

THE FORGOTTEN PATH: ADULT STAKEHOLDER PERCEPTIONS
ON THE TRANSITION FROM RESIDENTIAL TREATMENT
FACILITY SCHOOLS TO NEIGHBORHOOD SCHOOLS

by

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A DISSERTATION

Submitted in partial fulfillment of the requirements
for the degree of Doctor of Philosophy in the
Department of Special Education and
Multiple Abilities in the
Graduate School of
The University of Alabama

TUSCALOOSA, ALABAMA

2020

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ABSTRACT

Youth with emotional/behavioral disorders (E/BD) may be negatively impacted by their behavioral excesses and deficits across domains requiring more intensive supports and treatment than can be provided in a typical school. As a result, some of these youth will receive their supports and treatment from placement in a residential treatment facility (RTF) that provides around-the-clock services. Once a youth completes their treatment at the facility, they will integrate back into the community, including for some, enrollment in a neighborhood school. This transition from the RTF to the neighborhood school can be difficult due to the change in supports (e.g., small group to large group instruction, fewer treatment options related to mental health). Such a transition is an emerging pathway that was the focus of this qualitative inquiry. A focus group, interviews, and record reviews were conducted at an RTF serving students with E/BD in a Southeastern state. These RTF stakeholders shared their perspectives on the transition process from their facility to neighborhood schools. Using an intrinsic, instrumental, descriptive case study design, data were analyzed through the lens of sociocultural theory, a priori coding, and inductive analyses. The constructed themes (i.e., collaboration, communication, education, individualization, and involvement) align with the transition literature for best practices of different pathways. Limitations and future directions are provided within a lens of disruption as the novel coronavirus pandemic and facility access restrictions occurred during data collection limiting facility access to a single facility and limited time of contact with transition stakeholders.

NOTE: Data collection and subsequent results of this study were impacted by the COVID-19 pandemic.

DEDICATION

This dissertation is dedicated to all the youth I have worked with, especially those I have taught in Residential Treatment Facilities. You all have made me a better person and educator. I will forever be thankful for our time together and I promise to continue to work to make sure you are always given a chance wherever you are.

“They say I gotta learn, but there’s nobody there to teach me.

If they can’t understand it, how can they reach me?”

Artis Leon Ivey Jr.

ACKNOWLEDGEMENTS

First and foremost, I want to thank my family, especially my mom, Kae, and my aunt, Dorothy. You have supported me throughout my educational career, but none more when I decided to pursue my doctorate. Thank you for your love, support, and most importantly, helping take care of Daisy and Kingsley when I was so overwhelmed or busy that I could not give them the attention they deserved. Daisy and Kingsley, momma is ready for some much-needed hiking, exploring, and dog parking now.

Secondly, my amazing doctoral support system. Dr. J, I would not be here without you. Thank you for taking me in and seeing something in me that I didn't see in myself. You truly are a blessing. Dr. Shelton, for believing in me, being patient with me, and always giving me the push I needed to finish. Dr. Swoszowski, I thought you were crazy when you said I should aim for my Ph.D., but I'm glad you believed in me. Thank you for your support and encouragement for the past four years. Dr. Sanders, you are the best mentor a girl could ever ask for. From writing sessions, venting sessions, to just plain eating sessions, I have enjoyed every minute. To Lauren, or should I say Dr. Rollins, I am so thankful for all the stories that you tell that have caused me to laugh until my sides hurt and I snort. You are truly a gem of a human being. Speaking of laughing, to Skip and Elizabeth: thank you also for providing me with much needed therapy via laughing. I am so thankful I know you.

To Drs. Benner and Ennis, thank you for being on my committee. Your insight into working with youth with E/BD is invaluable. I am thankful that I have been able to learn from you.

To my professors from my master's program, I would not be here without you. Dr. Siders, not only are you a fierce advocate for youth with disabilities, but an advocate for each of your university students. You played a big role of helping me get through my master's, and into the doctoral program. I will forever be grateful for you. Dr. Ellis, I always enjoyed being in your classes. Not only did I learn valuable information, but you showed me what it means to have a professor who truly cares about his students. Dr. Beirne-Smith, because of your high expectations, I became a better writer. Your courses were challenging but taught me the meaning of hard work and persistence.

To my Calera family: You have provided so much joy, especially in these last few months as I was overwhelmed. Thank you for always seeing the best in me and making sure that I have fun along the way. I wouldn't trade you for anyone else.

Finally, to the participants of this study: thank you for meeting with me, especially during this unprecedented time. The way you speak of your programs, staff, and the youth gives me so much hope for the future and what we can accomplish together to make it better for the youth we serve. I look forward to seeing you again.

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CHAPTER ONE

THE FORGOTTEN PATH IN TRANSITION FOR STUDENTS WITH E/BD: A BRIEF

Emotional and Behavioral Disorders

Emotional and behavioral disorders (E/BD) are conditions which can interrupt a person's day-to-day activities and overall functioning across all domains: academic, behavioral, and social-emotional (Council for Children with Behavioral Disorders, n.d.). Youth with E/BD may demonstrate characteristics such as hyperactivity, aggression, withdrawal, and socially maladaptive behaviors within the classroom and during instruction (Kauffman & Landrum, 2018). Table 1 details the Individual with Disabilities Education Act (2004) definition of Emotional Disturbance.

