha, 2001; Sheldon, 2005).

Active and early outreach to families is consistent with PBIS: MTSS prevention and early intervention efforts and offers potential to increase family engagement in PBIS: MTSS (Cox, 2005; USDOE, 2001). At the classroom-level teachers can reach out to families personally (e.g., drop-off/pick-up, phone calls, emails, written invitations to engage in conversations face-to-face or virtually) before concerns arise to develop relationships and communicate genuine interest in the student and family including family strengths, concerns, hopes, and learning progress goals (also necessary for culturally responsive practice). Furthermore, personal, responsive invitations to engage with schools early on may influence families’ perceptions of relationships between home and school over time and set a foundation for lasting, positive relationships. Leadership can reinforce these efforts by allocating time in the schedule for personal outreach (e.g., creative class coverage an hour per week, allocating a small portion of professional development time for these efforts), ensuring accountability and follow-through with practices for all families (Jordan & Plank, 2000), and reinforcing educators who implement with fidelity and effectiveness. Teams can plan for staff recognition from families for those educators that went above and beyond to develop positive relationships with families (e.g., Positive Family Partner of the Week).

**Family empowerment.** Family empowerment is emphasized not from a deficit perspective (i.e., families are somehow lacking critical knowledge or skills) but from a perspective that acknowledges the perceived and real power differentials in the family-school relationship that too often suggest families are not central to the work of educating their children (Barajas-Lopez & Ishimaru, 2016). Family empowerment is included to emphasize the responsibility and importance of genuine educator invitations and outreach efforts to increase families’ engagement in education (Anderson & Minke, 2007; Hoover-Dempsey et al., 2005). The continued expression that families are valued, encouraged, and supported to be equal partners in children’s education through ongoing, consistent and authentic efforts to communicate and collaborate creates real change in family-school relationships. Educators employ effective strategies to utilize and support families’ knowledge and skills for supporting student learning. Importantly, these strategies for empowering, promoting and encouraging families’ engagement in and support for student learning are collaboratively developed among educators and families in order to be responsive to family preferences and needs.

Family empowerment strategies could range from parent leadership training (Boliver & Chrispeels, 2011), to cultivation of social capital (Bolivar & Chrispeels, 2011), to educators encouraging simple, subtle yet powerful forms of engagement and educational support that hold promise for achieving equitable outcomes (Jeynes, 2005, 2010). One specific and powerful
example of family empowerment experienced by one of the authors was being offered a para-educator opportunity in their child’s intensive support classroom; these kinds of opportunities established trust, as well as provided hands-on opportunities for the family to be essential members of the team. A second powerful example of family empowerment includes the cultivation of families’ social capital. Social capital refers to the power inherent in social relationships and connections (Boliver & Chrispeels, 2011), and social networks for the purpose of information and resource sharing (Goddard, 2003; Sheldon, 2002). These efforts are likely to create true change in educator and family partnership efforts and hold promise for reducing inequities (Goddard, 2003; Ishimaru et al., 2016).

**Multi-tiered, multidimensional approach.** Multidimensional and multi-tiered approaches align with the school’s PBIS: MTSS implementation (Reschly & Christenson, 2012). The multi-tiered aspect acknowledges that families of students receiving more intensive interventions at tier 2 or tier 3, may benefit from more intensive outreach and support efforts to supplement school-based intervention efforts beyond the school day. Additionally, there may be families who require more individualized or unique engagement approaches that might be conceptualized as a tier 2 or tier 3 outreach strategy in terms of intensity and resource allocation. The multidimensional aspect acknowledges that various forms, types and methods of engagement (e.g., engagement at home, at school and bi-directional communication and collaboration between educators and families; Anderson & Minke, 2007) can and should be facilitated to meet the needs of all families. Two key features of multi-dimensional, multi-tiered approaches reflect (a) developmental appropriateness depending on student age and grade, and (b) responsiveness to ensure match with student and family need. One strategy with support at all tiers is the use of collaborative-problem-solving approach to engaging families.

**Collaborative problem-solving.** One strategy that has strong support across each tier of implementation is the use of a collaborative problem-solving approach to engaging families. Inclusion of family perspectives and family voice in collaborative problem solving conversations regarding school policies and practices at tiers 1, 2 and 3 shows promise for improving outcomes for students and reducing inequities in PBIS: MTSS implementation (Bal et al., 2014, 2016; Barajas-Lopez & Ishimaru, 2016). Notably, expanding the conversation to include multiple perspectives of student-teacher relationships, discipline practices and schoolwide approaches to learning can provide contextually meaningful information and insights (Barajas-Lopez & Ishimaru, 2016). Learning Labs and Academic Parent Teacher Teams are similar approaches to engaging families in conversations around student data at tier 1 that have shown promise for improving family-school partnerships and student outcomes (Bal et al., 2016; Paredes, 2010). Engaging in collaborative problem-solving with families regarding individualized student need has been established as an effective practice for engaging families and developing more intensive and individualized support plans (e.g., Tier
When educators and families work together to define student concerns and goals, as well as collaboratively develop and share responsibility for implementing interventions, students, families, and educators benefit (Childress, 2004; Hancock, Kaiser, & Delaney, 2002). Specific to working with families of children with special needs, families are provided a forum to voice preferences, needs, level of satisfaction with services and ideas for improvement. These opportunities can range from input on policy changes to classroom-level supports. Understandably so, when discussing needs for individual children, families and educators alike can benefit from use of interpersonal communication skills that elicit open, bidirectional communication that focuses on positive non-verbals, de-escalation approaches, active listening and open-ended questioning to ensure all stakeholders feel heard and validated and perspectives are considered when moving forward.

**Full implementation, innovation and sustainability.** At this stage, family engagement is integrated into PBIS: MTSS policies, procedures and practices. Fidelity of implementation is resulting in positive outcomes and benefits for families, educators and students. Structured problem-solving is utilized to systematically identify and remove barriers to family engagement and ensure creative strategies are utilized to connect with families who may be unresponsive to initial communications or invitations for engagement. The use of ongoing evaluation of efforts that include both family and educator perspectives allow for continual regeneration of efforts and practices to ensure success.

**Conclusion**

This chapter reviewed essential considerations to aid in the translation of research to practice gleaning from implementation science, systems change, and family engagement research. The Dual Capacity Building Framework (USDOE, 2013) and the FACE-IC (Minch et al., 2015) were used to illustrate key features of comprehensive, integrated family engagement efforts considering stages of implementation and alignment with PBIS: MTSS implementation.

The Dual Capacity Building Framework (USDOE, 2013) raised expectations for family engagement requiring a new conceptualization and reorganization of family engagement efforts in ways that result in effective and sustainable practices. Although multiple handbooks (Ferguson et al., 2010; Weiss et al., 2010) and tools are readily available and accessible to schools (Westmoreland, Lopez et al., 2009) local capacity to facilitate and support the utilization of these resources with fidelity is needed. States, districts and schools often lack local capacity to move beyond compliance-driven approaches to systemic, effective and sustainable forms of family engagement. Federal and state funding to support these practices and research demonstrating improved outcomes as a result of these efforts is needed. Competing initiatives and a focus on accountability for academic outcomes pressures educators to engage in immediate turn around and improvement efforts and often discourages
those to take the time needed for the work of developing positive, sustainable respectful partnerships. Disingenuous and ineffective efforts ultimately result in wasted resources. Increased attention to the systems change principles in federal and state policy can ensure more effective and collaborative approaches to the implementation of schoolwide reform and improvement efforts that have been implemented in ways that we know to improve student outcomes. As research suggests, genuine and effective family engagement in whole-school reform efforts may be a significant key to sustainable improvements in student outcomes and reductions in achievement gaps.

REFERENCES


ChAPtEr FouR


CHAPTER FOUR


Chapter Five

Promoting Family Engagement in Schools through Interconnected PBIS and School Mental Health

Kelly Perales and Lucille Eber  MIDWEST PBIS
Susan Barrett  MID-ATLANTIC PBIS
Ashley Quell, Aylin Ulker & Mark. D. Weist  UNIVERSITY OF SOUTH CAROLINA

Leaders in the fields of education and mental health have partnered together to respond to the need for more seamless systems of support, developing an Interconnected Systems Framework (ISF) to align and integrate the education and mental health systems (Barrett, Eber & Weist, 2013). The ISF is a structure and process that uses the school-wide systems of Positive Behavioral Interventions and Supports (PBIS) to blend community and school mental health personnel into the multi-tiered system of support (MTSS). As presented in prior chapters, PBIS is a prevention-based implementation framework that emphasizes the social and behavioral culture of the school and provides steps for improving systems and procedures for staff, thereby influencing positive change in student behavior. The ISF expands this logic to a larger stakeholder group that includes school and community-based staff, and families, with families empowered as leaders, with all members working together as a blended team to assess needs, design interventions and progress monitor interventions that match student population, community demographics and culture.

This chapter defines how the ISF provides opportunity for strong school-family-community partnerships to detect, prevent, and intervene to improve emotional/behavioral (EB) functioning in students. Strategies for strengthening family partnerships from prevention through intensive interventions are provided, aligned with the features of the ISF.

The Interconnected Systems Framework

The ISF uses the established PBIS framework, a widely scaled up example of an evidence-based innovation (Fixsen, Naoom, Blase, Friedman, Wallace, 2005) proven to increase school climate and decrease problem behaviors when implemented with fidelity. As reviewed in earlier chapters, the multi-tiered PBIS system establishes a continuum of prevention (Tier 1), early intervention (Tier 2), and treatment (Tier 3) using a set of core features (Sugai & Horner,
2006). These features include explicitly teaching social and behavioral expectations and rules to all students; routinely providing feedback and acknowledgment as expected behaviors are displayed; and reviewing data on student EB functioning to design additional interventions for those students who demonstrate the need for more support (Lewis, Barrett, Sugai, & Horner, 2010; also see chapter 3). The PBIS framework promotes prevention efforts and relies on data-based decision making and an organized system. However, implementers often struggle to establish a strong continuum that includes connection to intensive interventions; with less attention paid to “internalizing” problems such as depression, anxiety, and trauma (Barrett et al., 2013).

The ISF also draws from community-based Systems of Care (SOC; Evans, Simonsen, & Dolan, 2013) with emphasis on the values of family/youth voice and cultural relevancy as well as from the field of expanded school mental health (SMH) involving school-community mental health system partnerships to expand, deepen and improve prevention and intervention efforts (Weist, 1997). While SOC promotes expanded options and culturally relevant supports through community-based approaches such as Wraparound (Burns & Goldman, 1999; Eber, Sugai, Smith, & Scott, 2002), it has not permeated into schools during its 20 plus year history of implementation. SMH improves accessibility to services, but is commonly limited or not present at Tier 1 or Tier 2 (Eber, Weist, & Barrett, 2013; Monahan et al., 2014). ISF combines the strengths of mental health and the education-based PBIS, while being cognizant of the limitations of both, to provide an enhanced continuum of evidence-based prevention and intervention within a multi-tiered system of support (Barrett et al., 2013; Swain-Bradway, Johnson, Eber, Barrett, & Weist, 2015).

The purpose of the ISF is to eliminate parallel structures previously existing between educators and mental health providers and address the multiple facets of student need more efficiently and effectively. The interconnected structure promotes more definitive collaboration and communication within and across tiers of support. Using the multi-tiered system of PBIS offers an opportunity to provide students and families with increasing intensity of interventions utilizing mechanisms, such as comprehensive universal screening, to make sure students and their families have earlier access to supports. The multi-tiered PBIS framework prioritizes the early identification of students exhibiting signs of risk rather than waiting for students to be in crisis before responding, and offers graduated intensities of support.

The following sections describes how the ISF enhances effective mental health delivery through the combined efforts of schools and community partners thus providing opportunity for more potent family engagement to improve outcomes for youth. Four defining characteristics of ISF will be used to organize the description of interconnected systems and family engagement strategies; (1) implementing a multi-tiered systems of support, (2) utilizing a single system of delivery, (3) promoting mental health for all, and (4) accessing mental health interventions with specific outcomes (e.g., acquiring skills...
as measured by decreases in problem behavior, increased instructional time and academic success, and improved attendance).

**Implementing a Multi-Tiered System of Support**

As reviewed in prior chapters, MTSS is a data based decision-making framework that provides academic, behavioral and social supports for all students (Harlacher, Sakelaris, & Kattelman, 2014). By definition, the MTSS should have active family involvement as a core feature (see Eber, Sugai, Smith, & Scott, 2002). At Tier 1, which includes all students, staff, and families, there is a two-way communication system in place that allows for families to provide input, and serve as leaders. For example, family representatives are part of the PBIS core team, and assist in the development of the social and behavioral expectations with input from other staff, students, and parents. The family representatives also work with parent groups within the school community to extend the teaching and reinforcement of these expectations to the community and home-setting context. Family representatives ensure that a broader range of stakeholders provide input to school-wide efforts through newsletters, open houses and other forums. Furthermore, when the team reviews data regarding problem behavior, parents and other family members can provide insight and input as to context and function, assisting in the interpretation of data and the development of appropriate action plans. For example, in a school on a military installation, parents are often in a position to inform school staff of unique stressors families are experiencing that have an influence on student behavior (e.g., an impending deployment for a large group of soldiers; see Faran, Johnson, Ban, Shue, & Weist, 2015).

Families are also represented on Tier 2 teams who work with the blended Tier 1 leadership team to use data to identify students and families who may need additional intervention and support. For example, students who are identified as needing more supports are provided additional time, structure and feedback to acquire skills necessary to navigate the school setting. This type of support is provided in small groups and progress is closely monitored through systems such as a Check In, Check Out (Crone, Hawken, & Horner, 2010). Within this system, a daily progress report is used to remind teachers to increase frequency of prompts and feedback so students are more likely to demonstrate new skills across the day. These students are discussed within a Tier 2 systems team and interventions are selected based on need as indicated by attendance data, academic progress or problem behavior. Parents of those students are included within the problem solving dialogue and kept in the communication loop regarding the student’s progress at least weekly (Crone et al., 2010).

Those students who continue to struggle, even after multiple interventions have been put into place, may need a team of adults to provide a more intensive and comprehensive individualized behavior support plan. Intensive supports are more likely to be successful when families are involved across the continuum. This
includes having knowledge about what supports are available and how to access them, as well as how intensive supports are layered and connected with lower level tiers.

Another core feature of a multi-tiered system of support is ongoing professional development and coaching support to all members of the blended school leadership teams with special effort to members who are not familiar with the educational setting and how schools operate. Schools implementing ISF offer cross-discipline trainings to support school employed and community mental health employed staff and families on best practices across the continuum (Splett et al., 2016). School faculty, family members and community partners are invited to participate in these professional development opportunities regarding messaging, cross-discipline collaboration with service delivery, and to enhance morale. Moreover, it is important to build capacity for families to have opportunities for training to expand their knowledge and develop skills. As families participate in professional development activities, this naturally provides opportunities for relationship building and confidence as they work side by side with professionals. Families and community-employed staff concurrently learn about overall operations of the school and interconnected efforts within the MTSS. School staff receive professional development on the basics of mental health. Examples of training include information about the most common mental health diagnoses in children and adolescents; how to identify a student who may be experiencing mental health issues; and generally how to support students who may be receiving mental health interventions. Youth Mental Health First Aid (Kitchener & Jorm, 2007) is a training that provides such information with ideas and strategies on what to do when concerned about a student. Trainings also include a component on how all stakeholder groups can install and continuously improve two-way communication processes to facilitate seamless and unified service delivery.

At the system level, families can assist in the development of policies and the development of training for school and community employed staff. Families can also serve as peer mentors or advocates for other parents. For example, a parent who has participated in the design of an individual student behavior support plan may serve as a mentor for another parent who is new to this level of intervention with their child. Parents and other family members can meaningfully contribute their perspective and perception of school climate and culture, assisting in the quality improvement process. Families involved at Tier 3 can be involved in training related to their child’s treatment plan; particularly as it relates to how the plan can be implemented in the home (Splett et al., 2016). Continuity of treatment across settings can support generalizability of the skill if reinforcement and implementation procedures are consistent (Cooper, Heron, & Heward, 2007).

Families also play a significant role in shaping the screening process, especially for students and youth with internalizing behaviors (e.g. anxiety, depression, trauma). As blended leadership teams work together to develop formal universal screening protocols that detect both inter-
nalizing and externalizing behaviors, families can provide input through informal data gathering processes such as surveys. Since internalizing problems usually reflect less visible behaviors (e.g., social withdrawal, absences, not participating in class), family members are critical to uncovering such patterns in students. This is more likely if family members are knowledgeable of signs of EB problems and the school process for gaining access to supports. This is more likely to occur when a strong Tier 1 collaboration and communication system is in place (see Lewis, Mitchell, Horner, & Sugai, chapter 3).

One example of family participation in screening comes from the work on Positive Family Support by Dishion and Kavanagh (2003). The parents of fifth grade students completed a screening instrument to provide their perception of how well they thought their child would transition to sixth grade and the middle school. Those students who were at an elevated risk of having difficulty with the transition were provided additional intervention at the start of the sixth grade school year. By soliciting family input, students were less likely to have problems in the transition to middle school.

**Utilizing a Single System of Delivery**

A single system of delivery indicates that the youth serving systems will operate as one. This is in direct contrast to the more traditional, and problematic, approach where community mental health provider are simply co-located in a school (see Barrett et al., 2013). For example, the clinician not participating on school teams, limit their relationships with school staff, and results in school staff making comments such as: “Yes, she is here Tuesdays and Fridays and sees a handful of students, but we really have no idea what she does.” To move toward a single system of delivery, a district and community leadership team is formed and made up of those in positions of authority, such as superintendents and mental health agency executive directors. These administrators develop a memorandum of understanding that clearly articulates how braided funding, policies, and staff members will come together to provide effective and efficient support to those students and families within the school community. The key factor is clinicians being truly integrated versus co-located in schools.

An ISF approach focuses on one set of school “behavioral health” teams (e.g. PBIS, MTSS, Wellness, Climate) organized around tiers of support with funding to allow community employed staff to serve on teams and assist in serving ALL students. School-employed education and mental health staff and community-employed mental health staff and families collaboratively participate in teams to design, implement and evaluate evidence-based programs and practices across ALL tiers.

Within ISF, home, school, and community data are reviewed by these teams in order to select interventions that match the needs of students. This means including the input and perception of parents and teachers in the decision making process. Cross training is provided to both school and community employed professionals, and family members, in order to deliver interventions with fidelity. In order to illustrate
more detail of a single system, the core feature of teaming is described below.

**Teaming at Tier 1**

A core feature within ISF is a blended team (Splett, et al., in press). Teams are comprised of cross-system stakeholders; to include school employed and community employed mental health professionals and family members. These teams develop school-wide expectations that are culturally relevant, examine school and community data, and promote mental health and wellness. The ISF advocates for families to be active leaders at all applicable tiers in their child’s academic, social, emotional, and behavioral development. This new paradigm urges families, including youth, to participate on school-based leadership teams at the system level to help guide and direct service delivery across all three tiers (Splett et al., 2016).

Schools implementing the ISF are guided to create defined opportunities for families to actively and purposefully engage to implement with high fidelity (Splett et al., 2016). Parents and other family members should have input into the development of behavioral expectations, acknowledgement systems and consequence systems that are built into the core features of PBIS (Garbacz et al., 2016). As an example, one school engaged youth voice on their teams which led them to change their social behavior matrix, a visual system used to define expected behaviors in various school settings, to include a “Guide Me” expectation directed towards adults within the school building. Students and family ISF team members provided feedback identifying the need for improved faculty/staff supervision and role modeling of expected behaviors to students. The Guide Me expectations highlighted for all stakeholders what was expected of the staff in each setting of the school. In the hallway, for example, staff are expected to be present and actively interact with students. Family and student input improved visibility and importance of the community expectations, strengthening ownership and support of the initiative.

Family members can also contribute at the Tier 1, or universal level, by providing insight into the best mechanisms to inform and involve other families in the school community. This may include how to share information about the school’s blended behavioral health system via a school newsletter, back to school night, or the school website. In addition, they can generate ideas on how to provide families with resources on a variety of behavioral health topics. In addition, there are articulated standards for Positive Family Support in schools (Dishion & Stormshak, 2007) and these include having resource libraries set up for families. These inviting spaces encourage family members to learn more about literacy, developmental milestones, and nutrition. When expanding the focus to include mental health, information can be made available on risk and protective factors, EB challenges experienced by students including anxiety, depression, conduct problems, attention issues, and other common childhood concerns (e.g., bullying, see Chapter 9).
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Teaming at Tiers 2 and 3

At the advanced tiers, school and community employed clinicians work together to develop an enhanced continuum of evidence-based interventions with input from family members. School and community data informs the team(s) as to which interventions to select. For example, if data indicate there is a targeted need for a trauma-informed intervention, a school social worker and an agency mental health clinician may co-facilitate a trauma-informed group intervention (see DeRosa et al., 2006; Jaycox, 2004 for examples of evidence-based approaches). Educators and clinicians work together to pool data sources to determine if treatment should be continued, implemented with a greater intensity, or ceased. All parents should be made aware of interventions that are available and how to reach out if they believe their child would benefit from participating in an intervention. Additionally, if parents are aware of various interventions and informed early and often when there are concerns about their child, they are less likely to be surprised of the need (see Chapter 10). In this way, mental health is treated in the same way as academics or physical health.

As students are identified as needing additional support, parents are often informed of lower level interventions (i.e. Tier 2) through letters home enabling them to opt out (referred to by some as “passive consent”). For example, if the student has been nominated to participate in Check In, Check Out (CICO; Crone et al., 2010), the parent would be informed of this and provided information regarding the intervention and the desired role of the parent. Communication regarding the student’s progress should be communicated to the parent regularly (i.e., at least weekly); however, an individual team is not created to support the student. Rather, student progress is assessed by the Tier 2 systems team in aggregate, with a parent/family member representative, to discuss Tier 2 data trends to inform Tier 1 practices.

As a student’s needs increase, and Tier 3 interventions are warranted, parents are often invited in for a problem solving meeting and asked to consent to higher level interventions, such as a social skills group or working individually with a clinician in cognitive behavioral therapy (Eber et al., 2009; Lane, Smither, Huseman, Guffey, & Fox, 2007); thus forming an individual student intervention team. When a child/adolescent is accessing Tier 3, active family participation is critical. Working conjointly with education and mental health staff, the family, with input of student voice, should actively contribute to the design and monitoring of the student’s individual treatment plan (Splett et al., 2016). Data reviewed by the student’s intervention team should include both mental health and education data, in addition to any information the family can provide on the student’s functioning outside of school (e.g., in relation to other systems like primary health care, social services). Families should be encouraged to voice any concerns about intervention components and should receive training by the education/mental health staff on how the intervention can be applied in home, school and other commu-
nity settings. These individual teams are guided to meet regularly (i.e., at least every 2 weeks) to discuss progress towards the intervention goals, layering upon the existing Tier 1 plan (Splett et al., 2016).