In our schools, these youth constitute less than 20% of the overall school-age population (George, 2018), and perform below their peers academically (Dunn et al., 2017; Gage et al., 2017; Mattison & Blader, 2013). Low academic achievement coupled with difficulties in other areas such as social skills and behavioral issues often lead youth with E/BD to have poor outcomes in school (Nochajski & Schweitzer, 2014). Researchers state the academic deficits of youth with E/BD do not improve over time, and they often fail to make meaningful academic progress as they age (Ysseldyke et al., 2017). Additionally, these academic deficits often lead to poor social outcomes as academic and behavioral deficits are often experienced comorbidly (Jolivette et al., 2000). Tables 2 and 3 provide additional features of E/BD. Due to negative school experiences, youth with E/BD are more likely to drop out of school (Dunn et al., 2017; O'Brien et al., 2019) or be placed in more restrictive settings (Muscott, 1995; Stoutendijk et al.,

2012) including secure placements such as residential treatment facilities, juvenile justice settings, or psychiatric hospitals (Gagnon & Barber, 2010). These placements in the youth's least restrictive environment (LRE) depends upon the youth's needs and what services each placement provides to meet these individualized needs (Mathur & Jolivette, 2012). Figure 1 highlights the continuum of education service placement options for youth with E/BD.

Resources

(See Appendix B for website information)

Tantrums, Tears, and Tempers: Behavior is Communication

This brief by the PACER Center (Minnesota Parent Training and Information Center) highlights how behavior, appropriate or inappropriate, communicates what a youth is feeling, needs, or wants. This resource provides ideas for adults to better understand what the underlying cause of the youth's behavior could be, as well as suggested steps to help them address these challenging behaviors.

Tips for Teachers and School Staff from Students with Mental Health and Behavioral Challenges

In this PACER brief, they provide tips to teachers on how to work with youth with challenging behaviors. Suggestions include treating youth with respect, getting to know the youth, and positively interacting with the youth.

Encourage Your Child's Positive Behavior and School Success: Creating a Home Plan with School-wide Positive Behavior Interventions and Supports

This PACER brief provides information on how to implement Positive Behavior Interventions and Supports (PBIS) across different settings to promote appropriate youth behavior. Additionally, they include a sample chart to help adults implement PBIS so that youth are learning positive behaviors at both home and school.

Health Care, Family, and Community Factors Associated with Mental, Behavioral, and Developmental Disorders in Early Childhood

This report from the Centers for Disease Control (CDC) provides an overview on how sociodemographic, healthcare, family, and community contribute to the physical, mental, and social well-being of youth. The researchers advocate for better access to healthcare for youth to help negate poor school outcomes and job opportunities.

Children's Mental Health

This website from the CDC provides adults with an array of resources regarding the mental health of youth. Topics include general information on youth mental health, data and statistics, research, and articles related to youth mental health. They also provide suggested treatment options for youth with behavioral issues.

Behavior Today

The Council for Children with Behavioral Disorders' (CCBD) newsletter is published every two months. Within the newsletter, stakeholders can find an array of topics regarding working with youth with E/BD. The newsletter addresses topics related to behavior and the current world, including ways to educate youth with E/BD during the worldwide pandemic.

Guides to Social Emotional Learning

These guides provided by the Collaborative for Academic, Social, and Emotional Learning (CASEL) cover topics related to social-emotional learning in schools which is applicable for youth with E/BD. A quick review of the site provides more resources, including articles, infographics, and reports.

Residential Treatment Facilities

One of the more restrictive settings on the continuum of care for youth with E/BD is a residential treatment facility (RTF; James et al., 2006; Yampolskaya et al., 2014), also known as Residential Treatment Centers (RTC) or Specialized Treatment Centers (STC). RTFs provide services across all domains including psychiatric, mental health counseling, and education (Development Services Group, 2011) in a 24-hour, 7-day a week service delivery model in a secure placement (Gagnon & Leone, 2005; Lynch et al., 2017). Youth are admitted to RTF for a variety of reasons such as psychological and/or behavioral issues when treatment was not successful in less restrictive settings (Development Services Group, 2011). Additionally, family issues, abuse, and neglect are other contributing reasons youth may enter an RTF (Yampolskaya et al., 2014). While at an RTF, all youth receive educational services and may participate in individual and group therapy while receiving medical, psychiatric, therapeutic, recreational, and social skill services (Abt Associates, 2008; Gagnon & Leone, 2005).

In the United States, there are roughly 44,000 youth served in RTF on any given day (Children's Defense Fund, 2020; Lynch et al., 2017). At some point, each of these youth will transition from secure placement and will need services to help them succeed in the community (Muscott, 1995). In addition to each youth's emotional and behavioral needs, these youth

typically have poorer school outcomes (Lehr & McComas, 2005) and neighborhood schools are not equipped to meet the multi-faceted needs of these youth (Goldkind, 2018). Furthermore, Gagnon and Leone (2005) state RTF must improve the discharge process for each youth to ensure a smooth transition back to the community and neighborhood school; however, there are no universally set practices for such transition (Nickerson et al., 2007).