The ISF promotes broader participation on teams across the tiers of support (prevention to intensive supports) with mental health providers, educators and families working together to review expanded data and design strategies and interventions. Active and meaningful parent/family participation all along the continuum fosters a greater sense of collaboration and trust. Parents are more likely to participate in their child’s intervention if they feel they have had an authentic voice in the development of the plan (Thompson, Bender, Lantry, & Flynn, 2007; also see Chapter 10). Providing information and education to parents regarding mental health issues also helps reduce stigma (Stephan, Weist, Kataoka, Adelsheim, & Mills, 2007). Furthermore, parents may be encouraged to form support groups within the school community around targeted identified need (e.g. military family support group, group for parents whose children have an eating disorder). This approach to authentic engagement and participation is rooted in the System of Care philosophy (Pires, 2002).

Promoting Mental Health for All

In ISF, a comprehensive single system emphasizes a more holistic approach to supporting children and families. First, by creating a positive, safe, and supportive school culture and climate; the mental health of all adults is fostered. Second, by providing professional development on mental health topics, faculty and staff better understand what their student may be experiencing and they will feel more confident and competent to address needs. Finally, by including mental health as part of the education system, just like physical health, the overall wellness of the children and youth becomes the focus.

Mental health is defined as a set of life skills that are necessary to navigate social situations across the lifespan. When viewed in this way, mental health becomes an integral part of the core curriculum and vital part of overall school success and creates an opportunity for all families to participate. In turn school leaders are more likely to allocate time, training and support for all staff to model, teach and reinforce social skills in students, with these efforts viewed as central to academic instruction. Therefore, in an ISF process: 1) social, emotional, and behavioral (SEB) skills are taught by ALL staff across ALL settings, and embedded in ALL curricula, 2) SEB examples are used to explicitly teach desired behaviors in various situations/contexts in school, and 3) community and school level data are used to ensure the school has a plan for ensuring core SEB competencies are the focus of programs at each of the tiers, with programming matching the level of particular need in the school building (e.g., if a large number of students are reporting stress and anxiety, coping skills should be included in Tier 1 programs such as in educational curricula).

Families in schools implementing the ISF can be actively engaged through the selection
of an evidence-based universal social-emotional curriculum. Parents can support school leadership by providing feedback on the curriculum, ensuring it is based on real and present SEB concerns they perceive would most impact their student. If a curriculum has already been selected, parents are informed of the particular skills taught so they can be reinforced in the home. A home behavior matrix, a visual reminder of expected behavior in different settings, is a method that offers parents a concrete example of how SEB skills might be reinforced in the home.

Beyond Access: Mental Health Interventions Connected to Specific Outcomes

As outlined earlier in this chapter, teams with community mental health and family partners work together to review an expanded set of data. Simply gaining access to school behavioral health programs is viewed as insufficient within an ISF approach. Appropriate psychosocial measures and school record data (e.g., student attendance, assignment completion, behavior, disciplinary referrals) are used to identify need areas and to track student progress within each tier of the MTSS. The blended team has a process for tracking positive outcomes for all children and youth and their families. More specifically, in an ISF process: 1) Interventions are matched to presenting problems using data, and are monitored for fidelity and whether desired outcomes are being achieved. When programs are not achieving desired outcomes, appropriate adjustments are made within them or new programs are implemented. 2) Teams including staff and families use more explicit vocabulary when describing mental health needs and/or types of interventions students and youth receive (e.g., from “student needs counseling” to “student needs 4 to 6 individual skill building sessions focused on teaching coping skills and problem solving). And 3) skills acquired during sessions with school behavioral health staff are supported by all staff and the support network (i.e., families and other involved adults and peers) and are linked to Tier 1 SEB instruction. For example, staff and families are aware that students are working on coping skills and problem solving, and prompt, acknowledge and reinforce these skills throughout the day, linked to core instruction at Tier 1.

Summary

A defining feature of the ISF is that interdisciplinary teams, including family members, progress monitor interventions for both implementation fidelity and student impact. Improved student outcomes across academic and SEB domains is one of the primary goals. With authentic family engagement and participation at every level, there is an increased chance that students will obtain and sustain appropriate pro-social skills, emotional regulation and management, and are able to be productive citizens, as emphasized in Chapter 1 and other chapters in this e-book. In order to increase authentic family engagement and participation, the following recommendations are provided:

1. **Develop a broad stakeholder system** – At the district and school building level, there is representation of family members, com-
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Community mental health provider agencies, and representatives of other youth serving systems (e.g., primary healthcare, child welfare, juvenile justice, disabilities). These individuals braid their resources, expertise, data, perceptions, and experiences in order to develop an enhanced continuum of interventions. When families perceive their input is valued and included in decision making, they feel empowered and connected to the school (see Chapter 10).

2. Implement layered and connected interventions that are matched to student need – School-employed faculty and clinicians, community-employed clinicians, and family members review student data obtained from a variety of sources in order to determine student need. Data from the school include attendance, time out of class, universal screening, and academic performance. Data from the community include the number of children and youth involved in the child serving systems, such as welfare and justice; the number of families who are homeless, accessing crisis services for mental health, and/or are involved in substance abuse treatment. Other community data might be the number of families who have a family member incarcerated or in the military with a history of deployment. Once student need is determined, interventions are selected that have evidence to address the indicated needs. The interventions are incorporated into the MTSS continuum within the school. All adults who interact with the student receiving an intervention know and understand their role. For example, if a student is learning coping skills such as taking deep breaths to manage anxiety, the parents, teachers, and other adults need to know what to look for, reinforce, prompt, or teach across settings. These skills can be added to the daily progress report card the student uses for Check In, Check Out (Crone et al., 2010). In other words, the intervention occurs within the system, not in isolation. This process enhances family engagement and participation by providing improved communication and collaboration and empowering families to use the same strategies at home.

3. Provide professional development to support adults – Training of educators, mental health providers, and families is a two-pronged approach. The first layer of training that should occur is having each system provide an overview of how their system works in concert with other systems. This allows for greater understanding of context, perceived barriers or problems and ways to overcome them. When families have a better understanding of the education and mental health systems, they are less intimidated by their interactions within these systems. The second layer of training is in specific evidence-based interventions. Once interventions are selected, those individuals who will be facilitating the interventions need to be trained in how to deliver them with fidelity. Implementation fidelity is imperative for improved outcomes. Family members can also receive professional development on various interventions in order to understand and take a more active part in their student’s plan.
REFERENCES

Barrett, S., Eber, L., & Weist, M. D. (2013). *Advancing education effectiveness: An Interconnected systems framework for Positive Behavioral Interventions and Supports (PBIS) and school mental health*.


Family engagement within early childhood classrooms and programs is considered to be a core practice of a high quality early education program. National professional practice standards guide early education and early childhood special education professionals to use the following family engagement practices (Division for Early Childhood, 2014; National Association for the Education of Young Children, 2009):

- establish reciprocal and responsive relationships with families;
- create a welcoming and supportive environment where families have many informal and formal opportunities to participate in the program;
- view families as the primary expert on the child;
- establish and maintain frequent, two-way communication with families;
- make decisions related to children in partnerships with families;
- work to ensure that all families are included in all aspects of the program;
- provide resources and supports to families;
- support families as decision-makers and provide opportunities for families to develop leadership and advocacy skills;
- provide families with information, resources, and education on parenting and child development;
- and provide family engagement opportunities that are culturally and linguistically responsive.

In a recent federal policy statement on the importance of family engagement in early childhood programs, programs and professionals were advised that “Strong family engagement in early childhood systems and programs is central—not supplemental—to promoting children’s healthy
intellectual, physical, and social-emotional development” (U.S. Department of Health and Human Services and U.S. Department of Education, 2016, p. 1). The federal policy statement provided guidance on family engagement policies, principles, and recommendation for system and program practices.

In this chapter, we will describe the family engagement practices and strategies that can be used to establish partnerships with families in the promotion of young children’s social and emotional competence within the framework of implementing Positive Behavioral Interventions and Supports (PBIS). We have structured the chapter to provide a brief overview of the application of PBIS within early childhood classrooms and programs and then offering multiple ideas and strategies to support teachers and program leaders in implementing family engagement practices at each tier of intervention.

**Family Engagement and PBIS in Early Childhood Classrooms**

The framework of evidence-based practices that are commonly used within early childhood classrooms and programs in PBIS is the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children (Fox, Dunlap, Hemmeter, Joseph, & Strain, 2003; Dunlap & Fox, 2015). The Pyramid Model (Figure 1) was developed to define the evidence-based practices within a multi-tiered approach that comprise the universal, secondary, and tertiary strategies and supports that promote the social and emotional competence and address challenging behaviors of young children (birth to five years). The development of the Pyramid Model was informed by PBIS and the program-wide implementation of the Pyramid Model shares the same four core elements of PBIS: outcomes; evidence-based practices; systems; and data-based decision-making. However, the Pyramid Model practices implemented within the multi-tiered system have been identified from the research on the evidence-based practices related to promoting the social, emotional, and behavioral outcomes of very young children (Dunlap & Fox, 2015).

**Figure 1.** Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children (reprinted with permission from www.challengingbehavior.org)

Family engagement is explicitly addressed at each level or tier of the Pyramid Model. The universal tier of the Pyramid Model defines practices essential to the promotion of children’s social and emotional competence. The foundation of the universal tier focuses on practices related to nurturing and responsive relationships with children, their families, and between practitioners. The second category of universal prac-
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PRACTICES ARE THOSE PRACTICES THAT DEFINE A HIGH QUALITY PROGRAM INCLUDING ENGAGING IN SUPPORTIVE CONVERSATIONS WITH CHILDREN AND PROMOTING THEIR COMMUNICATION SKILLS, JOINING IN CHILDREN’S PLAY, PROVIDING POSITIVE DESCRIPTIVE FEEDBACK, PROMOTING CHILD ENGAGEMENT IN LEARNING ACTIVITIES, TEACHING RULES AND EXPECTATIONS, AND SUPPORTING FAMILIES IN USING THESE PRACTICES. THE SECONDARY TIER OF PRACTICES ARE PRACTICES USED TO PROVIDE FOCUSED AND HIGH QUALITY SOCIAL EMOTIONAL TEACHING STRATEGIES TO ALL CHILDREN AND THE PROVISION OF TARGETED, EXPLICIT, AND SYSTEMATIC INSTRUCTION IN SOCIAL AND EMOTIONAL SKILLS TO CHILDREN WHO HAVE SOCIAL, EMOTIONAL, OR BEHAVIORAL DELAYS. AT THE SECONDARY TIER, FAMILY MEMBERS PROVIDE INFORMATION ABOUT THEIR CHILD’S SOCIAL AND EMOTIONAL SKILLS AND THEIR PERSPECTIVES ON SKILLS THAT ARE IMPORTANT AND VALUED AND ARE GUIDED IN USING STRATEGIES FOR TEACHING SOCIAL AND EMOTIONAL SKILLS WITHIN HOME AND COMMUNITY ACTIVITIES. FINALLY, THE TERTIARY TIER OF THE PYRAMID MODEL PRACTICES INCLUDES THE USE OF FUNCTIONAL ASSESSMENT AND A TEAM-BASED PROCESS TO DEVELOP AND IMPLEMENT A BEHAVIOR SUPPORT PLAN USED FOR INDIVIDUALIZED INTENSIVE INTERVENTIONS. THE FUNCTIONAL ASSESSMENT AND BEHAVIOR INTERVENTION PROCESS IS CONDUCTED IN PARTNERSHIP WITH THE FAMILY AND INCLUDES A CONSIDERATION OF THE CHILD’S BEHAVIOR IN HOME AND COMMUNITY SETTINGS.

At every tier of the Pyramid Model, practitioners and programs should consider what strategies might be used to welcome and support diverse families; how to create opportunities to learn from families; strategies for partnering with families to promote child outcomes; and providing the supports and services that families might need to promote their child’s skill development. In the remainder of the chapter, we will describe practices and strategies that are used across these elements at each tier of the Pyramid Model or in the implementation of PBIS with early childhood classrooms and programs.

Leadership Team: Family Engagement in Program Decision-making

A goal for family engagement in PBIS is for families to be involved as partners in the implementation of evidence-based practices that promote positive outcomes for children and in guiding the implementation supports that are involved in ensuring the fidelity of PBIS in the program. Programs should consider the value of including family members on the program leadership team and how including family members can strengthen the buy-in and support of families and communities for the implementation of PBIS. Moreover, family members can assist program personnel in understanding how to reach families, tailor outreach to the diverse communities of the program, and strengthen family engagement.

Family representatives on the leadership team can engage in a variety of activities that might greatly strengthen PBIS implementation. Below are a few ideas for leadership teams to consider. The family representatives can:

- provide leadership in developing and administering family surveys or focus groups to gather data on family engagement, family perspectives, or family needs;
• provide guidance to the leadership team in considering cultural and community perspectives of families, family needs, or community resources;

• provide guidance and leadership in designing family engagement activities related to PBIS implementation including initial family buy-in presentations, roll-out to families, family forums for gaining family perspectives, family discussion groups, or family workshops;

• assist in the development or review of materials and provide guidance on the use of family-friendly language or family information needs;

• co-lead family workshops on social emotional teaching strategies or related information;

• co-lead professional development presentations for program staff on family engagement and cultural responsiveness; and

• challenge the leadership team to consider family perspectives and strategies for fully engaging families in all tiers of support to children.

The inclusion of a family member or multiple family members on the leadership team creates a culture of respect, equity, inclusion, and partnerships for families that will strengthen the outcomes of PBIS efforts. Members of leadership teams that don’t currently include family members might initially express objections to how family members can be included and question the value or role of a family member on the team. Common objections that might be expressed include: family members are too busy with their own lives to actively participate, there are ethical issues related to examining data with family members present, family members might not be interested in this level of involvement within the program, or that one family member can’t be considered representative of all families in the program. If some leadership team members voice objections, it will be important to facilitate a discussion to address the objections and guide members to a point of agreement so that they can develop a thoughtful plan to address these concerns as they recruit family members to join the team. This plan might include the following elements:

• developing materials to use in the recruitment of family members to participate that clearly defines the mission of the leadership team, role of family members on the team, meeting obligations, and team expectations for potential family members;

• use recruitment materials that offer clear ideas of how the family member will be fully engaged in a leadership role in order to bring family perspectives to the leadership team;

• developing an active role for family members on the leadership team;

• creating a formal link between the leadership team’s family members to their family or community advisory board or creating a new organizational structure that links the family members to other families in the program (e.g., family committee);
• examining meeting procedures and ensuring that meetings are predictably scheduled, kept to the agreed duration, and use meeting procedures that promote the engagement of members who are not program staff; and

• addressing concerns about data review and confidentiality by asking that all leadership team members provide their explicit agreement to keep data review and leadership team meeting discussions confidential.

The leadership team might need to examine the culture or procedures of the team to ensure that the family members feel welcomed as members, have a voice in team processes, and are supported to provide valued perspectives. In examining how the leadership team operates and what changes might be made to support the active engagement of family members, consider the following recommendations:

• provide new leadership team members with an orientation as to how the leadership team functions, a review of data elements that will be examined in meetings, orientation to the current implementation plan, and access to shared files and resources;

• rotate roles of facilitation and note-taking among team members so that one member is not perceived as the leader and others as support;

• share minutes and implementation plan updates promptly after meetings and provide agendas to all team members prior to the monthly meeting;

• use team meeting strategies (e.g., round-robin discussion, group graphics, brainstorming processes) that allow for all perspectives to be heard during problem solving discussions;

• structure agendas so that team members independently report on their areas versus having a team leader guide all discussion items;

• use a formal consensus decision-making process so that everyone’s perspective have weight in the decision and the group works towards consensus;

• provide supports so that family members can fully participate as a leadership team member (e.g., assigning a mentor and providing reimbursement for transportation, child care, or time spent in meetings); and

• support participation by making sure materials are translated if needed for individual team members.

Universal Tier: Establishing Responsive Relationships and Supportive Environments

At the universal tier of the PBIS framework, programs should use practices and strategies that foster family engagement and meaningful partnerships with all families. Strategies that should be standard practice across early childhood classrooms include the following:

• conducting at least one home visit with a focus on learning more about the family, family structure, family activities, and goals for the child;
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- implementing a bi-directional family communication system that offers families a mechanism to share information about the family and child with the teacher and offers teachers a way to communicate with the family about the child’s progress and classroom activities;

- representing families in the classrooms by using photos of the families of children in the classroom;

- using images, artwork, and materials that reflect the diverse cultures of families in the program;

- establishing an open door policy so that families are able to visit the classroom whenever they desire; and

- offering structured and varied opportunities for families to contribute to the classroom by volunteering, helping prepare materials, assisting with events, etc.

A program-wide approach to family engagement in PBIS will assist classroom teachers to establish and maintain relationships with their families. Strategies that might be implemented program-wide include:

- using a variety of methods to regularly communicate with all families (e.g., web page, social media, notes home, family meetings, family bulletin board, texting, or newsletter);

- ensuring that communication is in the languages of families in the program; and

- providing a parent information table, information center (with computer, bulletin board, materials to check out), or bulletin board with information relevant to the PBIS effort and guiding young children’s social and emotional skill development.

The program should address how it will involve families in determining the PBIS program expectations and strategies for supporting families in addressing expectations at home and in the community. In addition, the program should provide information to families about the importance of social and emotional development, strategies that families might use to foster social and emotional skill development at home and in the community, and information on parenting and child guidance procedures. There are numerous materials that can be accessed on the web that are aligned with the Pyramid Model/PBIS and have been designed specifically to assist programs in sharing information with families (see www.challengingbehavior.org, http://csefel.vanderbilt.edu, http://www.ecmhc.org). As teams identify materials to use in the program, they should make sure that materials for families are linguistically and culturally appropriate for the families in the program. Programs might also consider subscribing to an application (e.g., https://readyrosie.com) that can be used by all families to access parenting information or offering information to families on web-based resources that might be helpful (e.g., http://www.joinvroom.org). Programs might also consider how they can foster family connections to each other so that families can support each other in their parenting roles. Programs might host parent training workshops, family fun days, community service fairs, and facilitate families in connecting with each other in order to organize social events on the week-
end (e.g., family gathering at the park, family meet-up at Saturday market).

In the program-wide PBIS effort, the leadership team will want to ensure all classroom staff understand the value of family engagement and are using family engagement strategies. It will also be important to include professional development opportunities to support classroom teachers in their ongoing family engagement work and use of culturally responsive practices to connect with all families. In addition, recent data on racial disproportionality in preschool suspensions and expulsions has raised concerns that the implicit biases of program personnel might be a factor that contributes to disparities in discipline actions (Meek & Gilliam, 2016; U.S. Department of Health and Human Services and U.S. Department of Education, 2014). In response to those concerns, it has been recommended that professional development on culturally responsive practices also include training on understanding and addressing implicit biases (U.S. Department of Health and Human Services and U.S. Department of Education, 2014).

An additional aspect that should be a core practice within the program is the universal use of a social emotional screening assessment (see a review of tools offered here http://challenging-behavior.fmhi.usf.edu/do/resources/documents/roadmap_1.pdf; Henderson & Strain, 2009). These tools are designed to be conducted in partnership with the family and will provide classroom teachers with critical information on the child’s developmental status and create a structured opportunity for the teacher and family members to have a focused conversation on the child’s strengths and needs related to social and emotional skills.

In addition to these activities that foster strong partnerships with families, the program should consider what strategies and activities will be used to inform families about the PBIS implementation plan. The following offers multiple ideas of strategies used by early education classrooms and programs to inform families about PBIS and program expectations.

**Informing and Promoting Family Engagement in PBIS**

1. Develop a brochure to describe the implementation of the PBIS and the Pyramid Model. Translate the brochure into home languages of families in your program. Send the brochure home, include it in the parent handbook, and review it with family members during parent/teacher conferences.

2. Create a family friendly storybook that explains PBIS and includes photos of the classroom, program, and children. Offer versions of the book in the languages of the families in the program.

3. Create parent posters of the expectations to send home — or fridge magnets, chore charts, etc. Use images that represent the diverse ethnicity and cultures of children in the program.

4. Make buttons that say “Ask me about PBIS.” Have staff wear the buttons and be ready to explain the new initiative to families.

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1. Fox, Binder, Hemmeter, Varland, & Barton, 2016
5. Adopt a symbol (e.g., bees, heart, hands) to illustrate the PBIS expectations or initiative. Send a symbol home and describe the initiative on the back. Send symbols home for a week and include a tip on the reverse side.

6. Take a photo of the child and include on a handout that explains the initiative. For example, the handout could be titled “Learning to Be a Friend” and include the child’s picture and some ways that will be worked on in preschool. At the bottom of the handout, you can develop a few sentences that describe PBIS. This could become a series to be used for each of your expectations. With the child’s photo, the parent will want to put it up at home.

7. Host an open house where parents are encouraged to drop in at any time that day or night and set up an activity where the child can introduce the parent to the expectations and PBIS. Make sure the parent also goes home with written material.

8. Post a short video on your website that describes PBIS in a family-friendly way. Include the home languages of your families in the video.

9. Host a family roll out event or playground party – The family roll out event could include community partners (e.g., community librarian discusses “be responsible” and families invited to sign up for library cards; soccer players discuss “be a team player”; firefighter discusses “be safe” and teach children to stop-drop-roll) or fun activities for families to do with their children related to your expectations.

10. Family meetings – Host small group family meetings in community sites that are gathering locations for families from diverse cultural groups. Connect with community leaders to co-host the meeting.

11. Create a newsletter and provide families with general parenting tips, ways to support social development, and ideas about teaching expectations at home.

12. Produce short podcasts for families to access. Podcasts could explain different aspects of your effort (e.g., expectations, importance of social skills training, emotional literacy, or teaching children to problem solve).

13. Provide families with children’s books that teach social skills. Put a bow on the book and a gift tag in your initiative’s symbol shape and list expectations.

14. Display expectations in your entryway and put up photos of the children and program staff engaging in expectations. Encourage families to submit pictures of families and children engaging in the expectations in the community and post them as well.

15. Encourage families to submit stories about their child using the expectations at home. They can write them down, call in to voice mail, or share them with a staff member. Put the stories in a jar and then have a drawing each month/week for a prize (e.g., children’s book, interactive toy, restaurant gift certificate). Collect the stories and create a newsletter to share with all or create a collage and post.

16. At every family/teacher conference, share information on the expectations and the progress of the child.

17. Have children make books about the skills they are learning to take home. Include photos.
tos of the child in the book so that it will be treasured by the family.

18. Send home tip sheets on how to promote the expectations at home in home routines. Make sure the tip sheets are in the languages of children in the program and include visuals that represent the racial and ethnic diversity of the program.

19. Send home personal notes that comment on the family strengths and efforts in supporting their child’s development (e.g., “Just wanted to share with you that I know you are working hard to teach Jamesha how to be a friend. Because of you, she is a great support to her peers”). Provide your teachers with a list of sample notes to make this easier for them to do.

20. Send home a brief video of the child demonstrating a skill or expectation. Add a few frames of the child speaking to their family in their native language about the skill/expectation (e.g., “At school, I am a team player, I help clean up”).

21. Provide families with “homework” assignments to practice social skills that align with an expectation with family members at home (e.g., “Be a friend. Give each person in your family 3 compliments”). A template for these assignments could be designed using the symbol (e.g., heart, hand, or bee) of your initiative.

22. Host a family night event where the families experience “A day in the life of a preschool child.” Each room introduces a major activity (large group, small group, centers, outdoor play). Families rotate. Each activity begins with an introduction to expectations and rules for the activity.

23. Host a monthly family activity — Calendars of events are given to families at beginning of the year. Events might include family breakfast brown bag (grab and go breakfast with an explanation about Pyramid Model and expectations in the bag); planting a butterfly garden (working together) at the center; and fire department presentation that illustrates “being safe.”

Family engagement in promoting and teaching program-wide expectations will also contribute greatly to the successful implementation of PBIS. Classroom teachers should be encouraged to use acknowledgement systems that include informing families about the child’s engagement in expectations. For example, teachers might take a photo of the child engaging in expectations, post the photos in the program, and then send home to the family. In another program, messages about child engagement in expectations are written on notes (e.g., “good news” post cards) that are publicly posted outside the classroom (on a poster of a mailbox that is labelled with “delivering safe and respectful behavior”) and then sent home at the end of the month. Teachers should also be encouraged to find ways to support families in using the expectations at home and develop rules for home and community that are a cultural fit for their family to link to expectations.

Tier 2: Partnering with Families to Promote Social and Emotional Competence

In the Pyramid Model, Tier 2 strategies include enhancing the curriculum with an
explicit focus on teaching social and emotional skills to all children in the classroom and providing more focused, intentional, and systematic instruction to children with social and emotional skill delays. There are a variety of published curricula that provide lessons and materials for teaching social and emotional skills to all children in the classroom (see http://challengingbehavior.fmhi.usf.edu/do/resources/documents/roadmap_2.pdf for a review; Powell & Dunlap, 2009). Across these curricula, the common skill areas that are a focus for instruction are self-regulation skills; understanding the emotions of self and others; managing strong emotions; social problem solving; and skills for initiating and maintaining social interactions with peers. As teachers put an emphasis on teaching these skill areas, families should be provided with information, materials, and support on how they might teach social and emotional skills at home. The Technical Assistance Center on Social Emotional Intervention offers the Back-Pack Connection series for classroom teachers to use with families (http://challengingbehavior.fmhi.usf.edu/communities/families.htm). These family friendly information sheets offer families an explanation about skills being taught in the classroom and how these skills can be taught and promoted at home and in the community.

When a Tier 2 instructional plan is developed to provide a child with intentional and systematic instruction, classroom teachers should engage family members in identifying the target skills that will be the focus of Tier 2 interventions and seek to develop strategies that might also be used by families to promote skill development within the home and community. For example, if the classroom teacher identifies a need to focus on teaching a child to engage in social problem solving with peers; the teacher might provide the family with materials and strategies to promote the use of the skill by the child with siblings and playmates. Families will need support in understanding the discrete skill that is a focus of instruction, how to identify learning opportunities in home and community activities, prompting procedures to use, and how to use reinforcement strategies. Teachers can use an activity skill matrix to help families identify routines that provide natural learning opportunities that might be used by the family for embedding instruction (Squires & Bricker, 2007). When families and teachers work together in this manner to deliver multiple learning opportunities for a targeted skill across routines and activities, the likelihood that the child will learn and generalize the skill is greatly enhanced.

In addition to the delivery of Tier 2 interventions to an individual child, the program might include parent education groups or manualized interventions to assist families who have concerns about their child’s social emotional skill development or behavior challenges. The Center on the Social and Emotional Foundations for Early Learning has developed a six session parent group curriculum that is aligned with PBIS and has been used successfully by many programs to support families in learning skill promotion and behavior support strategies (see http://csefel.vanderbilt.edu/resources/training_parent.html to access). Other parent education programs that are designed for use with young
children include First Steps Next (Walker et al., 2015) that offers both a classroom intervention and home-based component or Incredible Years (Webster-Stratton, 2001, 2004) that offers a classroom curriculum and parent education groups.

**Tier 3: Teaming to Address Challenging Behavior**

When children are in need of tier 3 supports, a partnership with families in the design of intervention is critically important. Families, as the one constant in a child’s life, have valuable information to share about the child and the child’s behavior and are essential change agents for behavior intervention (Dunlap, Wilson, Strain, & Lee, 2013). In PBIS, the steps for implementing a functional assessment and the development of a behavior support plan should be outlined by the program leadership team and include how families will be engaged in every step of the process. Descriptions of the program’s child guidance and discipline policies that are shared with families should clearly state the program’s intention to work in partnership with families. In addition, programs have found that it is valuable to provide all families with awareness information about the process that will be used to develop an individualized behavior support plan (see https://www.ecmhc.org/facilitating_toolkit.html p. 7 and p. 55 for samples).

We recommend programs explore the following resources developed specifically for conducting the functional assessment and behavior support planning process with young children and consider how these resources might strengthen their Tier 3 approach and strategies for engaging families. These are resources that have been thoughtfully designed to guide behavior support teams as they develop plans for young children in partnership with families.

**Resources for the Individualized Behavior Support Process**

- **Prevent, Teach, Reinforce for Young Children** (Dunlap, Wilson, Strain, & Lee, 2013) – Manual that guides the Individualized Positive Behavior Support Process including forms to use for functional behavioral assessment, identification of intervention elements, behavior intervention plan design, and progress monitoring.

- **Prevent, Teach, Reinforce for Families** (Dunlap, Strain, Lee, Joseph, Vatland, & Fox, 2016) – Manual to guide the implementation of the individualized positive behavior support process with families within home and community settings. The manual includes all forms needed for functional behavioral assessment and behavior support planning and includes guidance on coaching families for plan implementation.

- **Facilitating Individualized Interventions to Address Challenging Behavior** (Blair & Fox, 2011) – A tool-kit for behavior support facilitators to use in guiding functional behavioral assessment and individualized behavior support planning in early childhood settings. Includes detailed materials (e.g., scripts for phone calls, handouts for family members) for establishing and working in partnership with families and teachers in the process. Available for download at https://www.ecmhc.org/facilitating_toolkit.html.
For some families, engagement in formal meetings at school might be difficult. This might be due to work schedules, stressful life circumstances, or lack of a strong relationship with the school. In these circumstances, the program might consider a home visit or meeting in a community location preferred by the family (e.g., community center, church) to plan how the family can be involved in the development and implementation of the behavior support plan. For families who have significant challenges (e.g., homeless, mental health issues, family stress) that affects their involvement, the program should consider teaming with social service agencies to address those core needs while continuing to communicate about the child’s progress and desire to work in partnership with the family. Common barriers that may inhibit family engagement in meetings at school include the time meetings are held, the need for child care, language difficulties, past experiences with school and families feeling unsure of what they have to contribute to the meeting. Programs should be flexible about the scheduling of meetings or location of meetings, consider providing child care for the family to attend a meeting, use translators, and make sure that the invitation to meet is personal and welcoming.

When families participate in the Tier 3 functional assessment and behavior support planning process, it will be extremely important that the meetings are conducted using effective collaborative teaming strategies and the family is welcomed as an expert on their child and an invested team member. Team members should be cautious about how they discuss the problem behavior and communicate with families in a manner that does not place blame or cause the family to feel responsible for the child’s challenging behavior. The family role on the behavior support team will vary depending on the family’s comfort with the process and preferences and how they are treated by other team members. However, the behavior support team is encouraged to include the family in all of the processes. For example, family members can participate as respondents in functional assessment interviews, record observations of the child’s behavior at home and in the community, contribute to brainstorming plan elements that are linked to hypotheses, collect progress monitoring data, and attend meetings related to plan implementation and progress. Ideally, when a Tier 3 individualized behavior support plan is developed with family members as part of the team, a plan will be developed for routines and activities at school, in the community and at home and the family members will be willing to implement plan strategies and report on the child’s progress.

Summary

The use of robust family engagement strategies is an expectation for early childhood classrooms. When implementing PBIS, the use of family engagement strategies can greatly strengthen the impact of the intervention approach. This chapter has presented a few ideas to strengthen family engagement for program leadership teams to consider. We find that as program leaders begin to implement family engagement strategies, they are enriched and informed by the partnership with families and their family engagement efforts are strengthened.
REFERENCES


CHAPTER SIX


Schools offer a natural setting to address mental health concerns and build positive social, emotional, and behavioral skills for all students. Family engagement and school-family partnerships are essential components of a full continuum of mental health supports for children and adolescents in schools (Brandt et al., 2014). The involvement and collaboration of families is critical not only for youth at-risk for developing or already displaying mental health concerns, but for every student in a school building. When families are engaged in school and in addressing the needs of the whole child (academic, social, emotional, behavioral functioning), students are more successful and social-emotional skillsets are more likely to generalize from school to the home and community (Epstein, 2011). Although the school mental health field is increasingly describing the value of adopting the multi-tiered systems of support (MTSS) framework, with teamed and data-driven decision making informing a seamless continuum of care for all students in a school building, the literature is quite limited related to effective strategies for engaging families at each tier of support. After reviewing the overarching literature on family engagement and school mental health, we present specific strategies and case examples of how families of elementary and middle school students can best be engaged within a MTSS to promote student mental health and wellness.

Family Engagement

Family leaders and other key stakeholders of the National Community of Practice on Collaborative School Behavioral Health defined family engagement as “an active and ongoing
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process that facilitates opportunities for all family members to meaningfully participate and contribute in all decision making for their children, and in meaningful involvement with specific programs and with each other” (Fette et al., 2009, p. 8). “Family” refers to connections that are biological and non-biological, representing the natural supports within a student’s life. Given the goal of school mental health ideally reaching all students within a school building, the engagement of families in school mental health promotion should target all students and families, not just those who are engaged in individualized treatment or those identified as being at high-risk.

Engagement at the student as defined in the mental health literature is typically measured through one of three domains: attendance (i.e., presence at agreed-upon therapeutic contact), adherence (i.e., active demonstration of observable behaviors such as session participation and homework completion), and cognitive preparation (i.e., attitudes, expectations, motivation for change, and other cognitive constructs that are thought to impact behavior change; Becker, Lee, et al., 2015). However, engagement at the family level can be difficult to gauge because each family member influences the engagement dynamic and may be differentially engaged at any point in the treatment process. Attendance (or a lack thereof - attrition) is the most frequently used measure of engagement, but is often a poor indicator of actual engagement (Becker, Buckingham, Rith-Najarian, & Kline, 2015). In fact, it could be easy to overestimate someone’s level of engagement based on factors such as attending a session, whereas clarity of goals and positive expectancies may more accurately reflect engagement (Becker, Buckingham, & Brandt, 2015; Becker, Lee, et al., 2015), with a substantial body of literature linking positive expectancies to success or treatment engagement (Becker, Buckingham, Rith-Najarian, et al., 2015).

School Mental Health

Providing mental health services to families in the school setting affords multiple advantages over treatment in other community mental health settings (Brandt et al., 2014; Weist, Lever, Bradshaw, & Owens, 2014). One definitive advantage of serving mental health needs in schools is access to care. When services are provided in the school, many of the barriers to accessing mental health care are reduced or eliminated, including difficulty with transportation in getting to a community-based clinic, stigma associated with seeking specialty mental health services, and lack of trust in community providers. For example, students and families lose less time from school and work when a provider is within the school, and students typically follow through more readily with school-based services than those in other community settings (Catron, Harris, & Weiss, 1998), with the modal show rates in a community clinic being only one session (McKay, Lynn, & Bannon, 2005). School-based providers, by virtue of being part of a natural setting and having more flexibility to work across a MTSS, have the ability to provide a full continuum of promotion and preventive care, with opportunities to identify and address concerns early and as part of the larger school environment. Schools offer the benefit of
allowing generalizability of skills across school and home contexts, particularly when providers develop relationships with “natural” supports in the school building, such as teachers and other school staff and partner with the family on helping the student to develop needed social-emotional-behavioral skills. Given the potential for integrating mental health into the larger school milieu and educational context, schools may offer a less stigmatizing environment in which to learn skills and strategies related to promoting positive mental health and addressing mental health concerns.

Although the provision of mental health services in schools can reduce some barriers to care, there are still factors that inhibit family engagement in mental health treatment within the school setting. Of youth who are referred to a school mental health care provider, approximately 40% missed their first appointment (Guo, Kataoka, Bear, & Lau, 2014). This rate is comparable to attendance in community mental health settings (Brandt et al., 2014; Kim et al., 2015). One treatment barrier especially unique to school settings is a concern about a student’s privacy related to receiving mental health treatment. Awareness of a student receiving services could result in the student being teased, being perceived as weak, or being the subject of gossip due to stigma associated with receiving mental health care services (Brandt et al., 2014; Lindsey, Chambers, Pohle, Beall, & Lucksted, 2013). Lindsey et al. (2013) found this concern about the stigma of receiving mental health services was particularly prevalent among middle school students. Apprehension about seeking out mental health services in school can extend to families of students in care, who may be concerned that their children will experience negative reactions from other students and staff. In addition, some caregivers may be cautious about attending therapy sessions within the school setting related to their receiving mostly negative feedback about their children from school professionals and/or their own historical challenges with school performance. Further, high staff turn-over and limited communication between school professionals and families can make building relationships and coordinating care with families of students difficult (Weist et al., 2014).

Multi-Tiered Systems of Support for Family Engagement

School mental health systems have adopted a MTSS framework that aligns with other tiered systems within the school system (e.g., Response to Intervention, Positive Behavioral Interventions and Supports). MTSS is a framework for service delivery, grounded in the public health framework, in which services and supports are provided at three tiers: universal supports (Tier 1), targeted supports (Tier 2), and intensive supports (Tier 3). Universal supports address all students in a school, with the main aim of preventing mental health problems and promoting overall wellness. Targeted supports address all students in a school, with the main aim of preventing mental health problems and promoting overall wellness. Targeted supports are provided for identified groups of students or families of students at risk for a mental health problem and focus on preventing more serious mental health issues from developing. Intensive
supports are for individual students and families who are currently experiencing a mental health problem and require more intensive, individualized intervention and support.

Three-tiered systems of mental and behavioral health intervention typically focus on the direct services that are provided to students and families (e.g., social-emotional learning programs, prevention groups, individual therapy). However, this framework can also serve as a conceptual guide for how to coordinate efforts to increase family engagement. That is, schools can engage families in mental health services at all three tiers, beginning from a general, whole-school level that emphasizes initiating relationships and awareness about services to an intensive approach that focuses on building teams, clarifying role expectations, and having a specific plan for integration of mental health into a school setting. It is worth noting that practices within each tier supplement the other tiers and do not supplant interventions at any other tier. In the following sections, each level of support will be discussed within the context of engaging families in school-based services through a developmental lens, with a particular focus on elementary and middle school students. Many school mental health family engagement strategies recommended below are informed by a comprehensive literature review and series of focus groups on this topic conducted by Becker, Buckingham, and Brandt (2015).

**Tier 1: Universal Supports**

Tier 1 (universal) mental health supports are generally focused on promoting wellness and positive life skills among all students in a school, with a primary aim of preventing mental health problems from developing. Interventions at this level often include general school-wide education and awareness promotion activities, including methods that foster a positive school climate around mental well-being and use of mental health services. Examples of common universal school mental and behavioral health interventions include social-emotional learning curricula, school-wide positive behavioral expectations and reinforcement systems, and universal mental health screening.

**Goals of family engagement at Tier 1.**
Family engagement in school mental health is rarely discussed at the Tier 1 level, with most family engagement-focused research and intervention development geared towards targeted or intensive levels of service delivery. However, this is a significant gap in our understanding of engagement, as family engagement at the school-wide level is very important for promoting student and family wellness, reducing mental health stigma, and increasing access to needed services. Some key goals of family engagement at Tier 1 include: building collaborative and positive relationships between both schools and families and amongst families, decreasing stigma, increasing awareness about mental health and wellness, and making families aware of available mental health services and the process for accessing services. When these goals are accomplished at the universal level it is likely that help-seeking behaviors and mental health promoting behaviors will increase. Particularly in the context of elementary and middle school students, who are
so directly impacted by the behaviors, beliefs and decisions of their family members, it is important that all students’ families are engaged.

Families are also critical to the selection, implementation, and evaluation of resources and programs to support students and families at Tier 1. As schools decide on universal curricula, for example, families can help determine the relevance of content and target outcomes for their students. Family voice can help schools to be prudent in their decisions about program selection by prioritizing those that are most aligned with stakeholders’ priorities for goals, procedures, and outcomes, and that can be best reinforced at home as well as in the school. Families can also support the monitoring of fidelity and impact of selected interventions, in order to ensure that programs are implemented as designed. Families and schools may wish to use the Evidence-Based Practice Implementation Framework Self-Assessment Tool (Sugai & Stephan, 2013) to support implementation of Tier 1 (and Tiers 2 and 3) interventions. The tool encourages input from all stakeholders, including families, guiding a team through questions when considering if and how to implement evidence-based mental health practices in schools:

1. Are need and intended outcome specified?
2. Is the most appropriate evidence-based practice selected?
3. Is practice adaptable to local context and culture?
4. Is support for local implementation developed?
5. Is system level continuous progress monitoring and planning in place?

There are many individuals that should be involved in the process of engaging students and families at Tier 1. The most intensive Tier 1 interventions will include the entire staff body, including administrators, student support staff, school nurses, teachers, school custodians, bus drivers, hall monitors, and cafeteria workers (see Bear, Finer, Guo, & Lau, 2014), as well as families and youths. Although it is preferable for all school staff to be involved in and support the implementation of Tier 1 interventions, Tier 1 interventions can be successfully implemented with fewer supports (see Kim et al., 2014). Yet, programs with greater support may produce more benefit for students and may more effectively promote mental health awareness overall (Bear et al., 2014).

**Family engagement strategies at Tier 1.**

There are a range of goals pertaining to family engagement at Tier 1. For instance, schools may desire to build collaborative and positive relationships between both schools and families and among families. Goals may also be more specific to student mental health, including increasing awareness about mental health and wellness, decreasing stigma about mental illness, and encouraging help seeking behaviors among students and families. To meet these goals, a variety of specific strategies and programs can be implemented. Some of these strategies include: accessibility promotion, family mental health promotion workshops, school fairs and after-school events, student-led initiatives, and school-wide inclusion efforts.

**Accessibility promotion.** Accessibility promotion refers to the quick provision of resources
at a specific location and time that is convenient for families (Becker, Buckingham, & Brandt, 2015), and allows providers to promote mental health awareness with families they might not otherwise reach. In general, schools should make information about school mental health services as accessible as possible. For example, information about school mental health services should be available in multiple formats, languages, and locations. This may include having brochures, posters, and school website pages providing the names of the school counselor and other mental health professionals in the building, services offered, and the process for accessing services (e.g., referral process). All school affiliated staff should also understand the services offered and referral processes, so family members or students can reach out to anyone they feel comfortable with in the school building to learn more about available mental health services and how they can be accessed. Additionally, efforts to promote mental health awareness should be offered at times convenient for families. Specifically, presentations, workshops, and informational booths on school mental health topics and services should be offered in tandem with other activities at which caregivers might be present, including: parent-teacher conferences, Parent Teachers Association (PTA) meetings, back to school night, or at school drop-off or pick-up. Accessibility promotion can be integrated into a variety of school activities and events, with the goal of helping families gain greater awareness of available mental health resources and services. Broadly sharing information about wellness and mental health resources and services as part of addressing the needs of a whole child will likely help to increase positive social-emotional and coping skills while also normalizing help-seeking behaviors and decreasing the stigma around mental health care.

**Mental health promotion workshops.** Family-focused workshops on mental health promotion topics can also be used as a strategy for increasing family engagement at Tier 1. These workshops can provide psychoeducation to families about any number of relevant topics, including definitions of mental health and mental health services, family habits and routines that promote healthy child development, promoting positive coping strategies, conflict resolution skills, and positive parenting practices. Workshop topics should be selected based on family recommendations, when possible, to demonstrate the school’s interest and commitment to family-school collaboration, as well as to increase attendance, and when possible should include parents in the planning and delivery of the presentations. When planning family workshops and trainings, it is important to take family schedules into account; programs should be scheduled both during and outside of school hours and offer childcare services to maximize the number of families that can attend. Workshop leaders can utilize a number of creative methods to enhance family engagement during the workshops, such as small group discussion, arts and crafts activities, and educational games.

Family workshops serve multiple purposes, including establishing community, normalizing mental health and decreasing stigma, and pro-
moting help-seeking and generalization of skills to the home and community setting. Many evidence-based social-emotional learning curricula for elementary and middle school students such as Promoting Alternative Thinking Strategies (PATHS; www.pathstraining.com) and Second Step (www.secondstep.org) have family guides, programs, and learning components enabling families to learn about the curriculum and subsequently reinforce their children when they demonstrate these skills at home. Multi-family workshops promote bonds between schools and families, but also among participating family members. Such an arrangement fosters a sense of community and trust in the school, and may lead to increased engagement in other school-based activities (e.g., McDonald et al., 2006). There is evidence that increased family engagement at a universal level may enhance awareness of mental health, reduce stigma about mental illness and help-seeking, and increase wellness promoting practices (Pinfold et al., 2003).

**School fairs and after school events.** In addition to workshops, schools can also integrate mental health promotion and awareness activities related to basic mental health knowledge and of school mental health services into larger school fairs or after-school events. Although parent workshops and trainings allow families to gain more advanced knowledge and practice skills related to mental health identification, referral, promotion, prevention and intervention, many families are logistically unable or uninterested in attending these longer events. It is important to integrate mental health education and wellness promotion activities into school events that draw a larger and more diverse crowd, as a means of imparting knowledge and skills, as well as to help reduce stigma related to mental health.

Schools and community partners can also collaborate to host a community health fair or family outreach day/night/weekend, during which information about mental health services and student wellness can be disseminated (Dillon & Sternas, 1997). Tours of school-based health centers and mental health programs can be provided during these events, with a particular emphasis on introducing families to members of the school mental health team, physically touring therapeutic spaces, and providing a brief overview of what services are provided and how parents are an integral part of the mental health team. Including parents in school-based activities can facilitate collaborative and positive relationships between schools and families, as well as among families, and ensures that families in attendance are aware of both the mental health services available and the process for accessing these services.

**Student-led initiatives.** Youth voice and leadership is also instrumental in further engaging families in school mental health. For example, research on student-led conferences with parents and teachers suggests that when students take a leadership role, parents are more likely to attend and to feel positive about their child (Tuinstra & Hiatt-Michael, 2004). With regard to mental health awareness, youth can be a part of the mental health education team and can participate in a variety of ways such as: creating a marketing campaign with posters.
and visuals in the school, participating in creative writing activities, developing and presenting morning announcements related to mental health, and/or creating skits or plays about wellness-related topics and school services. It is a best practice in the teaming literature for both students and families to be included in school teams (Markle, Splet, Maras, & Weston, 2014); this should extend to any school teams focused on the topics of student wellness and mental health. Student involvement in helping to promote knowledge and skill development related to positive mental health can help to normalize mental health, reducing stigma, while also providing valuable resources to family members and school and community partners.

**Inclusion efforts.** For any of the above strategies and programs for increasing family engagement at Tier 1 to be effective, steps must be taken to include all families. It is critical for educators to understand their student and family population and unique religious and cultural perspectives related to how mental health is viewed. Some common barriers to family engagement include speaking a language other than English, having a disability, and/or living in poverty. Bilingual liaisons should be available, as needed, to effectively communicate with all members of a family, and handouts/posters/informational materials should reflect the language(s) and culture of students and families being served. Schools should also use or modify interventions to ensure responsivity to the needs of all students and families, including developmental, cultural, and linguistic considerations.