Resources

(See Appendix C for website information)

Residential Treatment Program for Teens

The Federal Trade Commission provides an overview of residential treatment facilities for youth. The commission provides adults with questions to ask facilities when considering potential placement options for youth with emotional and behavioral issues.

Association for Children's Residential Centers

The Association for Children's Residential Centers (ACRC) provides stakeholders with the best practices in caring for youth with E/BD who are served in residential treatment facilities. In addition to research and position papers, ACRC offers a look at what residential treatment is like from the perspective of the youth and the youth's family.

Residential Treatment for Youth with Mental Health Needs

This guide provided by the Illinois Children's Mental Health Partnership provides parents insight into having youth evaluated and then placed into a residential treatment facility. Other topics include: placement funding, issues to consider, the rights and roles of the parents, the treatment plan, discharge planning, and maintaining the well-being of the youth.

Transition Pathways

The Individuals with Disabilities Education Act (IDEA) of 2004 mandates schools provide transition planning for youth receiving special education services, including youth with E/BD (see Table 4 for more information). In the most traditional sense, transition is regarded as helping youth move toward post-secondary employment or job training after K-12 schooling (Plotner et al., 2020). However, other transition pathways exist. The following section details three identified pathways: 1) secondary school to post-school; 2) juvenile justice settings

to community; and 3) RTF schools to neighborhood schools. See Figure 2 for the relationship between Pathways One and Two and Figure 3 for the transition process for Pathway Three.

Pathway One

Pathway One is the transition for youth with disabilities, including those with E/BD, from secondary schooling to job training or competitive employment (Nochajski & Schweitzer, 2014). Schools provide coordinated activities based on the youth's strengths and needs that help prepare the youth for involvement in their community (Morningstar & Clavenna-Deane, 2017). Stakeholders for this pathway typically include the youth, family, special education teacher, transition coordinator, and community agency staff (Plotner et al., 2020).

Resources

(See Appendix D for website information)

What to Know About Youth Transition Services for Students and Youth with Disabilities

This fact sheet provided by the Federal Partners in Transition (FPT) presents 11 facts pertaining to the transition of youth from K-12 schooling to their adult life. Within the fact sheet, the FPT provides additional resources under each area, including, but not limited to career and technical education, health insurance coverage, housing, financial aid, and disability related programs and services.

Transition Planning Overview for Parents

The Center for Parent Information and Resources (CPIR), is a “hub” for parents with youth with disabilities, providing an overview of what transition means. CPIR describes the federal mandate on transition, and what this legally means for the youth with a disability.

Transition Planning

The National Technical Assistance Center on Transition (NTACT) offers resources such as toolkits, annotated bibliographies, data tools, lesson plans, matrices, and best practices guides, focusing on the transition from K-12 education to postsecondary life.

Charting a Course for the Future: A Transition Toolkit

The Colorado Department of Education offers a comprehensive toolkit that includes the basics of transition, assessing where the youth wants to go after high school, how to get there, involving agencies. Additionally, they provide tools, templates, and worksheets to help adult stakeholders provide meaningful transition activities for youth transitioning from K-12 education to postsecondary life.

Transition Tips for Educators Working With Students With Emotional and Behavioral Disabilities

This article by Dr. Cheney provides educators advice on developing a thorough transition plan for youth with E/BD. His suggestions include: a) teaching youth self-determination skills; b) completing thorough assessments to understand each youth's strengths; c) using the Personal Futures Planning process; d) creating an individualized transition plan based on the youth's strengths and needs; and e) discovering and continuing community partnerships.

Pathway Two

An emerging pathway is the transition from juvenile justice settings back into the community setting, including obtaining competitive employment (Mathur & Griller Clark, 2014). Much like Pathway One, Pathway Two includes collaboration among stakeholders (i.e., youth, family, community stakeholders, and transition specialist) to create a personalized reentry plan (Mathur et al., 2019). Transition planning for Pathway Two supports the practice of "Exit Upon Entry" which means planning for the youth's exit from secure care as soon as they enter the facility (Risler & O'Rourke, 2009). See Table 5 for Exit Upon Entry best practices. One example of Exit Upon Entry is situated within the Georgia Department of Juvenile Justice (GA-DJJ). The GA-DJJ Student Transition Model (Risler & O'Rourke, 2009) provides each youth with an educational plan that includes a) the first 30 days (intake); b) within a minimum of three months (ongoing/release); c) 60 days prior to release (release review); and d) 10 days prior to release (exit). The intake stage involves the GA-DJJ staff reviewing the youth's records, evaluating the youth's career aptitude and pursuits, and developing a student portfolio. During the ongoing/release stage, GA-DJJ staff monitor the youth's progress and adjust the youth's education plan and portfolio to reflect the growth of the youth. The release review continues progress monitoring while also finalizing release plans with the staff, youth, and the youth's parents. Finally, at the exit stage, a final meeting is held reviewing the youth's development and adding any other pertinent elements to the youth's transition portfolio, which is then given to the

adult stakeholders (i.e., parents, transition specialist and/or parole officer) to help the youth transition back into the community.