When diverse families are included in mental health promotion efforts—from planning to implementation—they can help identify the topics, content, and strategies that will resonate with different families. Inclusion of family partners that reflect the entire student and family population of a school can help address mental health stigma and enhance access to services, while promoting positive coping, conflict resolution and social-emotional-behavioral skills unique to different cultures and communities. When families are engaged at the universal level and mental health is viewed as an essential part of the larger school climate and as integral to overall student success, school teams will likely observe an increase in families’ help-seeking behaviors and engagement in mental health promoting behaviors.

**Case example: Family engagement at Tier 1.** The Gateway to Success Program (Gateway) was developed to increase access to quality mental health services for underserved families by connecting mental health resources in the community (e.g., local mental health care providers, university partners) and schools (Bear et al., 2014). In particular, the program focuses on using referral mechanisms and training to increase identification of mental health concerns and coordination of care to engage families and reduce racial disparities in mental health services. Gateway was developed in Alhambra County, California, which has a predominately Asian and Latino American populations. All schools within the Alhambra School District are Title 1
eligible, with up to one-third of students classified as English Learners.

At Tier 1, the Gateway program focuses on developing a quality referral system that increases identification of students in need of mental health care and initiates the referral process. Training is provided to district-wide staff on an annual basis on the topics of identifying student mental health needs and the referral process, how to document concerns about a student, and how to assess and respond to a student threat (for more information see Bear et al., 2014). In the 2009-2010 school year the Gateway program was associated with an increase in engagement in mental health services, with 1,413 referrals for mental health services and 71% of referred students being connected to mental health care (Bear et al., 2014). Thus, by ensuring that all staff in every school building has knowledge of mental health concerns in youth, the referral process for accessing services, and appropriate ways to respond to crises, the Gateway program broadens the reach of school mental health services and intentionally engages families that might not have otherwise received services.

**Tier 2: Targeted Supports**

At Tier 2, targeted supports are provided for carefully identified groups of students or families at high risk for developing a mental health problem or concern, or those showing early signs of problems. Ideally, within this level of support, problems will be identified early and interventions will be preventative, with an emphasis on promoting positive youth development. Tier 2 interventions typically include evidence-based prevention groups, social skills groups, and group contingency management programs. Tier 2 interventions can also include consultation with a specific teacher or group of teachers that have identified a mental or behavioral health need for a group, classroom, or grade level of students.

**Goals of family engagement at Tier 2.** At Tier 2, family engagement techniques primarily focus on psychoeducation and provision of resources to families that the school has identified as being at-risk or showing early signs of a mental or behavioral health problem according to screening measures of student emotional/behavioral functioning (Becker, Buckingham, & Brandt, 2015). It is important to establish strong family engagement at this level, as research suggests that group intervention programs for children are more successful when there is parental engagement and participation (see Barrett, Dadds, & Rapee, 1996). Some of the main goals of family engagement at Tier 2 include: building positive relationships between families and teachers, mental health providers, and other families; increasing awareness about mental health and effective strategies for preventing increased difficulties; developing a plan for monitoring youth symptoms or risk; and decreasing stigma associated with and increasing trust in school mental health services. When positive family engagement is accomplished at Tier 2, it is more likely that students at-risk for mental health problems will receive and benefit from the supports, preventing escalation in mental health symptomatology and related impairment in functioning.
Many individuals within a school can be a critical partner in the engagement of youth and families at Tier 2. School professionals, including principals, teachers, counselors and school nurses, are well-suited to help students and families to become aware of and learn about the importance of and how to access mental health prevention resources and programs. Additionally, mental health practitioners working as community partners within schools may work to engage families in Tier 2 interventions. For example, the Families and Schools Together (FAST; www.familiesandschools.org) intervention, discussed in more detail as a case example below, is led by a team that includes at least one school partner (e.g., a teacher) and at least one community partner who is knowledgeable about mental health and local resources (e.g., therapist), as well as a parent partner. Family-school-community partnerships are an essential component within comprehensive school mental health systems and are critical to ultimate buy-in and impact on student wellbeing and academic-social-emotional-behavioral functioning.

**Family engagement strategies at Tier 2.** The primary goals of family engagement include building positive relationships; increasing awareness about mental health and effective intervention; developing a plan for monitoring youth symptoms or risk; and decreasing stigma and increasing trust in school mental health services. Specific Tier 2 strategies to achieve these goals include collaborating with families to determine their need and desire for services; offering a menu of Tier 2 service options; conducting assessment and data-based feedback; connecting families to relevant resources; and promoting family-to-family support. Many of these strategies are utilized in exemplary Tier 2 interventions, including modified Check-In/Check-Out (Fosco et al., 2014), the Family Check-Up (Stormshak et al., 2011), and modified First Step to Success (Frey et al., 2013).

**Collaborate with families to determine need/desire for services.** Research suggests that the use of collaborative therapeutic styles is an effective strategy for establishing and maintaining engagement with families involved in school-based services (McDaniel, Schiele, Taylor, Haak, & Weist, 2014). In fact, because caregivers play such a vital role in the change process over the course of treatment, particularly for children in elementary and middle school, it is essential for the provider to recognize the expertise of the caregiver(s) and the child, and refrain from assuming the “expert” role. Instead, providers should approach families and caregivers as partners in promoting wellness and addressing mental health concerns (Hoagwood et al., 2010; McDaniel et al., 2014). Providers can help promote genuine partnerships with families by learning directly from families about their interest in services, concerns, previous experiences with mental health systems (including successes and challenges and experiences with stigma and prejudice). This collaborative approach helps to build a positive relationship between mental health providers and families and increases family and student trust in school mental health providers.

**Offer menu of services (choices).** It is also important to consider the importance of pro-
viding choices in treatment. Families are more likely to be engaged in services if they feel they can help inform and have a choice in the treatment service provided and have the power to make decisions with and on behalf of their child (He, Gewirtz, Lee, & August, 2016). Indeed, promoting client autonomy and choice is a key principle of motivational interviewing, an evidence-based approach to increase motivation to change (Frey et al., 2013). One way to promote client autonomy is to offer a menu of appropriate services (e.g., group therapy, behavior report card system, parent training sessions), allowing families to choose the option(s) that best fits the needs of the student and family. When families are empowered to choose the services that fit their needs, they are more likely to build a positive relationship with mental health providers and to experience increased trust in school mental health services.

Assessment and data-based feedback. Another strategy for engaging families in Tier 2 interventions is to share screening or behavioral health data about the youth in the context of risk and with the aim of working together to decide what strategies and resources, if any, may help the youth to be successful. For example, a provider might give feedback to a family about questionnaires that a child, caregiver, teacher, or the provider completed. The provider can share information about how the social, emotional, and/or behavioral functioning of their child compares to other students of the same age and gender. This discussion provides an opportunity for the family and provider to discuss areas of concern, consider other factors impacting the concerns, and explore what treatment and resource options are available and appropriate for the student and family (Becker, Buckingham, & Brandt, 2015).

A similar engagement strategy is to share ongoing progress monitoring data with families. For example, the Tier 2 intervention Check-in Check-Out has been adapted in the scaled-up version of the Ecological Approach to Family Intervention and Treatment (EcoFit) to include caregiver involvement through a family incentive plan (Fosco et al., 2014). The original Check-In Check-Out system provides students with feedback on their behavioral goals throughout the day. The EcoFit family incentive plan integrates caregiver involvement into this intervention and provides additional family supports, including support with structuring and supervision of homework and attendance (Fosco et al., 2014). Programs like EcoFIT demonstrate how progress monitoring data can be used to engage families in the early stages of school-based behavioral interventions. Ongoing data-based assessment and monitoring can help document youth symptoms and risk over time and guide the selection of appropriate interventions.

Connecting families to relevant resources. Tier 2 interventions for students can encourage parent engagement by providing resources for families, as well. For example, for students participating in evidence-based prevention groups, meetings with parents can be held to demonstrate the skills the students are learning and information sheets can be sent home to families to tell them what the child learned in session each week. Additionally, students can be asked
to complete between-session practice activities ("homework") that involve their families, as practice is an effective method for increasing the adherence domain of engagement in treatment (Becker, Buckingham, & Brandt, 2015). Practice assignments also allow youth to share what they are learning in group with their parents, helping to increase mental health awareness in family members. Furthermore, clinicians can call parents to let them know how their child is doing in group and what they have learned and applied, with a focus on discussing strengths and instilling hope. School mental health providers can also implement parent-specific trainings and groups, where parents come together to learn about the intervention curriculum and strategies for supporting their youth. A number of evidence-based school interventions at Tier 2 include parent components, such as Cognitive Behavioral Intervention for Trauma in Schools (CBITS; www.cbitsprogram.org), Incredible Years (http://incredibleyears.com/), and Coping Power (www.copingpower.com). When families are included in, and provided resources related to Tier 2 interventions, they are more likely to develop positive relationships with mental health providers and trust in school mental health services. Connecting families to relevant resources is also likely to increase family’s awareness about mental health and effective strategies for promoting mental health.

**Promoting family-to-family support.** Peer-to-peer support has been found to be an effective strategy in a broad spectrum of mental and behavioral health contexts (Repper & Carter, 2011). Families are more likely to be engaged in treatment when they also have the opportunity to support and learn from one another, particularly from families who have been through similar situations and successfully navigated them. For example, families might provide each other with strategies to use for managing children's behavior or ways to access local resources. In some cases, such as the FASTWORKS program discussed as a case example below, family-to-family support activities can be led by a parent, empowering parents as community leaders (McDonald, FitzRoy, Fuchs, Fooken & Klasen, 2012). Opportunities for family-to-family relationship building encourages family ownership over these activities, can increase the relevancy of the activities, and helps families learn advocacy strategies (e.g., Trainor, 2010). When families are engaged through peer-to-peer support, they are more likely to build positive relationships with other families. In turn, the informational support that families receive from these interactions may help them develop increased awareness about mental health and effective strategies for addressing concerns in their children.

**Case Example: Family engagement at Tier 2.** Families and Schools Together (FAST) is a multifamily group intervention program that has been implemented in more than 800 schools (McDonald & Frey, 1999). FAST targets families of children who are identified as at-risk for academic and social programs. These families are invited to participate in eight weekly meetings with other families whose children have also been identified as being at-risk. Approximately 8-10 families participate in one FAST group,
which is led by a team including at least one school partner, community partner, and parent partner (who has graduated from the FAST program). The meetings include structured group activities, a family meal, parent mutual-support time, and parent-child play time. FAST utilizes a number of engagement strategies, including taking a collaborative approach and promoting family-to-family support (McDonald et al., 2012). After the eight team-led sessions, the group shifts to monthly sessions led by parent graduates for two years (called FASTWORKS), which rely even more heavily on family-to-family support and empowerment.

A family might get involved with FAST when school staff observes that a child is having difficulty with learning and behavior at school, and the parent is open to the idea of the child receiving additional supports. The initial meeting to invite the family to participate in FAST would take a collaborative approach and allow parents opportunities to voice any concerns. Each FAST session includes time dedicated for parents to give and receive support related to their children and life experiences (Hernandez, 2000).

**Tier 3: Intensive Supports**

Tier 3 intensive supports are for individual families of youth who are currently experiencing a mental health problem. At this level of support, the provider is directly involved in treatment, and interventions are individualized to meet that specific child and family’s needs. Tier 3 interventions often include school-based individual and group therapy, family therapy, parent training, and teacher consultation related to the target child. These are the most intensive of interventions and typically require the greatest engagement from families to be effective.

**Goals of family engagement at Tier 3.**

Much of the research literature on family engagement in child mental health treatment focuses on this Tier 3 level of support. This body of literature shows that when steps are taken to actively engaging families in the treatment process, this results in better attendance and follow-through with mental health services (Lindsey, et al., 2013). This is especially important for families with children who have the most serious presenting problems, who tend to be the least likely to return for services after the initial session (McKay & Bannon, 2004). By engaging families at Tier 3, school mental health systems will be working towards the goals of: building positive working relationships among members of the treatment team (youth, family, teachers, providers, administrators); developing a plan and delivering effective treatments; promoting participation in services; and increasing trust in the school mental health system. However, at this individualized level of support, barriers to engagement will differ for each student and family, and engagement strategies must be adapted to the needs of each unique family.

The primary individuals who will be involved in the process of engaging families in school mental health services at Tier 3 will be the mental health providers and treatment team members. Naturally, there are a number of strategies individual providers and the school mental health treatment team can incorporate to engage families, beginning with the first phone call and
intake session, and extending throughout the course of treatment. Additionally, depending on the types of interventions used, teachers, school staff, other parents and students, and community partners can also be involved in engagement processes. For example, teachers can help reinforce intervention approaches with families and students, whereas community partners can provide additional needed services (e.g., psychotropic medications). Students and families who receive school mental health services can both indirectly and directly engage other students and families in treatment both through modeling their receipt of care and by talking about positive treatment experiences with others.

**Family engagement strategies at Tier 3.** At Tier 3, it is critical that engagement strategies are individualized to the needs and experiences of each student and family. Barriers to treatment can arise at any point throughout the course of treatment, and treatment providers must recognize and address these problems so that families stay engaged and feel supported throughout the treatment process. Certain engagement practices will be more relevant at the outset of treatment while others should be used as needed throughout the treatment process (Becker, Buckingham, & Brandt, 2015). Family engagement strategies discussed for Tiers 1 and 2 can also be beneficial in Tier 3, including strategies for collaborating with families to determine the need/desire for services, offering a menu of service choices, and being flexible and working to reduce barriers to receiving services. Psychoeducation and family peer support remain important interventions components at Tier 3. In addition to these strategies, family engagement can be further encouraged at Tier 3 through the use of: assessing and addressing individual barriers to treatment, effective rapport building, providing psychoeducation, using motivational strategies, administering assessments and providing data-based feedback, and focusing on culturally-specific and relevant practices (Becker, Buckingham, & Brandt, 2015).

**Addressing barriers.** To effectively engage families in treatment and ensure families return for a follow-up session, providers should assess, explore, discuss and problem-solve potential barriers to obtaining ongoing services at the beginning of treatment. Providers should engage in open discussion with family members about potential barriers to treatment engagement. This assessment can be an unstructured open conversation or a more formal semi-structured questionnaire (see Becker, Buckingham, & Brandt, 2015 for an example of a semi-structured questionnaire). Regardless of the assessment method used, this process should allow for the identification of family-specific barriers to attendance and completion of homework/family activities, as well as beliefs and attitudes about mental health services that can affect engagement. Such assessment can take place at intake as well as at multiple time points throughout the course of treatment (Becker, Buckingham, & Brandt, 2015). Additionally, it is imperative that providers not only identify barriers, but also engage families in active problem-solving around how to address any barriers to engagement, such as working together to identify specific bus schedules to address transportation challenges.
Providers are more likely to maintain engagement throughout the course of treatment if they begin the problem-solving process early, remain flexible, and are ready to adapt the treatment process to meet each family’s needs as barriers and needs shift (Hoagwood et al., 2010). Indeed, when providers effectively identified concrete and practical issues related to treatment engagement that could be addressed immediately, families were more likely to continue with treatment (McKay, Nudelman, McCadam, & Gonzales, 1996). Specific methods that providers can use to address common barriers to engagement include: offering to have family members participate in sessions on the telephone, having home visits for some sessions, and incorporating family members who are unable to attend sessions into homework/home skills practice (Becker, Buckingham, & Brandt, 2015).

**Rapport building.** Throughout the course of treatment, providers who build and maintain rapport with all family members and who listen without judgment are more likely to successfully engage families in treatment (Becker, Buckingham, & Brandt, 2015; Hoagwood et al., 2010). General rapport building techniques (e.g., acknowledging family needs, demonstrating unconditional regard for a client) can be utilized across settings, including in schools. Rapport can be cultivated through a variety of methods. For instance, school-based providers who are experiencing difficulties connecting with caregivers could strategize with school staff that have successfully established connections with families and ask that staff member to foster communication between the family and the provider (Becker, Buckingham, & Brandt, 2015). Rapport can also be developed through less traditional means, such as by showing flexibility with services and meeting families where they are (e.g., offering multiple times, providing home visits, allowing the caregiver to participate in sessions via telephone), especially for families with financial, transportation, or scheduling constraints. Because a central goal for school mental health providers is to build constructive working relationships and to promote effective family-school-community partnerships, it is imperative that providers actively seek to build strong rapport with families early in the treatment process and continue to work to maintain and/or improve this rapport throughout treatment.

**Psychoeducation.** Providing psychoeducation related to mental health treatment, the provider, and the clients’ mental health concerns early in treatment is often helpful in engaging families. Psychoeducation about mental health services and the provider should focus on clarifying the helping process, carefully introducing oneself and possible service options, ensuring the student and family have received accurate information about services, and informing families about what is expected of them throughout the course of treatment (McKay et al., 1996). Additionally, psychoeducation about mental health should focus on contributing factors to a given mental health problem, misperceptions about mental health, advantages and disadvantages of psychotropic medication usage if relevant, and stigma (Becker, Buckingham, & Brandt, 2015). Proper psychoeducation about the mental health services being provided and
the mental health issue being addressed helps families to have a fuller understanding of what to expect throughout the treatment process. This clarity can help to decrease family members’ anxiety about treatment and sets expectations for family involvement, ultimately increasing engagement. By including psychoeducation in the Tier 3 intervention process, providers will be helping families to better understand and be informed as a consumer about school mental health care.

**Motivational strategies.** Another effective strategy for increasing family engagement at Tier 3 is through the use of evidence-based motivational techniques. Some key features of motivational change are setting positive expectations, instilling hope, eliciting change talk, and using a nondirective and non-confrontational approach (Miller & Rollnick, 2002). Providers are encouraged to emphasize instilling hope for overwhelmed families in an effort to promote an optimistic view of the course of treatment and to challenge the family’s negative thoughts about mental health services (Becker, Buckingham, & Brandt, 2015). Empirical evidence indicates that when providers promote change talk or examination of advantages and disadvantages about social norms, a demonstrable increase in engagement and motivation can be observed (Snell-Johns, Mendez, & Smith, 2004). In sum, motivational interviewing is an empirically supported set of techniques that can greatly increase or promote family engagement in treatment. By engaging families using motivational interviewing skills, school mental health providers foster working relationships with the family in treatment and promote healthy relationships within family members.

**Assessment and data-based feedback.** Data-based feedback was discussed in the section on Tier 2 family engagement and these principles apply to Tier 3, as well. However, there are some unique factors to consider at Tier 3. In general, data tracking is an important component of treatment that allows the provider to monitor treatment progress over the course of treatment, to identify new problem areas, and to provide feedback to the client and family involved in the treatment. When used at the Tier 3 level, assessment can be used at various intervals throughout treatment, not just at intake, as part of a continuous quality improvement process. The student and family should be engaged in this process and part of the discussion and problem solving when changes are needed in treatment planning.

Through data-based feedback, providers can pay particular attention to efforts and successes of all members within the family, highlighting how certain techniques used by one person can influence broader family dynamics (Hoagwood, 2005; Hoagwood et al., 2010). For example, during a week in which one caregiver is focusing on more individual, special time with their child, the other caregiver and child may also experience success toward their treatment goal of feeling more positively toward one another. This technique can also be used to emphasize barriers identified in prior sessions, highlight how barriers may have influenced or hindered progress toward treatment goals, and demonstrate how addressing barriers improves or promotes progress (Becker, Buckingham, & Brandt, 2015).
Further, data can be used to acknowledge issues as they arise. By responding quickly to caregivers’ concerns, the provider has an opportunity to demonstrate commitment and capacity to help, a practice that could indirectly increase family engagement.

Through progress monitoring, the provider has an opportunity to instill hope with the family, and can set positive expectations for change over the course of treatment. When families are able to see data that demonstrates a positive trajectory of change, they are more likely to be optimistic about the improvements they will continue to experience in the treatment. If this practice becomes a regular treatment component, clients are more likely to be engaged in goal setting and monitoring (Hoagwood et al., 2010). Further, tracking a family’s progress over time during treatment can facilitate family engagement by fostering a working relationship between the provider and the family members, as well as among family members.

**Cultural acknowledgment.** Cultural acknowledgment by the provider can also be essential to family engagement, as it allows the provider to address and identify any cultural differences (e.g., age, sexual orientation, gender, race/ethnicity, religion) between the clinician and the family. The clinician can then adapt therapeutic techniques to be more consistent with a family’s values, beliefs, and lifestyle (Becker, Buckingham, & Brandt, 2015). For instance, a provider can ask family members about their values, practices, or beliefs, and encourage each family member to share a benefit they have noticed related to being a part of their cultural group. Beyond acknowledgment of culture, it can be beneficial for providers to work with families and make accommodations or treatment modifications to best fit within the beliefs and cultural needs of the family. While cultural acknowledgment further promotes participation in treatment by each family member, practices like this can also encourage families to feel more comfortable to continue sharing relevant information about their culture with the provider across the course of treatment.

**Case Example: Family Engagement at Tier 3.** Although there are a number of engagement strategies that providers could potentially use to engage youth and families in school mental health services (see Becker, Buckingham, & Brandt, 2015 for a review), it is also important to provide support around decisions about which engagement practices to use for which family and for what purpose. Accordingly, a series of prompts within a checklist format were recently outlined (e.g., “Can the youth/family describe what treatment involves and how it will address their needs?” see Becker, Buckingham, & Brandt, 2015 for Strategic Engagement Checklist) to guide provider reflection about what facets of engagement (e.g., alliance, understanding, motivation, attendance, adherence/participation) could be enhanced for a particular youth or family. Provider responses to these items can come from self-report or collaborative discussion with a youth or caregiver using these prompts as a guide to address a specific engagement target (e.g., understanding). This discussion can ultimately help to inform the provider about the engagement practices that are most
relevant for that youth and family (e.g., psychoeducation about services).

Conclusion

Family engagement and meaningful family-school-community partnerships are foundational to high quality and sustainable comprehensive school mental health. Three-tiered systems of mental and behavioral health supports can serve as a conceptual model for promoting family engagement in school mental health. This model considers effective strategies for engaging families in school mental health at the universal (Tier 1), targeted (Tier 2) and intensive (Tier 3) levels. Youth, families, school staff and community partners can engage families in school mental health supports and services within and across each of the three tiers. Many of these strategies, such as psychoeducation, rapport building, cultural competency, assessment and data-informed decision making for addressing family engagement in school mental health, are applicable to multiple tiers of service delivery. However, the way they are applied and form they take can vary depending on the level of service need and the developmental and cultural needs of students and families. Strategies for elementary and middle school students are often similar, but the unique needs and goals for different stages of development need to be considered. For example, for a kindergarten student, families may need support in helping the child appropriately separate from the parent in social settings while for an eighth grader families may struggle with navigating and negotiating a student’s desire for increased independence. Applying the recommended family engagement strategies while still being cognizant of social and developmental norms is essential to ensuring high quality care.

While there are many effective strategies that can be used at each tier, family engagement is not a one-size-fits-all approach. Unique family culture, history, and experiences related to mental health, education, and child rearing help to inform engagement in services and all stages of treatment. The implementation of these outlined strategies for increasing engagement at all three tiers will help to reduce or even eliminate barriers to family engagement in school mental health care and can improve student outcomes. When families are involved in education and mental health care, students are more likely to engage in mental health services and supports and to be more successful in school, at home, and in the community.

REFERENCES

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High schools have been charged with helping to develop and prepare students who, upon graduation, are able to (a) maintain their own personal health and wellness (Lemon & Watson, 2011), (b) contribute to and support their families and communities (Barber, Mueller, & Ogata, 2013), and (c) enter and successfully participate in a college or post-secondary training program or career of their choice (Morningstar, Lombardi, Fowler, & Test, 2015). Achieving these goals for all students is a significant undertaking which requires a focused partnership between schools, families, and communities.

The individual and societal costs of not meeting this challenge are staggering. Students who do not graduate from high school are likely to (a) make significantly less money over the course of their lifetime (Dynarski et al., 2008), (b) suffer from a variety of physical and mental health challenges such as depression (Liem, Lustig, & Dillon, 2010), and (c) become involved in criminal activity and spend time in jail (Rumberger, 2011; Swanson & Editorial Projects in Education, 2009). At a larger scale, these outcomes include significant costs for communities including lower tax revenue, higher health care costs, and higher crime rates (Belfield & Levin, 2007; Maynard, Salas-Wright, & Vaughn, 2015)

Fortunately, we have a growing research base to ensure that our students leave high school prepared to succeed and to understand the critical role that parents and families play in this success. Risk and protective factors for school completion have been clearly defined in research. In addition to static risk factors such as race/ethnicity or socio-economic status, students who experience academic, behavioral, or attendance difficulties in school are less likely to complete high school or to be adequately prepared for life after high school (Dynarski et al.,
2008; Suh & Suh, 2007.). Preventing these failures early and systematically using a multi-tiered system to organize supports efficiently is critical (Brenner, Kutash, Nelson, & Fisher, 2013).

Positive Behavior Interventions and Supports (PBIS) is associated with promising and positive student outcomes closely associated with school completion at the high school level (Bohanon, Flannery, Malloy, & Fenning, 2009; Freeman et al., 2015; Freeman et al., 2016; Vitario, Brendgen, & Tremblay, 1999). Just as in lower grade levels, the PBIS framework is organized around four critical features: academic and behavioral outcomes are clearly defined, data are used to measure progress toward outcomes and to monitor implementation, evidence based practices are selected that align with established needs and contextual fit, and systems are developed to support adult implementation of selected practices (Lewis & Sugai, 1999; Sugai & Horner, 2009).

Researchers have repeatedly documented the importance of parent and family involvement in promoting student attendance, academic achievement, homework completion, positive behavior, career aspirations, and ultimately high school completion and increasing the likelihood that students will enroll in higher education (Christenson & Sheridan, 2001; Boulter, 2004; Darsch, Miao, & Shippen, 2004; Deslandes & Bertrand, 2005; Henderson, Johnson, Mapp, & Davies, 2007; Jimerson, Egeland, Sroufe, & Carlson, 2000; Lee & Burkham, 2002; Parr & Bonitz, 2015; Trusty, 1996). These results hold true in urban settings (Noguera, 2001) and across family backgrounds (Keith, Keith, Troutman, Bickley, 1993). Despite the clear benefits of parent and family engagement for high school outcomes, researchers have also documented a decline in school outreach and engagement opportunities for parents resulting in a tendency for parent engagement to decline as students progress through school (Mac Iver, Epstein, Sheldon, Fonseca, 2015; Sheldon & Epstein, 2002; Simon, 2004; Spera, 2005).

The quality of family outreach and parent engagement efforts by schools are directly linked to improved student outcomes – especially during the critical first two years of high school (Mac Iver, Epstein, Sheldon, Fonseca, 2016; Sheldon & Epstein, 2002). Building systems to support meaningful family engagement within the multi-tiered PBIS framework can strengthen student/family connections, ensure that meaningful outcomes for families/communities are addressed by schools, provide additional opportunities for students to receive consistent messages and practice appropriate social/academic behaviors, as well as promote the sustainability of the PBIS framework across time (McIntosh et al., 2014).

The purpose of this chapter is to summarize existing research validating the importance of family engagement and to provide recommendations for structuring family engagement systems to support and enhance the PBIS framework. The following factors make high schools a unique context for both implementing PBIS and developing systems for family engagement: the size of many high schools, the academic focus, the departmental organizational structure, and the developmental age of the students. Each
of these factors have implications for leadership, communication, and data systems that support PBIS implementation and will need to be considered when building systems to support/ enhance family engagement (Flannery, Frank, Kato, Doren, & Fenning, 2013). We begin by providing an overview of several critical features of family engagement at the high school level. We then provide specific recommendations and examples for overcoming the challenges of the high school environment, effectively organizing family engagement outreach, and incorporating opportunities within PBIS across tiers. Finally, we discuss and provide examples for evaluating systems designed to enhance family engagement.

Critical Features of Family Engagement

Successfully engaging families in PBIS implementation at the high school level requires a coordinated effort across implementation levels. The following three critical features apply across tiers and will ensure that student benefit is maximized.

First, family engagement must be a district-wide priority. Just as with any implementation initiative, family engagement efforts at the high school level will be more effective when there is a clear vision for and commitment to meaningful family engagement that is communicated by the district leadership team. The district leadership team has a particularly important role to play ensuring that families are supported as their students’ transition across buildings. For example, district leadership teams may ask middle and high school teams to coordinate family engagement efforts for rising cohorts to ensure that families are welcomed, informed, and invited to participate in their students’ education right from the start of their freshman year.

Second, across all tiers of implementation, the responsibility for family outreach and engagement lies with school leadership teams. While the end result of family engagement efforts should be a collaborative, reciprocal relationship between schools and families, schools should provide a range of opportunities for families to participate, invite families to collaborate, and encourage families to contribute. This effort must be ongoing, multi-faceted and monitored to ensure effectiveness.

Third, leadership teams at all tiers will need to consider specific strategies to enhance school-family communication and remove barriers to family participation. All leadership teams should consider providing multiple communication options for staff and families (e.g., letters sent home, email, website, twitter feed, and text messaging) in all languages spoken by family members. At the high school level, it is also important to consider providing clear guidance for families about who to contact, as many high schools have multiple administrators and students will have multiple teachers. When coordinating events for parents, leadership teams should always consider removing as many barriers as possible in order to promote parent participation. This may include considering holding events at a variety of times to accommodate parent work schedules, considering event locations that are most convenient for parents (e.g., school, community venues), as well as offering transpor-
Tier 1 Systems for Family Engagement

Tier 1 systems are designed to proactively support all students across all school settings and are guided by a leadership team comprised of a representative group of faculty members, non-professional staff, specialists, at least one administrator, and at least one parent representative. In high schools, leadership teams are also encouraged to incorporate student membership so as to capture their voice in all implementation activities.

The inclusion of family membership and voice on the leadership team is critical to ensuring that the systems developed and practices selected are contextually and culturally relevant and meaningful. However, there is significant variation in how this recommendation is met by high schools (Auerbach, 2009; Garbacz et al., 2016). At times, school teams can be hesitant to include parents on the leadership team for fear that parents will see the “messy” process of implementation (Muscott, et al., 2008). In some high schools, the parent representative is a faculty member who also happens to be a parent. In other high schools, the parent representative is the head of a parent organization and able to represent a segment of family and community voice. Other schools attempt to include broader parent voice by regularly conducting parent surveys and using that data to guide implementation planning but may not have an active family member on the leadership team. Although parents or family representatives who participate on leadership teams should be fully included in all leadership team trainings they may or may not receive additional training related to parent or family advocacy within the leadership team context.

Outcomes. High school leadership teams should consider developing both short and long term goals based on clearly defined outcomes which are important to the school and community. For example, improving school climate, improving “social employability” skills (e.g., collaboration with peers, self-advocacy) or preparing students for life after high school are frequently identified by parents and family members as important outcomes at the high school level. These longer term outcomes can be closely linked to shorter term goals that may be a higher priority within the school such as reducing discipline infractions or improving attendance. Making this link explicit when developing short and long term goals can help parents, family, and community members understand how the outcomes they care most about are being addressed by the school (Freeman, et al., 2015; Swain-Bradway, Pinkney, & Flannery, 2015).

High schools may consider a variety of options for securing family voice and input when developing these goals. The responsibility for negotiating this process should fall on all leadership team members not just the designated family member (Auerbach, 2009; Garbacz et al., 2016). That is, all leadership team members are responsible for actively soliciting and considering family input rather than just waiting for feedback. For example, leadership team members may consider conducting a school climate sur-
vey or other parent survey to obtain information about how parents view current school practices and what outcomes or goals are most important to families (Schueler, Capotosto, Bahena, McIntyre, & Gehlbach, 2014). For example, the Georgia Parent Survey (Georgia Department of Education, La Salle, & Meyers, 2014; www.gadoe.org/External-Affairs-and-Policy/Policy/Documents/Georgia%20Parent%20Survey.pdf) includes questions related to both parent involvement in decision making and participation in school events along with parental perceptions of the overall school climate. In addition, the family engagement checklist (Muscott & Mann, 2004; www.pbis.org/resource/264/family-engagement-checklist) provides family members with an opportunity to rate both what is currently in place and indicate their priority for improvement. Information from one or both of these sources could guide leadership teams by identifying areas of strengths and weaknesses with respect to parent involvement and parent perceptions of school climate.

Leadership teams may also want to consider conducting parent focus groups (Quiñones & Kiyama, 2014; either in the school building or in community centers), asking for parent and family input at school events, or using a parent suggestion box or email account to collect information on parent and family priorities when defining outcomes and goals. Feedback from parents and families should be used both to develop initial outcomes and to refine them in an ongoing reciprocal process in which family input is valued (e.g., reflected in the schools defined outcomes and goals).

High school leadership teams should consider developing and including both short and long term goals based on the identified outcomes. For example, improving school climate, improving “social employability” skills (e.g., collaboration with peers, self-advocacy) or preparing students for life after high school are frequently identified by parents and family members as important outcomes at the high school level. These longer term outcomes can be closely linked to shorter term goals that may be a higher priority within the school such as reducing discipline infractions or improving attendance. Making this link explicit when developing short and long term goals can help parents, family, and community members understand how the outcomes they care most about are being addressed by the school (Freeman, et al., 2015; Swain-Bradway, Pinkney, & Flannery, 2015).

Once outcomes are defined, leadership teams should ensure that these short and long term goals are clearly communicated to staff, students, families, and the community. As described above, the communication strategy from the leadership team should be multi-faceted and ongoing. For example, teams could consider publishing family-generated short and long term goals in school and community newspapers, as well as providing information via email or website portal. Communications surrounding goals should include specific information about the process for defining goals and how they align with and support family/community priorities.

Data. Once short and long term goals have been clearly defined, leadership teams will need
to identify data sources to measure these outcomes and to ensure that the implementation plan is being executed as intended. Whenever a data source is selected teams should ensure the chosen tool (a) clearly measures the intended short or long term goal, (b) includes multiple perspectives (e.g., students, staff, families) where appropriate, and (b) has been validated for the intended use and context. For example, a high school in which improving school climate was identified as a goal should consider directly measuring specific indicators of climate (e.g., behavior infractions, attendance) as well as student, staff, and family perceptions of school climate. A number of school climate surveys are available for this purpose and teams will want to select one that is both validated for use with high school students and that best fits their school/community context.

Teams may also consider selecting measures to monitor the extent to which families are engaged and supported throughout the implementation process and across the school community in general. Often, this outcome is measured by counts of parents who attend back to school nights or parent teacher conferences. We argue that true family engagement is more difficult to assess. While not developed specifically for high schools, the Family, School, and Community Partnership Fundamentals Rubric created by the Parent and Community Education and Involvement (PCEI) Advisory Council of the Massachusetts Board of Elementary and Secondary Education (http://www.doe.mass.edu/boe/sac/parent/FSCPfundamentals.pdf) is an excellent resource for leadership teams to consider. This rubric identifies six fundamentals of family engagement and provides examples of each in schools that are initiating, progressing, or mastering these fundamentals. Used regularly as a self-assessment by high school leadership teams, this rubric can guide action planning, as well as, monitor progress toward enhancing parent and family engagement.

Practices. Practices are the activities or curricula used to teach and reinforce specific student skills and behaviors. Leadership teams may also consider specific practices to promote family engagement. Teams may want to consider antecedent, teaching and reinforcement strategies. Antecedent strategies make it more likely that parents and families will engage with the school. Teaching strategies build capacity in parents and families on how to engage with the school or how to support their students in the community. Reinforcement strategies provide encouragement for both families and faculty members for engaging in collaborative partnerships.

Antecedent strategies. There are a number of strategies that high school leadership teams may consider to make it more likely that parents and families feel welcome at the school and engage in promoting student learning. Simply creating a physical environment where parents and family members are clearly welcome is an important first step. For example, signs welcoming parents and family members to the school, easy to read school maps that identify key parent and family resources, posters providing information what to expect upon entering the school building, and even designated parking places for parents, family members, and visitors that are
close to the school entrance make it more comfortable for them to come into the school building.

High schools should also consider strategies to make it easier for parents and family members to communicate efficiently with members of the school community. In particular, at the high school level, students have multiple teachers, guidance counselors, administrators, and support staff with whom they interact each day. As a parent, knowing who to contact can be very challenging. High schools may consider identifying a family liaison for each grade cohort or department. School leadership teams should ensure that the removal of structural barriers to family engagement is an ongoing responsibility and includes such things as making certain that all school materials are available in all relevant languages, assuring that parent and family events and training opportunities are held at times that accommodate a variety of work and family schedules, and providing transportation or child care options that are readily available for parents and families.

**Teaching and reinforcement strategies.** At the high school level, the students’ developmental level offers some unique opportunities to promote family engagement in teaching practices. In many high schools, social skill lessons are taught by student leadership groups rather than by faculty members. Inviting parents to participate with their children in leading these lessons or inviting parents to join in reinforcing students when expectations are met are powerful ways to promote family engagement as well as build the capacity of parents and families to implement similar practices at home. In some high schools, students and faculty members team up to provide training for parents and family members on the Tier 1 practices implemented in the school and provide examples of how these strategies may apply in the home environment. This encourages family participation by directly involving family members with their students and ensures that all stakeholders share common language and practices across settings.

In addition to promoting family engagement in PBIS teaching practices at school, high schools may want to consider strategies for supporting the use of positive behavior support teaching and reinforcement practices in community, and home settings. In many communities, high schools share copies of their expectation matrix and reinforcement systems with local gyms and community centers. Schools, students, and family members can work together to provide training to community members. When all stakeholders work collaboratively with common language and expectations, student and family benefit can be maximized.

**Systems.** In general, systems refer to the routines and supports available to adults to support and reinforce the implementation of practices. In many ways, systems are the most critical element of the PBIS framework and this is especially true when PBIS teams are focused on enhancing family engagement. In addition to the communication structures described above, leadership teams should consider developing systems related to professional development and reinforcement systems.

**Professional development.** Although the responsibility for developing systems to encour-
age family engagement lies with the school staff, it is not a valid assumption that all teachers and school staff are equally prepared to successfully implement these systems. High schools will need to assess the current comfort and skill level of faculty and staff with family engagement and develop appropriate professional development supports to ensure that all faculty and staff are knowledgeable about the school’s systems for encouraging parent and family engagement and have the skills to successfully implement them (Harvard Family Research Project, Oct 2006). Specifically, high schools may consider providing professional development to faculty and staff to ensure a complete and common understanding of family engagement. Brief in-service strategy presentations could provide teachers with discrete skills and strategies for promoting family engagement in their classrooms and school-family liaisons could provide coaching and feedback for faculty and staff as they work to implement these strategies. Finally, providing opportunities for faculty and staff members to work together to engage families offers support to faculty and staff members as they learn new strategies.

**Reinforcement systems.** Even adult learners need reinforcement. Changing habits and practices requires significant effort and often the new practice is initially more difficult than the old. Following professional development on family engagement, high school leadership teams may consider adapting their existing staff reinforcement systems to recognize and encourage staff who implement family engagement practices. In addition, leadership teams should consider developing systems for reinforcing parents and families who participate in school activities. For example, schools can conduct raffles or offer certificates redeemable for school supplies or at local community vendors for attendance at school events or parent trainings. Other options for reinforcing family engagement may include offering childcare supports and meaningful parenting classes or supports free of charge, highlighting parent and family contributions in school and community newsletters, and promoting the development of family support networks.

**Tier 2 Systems for Family Engagement**

Tier 2 provides support for students who are at risk of more serious problem behaviors that can impede their academic and social success in high school. Examples of commonly used, evidence-based Tier 2 supports in high schools include social skills groups (Gresham, Sugai, & Horner, 2001), “Check-in Check-out” (CICO; Hunter, Chenier, & Gresham, 2014), academic seminar, and homework clubs. Collaboration with the families of students receiving Tier 2 supports can benefit all involved (Anderson & Borgmeier, 2010).

**Outcomes.** At Tier 2, targeted interventions support the overall Tier 1 outcomes and goals and are refined to further consider outcomes that are specifically important to families of students receiving Tier 2 support. Encouraging family involvement in the development and support of desired outcomes can build support for Tier 2 interventions, and build family capacity for implementing interventions at home. For example, when implement-
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Chapter Eight

In Chapter Eight, school leadership teams should clearly communicate how these interventions align with already established school-wide short and long term goals. In addition, leadership teams should solicit feedback from families of identified students regarding refinements to school-wide outcomes related to transition (into or out of high school) or community-based needs.

**Data.** Effective family engagement in Tier 2 involves sharing and supporting families to interpret and use intervention data. The PBIS leadership team can offer workshops for families about interpreting and using Tier 2 intervention data, and should identify a family liaison who can support this process. For example, students receiving support through a high school CICO program will bring home a daily report card outlining progress towards specific behavioral goals. When a student is identified as in need of Tier 2 supports, the family liaison can meet with his or her family to review the report and offer suggestions about using positive reinforcement and re-teaching as needed to support their student. Following the initial meetings, ongoing communication should continue between the liaison and family members regarding progress.

**Practices.** In addition to helping families to interpret and use data, schools are responsible for identifying practices to engage families in the implementation of and support of Tier 2 interventions at home and at school. Collaborative and interactive opportunities for student volunteers to train small groups of parents in Tier 2 interventions can effectively engage families in Tier 2 practices. For example, students might develop a role play or video that demonstrates how CICO operates at school, and what can happen at home when the daily report card is shared with family members.

High school social skills groups can teach and support the development of a number of skills that benefit students as they develop supportive relationships, practice effective communication strategies, and learn to self-manage behaviors that impede their academic and social success. Sharing these specific skills and strategies with families through staff or student led trainings will build the families’ capacities to support newly learned skills at home.

To maximize family member attendance and participation in training related to Tier 2 interventions, leadership teams should consider several antecedent strategies. Family liaisons can be responsible for encouraging and reminding family members about trainings. Invitations can be sent to families through multiple modes, such as paper, e-mail, voicemail, and text reminders. As discussed above, leadership teams should remove obstacles that may prevent staff, families, and students from participating in these training opportunities.

**Systems.** The high school environment can make the implementation of targeted Tier 2 interventions more difficult as they typically require more intensive coordination across classes and settings. Clearly establishing communication routines with families and all staff members involved in Tier 2 implementation can ensure that students are receiving coordinated instruction and support and that family members have regular avenues for providing feedback and learning about the supports their students
are receiving. Professional development for implementing staff members at the Tier 2 level is critical. Leadership teams will need to ensure that this training includes information and skills related to regularly communicating with families and for using family feedback to make enhancements to students’ Tier 2 plans. Finally, leadership teams will want to consider modifications to the staff and family recognition systems to acknowledge those that are engaged in supporting families with students at the Tier 2 level.

**Developing Family Engagement for Individualized Intervention (Tier 3)**

As in elementary and middle school grades, the vast majority of students in high school should be adequately supported with Tier 1 and Tier 2 intervention when multi-tiered systems of support are implemented with fidelity. However, there is a smaller group of students in each school who may require more intensive intervention. Students who receive Tier 3 support fit the following criteria: (a) the behavior impedes the student’s ability to maintain an adequate performance level and/or the student is at-risk for change of educational placement because he/she is not responding to current systems and practices and (b) the student’s needs cannot be effectively served utilizing only Tier 1 or 2 services. Typically, students in need of Tier 3 intervention are identified through a referral process following a lack of progress; though, in some circumstances, it is a family member who advocates for more intensive intervention rather than the teacher or school (Flannery, Fenning, Kato, & McIntosh, 2014).

In secondary settings, the outcomes for students in need of intensive intervention are bleak. These students consistently under-perform academically (Nelson, Benner, Lane, & Smith, 2004) and are at high risk for dropout (Aud et al., 2013). They also tend to engage in higher risk behaviors such as substance abuse, unprotected sexual activity, violent behavior, and suicide ideation (Centers for Disease Control and Prevention, 2012; Wagner, Kutash, Duchnowski, Epstein, & Sumi, 2005). High school and middle school students typically experience more severe action as a result of challenging behavior with more reliance on punitive procedures such as office disciplinary referral (Vincent, Tobin, Hawken, & Frank, 2012), the most frequently used disciplinary procedures for secondary students are suspension and expulsion (Flannery, Frank, Kato, Doren, & Fenning, 2013). Development of quality Tier 3 supports can address these issues by developing a more proactive approach with a focus on prevention rather than consequence. Unfortunately, just as with Tier 1 and 2 interventions, proactive measures can also be more difficult to implement in secondary programs. For example, some high school teachers believe that students should already have appropriately developed social skills and therefore the responsibility for change lies with students rather than the teacher or school (Flannery, Fenning, Kato, & McIntosh, 2014).

Frequently, behaviors exhibited in schools by students supported at Tier 3 also occur in other non-school environments. For example, a behavior that a student uses to escape a demand in class may be used to escape demands at home or at
work. Also, many of these more intense behaviors may be exacerbated by or otherwise influenced by factors outside of school, with increasing demands and responsibilities at work or at home. Additionally, family members or students may be facing life challenges that impact the student (e.g., unemployment, substance abuse, illness, a sibling with a disability, homelessness). Much of this information may not be available to school staff without consulting family members.

While there are many similarities across elementary, middle, and high school levels, there are some characteristics of both the student and the environment that are unique to Tier 3 implementation in secondary settings. While we often think of Tier 3 as intensive intervention to address problem behavior (e.g., functional behavior assessments - FBA, behavior intervention plans - BIP), there may be other individualized support needs (e.g., for more intensive mental health or substance abuse services), which are either unique to or more complex in high school due to both students’ age and maturity level and school environmental characteristics. With an array of Tier 3 processes, assessment and intervention should attend to both behavioral and emotional functioning as indicated for each student.

**Tier 3 teams.** While district- and school-based teams oversee the systemic implementation of intensive, individualized interventions, Tier 3 also involves the formation of student-specific teams. These teams contribute information to an FBA, inform intervention choices in the development of the BIP, and review data following implementation in order to assess the effectiveness of Tier 3 intervention. Family members and those who know the student well are invaluable members of this team. In high school, students should also be an active and contributing member of the team; however, family members provide a unique perspective including information regarding transition goals and objectives.