Resources

(See Appendix E for website information)

Addressing the Unmet Educational Needs of Children and Youth in the Juvenile Justice and Child Welfare Systems Requires Within-Agency and Cross-Agency Leadership

The National Evaluation and Technical Assistance Center for the Education of Children and Youth Who Are Neglected, Delinquent, or At-Risk (NDTAC) published this practice guide to help adult stakeholders who are involved in educating youth with E/BD across settings. The authors advocate for interagency and cross-agency collaboration that ensures personalized support services for the youth.

Creating and Maintaining Good Relationships Between Juvenile Justice and Education Agencies

This tip sheet created by NDTAC provides guidelines to help establish meaningful collaboration between juvenile justice facility stakeholders and the education agency stakeholders they work with. The authors provide 10 tips to help the varying stakeholders come together to provide an appropriate education to those youth being served in juvenile justice settings.

Transition Toolkit 3.0: Meeting the Educational Needs of Youth Exposed to the Juvenile Justice System

NDTAC's Transition Toolkit 3.0 provides a detailed overview of the transition process regarding youth re-entering the community after being adjudicated. The authors provide guidance to adult stakeholders by starting at the youth's entry into the juvenile justice facility and throughout until they exit, including aftercare services as well.

Improving Outcomes for Youth with Disabilities in Juvenile Corrections: Transition and Reentry

This topical brief presented by the U.S. Department of Special Education Programs provides a summary concerning youth exiting the juvenile justice setting and integrating back into the community. Key practices promoted by the Department are transition planning beginning at entry, prioritizing family involvement, and coordinating aftercare services.

From the Courthouse to the Schoolhouse: Making Successful Transitions

This Juvenile Justice Bulletin developed by the Office of Juvenile Justice and Delinquency Prevention highlights several transition programs throughout the United States that are making progress to help youth transition from secure care back into the community. The bulletin also offers key practices, including transition planning, for adult stakeholders.

You Got This: Educational Pathways for Youth Transitioning from Juvenile Justice Facilities

The U.S. Department of Education provides this roadmap for youth transitioning from secure care back into the community and public school. These five steps are detailed: 1) know your

rights, 2) ask for help, 3) make a transition plan, 4) stay focused on going home, and 5) go back to school.

Transition Planning for Adjudicated Youth

The National Technical Assistance Center on Transition provides this annotated bibliography of resources to help adjudicated youth transition back into the community.

Blueprint for Change: Education Success for Youth in the Juvenile Justice System

This blueprint provided by The Legal Center for Youth Justice offers 10 goals for youth returning to the community from juvenile justice settings. The goals include: giving youth a voice; providing adult support; educating youth in the community; giving youth full opportunities in the community; providing quality education in facilities; creating a supportive school environment; having access to career pathways; supporting post-secondary access; smooth transitioning between placement and community; and protecting especially vulnerable youth. Additionally, the center presents several other resources for adjudicated youth.

Merging Two Worlds

Merging Two Worlds is a Transition/Career Planning Curriculum designed specifically for helping youth in juvenile justice settings transitioning back into the community. This website provides the curriculum resources such as assessing the student, 40 curriculum lessons, and resources for teachers at no cost.

Pathway Three

Pathway Three addresses a setting between Pathway One (neighborhood schools) and Pathway Two (secure juvenile justice settings), which is the transition from an RTF back to a neighborhood school. While the settings in Pathways Two and Three may seem similar due to both requiring around-the-clock care, RTFs include more therapeutic services for youth who enter care usually due to childhood trauma (i.e., neglect, physical abuse, sexual abuse) that has manifested into emotional and behavioral difficulties (Pecora & English, 2016). Youth in juvenile justice settings are justice-involved youth, meaning they have committed offenses against the law (i.e., technical violations; public order offenses; drug offenses; property violations; and person offenses) and are being held in secure settings while they await trial, sentencing, or have been placed there after being found guilty of the offense (Sawyer, 2019). Thus, the difference in entry necessitates differentiating transition planning. Youth who receive

care in RTF receive their educational services in a small group setting where staff are trained to manage their emotional and behavioral needs (Freeman et al., 2019) and may struggle when transitioning back to a neighborhood school with larger class sizes with staff who are not trained in E/BD (Whittaker et al., 2015). Due to these gaps (i.e., lack of trained staff, larger class sizes), it is important for there to be a transition process to help not only the neighborhood school understand the youth, but also ensure the youth is able to transition successfully to the neighborhood school.

Resources

(See Appendix F for website information)

Transitioning Adolescents with Emotional and Behavioral Disorders from Most-to-Least Possible Restrictive Environments: Views of Transition Service Providers

This article from Maximoff et al. (2017) highlights transition practices that promote success for youth with E/BD transitioning from more restricted environments to less restrictive environments. Practices detailed include: a) promoting continuity of care; b) involving the family; c) easing academic concerns; d) promoting self-determination; and e) assisting the move to adult systems.