**Practices.** There are a growing number of professionals advocating for a continuum of support within Tier 3 to address a wide range of needs that require individualized intervention and support (Scott, Alter, Rosenberg, & Borgmeier, 2010). No matter the level of Tier 3 intervention, the family’s participation is invaluable in ensuring accurate assessment and development of an intervention that is contextually relevant for the student. As above, family members can also help to develop the student’s transition goals and objectives. There are several distinct phases of individualized intervention: identification, assessment (functional assessment and other related assessments), intervention planning, and implementation and maintenance.

**Identification.** An effective Tier 3 system includes a data system that helps to identify individuals who are in need of individualized supports and who are not responding to Tier 1 and Tier 2 interventions. District and school policies should include a prescribed system to ensure family awareness of the school’s approach to supporting student needs and decision rules and procedures for the addition of more intensive supports as needed; along with an open invitation to families to take an active role in the design and implementation of Tier 3 supports. Family engagement at Tiers 1 and 2 provides opportunities for school teams to build proac-
tive relationships with families rather than wait-
ing until a student is in need of Tier 3 support to
build these relationships.

Assessment. The traditional FBA is the
method most often equated with Tier 3 and
consists of multiple interviews and observa-
tions. Basic FBA (Loman, Strickland-Cohen,
Borgmeier, & Horner, 2013) may be used at the
lower level of Tier 3 and includes a brief func-
tional assessment conducted by the teacher
or someone closely engaged with the environ-
ment and might include enough information to
quickly assess the function of the behavior and
develop a few strategies to address the behavior.
At the highest level of Tier 3, a student may pres-
ent with challenging and complex behaviors that
are pervasive across multiple settings or require
medical, mental health and community sup-
ports and may need a more intensive functional
assessment including some manipulation of
variables using functional analysis. Per expanded
school mental health (SMH; see Weist, 1997)
and movements to join SMH and PBIS as in the
Interconnected Systems Framework (see Barrett,
Eber, & Weist, 2013), Tier 3 services may also
include more comprehensive psychosocial eval-
uation building on the FBA and the delivery of
more intensive services such as cognitive behav-
ioral therapy for students (and their families in
many cases).

In the assessment process, family input can
help to identify the scope and topography of
a behavior as well as factors that influence the
presence of the behavior and affect emotional
well-being. There are some functional behav-
or assessment interview forms that have been
developed specifically for interviewing parents
and family members, though even informal
review of a school assessment with the fam-
ily can be enlightening. Family members can
confirm hypothesis statements and offer inform-
ation regarding potential factors that influence
behavior outside of school. Even if there is
no in-home component to the plan, this per-
spective can inform the implementation of the
intervention in school. Also, knowledge of set-
ting events prior to the school day that would
exacerbate behavior at school will help to inform
the type and frequency of communication that
needs to occur between home and school in
order to ensure that adequate accommodations
are made. In high schools, the student should
have input in the assessment phase as well. It is
not atypical to see teams that include both the
student and a family member as active members,
even in the assessment phase.

Typically, in high schools, students may
spend time with a number of different teachers
in a number of different classrooms throughout
the day. This presents a particular challenge at
Tier 3 as systems need to be sensitive enough
to note patterns of behavior across a number
of settings and/or supporting individuals. This
requires the school’s data systems to be sensitive
to patterns and have the capacity to link these
data across settings. One constant for the stu-
dent is often his or her family. The family can
serve as an additional barometer for both behav-
or and academic concerns, but only if proper
mechanisms are set up to ensure active and
ongoing communication. Relatedly, assessment
approaches are significantly improved when
multiple informants are used, such as collecting ratings of emotional/behavioral functioning by the student, parent and teacher.

**Intervention.** Family members can play an invaluable role as implementers of intervention outside of the school setting. In high school, a student may play a more active role in their own supports and a family member’s role as interventionist may not be as great as in elementary and middle school years. Yet, the importance of Tier 3 implementation in multiple settings cannot be understated as families still play an important role in teaching and supporting students as they develop improved skills in self-management, problem solving, cognitive coping, and other skills.

To most effectively engage families, the Tier 3 team must (a) utilize language that isn’t alienating to those who are non-school professionals, (b) work actively to garner input from family members, (c) share information not just about the intervention plan, but about the logic that drives the chosen evidence-based strategies, (d) work with families to identify ways that strategies can be adopted to settings outside of school, and (e) provide feedback and support following implementation of the plan. The team must also have an awareness of how cultural and language differences affect all of these efforts. Due to the numerous differences in culture, as well as the environment, expectations, and the skill set of the implementer, the core strategies in the family’s BIP or mental health treatment plan may vary notably from approaches used in classroom contexts (Horner, Sampson, Anderson, Todd, & Eliason, 2013).

**Progress monitoring.** Once a student is identified as needing Tier 3 supports and a plan is developed and implemented, there should be a data system to monitor the student’s progress in Tier 3. Tier 3 data should be collected daily and reviewed at least weekly (Scott, Anderson, & Spaulding, 2008). Schools often default to office discipline referrals (ODRs) as a data source for Tier 3. While this information is important, it is not sensitive enough to measure daily response to intervention. Data systems need to measure not just the reduction of problem behavior, but also increases in the targeted desired, prosocial behaviors. Families can be important sources for some of these data, as Tier 3 intervention is concerned with performance not just in school, but in multiple environments. Schools can facilitate this process by developing daily or weekly (depending on the frequency of the behavior) report forms. These reports should be efficiently and easily integrated into a daily routine at home. As above, ratings of student emotional/behavioral functioning can be obtained from the student, parent and teacher early after problem identification and to track progress at regular intervals (e.g., monthly).

**Additional Tier 3 transition supports.** As high schools prepare students for life after high school, Tier 3 supports may include intensive and individualized support to help students develop life skills in order to prepare for college, jobs, and adult life. It is vital for a student’s post-school success that all parties who are familiar with the student work together in a planning process (Michaels & Ferrara, 2005). Person-centered planning is a vital part of tran-
tion planning for students with more intensive support needs (Claes, Van Hove, Vandevelde, van Loon, & Schalock, 2010). The intention of person-centered planning is to build collaboration between student, family, and school; with the student’s voice at the center of the process (Smull & Bellamy, 1991). Preference assessments included in person-centered transition planning have the ability to produce long-term goals that encompass and reflect the needs as well as the lifestyle of the student (Lohrman-O’Rourke & Gomez, 2001).

Self-determination plays a large role in secondary environments as students are not only expected to acquire but also utilize these skills as they take a more active and direct role in their own education, are presented with more course offerings, less one-to-one interaction, and increasing autonomy (Flannery et al., 2013; Lane, Kalberg, Parks, & Carter, 2008). While families can assist in directly teaching skills related to self-determination (e.g., practicing choice making and decision making), they can also provide opportunities for students to incrementally increase independence at home and in the community (Wehmeyer & Bolding, 1999). Students can also be given opportunities to draw on supports and resources from family as they identify their interests, set goals, communicate their choices, take steps to achieve their plans, and evaluate their own progress.

Ensuring Effectiveness of Family Engagement

There are mechanisms to ensure the effectiveness of family engagement at all tiers in high school. Many of these mechanisms are the same or similar to those employed in elementary and middle school settings. However, there are some factors at the high school level that must be considered in order to ensure the effectiveness of family engagement efforts. Secondary schools are organized quite differently than elementary and middle schools, with greater focus on content area instruction and department affiliation. This organizational structure can make it more difficult for a school to ensure consistency in implementing universal strategies. There are also fewer opportunities for teachers across disciplines to share information about students and it is more difficult for any single teacher to get to know a student well (Flannery et al., 2013).

Because of these differences, teams at the high school level must make more concerted, organized efforts to ensure consistency and implement structures that ensure input from all parties, including families, is solicited and respected in each phase of the problem-solving process. Engaging families and the community in the early stages of program development can help a district to outline programs that are sufficiently sensitive to the needs of families and that capitalize on the resources that families have to offer.

Fidelity measures are vital to ensuring effectiveness across tiers. Without knowledge of how well teachers are implementing interventions, it is impossible to know if student’s lack of response to intervention is due to a mismatched intervention or a lack of attention to the details of its implementation. Tools such as the Tiered Fidelity Inventory (TFI; Algozzine et al., 2014) and the Benchmarks of Quality (Kincaid, Childs,
& George, 2005) measure overall implementation of a multi-tiered system for behavioral interventions. While these inventories include some measurement of family engagement, schools may need to employ additional check points to ensure full family engagement across all phases as described earlier in this chapter.

In addition to fidelity data for overall organization, behavior teams must attend to implementation fidelity data of BIPs and other individual plans of support. This can be more challenging in secondary environments, with multiple parties sometimes administering slightly different interventions, depending on the needs of the student in that setting. In order to address this issue, the team can designate one individual (e.g., behavior support specialist, coach) to follow-up in each classroom, as well as with family members. This person can ensure implementation and help to problem-solve issues with implementation in each setting. The person can also provide coaching and performance feedback to family members as needed.

A large part of the effectiveness of more targeted and individualized (i.e., Tier 2 and 3) interventions is their contextual relevance (Horner, Salentine, & Albin, 2003). Ideally, individualized interventions should be developed that are reflective of and sensitive to the culture of the student and the student’s family. Family members can play a crucial role in informing team members about the student’s specific needs and social history. In addition, BIPs and other intervention and support plans may contain intervention in the home and community. Family members’ voice in the development of these interventions can ensure that features are aligned with the culture and background of the student as nested within the family and the larger community.

**Conclusion**

The PBIS framework provides an important starting place for improving student outcomes closely associated with school completion at the high school level (Bohanon, Flannery, Malloy, & Fenning, 2009; Freeman et al., 2015; Freeman et al., 2016; Vitaro, Brendgen, & Tremblay, 1999). Additionally, parent and family involvement in high schools is critical but tends to decline as students age (Boulter, 2004; Christenson & Sheridan, 2001; Darsch, Miao, & Shippen, 2004; Deslandes & Bertrand, 2005; Henderson, Johnson, Mapp, & Davies, 2007; Lee & Burkham, 2002; Jimerson, Egeland, Sroufe, & Carlson, 2000; Mac Iver, Epstein, Sheldon, Fonseca, 2015; Parr & Bonitz, 2015; Trusty, 1996; Sheldon & Epstein, 2002; Simon, 2004; Spera, 2005). In this chapter we provided recommendations and examples for high school leadership teams working to enhance family engagement systems across all three tiers of PBIS implementation. We also provided recommendations for measuring and monitoring the effectiveness of these family engagement efforts.
CHAPTER EIGHT

REFERENCES


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In education and mental health fields such as psychology and social work, it is informative to consider defined groups as a way of understanding the larger population (Cottrell & McKenzie, 2012). Reviewing the unique contexts of groups provides a way to consider the family engagement process in a deliberate and focused way. The schoolwide positive behavioral interventions and supports (PBIS) framework becomes the operating continuum for sequencing, aligning, and integrating multiple behavior related practices to stakeholders’ perceptions of the school and community environment. The characteristics and cultural learning histories of stakeholders, implementers, and consumers are integral to PBIS implementation (Sugai, O’Keeffe, & Fallon, 2012).

We hope that understanding cultural diversity will help improve youth and family led engagement to improve school climate for three specific groups: youth receiving special education services; Lesbian, Gay, Bi-sexual, and Transgender (LGBT) youth; and youth involved in bullying-victimization. Family engagement strategies used in specific instances should inform and provide clarity to the broader stakeholder engagement topic, as well as helping to inform school-wide approaches. Further, how school staff and students participate in their own engagement can help address the key context of family diversity and special populations.

We agree with Sheridan, Knoche, Kupzyk, Edwards, and Marvin (2011) and with authors of other chapters in this e-book and advocate for family engagement that is active, interactive, and dynamic. In each case, engagement is successful if everyone involved is invested in collaboration. This collaboration requires that
all stakeholders are viewed as equally important in the engagement process. In many cases we find that the impetus for engagement lies with school staff (Christenson & Reschly, 2010), which, unfortunately is associated with limited efforts. Often families are unsure of their role in their child’s education or how to best support them. Educators should support a framework to support family-school collaboration, which ultimately should be in the form of an engaged partnership (Reschly & Christenson, 2012) where family members and school staff are co-equals who share responsibility for priorities, plans, and follow-up (Christenson & Sheridan, 2001).

Before discussing needs of the three specific groups of students presented in the above, we review critical issues pertaining to cultural diversity and disproportionality. Recent events across the U.S. have focused educational communities to consider these issues, and a moral imperative for cultural responsiveness in our schools is emerging. Self-determination and cultural competence are key factors in resilience for both students and families (Masten, 2015) and families are helping to create new paradigms of engagement that better reflect their needs. We then examine effective models for youth and family led engagement to improve school climate. School climate research suggests that improving engagement requires not only viewing young people as the recipients of engagement activities, but as active partners and decision-makers (Yonezawa, Jones & Joselowsky, 2009).

**Family Engagement and Promoting Cultural Competence—Strategies for Diverse Students**

The National Association of State Boards of Education (2002) defines a culturally competent school as one that honors, respects, and values diversity in theory and in practice and where teaching and learning are made relevant and meaningful to students of various cultures. PBIS considers that the culture of a school may or may not be in harmony with the culture each student brings to the school (Mathews-Johnson, 2007).

The evolution of public education in the U.S. presents a historical reflection of change, politics, accountability and inclusion. One might liken the unpacking of these experiences to the complexities of unraveling the strings of a quilt. Each section is an essential element to the final body of work. Each section emerges as unique, complex, and different (in its own right) yet necessary for the end result. Still, there is in existence a common thread that is essential in binding and connecting every unique piece. The absence of that thread results in the unraveling of a masterpiece. Education and the theory and practice behind insuring that all families (specifically the children that we serve) see themselves as a critical component in completing the cycle of securing a quality education is perhaps similar. Understanding families and the unique and sometimes complex experiences and compositions that they bring are the most necessary part of the educational experience. As presented in other chapters in this e-book, PBIS practices provide a foundation for inclusion and collab-
oration for student engagement, behavior, and learning. These practices and systems help to ensure that schools honor diversity, recognize the need for cultural competencies, and engage in implementing best practices to guide student learning (Lewis, 2007; Sugai et al., 2012).

The wide use of the word “diversity” has evolved as a critical and necessary component of student learning in both the public and private education sector. This term, when used while referencing students, is representative of many areas of human existence – race and ethnicity, gender, sexual orientation, socio-economic status, demographics, religious orientation and other. Each dimension exists as a component of what has evolved into a much larger list of characteristics that embody diversity (Ugbu, 1992). As educators, researchers, and practitioners we must recognize that we are operating in a time and space where the promotion of cultural competency is a non-negotiable responsibility that must not only be learned in theory, but also taught in practice (see Chavous et al., 2008). Furthermore, there should be accountability for creating a culturally competent learning environment. History and the law have taught us (educators, researchers and practitioners) that we must engage and practice pedagogy with great intentionality, accountability and focus.

Culture includes the customs, arts, social organizations and achievements of a particular people including the “way a population uses its natural environmental influences and is influenced by its social organization and values” (Ugbu, 1981, p. 421). Across the landscape of America, issues surrounding race, culture and social perceptions of others have garnered national attention and calls for responsible behaviors and training around race relations, social engagement and appropriate reactions that are proactive and not reactive. This stands vividly clear as a necessity within school settings. It is generally accepted that the quality of relationships between students and their teachers is important for students’ behavioral outcomes (Hamre & Pianta, 2001). The increasing enrollment of students from varied backgrounds, cultures and languages has served as the impetus for school districts and school leaders to make every effort to create inviting environments that meet the essential needs of the population that they serve. Strategies and work centered on closing the achievement gap are equally focused on the disparities and inequities around student performance and achievement (McIntosh, Flannery, Sugai, Braun, & Chochrone, 2008).

Alignment of Culture and Family with PBIS

To understand how culture and perceptions of problem behaviors play a significant role in addressing student engagement on the part of school and families, it is critical to examine a number of related research avenues. Aggressive and disruptive behaviors present formidable challenges for educators and mental health professionals in secondary schools (U.S. Department of Education, National Center for Education Statistics, 2004) and to address these problems requires clear district-wide practices and expectations (McIntosh, Girvan, Horner, Smolkowski, & Sugai, 2014). The establishment
of clear expectations and accountability systems throughout the school district and across all schools should serve as a best practice for establishing a student and family friendly focus (Comer & Haynes, 1991).

Intentionality and persistence are two characteristics schools must embrace to ensure families understand they are needed, invited, and critical in playing a role in their child’s journey through school. The ability to identify and celebrate differences while also addressing concerns around student challenges is the appropriate formula for insuring better outcomes for all parties involved in the learning process (McIntosh et al., 2014).

**Best practices for addressing inequities and disproportionalities.** In working with school leaders, one should be aware of the cultural competence of one’s school and be a leader in assessing and promoting culturally competent school environments and expectations (Nelson & Bustamante, 2009; Nelson, Bustamante, & Watts, 2013; Nelson, Bustamante, Wilson, & Onwuegbuzie, 2008). Schoolwide expectations “can be developed collaboratively with students, families, and community members, as well as assessed for their congruence with the range of cultural groups in the school” (McIntosh et al., 2014, p.2). School leadership should assess the organizational cultural competence of their school environments and then how to take actions that enhance strengths-based policy and practice will contribute to the provision of academically and socially positive experiences for all students (Nelson, Bustamante, Sawyer & Sloan, 2015).

A strength-based approach is essential in all of these efforts (Saleebey, 2001). Eber (2003) states, “the role of a designated team facilitator is critical to ensure the process is adhered to and that the principles of the strength-based person-/family-centered approach are held fast” (p. 3). This focus rests on the belief that culturally competent schools should promote academic and social success for all students, particularly those who are at risk of failing and/or dropping out of school, including bilingual students and English Language Learners (Scott & Eber, 2003).

**How Principles of Youth Engagement Can Inform Family Engagement**

What might it look like for schools to not only see young people as participants, but as active partners and decision-makers when it comes to their experience of wellness and achievement at school? Likewise, what might it look like for school systems to envision their students’ families as equitable partners in the construction of their children’s experience of wellness and achievement at school? Family engagement and school mental and behavioral health has received due attention in the past decade, with many organizations publishing guides, toolkits and web-based resources to developing frameworks and partnership practices (e.g., the Johns Hopkins’ National Network of Partnership Schools, The Harvard Family Research Project). School practitioners are eager to partner with parents/guardians of their students driven by the research that demonstrates these partnerships as pivotal pre-
ventative and promotive factors in young people’s positive healthy development (Epstein & Sheldon, 2002; Fan & Chen, 2001; Jeynes, 2007). Although some scholarship has examined how family engagement can positively influence youth participation and academic achievement in schools (Stormshak, Fosco, & Dishion, 2010), and other articles have discussed the role of family engagement in youth violence prevention (Zeldin, 2004), youth engagement is rarely positioned as leading other engagement strategies. Greenberg et al. (2004) importantly note that to enhance school-behavioral health (inclusive of mental health), all engagement efforts need to be coordinated and aligned so the school is activating a cohesive, comprehensive, and consistent approach to all aspects of engagement.

There’s a radical – and wonderful – new idea here…that all children could and should be inventors of their own theories, critics of other people’s ideas, analyzers of evidence, and makers of their own personal marks on the world. It’s an idea with revolutionary implications. If we take it seriously.


For the purpose of understanding how principles of youth engagement in the context of PBIS can inform the way in which schools might partner with families, we define youth engagement as the overarching term that captures the concepts of student voice, expression, leadership, and consultation. Many continua have been widely adapted to assess the quality of youth engagement, providing opportunities to self-assess to redirect. The organization THRIVE\(^1\) offers a continuum of youth involvement, arguing that organizations (e.g., schools) can be youth-guided, youth-directed, or, ideally, youth-driven. We believe the same can be applied to families. Additionally, the Jim Casey Youth Opportunities Initiative\(^2\) builds off a continuum of adult attitudes (Lofquist, 1989), arguing that adults see youth as objects, perhaps as recipients, and ideally as partners. Since research has demonstrated that self-determination and competence are key factors in resilience (Masten, 2015; Ungar, 2013, 2015), institutions have begun recognizing that students are often not allowed to actualize their resilience. For example, students are often perceived by adults as “too young” to have agency or are not knowledgeable enough, or that young people are simply uncaring or disinterested in matters related to their schooling experience (Fletcher, 2015; Isralowitz & Singer, 1981). In the same time period (1990s), youth engagement scholars were challenging schools to become more student-centered (and less test-centered) and PBIS emerged as a framework to proactively establish a positive school culture and establish behavior interventions and supports for all students to achieve social, emotional and academic success (Sugai & Simonsen, 2012). Notably, however,
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Youth (students) and families have not been involved as equal partners in the development and proliferation of student supports and services efforts like PBIS.

As emphasized throughout this e-book, we are now at a cultural inflection point that recognizes the power of service recipients (students and families) — a shift from being passive receptacles of care to empowered partners in their own wellness and achievement. The youth engagement field is moving from a unidimensional definition of youth engagement — where its sole purpose was cognitive learning and academic achievement — to a multidimensional interpretation that sees the benefit of youth engagement beyond academic gain and recognizes that youth engagement benefits the whole child (Yonezawa, Jones & Joselowsky, 2009). With this understanding, PBIS can help engage youth and families as equal and equitable partners in achieving these whole child benefits that stem from the understanding that a child’s physical, mental, behavioral, social and academic outcomes are all interdependent and mutually influencing (Allensworth & Kobe, 1987; Centers for Disease Control and Prevention, 1992; Valois Lewallen, Slade & Tasco, 2015).

Culturally, we have seen an attitudinal shift from one that positions students and families as disconnected and/or uninterested in their education (without examining the schools’ role in that experience) to a more holistic perception that young people and their families are not disinterested in education per se, but rather the kind of education they are offered. This shift is often noted as the move from “parental involvement” to “parental engagement,” a shift from school leadership’s deficit based to strengths-based attitudinal mindset (Baker, Wise, Kelley & Skiba, 2016; Ishimaru, 2014). We often hear families referred to as receivers, rather than partners. For example, one of the main tenants of PBIS is to connect school systems with families (Muscott et al., 2008b), and often the verb that follows is “including” families throughout the process. However, what might it look like to partner with families? What would it be like to co-construct what interventions are delivered at each tier? What would it be like to co-determine “expected” behaviors or co-define what “positive” behaviors look like? How can family engagement practices for support systems like PBIS share outcomes?

Continuum Models of Quality of Participation

As previously mentioned, PBIS aims to connect schools with families, but typically refers to them as “including” families in the process, rather than engaging them as equal partners. Thus, this continuum of adult attitudes toward youth also appears applicable to the school-family context.

The shared apex for the majority of youth engagement continua is to work towards a culture of youth-adult partnership; thus, we are working toward a culture of family-school partnership. This partnership is defined as collaborative relationships between school staff, parents and other family members of students at a school in which mutual trust, respect, shared decision making and responsibility are foundational (Mapp & Kuttner, 2013). Zeldin and Collura
(2010) define youth-adult (or student-educator if one desires to position the role of the stakeholders over the age of the stakeholders) partnership as a relationship that implicates both youth and adults in work that holds a shared, purposeful and intentional outcome, argued to be the most central aspect to authentic youth engagement.

To note, these youth engagement frameworks are parallel to the context of family engagement, especially when arguing that a partnership implies critical action of both parties; neither the young person nor the family is a passive actor but rather is an active collaborator. For example, Chovil’s (2009) Family Model of Care (based on Spragins’ [2007] Family Centered Practices work) posits that family engagement is the umbrella term that not only supports family participation and involvement, but more importantly, family empowerment. In fact, “families are active participants in all aspects of services and involved in decisions about care. Familismo (family-centered) in mental health contexts refers to family support and shared decision making when working with professionals” (Olvera & Olvera, 2012, p 79).

These continuum models of quality participation have been widely used in non-profit organizations, in relation to student leadership, but rarely applied to the context of youth mental health and/or service access. We aim to offer a model of how the concepts of youth – adult partnership can be applied to family-school partnerships in the context of student support services, like those represented in PBIS.

**Applying Concepts to Practice: Behavior and Mental Health Referral Pathways/Systems**

PBIS offers schools a tiered framework through which services and evidence-based practices are selected and applied within a data-driven process to promote and support student behavioral, emotional, and social well-being (see Chapter 3). Often, this includes schools developing and implementing formal or informal referral pathways – systems in which adults identify students based on data from screening or adult reports of various student concerns and then referring students for supports or interventions within the school or to outside community providers (Ikeda, Neesen, & Witt, 2009). Referral pathways are defined as “the series of actions or steps that begins at the moment a person in the school or local community identifies a mental health-related concern in a school-aged young person” (O’Malley et al., 2015). Referral pathways offer an entry point for schools to model authentic youth-adult partnership, or in this case, family-school partnership. Referral pathways can either continue to perpetuate systems where decisions happen to youth and/or their families, or if constructed through a youth-empowered and family-driven lens, can shift to systems created for and with youth and families.

We offer another popular model of youth engagement as the most helpful tool because it explicitly unpacks what a family-school partnership might look like. This model is Hart’s Ladder, originally developed by Roger Hart in 1997 and adapted by youth development theorist, Adam
Fletcher in 2008. Using Hart’s Ladder, schools and school systems can self-reflect to gain deeper understanding about the nature of youth-adult, and in this case, family-school partnerships. The model describes eight rungs of participation in a partnership; the bottom three rungs demonstrate non-participation and the upper five rungs delineate active participation. In Table 1, we adapted Hart’s Ladder to what it might look like in the school behavioral health and wellness context for youth and families. The model’s original rungs are delineated in the column “Quality of Participation or Consent.” Hart’s model uses participation as the measured quality, and in the context of school referral pathway identification and interventions we use consent.

Table 1. Adapting and Applying Hart’s Ladder to Youth- and Family-Driven Behavioral and Mental Health Referral Pathways/Systems

<table>
<thead>
<tr>
<th>Quality of Participation or Consent</th>
<th>Rungs of Youth Voice</th>
<th>Rungs of Family Voice</th>
<th>Rungs of Family Voice Youth Driven</th>
<th>Wellness &amp; Support Systems Family Driven</th>
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<tbody>
<tr>
<td>8. Young people and adults share decision-making</td>
<td>Young people have the ideas, set up the project and invite adults to join them in making decisions throughout the project. They are equitable partners.</td>
<td>Family members have the ideas, set up the project and invite school site leadership to join them in making decisions throughout the project. They are equitable partners.</td>
<td>Young people actively identify their own wellness and support system needs, approaches, and services and invite adults to partner with them throughout the process. Any adult action is youth-centered and responsive.</td>
<td>Families actively identify their own [student’s] wellness and support system needs, approaches, and services and invite school site leadership to partner with them throughout the process. Any school action is family-centered and responsive.</td>
</tr>
<tr>
<td>7. Young people lead and initiate action</td>
<td>Young people have the initial idea and decide on how the project is to be carried out. Adults are available and trust in the leadership of young people.</td>
<td>Family members have the initial idea and decide on how the project is to be carried out. School site leadership are available and trust in the leadership of families.</td>
<td>Young people initially identify a/their wellness and support system need(s) and then determine which services and approaches they would like to access.</td>
<td>Families initially identify a/their wellness and support system need(s) and then determine which services and approaches they would like to access.</td>
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<th>Quality of Participation or Consent</th>
<th>Rungs of Youth Voice</th>
<th>Rungs of Family Voice</th>
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<tr>
<td>6. Adult-initiated, shared decisions with young people</td>
<td>Adults have the initial idea, and young people are involved in making decisions, planning and implementing the project.</td>
<td>School site leadership have the initial idea, and family members are involved in making decisions, planning and implementing the project.</td>
<td>Adults initially identify the wellness and support system need(s) of young people, and young people are involved in making decisions around the response to those needs.</td>
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<td>5. Young people are consulted and informed</td>
<td>Adults design and facilitate the project and young people's opinions are given weight in decision-making. Young people receive feedback about their opinions.</td>
<td>School site leadership design and facilitate the project and their opinions are given weight in decision-making. Family members receive feedback about their opinions.</td>
<td>School site leadership designs and facilitates the referral pathways, processes and policies related to student wellness and support systems. Families are asked for their opinions based on their lived experiences; they receive feedback about their lived experiences (validating or invalidating their opinions).</td>
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<th>Rungs of Family Voice</th>
<th>Rungs of Family Voice</th>
<th>Wellness &amp; Support Systems</th>
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<tr>
<td>4. Young people assigned but informed</td>
<td>Adults decide on the project and young people volunteer for it. Young people understand the project and adults respect their views.</td>
<td>School site leadership decides on the project and families volunteer for it. Families understand the project and schools respect their views.</td>
<td>Adults design and facilitate the referral pathways, processes, and policies related to young people’s wellness and support systems and young people volunteer to participate in some or all of the steps of the processes and policies. Adults ensure that there are structured opportunities to check for youth [and their families’] understanding of the process, policies, and pathways in place regarding youth wellness and support systems. Adults create and drive a wellness and support system reform initiative or project; adults select [which] young people [should be] to be a part of the implementation.</td>
<td>Schools design and facilitate the referral pathways, processes, and policies related to student wellness and support systems and families volunteer to participate in some or all of the steps of the processes and policies. Schools ensure that there are structured opportunities to check for families’ [and their young people’s] understanding of the process, policies, and pathways in place regarding student wellness and support systems. Schools create and drive a wellness and support system reform initiative or project; schools select [which] families [should be] to be a part of the implementation.</td>
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### Quality of Participation or Consent

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<td>3. Tokenism</td>
<td>Young people are given a limited voice and little choice about what they say and how they can communicate.</td>
<td>Families are given a limited voice and little choice about what they say and how they can communicate in relation to their child's wellness and support system access.</td>
<td>Young people are given limited voice and choice about how they experience awareness and access of wellness and support system services and approaches. There are few opportunities to communicate their lived experiences to adults. Adults only refer or invite young people to share their wellness and support system needs when they are required to.</td>
</tr>
<tr>
<td>2. Decoration</td>
<td>Young people can take part in an event in a very limited capacity and have no role in decision-making</td>
<td>Families can take part in an event in a very limited capacity and have no role in decision-making</td>
<td>[Only youth with the awareness of services] can access wellness and support system services based on a referral from an adult; they do not have decision-making power in if or how they receive services.</td>
</tr>
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</table>
Quality of Participation or Consent

1. Manipulation

Adults have complete and unchallenged authority to abuse their power. They use young people’s ideas and voices for their own gain.

Schools have complete and unchallenged authority to abuse their power. They use families’ ideas and voices for their own gain.

Adults have complete and unchallenged authority to abuse their power in forcing or coercing young people to receive services. Any ideas youth offer about their experiences of support systems and wellness services are used for adult gain.

Adults share young people’s wellness and support system needs & information without permission.

Schools have complete and unchallenged authority to abuse their power in forcing or coercing families to receive services. Any ideas families offer about their experiences of support systems and wellness services are used for school gain.

School site leadership share young people’s and their families’ wellness and support system needs & information without permission.

Remembering that all schemas, continua, and models might suggest that working with youth and families in schools is linear, we acknowledge that in each relationship and interaction and in each school and district, the quality of participation or consent in partnerships may shift dynamically. The purpose of this applied (and adapted) model is to offer schools a tool through which school leaders and families might “sit together” and discuss with authenticity and transparency what their partnership looks like regarding student support systems like PBIS. Too often, when we ask schools how families are involved, it rarely lands above Rung 5 (“School site leadership design and facilitate the project and their opinions are given weight in decision-making. Family members receive feedback about their opinions”). At “back-to-school” events, families may be presented with the expected behaviors for their children or the tiered student support model with examples of services and supports by tier. Rarely, however, are families active co-constructors of those expectations or of the decisions that contribute to what supports are provided for each tier and whether or not their children should be placed in services. Altogether, there are enormous challenges to this work, and they namely land in school leadership’s attitudes and
beliefs systems around how students and their families are seen and valued in the schooling experience, a dynamic stemming from a number of potential factors. These include parental perception of a school’s culture that exhibits culturally insensitive outreach, communication errors or inadequate methods, logistical barriers (e.g. when schools create meetings during parent/guardian work hours), and schools failing to orient and explain the school system or opportunities for parent/guardians to contribute meaningfully. In the section below, we discuss how leaders can use Hart’s Ladder to assess their attitudes and belief systems and begin the shift toward a more equal and equitable partnership with youth and families.

**Avoiding engagement traps.** It can be tempting to concentrate on where a partnership lies in the top few rungs, but we encourage practitioners to examine the bottom three rungs: tokenism, decoration, and manipulation. They often surface during uncomfortable conversations among school staff or between school site leadership and youth and families, particularly if discussing the quality of participation in their partnership together. Schools may not realize that they share information about student and family behavior, mental health and wellness needs and supports without permission. Additionally, when families share information about their first-hand involvement in everyday experiences, their stories are often repeated as part of the school’s narrative by educators and researchers for the school’s gain without the student’s or family’s consent.

Importantly, schools may only engage families because they are mandated to do so. An important aspect of PBIS is to engage families as partners of school culture and climate⁴, but this may be perceived as a “tack on” or extra thing to do (Muscott et al., 2008a). There is great value in taking time to discuss how, when, and with whom schools disproportionately tokenize families (and their participation) when it comes to implementing support systems like PBIS. Terms like “getting parent buy-in” or “getting parents on board” are clues into a partnership that may not be fully equal or equitable.

When using Table 1 to reflect on implementation partnerships among families (including youth) and the school/PBIS team, the school site leadership might examine questions that probe which families may disproportionately experience tokenism, decoration, or manipulation more than others. Are families who are English language learning more often manipulated? Are families that are able to be physically present at school more often able to be consenting partners? Which families’ home values parallel the school’s? Tackling questions like these may result in more authentic partnerships that can move a families’ experience from the bottom rungs to higher ones, accessing a more empowered, cooperative, and collaborative relationship between the school site leadership and students’ families.

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⁴ School “climate” and “culture” have been described in various ways over the past several decades and are often used interchangeably. School climate generally refers to perceptions or subjective experiences of school, whereas school culture tends to indicate the actual (objective) state of a school (see www.schoolclimate.org for additional discussion).
Summary

Hart’s Ladder, when applied to the context of PBIS and tiered behavior and mental health referrals, offers a concrete approach for schools and their family partners to create school-based systems that are family-driven and student-centered. Whether referral pathways are informal or formal, or have been developed or are in the process of being so, schools have the opportunity to re-empower families. Opportunities lie in the definition of expected behavior, in the agreements around what constitutes each tier, and shared-decision making around supports and interventions (who, why, how,). This explicit partnership might shift families’ experience of having student supports happen to them to happening with them. Conversations are not easy; families’ needs are not uniform. Families often carry similar mental health intervention needs as students’ needs and can be reflections of unmet needs in their larger contexts. Nonetheless, by identifying tangible partner possibilities, schools can work towards building effective student support systems that ensure school climates are intentionally oriented towards youth and family engagement.

Legal Considerations for Family Engagement with Special Education Populations

Quasi-experimental research conducted on the effects of parents’ involvement in the education of their children have documented that increased parent engagement in their child’s education results in increased academic and behavioral achievement of children (Duchnowski et al., 2012). Such research has shown improvements in reading and math achievement, student attendance, prosocial behaviors, homework completion, and graduation rates (Burke, 2012; Duchnowski et al, 2012) and holds true despite the parent’s socioeconomic and educational levels (Henderson & Mapp, 2002). In fact, according to a report by the U.S. Department of Education “Thirty years of research shows that greater family involvement in their children’ learning is a critical link to achieving high quality education and a safe disciplined learning environment” (U.S. Department of Education, 1994, p.1). Moreover, programs designed to increase parent involvement in their child’s school have shown positive effects (Sheldon & Epstein, 2005). PBIS provides systems for these parental involvement practices (Sugai & Simonsen, 2012) to transform parent involvement into meaningful partnerships; consequently resulting in engaged families across the continuum. The purpose of this section is to identify the relevant laws surrounding family engagement and to understand how these legal and policy implications inform family engagement and PBIS.

The importance of family engagement has also been recognized in federal education law and can be fulfilled through the implementation of PBIS with fidelity. President Lyndon Johnson signed the Elementary and Secondary Education Act (ESEA) into law in 1965. The purpose of the ESEA was to improve the academic achievement of disadvantaged students by provided federal money to assist states in improving edu-
Aligning and Integrating Family Engagement in Positive Behavioral Interventions and Supports (PBIS): Concepts and Strategies for Families and Schools in Key Contexts

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Educational opportunities for these. Since its original passage, a critical piece of the ESEA was an emphasis on parent and family engagement in their children's education. The latest reauthorization of the Every Student Succeeds Act (ESSA) of 2015 increases this emphasis.

Title I of the law allocates funds from the federal government to state educational agencies (SEAs). The SEAs then allocate funds to school districts and schools. Section 1116 of Title 1, titled the Parent and Family Engagement Set Aside; require each school district that receives Title 1 funds to reserve at least 1% of these funds to carry out family engagement activities. Moreover, parents and family members of low-income students must be included in decisions about how these parent and family engagement funds are spent. These funds must be spent for at least one of the following activities: (a) supporting school in training staff regarding parent and family engagement activities; (b) supporting programs that reach families at home, in the community, and at school; (c) disseminating information on best practices that focus on parent and family engagement, especially for increasing engagement of economically disadvantaged families; (d) disseminating sub grants to schools to collaborate with community-based organizations or businesses that have a track record of improving family engagement; or (e) engaging in any other activities that the district believes are appropriate in increasing parent and family engagement.

Part A of Title IV of the ESSA, titled Student Support and Academic Enrichment Grants, provides flexible block grants to states for activities, which include establishing statewide family engagement centers. The purpose of these centers is to assist parents to effectively participate in their children's education and to remove barriers to parent and family engagement.

The ESSA involves parents in several activities throughout the law and actively funds activities to increase parent and family engagement. Moreover, school districts must make active and good faith efforts to increase meaningful parent involvement in their child’s education. PBIS is a prime opportunity to meaningfully engage parents in their child’s educational trajectory as it advocates for parent representation on systems-level teams and requires parents to be a major contributor to intervention design at Tier 3.

Another federal law, the Individuals with Disabilities Education Act (IDEA), goes beyond ESSA to mandate the school officials involve the parents of students with disabilities in the development of their child’s education plan. In 1975, when the IDEA was originally passed, the law was titled the Education for All Handicapped Children Act. In crafting the law, the Congressional authors understood that parental involvement in the development of their children's special education plan was essential because the receipt of special education services by children with disabilities depended in part on their parents’ abilities to advocate on

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5. The US Office of Management and Budget defines “family member” as an individual with any of the following relationships: spouse and parents; sons and daughters; brothers, sisters and their spouses; grandparents their and spouses; domestic partners of those listed here; and any individual related by blood or affinity whose close association is the equivalent of a family relationship.
their children’s behalf. Essentially, the IDEA required parents to be involved in their child’s special education from planning to implementation. In fact, Congress emphasized the central role of parents in IEP development and the provision of an appropriate education from the outset in the findings and purposes provision of the IDEA:

Almost 30 years of research and experience has demonstrated that the education of children with disabilities can be made more effective by—strengthening the role and responsibility of parents and ensuring that families have meaningful opportunities to participate in the education of their children at school and at home (IDEA, 20 U.S.C. § 1400 [c]/[5] [B], 2006).

PBIS supports family engagement through inclusion in the tiered intervention process mandated by IDEA (Eber, Sugai, Smith, & Scott, 2002). For example, schools implementing wraparound services in a PBIS setting with fidelity partner with families at the onset of service delivery to actively solicit feedback regarding goals and to develop intervention plans. Families are viewed as team members rather than a visitor or outsider, and are considered an expert for the child in question (Eber et al., 2002).

The IDEA includes a set of procedural requirements to ensure that students with disabilities receive a free appropriate public education (FAPE) that consists of special education services that are individualized according to students’ needs. Among these procedural safeguards are protections to ensure the involvement of the parents of students with disabilities. Three such safeguards include notice requirements, consent requirements, and participation in the development of their child’s individualized education program (IEP).

The IDEA includes mandates that schools notify parents at various stages in the special education process regarding their procedural rights. School districts must provide written notice to parents of students in special education prior to the school’s proposing to initiate or change the identification, evaluation, educational placement, or provision of a free appropriate education (FAPE) to their child, or prior to the school’s refusing to make such changes (IDEA Regulations, 34 C.F.R. § 300.503(a)). Additionally, school districts are also required to provide parents with the information about their procedural rights in the following circumstances: (a) after the initial referral, (b) upon receiving a parental request for evaluation, (c) upon receipt that the parent has filed a complaint with the SEA and first due process complaint, (d) when school district’s disciplinary removal constitutes a change of placement, and (e) upon receiving a parental request (IDEA Regulations, 34 C.F.R. § 300.504a). The purpose of notifying parents is to provide them with information to protect their rights and the rights of their child, to allow them to make informed decisions, and to enable them to fully participate in the special education process (Tatgenhorst, Norlin, & Horn, 2014).

School districts must also obtain informed written consent from a student’s parents before they take certain actions. The IDEA requires informed parental consent prior to taking any of the following actions: (a) evaluating a child to
determine whether the child is eligible to receive special education and related services (initial evaluation only), (b) providing special education and related services to a child, (c) reevaluating a child, (d) allowing an individualized education program (IEP) team member to be excused from attending an IEP meeting, and (e) accessing a child’s private insurance information (IDEA Regulations, 2006, 34 C.F.R. § 300.300 et seq.). When a school obtains parents’ written consent, it gives the district permission to carry out the action proposed by the district. Readers should note that although written consent is required to conduct an individualized evaluation of a student with disabilities, if the district is giving a test that is taken or may be taken by all of a school district’s students, written consent is not required. Such a situation may occur when a school district uses a multi-tiered system of supports (MTSS), which requires assessment to move within the tiered system.

The most basic special education parental mandate is that a student’s parents be full, equal, and meaningful participants with school district personnel in the development of their child’s individualized education program (Yell, Katsiyannis, Ennis, & Losinski, 2013). The IEP is based on an assessment of a student’s unique educational needs, and delineated a student’s program of special education and related services that a school district will provide. When developing the regulations to the IDEA, officials in the U.S. Department of Education noted that the effectiveness of educating children with disabilities depended on “strengthening the role and responsibility of parents and ensuring that families of such children have meaningful opportunities to participate in the education of their children at school and at home” (IDEA Regulations, 34 C.F.R. § 1400 (c) (5)(B)). According to Bateman (2011), “few, if any, of IDEA’s procedural rights are more vigorously protected by courts” than parental involvement (p. 93). Furthermore, the U.S. Court of Appeals for the Ninth Circuit noted that any interference with parental participation in IEP would “undermine the very essence of the IDEA” (Amanda J, v. Clark County School District, 2001, p. 892). Clearly parental involvement is a core imperative of the IDEA. This imperative is supported by effective PBIS implementation (Eber et al., 2002).

Bully-Victim: Understanding the Context

Olweus (1993) defines bullying or victimization as occurring when one, “is exposed, repeatedly and over time, to negative actions on the part of one or more other students” (p. 9). There are at least two types of victims described in bullying prevention work. One is a victim, who acts passively, one who does little to entice the one bullying besides possessing traits of being an easy target. Often this type of victim uses avoidance to deal with the victimization. Another type of victim is a bully-victim or provocative victim, one who provokes others, which may encourage exclusion, teasing, and bullying (Smokowski & Kopasz, 2005). Even though this type of victimization represents a small number of young people, most everyone can visualize a provocative victim when asked to do so. These youth, who
bully others and are bullied themselves, are often unpopular with other children and youth, and some adults, are easily provoked, and may be perceived as anxious and nervous type individuals (Andreou, 2001; Carney & Merrell, 2011). Repeatedly they trigger negative responses from their peers, because of outbursts, or other disruptive behavior (Smokowski & Kopasz, 2005). When these behaviors spill over into the classroom, some students may see their teachers respond in anger and with frustration to this child. When this happens, students may feel they are given unspoken permission to discount this child, to give them what they deserve because they, “asked for it.” Provocative victims often have elevated levels of dominant, aggressive, and antisocial behavior but, at the same time, they may feel socially anxious and possess low self-esteem (Olweus, 1997). Students who bully may also target this individual because of their inability to protect themselves. There are fewer studies addressing the bully-victim than the traditional bully and victim roles, but according to Craig (1998), they possess some similar characteristic to the bully – higher levels of physical and verbal aggression.

It is important to consider that many of these bully-victims possess some sort of learning or attention disorder which enhances their behavioral issues. Kumpulain et al. (1998) compared bully-victims with non-bullying youth and youth who bully only, and found bully-victims measured a higher rate of externalizing behavior and hyperactivity and depressive symptoms relative to the other youth. Some studies show that children with Autism Spectrum Disorder (ASD) may possess some of these traits. One study (Sterzing, et al., 2012) reported 46.3% of children with ASD were involved with bullying, while a 2012 study by the Interactive Autism Network found that a total of 63% of 1,167 children with ASD, ages 6 to 15, had been bullied at some point in their lives.

Family engagement as it relates to PBIS, is defined by Lewis (2007) to include awareness, involvement, and support across the three tiers – universal, selected, and targeted. Family engagement involves more than one-directional communication which is one of the most prevalent ways that families receive information about their child from schools (Garbacz et al, 2016). Engaging families in the work of bullying prevention is key to the well-being of their child.

According to Ttofi and Farrington (2011), parent meetings and parent trainings were associated with reductions in bullying at schools. Families becoming involved by having discussions on positive expectations with their child in a calm, nonjudgmental, and loving tone may encourage the child to open up to new ideas toward problem solving. During these conversations, families and school staff can connect the school’s 3-5 schoolwide expectations and provide examples and non-examples (i.e., bullying behaviors) describing appropriate ways to interact with peers. This connection further integrates the school’s PBIS framework into the problem-solving process and makes the universal plan salient to both the student and his/her family (Bosworth & Judkins, 2014; Lewis & Sugai, 1999). In order for the student to be successful in the long term, the student must be provided...
with replacement behaviors and the opportunity to practice such in the context of the school and community environment (Colvin, Tobin, Beard, Hagan, & Sprague, 1998; Sugai, et al., 1999). In a PBIS framework, schools provide multiple opportunities to practice skills through teaching and re-teaching expectations at multiple time points during the school year (Sugai & Horner, 2006). Reinforcing students using appropriate schedules of reinforcement helps shape behaviors to increase the future probability that the expected behavior will reoccur. The reinforcement schedule can be thinned once the student has demonstrated competency with the skill (Cooper et al., 2007).