Transition Supports for At-Risk Students: A Case Example

This article from Buchanan et al. (2016) discusses the challenges youth with E/BD face when transitioning from one school to another. The article details the Students with Involved Families (SWIFT) intervention, which requires collaboration between the youth, parents, and educational stakeholders. The intervention is centered on the belief that youth learn from their social environments, and those who exhibit negative social traits may not have the ability to apply other behavioral choices.

Youth and Parent Perceptions of Aftercare Supports at Discharge from Residential Care

Trout et al. (2014) discuss the transition to aftercare process from the viewpoint of the youth and their family. The study found that the youth believed the transition plan was helpful and they were involved in the transition planning. However, the youth's confidence in transitioning back to school was lower, with the youth believing that aftercare services were not very important, while their families believed aftercare supports are beneficial.

Methods for Youth Involvement in Transition Planning

Researchers have shown that involving youth in their transition planning, whether through Pathway One or Pathway Two, is instrumental in helping them succeed (Gagnon, 2018;

Powers et al., 2001). The following resources are strategies shown to be beneficial in teaching youth various transitional skills related to employment, social skills, and life skills.

Resources

(See Appendix G for website information)

Using the Self-Determined Learning Model of Instruction to Teach Goal Attainment

This practice description by the National Technical Assistance Center on Transition (NTACT) provides educational stakeholders information regarding the Self-Determined Learning Model of Instruction (SDLMI). This model teaches students to take part in self-directed and self-regulated learning. The model contains three units with each youth required to solve problems in each unit through four steps: 1) identifying the problem, 2) identifying potential solutions to the problem, 3) identify barriers to solving the problem, and 4) identifying consequences to each solution.

Using Published Curricula to Teach Student Involvement in the Individualized Education Program (IEP) Meeting

This practice description provided by the National Technical Assistance Center on Transition (NTACT) provides educational stakeholders information on the subject of student involvement in the IEP planning process. Practices highlighted include: The Self-Directed IEP; Self-Advocacy Strategy; Whose Future is it Anyway?; and the Personal Futures Planning model.

Using Simulation to Teach Social Skills at Work

This lesson plan starter provided by the National Technical Assistance Center on Transition (NTACT) provides educators an outline on topics to cover when teaching youth social skills that pertain to employment. Topics include: ordering job duties; conversational skills; and giving instructions. The plan also provides educators the procedures for the lesson, including: a) facilitating discussion, b) modeling the behavior, and c) developing a role-play scenario for each given situation.

Student Development-Life Skills

NTACT provides 16 documents pertaining to teaching youth life skills needed for independent living. Areas included are: food preparation, cooking, home maintenance, and purchasing skills.

Paving the Way to Work: A Guide to Career-Focused Mentoring for Youth with Disabilities

The National Collaborative on Workforce and Disability for Youth (NCWD/Youth) offers strategies to improve the transition outcomes for youth with disabilities. This comprehensive guide gives an overview of various disabilities and what mentoring entails when working with youth with these disabilities followed by in-depth dialogue on effective mentoring settings, approaches, and evaluation – all related to transition.

What We Want You to Know Regarding the Transition Pathways

While the United States does not have a federal mandate or guidance for Pathway Three types of transitions, there is research to inform this type of transition (Miller & Therrien, 2018). Though Pathway Three differs from Pathways One and Two, we can borrow the best practices from each of the first two pathways, make adaptations, and then apply it to the transition of youth from RTF back to their neighborhood school. One best practice that may be adapted for Pathway Three is the premise of “Exit Upon Entry” whereby the transition process and services begin as soon as the youth enters and is followed through until after their transition back into the community (Miller & Therrien, 2018; Unruh et al., 2018). This involves interagency collaboration, whose coordination is typically the responsibility of a transition specialist/coordinator (Mathur & Griller Clark, 2013). Refer to Table 5 for best practices in the “Exit Upon Entry” model.

Another best practice is the use of a transition specialist, who are designated personnel who direct the transition plan and activities of the youth, much like the role of a case manager. The use of a transition specialist has become another best practice cited for both Pathways One and Two. For Pathway One, the transition specialist is usually the special education teacher (Morningstar & Clavenna-Deane, 2017) while for Pathway Two, the transition specialist is usually a support personnel who is tasked solely with delivering transition services and activities to the justice involved youth (Mathur & Griller Clark, 2013). Miller and Therrien describe a transition specialist’s role as to “identify and coordinate services that are appropriate for youth while detained and those that would be beneficial once released” (2018, p. 4). Moreover, Unruh et al. (2018) assert that having a selected person in charge of the delivery of transition services

and charged with establishing interagency collaboration will benefit the youth from entry into care to the transition back into the community and aftercare.

Transition Planning

According to Miller and Therrien (2018), a transition plan involves wraparound services—those that address not only the emotional and behavioral needs of the youth, but the academic and life skills as well. Griller Clark et al. (2016) assert a transition plan should: 1) have goals based on academic, vocational, and career assessments; 2) involve the youth; 3) guide educational placement; 4) ensure collaboration amongst stakeholders; and 5) plan for continual monitoring of the plan. Moreover, transition plans should focus on the strengths and needs of the student (Gagnon & Richards, 2008). An example of a transition plan is found in Table 6.