Establishing a system of positive acknowledgment when the child successfully follows expectations is important for families, as well as teachers (Ross & Horner, 2009). Both sets of adults might be teaching skills to reduce impulsive behaviors, such as positive self-talk, wait time, and using pre-correction to better prepare the child for new experiences. Ensuring that the child knows and understands the expectations and consequences whatever situation they are exposed to should help to prepare them for greater success with the behavior (Lewis, 2007). Providing reminders, prompts, and pre-corrections can help to prepare the child to make better choices (Lane, Menzies, Ennis, & Bezdek, 2013). Some families have found that using a more formal approach, like a written contract encourages their child to maintain a level of appropriate behavior (Smokowski & Kopasz, 2005). When using behavior support plans at home, consistent implementation is key. Families should reinforce appropriate behavior when it happens, even if it is only a baby step or approximation of the expectation.

Families could also seek information from teachers and other informed adults with a positive attitude, not a defensive tone. It may be difficult for families to admit and then address the bullying role the child played (Kumpulainen et al., 1998). PBIS offers a data-driven approach to parent-teacher-student interactions. Rather than offering subjective statements which might incite confrontation, schools utilizing PBIS employ data (e.g., office discipline referrals, nurse’s referrals, attendance) to drive conversations with parents and students (McKevitt & Braaksma, 2008). Products of these meetings are data-driven interventions to support the student at the secondary or tertiary level. Selected interventions describe how progress is monitored using multiple data sources, and should include information on what criterion must be met for the student to exit the intervention (Splett et al., 2016). Through a bullying prevention lens, that could mean that a student’s behavior is tracked through teacher referral, family observation, and self-assessment. The student problem solves with their family and teacher to set positive behavior goals. When goals are met by the student, there may be positive acknowledgments and less monitoring by adults. Family input on intervention progress and decision rules is paramount to the success of the intervention as families are the ultimate expert on the student and can offer a viewpoint different than that of school staff.

The Collaborative for Academic, Social and Emotional Learning (CASEL) defines...
social emotional learning (SEL) as, “the process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions” (Weissberg, Goren, Domitrovich, & Dusenbury, 2013). O’Moore and Kirkham (2001) concluded that bully-victims need more rehabilitative programs rather than punishment or harsh discipline to address their strong sense of inadequacy. Within the school building, a validated SEL program with a plan for non-responders is supportive to students across the continuum. A universal SEL program (see www.casel.org) complements PBIS in that a) both focus on preventing problem behavior, b) both take a positive approach rather than punitive, and c) students are explicitly taught expected behaviors to be successful in school (Cook et al., 2015). Families should be informed of the SEL program selected for their child’s school and information regarding subject matters should be shared so lessons can be reinforced in the home. Outside of the school building, this kind of rehabilitative support may consist of families providing more structured time and a variation of prospects for their child to meet new friends. Interacting with children that are not their schoolmates may allow a fresh start without being hindered by their negative history from school. When a parent finds new ways that their child can be successful outside of the school day, such as a hobby or involvement in a sport, it may form a foundation to begin building positives on. This may also increase the probability of their child finding a different venue, outside school, to increase their self-worth and find new friends.

The life of a provocative victim can be lonely and frustrating. Considering ways that all adults who surround these children can show positive connections and care will encourage the other children around them to know that everyone should be treated with respect. These examples are useful for parents and other adults to positively connect with provocative victims across PBIS tiers with all students (Ross & Horner, 2009).

**Family Engagement and the LGBT Community**

In this section we use the term Lesbian, Bisexual, Gay, and Transgendered (LBGT) Community because youth a part of the community might personally identify as LGBT or be a member of a family which includes LGBT parents, or siblings. In either case, research informs us that LGBT youth are often victims of bullying and have greater challenges with school engagement. The National Education Association (2012) considers PBIS a general education initiative in which positive interventions are used to accomplish behavioral change that can reduce bullying in the LGBT community (Sugai et al., 2012).

In a 2008 national survey, the Gay, Lesbian and Straight Education Network (GLSEN; www.glsen.org) found that students who identify as LGBT or live in families which include LGBT members, report that: 72.4% heard homophobic remarks, such as “faggot” or “dyke,”
frequently or often at school; 84.6% of LGBT students reported being verbally harassed; 40.1% reported being physically harassed; 18.8% reported being physically assaulted at school in the past year; 61.1% of students reported that they felt unsafe in school because of their sexual orientation; 25% skipped school because they felt unsafe, compared with 5% of straight students; and 45% attempted suicide, compared with 8% of straight students (Kosciw & Diaz, 2008).

These statistics have a direct impact on family and student engagement at the school. Students who identify as LGBT or have family members, who are LGBT, report that they often hear negative comments from 10-15% of school faculty as well as other school staff. This is compounded when the student and indirectly the family hear negative comments from 25% of other adults, including other parents and community members who interface with the school (Kosciw & Diaz, 2008). Research indicates that when other students hear adults being critical of the LGBT community that they are more likely to bully LGBT youth (Stone et al., 2014).

If there is a silver lining regarding LGBT families in American schools, it is the issue of engagement. In a 2008 national survey, GLSEN found that the majority of parents in the study had been involved in their child's school in the past year. Nearly all parents (94%) reported that they had attended a parent-teacher conference or Back-to-School night and two-thirds (67%) had volunteered at the school. About half (51%) of the parents reported that they belonged to the school’s parent-teacher association or organization (e.g., PTA or PTO) and an even higher percentage reported that they had taken part in activities of this organization in the past year (regardless of belonging to the organization). LGBT parents are seen to be proactive in addressing LGBT issues. About half of the parents (48%) reported that they had gone to the school at the start of the school year to talk to school staff about their unique family situation.

To examine whether the involvement of LGBT parents in their children’s schools was similar to the involvement of other parents, we can compare results from the LGBT survey of parents to available national statistics on parental involvement in school. When comparing the percentages of LGBT parents to a national sample of K-12 parents available from the National Center for Education Statistics (NCES, 2002; Vaden-Kiernan & McManus, 2005) on two indicators of parental involvement: attending parent-teacher conferences and acting as a volunteer in school, we find interesting results. On both indicators, LGBT parents were more likely to be involved in their children’s school than parents in the national sample. With regard to parent-teacher conferences, nearly all of the LGBT parents (94%) report having participated in the past year compared to 77% of the national sample of parents (Vaden-Kiernan & McManus, 2005). Parents were asked how comfortable they would be talking to school personnel about their family as well as how often they discussed being an LGBT parent with school personnel. Overall, parents in the survey reported high levels of comfort with school personnel – two-thirds or more reported that they would be very comfort-
able discussing their family with teachers, the principal, school counselor and other staff.

Despite the finding that LGBT families may be more engaged than other groups, it is clear that there is an urgent need for action to create a safer school climate for not just LGBT youth, but for all students. There are steps families and stakeholders can take to remedy the situation. Data from the LGBT school experience has provided a direction for effective such as supporting student clubs, such as Gay-Straight Alliances, including diversity training for school personnel to include LGBT families, and adopting and implementing comprehensive anti-bullying programming (Kosciw & Diaz, 2008). LGBT families understand in-school resources and supports can have positive effects on school climate, their students’ sense of safety, and ultimately, on students’ academic achievement and educational aspirations.

The discussion of school staff led engagement and the presence of school staff that support LGBT youth is related to students’ academic achievement. As the number of supportive school staff increases, students’ reported grade point averages increased (Kosciw & Diaz, 2008). A greater number of supportive educators were also related to fewer missed days of school due to safety concerns (Kosciw & Diaz, 2008). Given the relationships between the presence of supportive educators and students’ academic achievement and sense of safety, it is important for schools to provide training for educators about LGBT related issues, including how to provide appropriate support to students with LGBT parents. Such training may foster a more positive school climate for LGBT parents as well as students (Goodenow, Szalacha, Westhimer, 2006).

Enhancing LGBT Family Engagement in School

To enhance family engagement of LGBT youth, classroom teachers, education leaders and policymakers should consider the following actions:

- Advocate for comprehensive anti-bullying and anti-discrimination legislation at the state and federal level that specifically enumerate sexual orientation and gender identity/expression as protected categories alongside others such as race, faith and age (Kosciw & Diaz, 2008);

- Adopt and implement comprehensive anti-bullying policies in schools and districts, with clear and effective systems for reporting and addressing incidents that students experience (Kosciw & Diaz, 2008);

- Provide training for school staff to improve school/home relationships, and increase the number of supportive faculty and staff available to students and their families (Goodenow, Szalacha, Westhimer, 2006);

- Include multicultural diversity training into professional development that includes information about LGBT families (Toomey, Ryan, Diaz, Card, & Russell, 2010);

- Support student clubs, such as GSAs, that address LGBT issues in education (Kosciw & Diaz, 2008);
Increases student access to appropriate and accurate information regarding LGBT people, history and events (Kosciw & Diaz, 2008);

- Encourage parent-teacher associations to acknowledge the diversity of their school communities and take steps to ensure that no one experiences mistreatment—students and parents alike (Toomey et al., 2010);

- Offer educational programs for parents in the school community that include information about LGBT families (Kosciw & Diaz, 2008);

- Consider the LGBT family at social functions and celebrations such as; staff events, family events, student events, holiday celebrations (Kosciw & Diaz, 2008). For example, include artwork on school event invitations or signage on walls to include LGBT families.

**Aligning Family Engagement Conclusion**

In reviewing family engagement research and practices for the contexts discussed in this chapter, a blueprint of best practices has been provided. We identified a number of universal practices that come from the unique contexts of the groups discussed. These universal practices can be used with each of the groups, but also in the broader school-wide conversation about family engagement. Content in this chapter reinforces that PBIS systems and practices must be tailored to the needs and preferences of the local students, families, and community.

Practices that consider these unique populations are more likely to be effective than those that are implemented in a generic format (Sugai et al., 2012). These practices include:

1. School staff initiates evidence based family engagement strategies as an evaluated part of their jobs. These strategies avoid tokenism and manipulation on the part of school staff (Fletcher, 2014).

2. School leaders assess for and promote culturally competent school environments (McIntosh et al., 2014).

3. Schools and families collaborate when creating group opportunities such as meetings, support activities, and extra-curricular activities (Christenson & Reschly, 2010).

4. Strength-based interventions for academics and behavior are used that consider cultural differences to help build family engagement in diverse populations (Saleebey, 2001).

5. Youth help lead the planning and implementation of engagement activities (Zeldin & Collura, 2010).

6. Scripts for school personnel, families and youth are available and practiced to support positive interaction between all stakeholders. This includes; students, staff, parents, and other community members.

7. Increase student and family access to appropriate and accurate information regarding exceptional students, minority cultures, LGBT people history, and events (Kosciw & Diaz, 2008).
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CHAPTER NINE


Individuals with Disabilities Education Act, 20 U.S.C. § 1401 et seq.

Individuals with Disabilities Education Act Regulations, 34 C.F.R. § 300.300 et seq., 2006.


CHAPTER NINE


Aligning and Integrating Family Engagement in Positive Behavioral Interventions and Supports (PBIS): Concepts and Strategies for Families and Schools in Key Contexts

Chapter Nine


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My perspective regarding navigating education systems and schoolwide positive behavioral interventions and supports (PBIS) has been shaped by my experience as a parent of an elementary aged child, and as a special education teacher working in different school systems, in different states, for the last six years. Most recently, I worked for a non-profit organization where I partnered with a state university, schools and school districts, and state government. This afforded me an up close and personal view of the challenges and opportunities that can arise with the development of initiatives/frameworks like PBIS.

Guiding Principles for Systems Change and their Application to PBIS

There are many approaches to guiding systems change (e.g., Fixsen, Naoom, Blasé, Friedman, & Wallace, 2005) in educational and other systems. One approach that is particularly salient to me as a parent and educator are recommendations made by Mark Friedman in Trying Hard Is Not Good Enough (Friedman, 2005). Friedman suggests that when approaching the creation of an initiative there are several critical factors that should be addressed before beginning. First, the initiative's usefulness to community and the community's readiness to implement is important to consider. Guiding questions include, (a) Has a needs assessment been conducted? (b) Are there certain prerequisite conditions for children and families who live in the community? (c) Has the initiative been implemented elsewhere, and if so, are there data showing the impact it had on the community overall (Friedman, 2005)?

Creating buy-in with a new initiative is often one of the more challenging aspects of starting it. When creating buy-in it can be helpful to show positive effects of implementation, and building a positive culture that reinforces values, goals, and overall mission. An important principle to establish when creating buy-in is transparency. The bottom line is, people need to see something tangible and substantial, and how the program will positively affect their school.
and child. Transparency is important when communicating details about the initiative and any progress toward goals to community members.

After creating buy-in a second key theme is for challenges to be approached with common sense solutions. For example, when looking at the problem of behavior challenges in schools, one solution is to identify behavior expectations and teach the expected behaviors. Third, it is important to align goals and training plans, and provide appropriate supports during the training period. Fourth, use methods to help participants learn concepts quickly and apply them easily. Fifth, avoid jargon and use language that is easily understood. When we articulate using plain language, we will reach more people. Plain, transparent language eliminates communication errors that arise as the complexity of the issue is mirrored in the language we use. Teachers, administrators, and community members should all be using the same jargon free language (Friedman, 2005).

The sixth and final factor Friedman (2005) suggests is to measure results. Data systems should be established to measure the process and outcomes of the initiative. It is acceptable to fail or to underperform when starting an initiative. The point is to use data and measures to identify where changes need to be made or address where assumptions need to be challenged (Friedman, 2005).

In addition to the factors identified by Friedman (2005), my experience suggests it is essential to create a positive culture when launching an initiative. An organization can be comprised of bright, engaged, and talented people, but that is not enough to sustain a new program. A positive culture embraces ideas such as using supported training, fostering connections with all stakeholders, creating innovative solutions, and emphasizing a commitment to the work. A positive culture also facilitates shared decision-making wherein all involved can challenge assumptions.

**Resource Allocation and Community Building**

An elementary school in the Southeast United States demonstrated to their school district that after implementing PBIS, student outcomes improved. Over a five-year period, data collected by the school showed a 50% reduction in discipline referrals and improvements in state test scores in reading and math. In fact, test scores were nearly 10 points higher than other schools in the district that were not using PBIS. Data were used by the school to demonstrate how implementing a positive behavior program helped to reduce discipline issues while increasing grades. When the school taught social skills and provided self-management tools and supports to students, there was a drop in discipline referrals. Because there were less discipline interruptions in the classroom, students were likely able to access more direct instruction time in the classroom. The success of the program at the elementary school allowed the district to expand the positive behavior program to other schools in the district (Ross, 2016).

It is possible to implement PBIS without an infusion of resources, but resources, such as funds and staff time are beneficial. In states
where statewide school budgets have been substantially reduced, many school administrators are focused on basic needs, like ensuring they have enough books for students. In addition, class sizes may expand, special service personnel (e.g., occupational therapists) may see increased caseloads, and non-required activities may be cut. In a climate of decreased funding and limited resources, it can be difficult for school staff to be convinced that new initiatives like PBIS are an integral part of the student’s education. Thus, it is all the more important that schools share their data at the district level and with families so positive outcomes are clear.

If districts lack funds, they can assess available grants at the federal, state, local, and private level (Jordan, 2007). Federal government grants like the School Climate Transformation Grant, allow schools to fund PBIS programs at the building level (Iowa Area Education Agencies, 2015). In Iowa, Area Education Agencies helped implement PBIS programs into local school systems, provided training on evidence-based practices, and documented results showing the program could be maintained. A recent estimate indicated 556 schools in Iowa were implementing PBIS (Iowa Area Education Agencies, 2015). Similar mechanisms could be identified and used in other states to access funds to support PBIS.

The purpose of creating a positive social culture around the initiative is to establish an engaged community. In my experience, it is important for administrators to create an environment of mutual trust where employees can feel confident in their work. This can be done through modeling expectations, clearly and consistently communicating expectations, and providing performance feedback. One study showed that in organizations that had low employee engagement, productivity was also lower (Seppala, & Cameron, 2015). School administrators model what is expected, attend meetings and participate in them, and actively support initiatives. Three foundational characteristics administrators and staff can use to create and maintain a positive culture are: (1) emphasizing the impact of the initiative on the community, (2) providing supports for employees to implement the initiative, and (3) providing positive feedback and recognition (Seppala, & Cameron, 2015). These characteristics are the cornerstone of a positive school culture. Effective and engaging administrators create effective and engaging employees. They bring out the best in employees. Administrators understand employee strengths and use them to propel the initiative and employee forward.

Administrators must create a social culture that supports and encompasses all aspects of the initiative. Administrators share their vision and the purpose of the program so each individual in the organization understands their role. For instance, all staff regardless of position should have training in PBIS. This means training for teachers, assistants, school nurses, all administrators and support staff, lunch personnel, librarians, counselors, bus drivers, and janitorial service providers. This offers a wrap-around type of support system for students and families. In addition, by including all personnel, each employee feels vested in the initiative.
and understands their purpose at their job on a daily basis. They also feel part of a team trying to accomplish a goal for a greater purpose than just themselves.

Resistance and Retention

When starting a new initiative, resistance may arise. A new initiative means change and that can be unsettling and overwhelming for people. The point is to be aware of this reality and to be willing and ready to find solutions to challenges and obstacles. When implementing PBIS, it is important to recognize that teachers and other staff have varying backgrounds and may not be familiar with PBIS or its features. To help address this, and as mentioned earlier, when presenting on PBIS, leaders should not use jargon, and should speak in plain language that all can understand with transparency. In addition, due to variation in subjects taught by teachers some differentiation in PBIS procedures may be helpful. Administrators should begin creating and fostering a positive school culture from day one. If a positive culture is promoted, and if positive results are disseminated, the infrastructure will be solid. When the characteristics of a positive culture are utilized, employees are loyal to the organization they were working for, and administrators are able to divert any resistance and bring out the best strengths of their employees (Seppala, & Cameron, 2015).

Resistant employees can certainly affect the culture of a building, which can affect the mission. Thus, it is important to take time to listen to and understand employee experience. One way to address concerns among resistant staff is by reorienting to their shared priority: improving outcomes for children. One idea for an administrator with a divided staff is to share outcomes for successful implementation. For example, in the Kansas school system, following implementation of PBIS, there was a 60% reduction in discipline referrals at the elementary level, a 33% decrease at the Middle School level, and 2,000 fewer referrals at the High School level (Freeman, 2011). Communicating positive outcomes can rally staff toward their shared goal.

Getting the right people is essential to positive workplace culture. New personnel should be informed of the expectations surrounding the implementation of PBIS to confirm that will be contributors. I have seen firsthand that people with aligned values and behaviors create positive workplace cultures. If they do not feel comfortable with the program, they should not be hired. Hiring engaged and committed individuals can prevent future resistance. When you have strong and engaged people in the classroom, it spreads throughout the building, then district, then the county, and then throughout the state. This allows the passion and the positivity surrounding the initiative to infiltrate all levels.

After hiring committed and engaged individuals, efforts should be put in place to retain them. Creating and fostering a positive school culture can make people want to stay in your school. When employees are allowed to create and share ideas with constructive criticism and positive feedback, when they receive recognition for a job well done, when they are told a simple thank you, they are more motivated to work to achieve the group plan or goal. In addi-
tion, having better test results, proven benefits concerning quality direct instruction time and less disciplinary concerns, the community will be more willing to support the school. Putting these initiatives in place can create a chain effect of support for the positive program. If students come home from school praising their teachers, and the parent/s see positive learning results and behaviors in their children, it is very likely that they will vote for schools and buy into the system.

**Family and Community Engagement**

When engaging families, PBIS and the family’s role should be described clearly, concisely, and in a transparent fashion. Two components that may be particularly important to identify are (a) support for evidence-based practices and how they will create a cohesive and safe learning environment for children, and (b) how PBIS is relevant for their everyday lives. There are a variety of ways school administrators can offer this information. Town hall meetings or neighborhood meetings can be held, information can be included in newsletters, flyers, and school handbooks that go home. Administrators and teachers can relay the information in a group or one-on-one at parent/teacher conferences. When communicating with families it important to have communications in languages families in the school community understand and in places that are easy to access. School staff may wish to use e-mail, phone calls, or social media (e.g., Facebook, Twitter) to reach all families in their community.

There are several considerations for working with families. School officials need to recognize the term *family* can include a parent, sibling, grandparent, or anyone else who is considered a caretaker for the student. Barriers form when limitations are placed on which caretakers can participate in the initiative or when school officials do not make parents feel welcome in the process. Also, school officials can have misconceptions about caretakers either because of title or because of educational background. Both perceptions can impede family engagement and the success of the program. School officials can reduce barriers by creating projects where a variety of family members can work alongside the school, either by working together on committees, collaborating on projects, or volunteering in the classroom. They can reduce barriers by understanding and incorporating different communication styles and cultural differences, and helping families feel that their voice is respected.

To maximize family engagement, it is important to create a positive school culture. Three considerations for creating a positive culture are (a) transparent and friendly environment, (b) positive staff attitudes, and (c) full partnerships with families. The school organization should include clear signs and markers so families know what to do upon entering. Families should be provided with a calendar of events to increase the probability of family participation. Families can participate in reviewing initiative expectations and goals, providing feedback on program outcomes, and by participating on council boards that oversee the initiative. Staff members should portray a positive attitude toward families and the PBIS systems. Finally, families should be engaged as full part-
ners where their feedback is sought on decisions and they have voting representation.

When building a positive and inclusive school culture, it is important to engage community organizations close to the school. This will allow the school and the community to align their goals and resources, which can maximize student success. Community organizations with a focus on academics, mental health, adult education, early childhood, and non-profit agencies can help maximize engagement within the community (Blank, Jacobson & Melaville, 2012). The goal is to identify a shared vision with community organizations to align in support of the children and families they serve. Partnering with community organizations can also include pooling resources. Challenges faced in communities include abuse, socioeconomic hardships like hunger, unstable living arrangements, inadequate access to therapy or healthcare, and learning challenges (Blank et al., 2012). By partnering with community organizations, resources increase and children have a higher likelihood of experiencing their immediate environments as consistent and predictable, firmly rooted in evidence-based practices.

Conclusion

PBIS offers an opportunity to move away from punitive measures to effective, efficient, and positive approaches to support children. PBIS teaches children skills that will benefit them throughout their life. In addition, PBIS can support a positive school culture and serve as a vehicle to engage community organizations and families, and extend the evidence-based positive behavior support practices to homes. PBIS provides the infrastructure and support to help children thrive. The collaborative model of PBIS empowers parents, children, other family members and caretakers, school staff, and administrators with the structure that gives each person a voice and a place at the table. Schools implementing PBIS gain the tools to offer positive and safe education to our children and lessons in empathy, collaboration, and the ability to work through issues in a manner that will keep our children from slipping through the cracks created by a punitive system.

REFERENCES


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