Case Examples

While Pathway Three is an emerging area, there are examples of youth successfully transitioning from RTF back to their neighborhood school. Two examples are detailed as experienced from two separate RTFs who are in the process of refining their transition processes. While neither have a transition coordinator, the transition responsibilities were undertaken by either a teacher or the education director. While one youth has completed the transition process, one youth is still in process of transitioning to their neighborhood school. The key takeaways from these two examples are: a) the neighborhood school being receptive of the youth joining/rejoining them; b) effective collaboration of stakeholders between the RTF and the neighborhood school; c) the neighborhood school ensuring the youth's placement accurately reflected the youth's LRE; and d) the ability of the youth to progress to different settings as they developed emotionally and behaviorally. Within each case, the participating stakeholders are noted.

Clay

Background

Clay, an 8th grader, was admitted to an RTF in the Fall of 2015. He was referred to the program due to a history of maladaptive behaviors, including verbal aggression, physical aggression, property destruction, fire-setting, and self-injury. Prior to his entry to the RTF, Clay had several acute psychiatric hospitalizations in addition to receiving outpatient therapeutic services. Clay's maladaptive behaviors began in elementary school and continued after he experienced childhood trauma. From the beginning, Clay's mom has been involved in his treatment, with the intention for Clay to return to their home in seven months after completing the program at the RTF. The RTF made expectations clear to Clay - he had to make progress in those seven months to be able to return to his mother's care and his neighborhood school.

Stakeholders. Clay, Clay's mother, RTF teacher, RTF therapists, RTF support staff, neighborhood school special education liaison, neighborhood school administration, and neighborhood school teacher and support staff.

Receptiveness of Neighborhood School

Clay had attended his neighborhood school since he was elementary aged. The school was well-versed in Clay's history, including his behaviors. Clay received special education services (under the exceptionality of Other Health Impairment) while attending his neighborhood school, and these were continued at the RTF. The school knew Clay would return after completion of treatment and they were eager to work with Clay to ensure continued progress when he rejoined them.

Effective Collaboration

In the Spring of 2016, Clay's annual IEP was due and his neighborhood school was invited to participate. As part of the RTF program, Clay had undergone psychological testing and the results were reviewed at the IEP. The RTF had implemented strategies based on these results, specifically regarding when Clay was given task directions. While Clay's intelligence and achievement scores were in the average range, his processing speed was in the low range. Based on this, the RTF began instituting the "two-prompts rule". For example, if it was time to move on to another activity, the teacher, Chelsea, would give the first direction, "Clay, put up your activity". She would then wait ten seconds to see if he would process it and begin to start putting it away. After ten seconds, Chelsea gave the second prompt, and then waited another ten seconds. Usually by the second time, everything was put away and he was ready to start on the new task. While this seems minor, one of Clay's biggest behavioral challenges while at the RTF was following directions the first time they were given. Neighborhood school personnel at the meeting, as well as Clay's mom, echoed this sentiment. With this, the "two-prompts" strategy was written into his IEP so that the neighborhood school could use it when Clay returned to them.

Least Restrictive Environment

By the end of Clay's IEP meeting, it had been decided Clay would not transition directly to his neighborhood school, but instead would start at an off-campus school specifically for youth with E/BD. Clay stated he was okay with this decision because he did better in small settings. In August of 2016, Clay discharged from the RTF and returned to the neighborhood school system. At the alternative neighborhood school, Clay not only participated in academics, but was able to help around the building with the maintenance man, as it was something he

enjoyed. The school continued to implement the “two-prompts” strategy, while Clay also received outpatient counseling services. Around this time, Clay and his mother moved to a different school district. Luckily, this school district also had several options for youth like Clay, including self-contained classrooms at each school specifically for youth with E/BD. While Clay was receiving services for OHI, these classrooms were specifically designed for any youth needing extra emotional and behavioral support. Clay’s IEP team, including Clay and his mother, determined it was in Clay’s best interest to begin in one of these classrooms as a change in schools represented a new environment with adults that Clay would need to build rapport with.

Potential to Progress

By all accounts, Clay was flourishing at his new school. While he was participating in school activities 100 percent of the day within the behavioral classroom, he was able to participate in the general education setting in various ways, including attending prep rallies, eating lunch in the cafeteria, and participating in extracurricular activities. As his behavior continued to improve, Clay began attending elective classes outside of the behavior unit and eventually fully integrated into the general education setting. As of today, Clay is doing well in school, has a job, and will graduate at the end of this school year.

Landon

Background

Landon, a 6th grader, was admitted to an RTF in the Spring of 2020. He was referred due to a history of maladaptive behaviors including defiance, destruction of property, and aggression (both verbal and physical). Prior to his placement at the RTF, Landon had one acute psychiatric hospitalization and received in-home therapy and outpatient counseling. According to Landon’s mother, father, and stepfather, Landon began displaying maladaptive behaviors as a toddler that

only worsened as he aged. Landon's family has been involved throughout his treatment. Upon discharge, Landon would return to his family and neighborhood school.

Stakeholders. Landon, Landon's family, RTF education director, RTF therapists, RTF classroom staff, neighborhood school system special education director, neighborhood school system special education liaison, and neighborhood school staff.

Receptiveness of Neighborhood School

Landon was new to his school district but the school personnel, too, were eager to ensure Landon would be able to continue to make progress when he returned. Because a special education referral meeting was not completed due to Landon withdrawing from school, he was not receiving special education services through his neighborhood school. However, the school would collaborate with the RTF ensuring that Landon would receive appropriate educational supports. These supports would be based on strategies suggested by the RTF when Landon returned to the neighborhood school.

Effective Collaboration

For Landon, effective collaboration came in a different form since he had not received special education services at his neighborhood school. While Landon had made behavioral progress at the RTF, his treatment team and parents decided he would continue treatment in the program while the RTF referred and evaluated him for special education services. With this determination, the RTF education director, James, contacted the special education department personnel at Landon's home school. The school system sent a special education liaison for the initial referral meeting. At this meeting, the liaison met and got to know Landon, his parents, and two of the RTF therapists who were charged with providing therapeutic services. While Landon had made progress at the RTF, the IEP team agreed his referral warranted evaluation due to a

history of maladaptive behaviors. After the evaluation, the IEP team, again including the liaison from his home school district, met to discuss the results. The IEP team unanimously agreed that the data (i.e., medical and psychological records, behavioral observations, behavior rating scales, daily behavior data) indicated Landon would be best served with special education for an emotional disability due to his history of maladaptive behavior at both home and school, coupled with clinically significant scores on behavior rating scales.

Least Restrictive Environment

While Landon continued to receive treatment at the RTF, the IEP team now had more post-RTF options since he was found eligible for special education services. Landon stated multiple times throughout his stay that he was overwhelmed by middle school due to having multiple teachers and changing classes in a short period of time. Landon also said that he got in trouble because he was distracted by having so many peers in his class. With this in mind, Landon and his parents asked if he could be placed at the school district's behavioral school program. This program offered smaller class sizes and staff who received continuous training on implementing a variety of behavior strategies. The school system special education liaison contacted the school to determine if there would be an opening for Landon. Knowing that the school had an opening, the IEP team developed an IEP for Landon in this LRE (i.e., a separate day school that he stated he was looking forward to attending) upon his return to the neighborhood school district.

Potential to Progress

Landon is currently still receiving his educational services at the RTF as his treatment was extended due to a medication change to address his anxiety. When the education director communicated to the neighborhood school how Landon would remain at the RTF longer than

intended, they agreed to hold an opening for Landon. The neighborhood school understood their program was the best fit for him, reiterating they wanted to make his transition back to them as smooth and successful as possible. It is the hope of the neighborhood school that Landon will continue to progress when he returns to them, allowing him to move from the separate day school to the neighborhood school in a behavior unit, before fully integrating back into the general education setting. However, they specified that this would be based on Landon's progress, strengths, and his emotional, behavioral, and academic needs.

CHAPTER TWO

THE FORGOTTEN PATH

Many youth with emotional and behavioral disorders (E/BD) are served in residential treatment facilities (RTF) due to their excesses and deficits across all domains, including mental health and as such, their overall functioning can be impacted (Wiley et al., 2014). E/BD can consist of mental health disorders as classified by the Diagnostic and Statistical Manual of Mental Disorders (Whaley et al., 2017) and are characterized by a display of a wide range of emotion, not typical of the youth's age. This can often lead to these youth being placed in an RTF and receiving treatment for their disability and its manifestations (Epstein et al., 1994). Mental health disorders prevalent among some youth with E/BD may include mood disorders, psychoses, depression, disruptive mood disorder, substance abuse disorders, anxiety disorders, and eating disorders; and these youth are likely to experience additional disadvantages such as poverty, illness, and/or crime experienced or observed in the home and/or community (ABT Associates, 2008; Acri et al., 2018; Freedman & Woods, 2013). Also, without strong connections to their family or community, these youth are more prone to display behaviors symptomatic of their mental health disorder in public settings (e.g., verbal or physical aggression, property destruction) where adequate mental health supports are void or inadequate to meet their needs (Abt Associates, 2008; Kauffman et al., 2007; Whaley et al., 2017).

For those who are symptomatic in school settings, negative school performances and outcomes may be experienced. For example, many of these youth a) are not at grade level in reading, math, and/or writing often due to missing academic instruction per their behavioral

symptoms (Ennis et al., 2018; Freeman et al., 2019); b) are one to two years behind their same-aged peers across academic content areas and skills (Freeman et al., 2019; Reid et al., 2004) attributed to missed instruction; c) have comorbid reading and language deficits which negatively influence other academic areas as well as both their social skill acquisition and social outcomes (Benner et al., 2002; Gagnon & Barber, 2015); and d) continue to experience academic deficits due to these symptoms negatively influencing task completion and accuracy of completed tasks (Ramsey et al., 2017). Researchers also suggest that poor academic performance can impact negative behavior, while negative behaviors can produce poor academic performance for those with and at-risk for E/BD (e.g., Kilgus et al., 2019; Scott et al., 2001). Thus, this cycle can perpetuate with many of these youth with E/BD in jeopardy of developing learned helplessness during academic instruction and having an unfavorable self-concept toward academics (Garwood & Ampuja, 2019). Others have poor relations with their peers and teachers or are unable to maintain positive relations with others influenced by the negative feelings others may have as they observe the youth engaged in maladaptive behaviors (van Loan & Garwood, 2018).

Behaviorally, many of these youth display “barrier behaviors” such as extreme aggression, verbal abuse, relationship difficulties, and property destruction that excludes them from full integration with others (McCurdy & McIntyre, 2004); and externalizing behaviors (or visible behaviors) such as fighting, non-compliance, and being out-of-seat as well as internalizing behaviors like isolating oneself, complaining of somatic symptoms (e.g., headaches or stomach aches), or excessive worry (Stephens, 2016). Further compounding the school experiences and outcomes of youth with E/BD across domains include a) continued definitional difficulties of what E/BD, referred to as emotional disturbance in the federal definition, means in

relation to the domains affected within the term maladaptive (Council for Children with Behavioral Disorders; Forness et al., 2012); b) the challenging process of identifying these youth as less than 1% are being provided with special education services while researchers argue this number is modest compared to the number of youth who actually require such services; and c) teachers of core content classes (e.g., math, language, science, social studies) stating they feel unprepared to work with youth with E/BD (Garwood & Ampuja, 2019). Thus, symptoms and the combination of symptoms (e.g., excesses and deficits) across domains displayed by youth with E/BD and paired with the difficulties in identifying and serving these youth, leads to youth with E/BD being excluded from typical school settings and instruction more frequently than their peers (Freeman et al., 2019; Kauffman et al., 2018); and, may require their educational services and supports to be delivered in more restrictive settings such as an RTF. However, it is critical to note that placement within an RTF is not permanent for these youth, and they will, at some point in time, return to the community including to a local school.

Youth with E/BD in Residential Treatment Facilities

Youth with E/BD who display antisocial behaviors (e.g., verbal or physical aggression, bullying, property destruction) and/or mental health symptoms may need more intensive treatment services than those available in their neighborhood school; thus, placement in an RTF may be the most appropriate setting to receive their education, programming, and treatment services. Academically, these youth are served in a school on a residential campus and constitute about 44,000 of those youth with E/BD nationwide (Children's Defense Fund, 2020). The programming and treatment provided in RTF offers youth 24-hour, 7-days a week supervision in a therapeutic environment each supported by a team of professionals with expertise in the youth's specific areas of need (Abt Associates, 2008; Jolivette, 2016). Within RTF, the youth

participate in alternative educational programming where education is individualized to help address the comorbid academic, behavioral, and social-emotional deficits and excesses, and paired with mental health services for those youth who have not been successful in traditional educational settings (Mathur & Jolivette, 2012; McGee & Lin, 2016). These settings provide youth with low youth-to-teacher ratios, highly structured classrooms, access to positive behavior supports, access to adult mentors, social skills instruction, and individualized behavior interventions across all domains (Sprague et al., 2014; Tobin & Sprague, 2000; Unruh et al., 2007). Additionally, many RTF have adopted multi-tiered systems of support (e.g., facility-wide positive behavior interventions and supports) to help organize their education, programming, and treatment through data-based decision-making and tiered practice assignment within a trauma-informed lens to address the complex needs of the youth across all domains (e.g., academic, behavior, social-emotional, mental health; Jolivette, 2016). Due to the 24-hour service delivery model in RTF, treatment extends beyond just the school hours, with youth receiving treatment in the residential unit before and after school as well on school breaks and weekends. Treatment during these times typically includes social skills groups, life skills groups (e.g., cleaning, cooking, laundry), individual therapy, group therapy, transition services, and community outings to help build social skills as well as life skills (e.g., making purchases and communicating with community members). The specific programming and amount of time a youth with E/BD resides in an RTF is dependent on their mental health, academic, behavioral, and social-emotional needs as well as achievement of education, program, and treatment goals; this means, every youth with E/BD in an RTF will transition from the RTF to a less restrictive setting (e.g., neighborhood school, community placement) at some point.

Transition

The Individuals with Disabilities Education Act (IDEA) of 2004 states that all school age youth receiving special education services, including youth with E/BD, must have a transition plan. The national statute aims to help youth with disabilities move from K-12 schooling into the post-school community, typically defined as the workforce or job training (Plotner et al., 2020). The U.S. Department of Education asserts that youth with disabilities are less likely to be able to perform basic living skills, engage in the community, or prepare for post-secondary schooling or independent living; therefore, the need for transition planning is critical (Lipscomb et al., 2017). IDEA explicitly states that each youth's transition plan should be built upon their strengths, preferences, interests, and needs encompassing all domains. Furthermore, the transition plan should start before the youth turns 16, to help ensure that there is adequate instructional time to practice skills and experiences detailed within the transition plan to cultivate their skills needed to successfully live in a post-secondary school world (Talapatra et al., 2018). While IDEA mandates transition plans for youth with disabilities, there are multiple paths for the transition process, dependent upon the youth's current setting, disability, needs, and projected path (i.e., post-graduation or transition of settings).

Pathway One

When stakeholders mention the word "transition", specifically pertaining to youth with disabilities, individuals characteristically think of facilitating the transition of youth with disabilities from school to post-school activities. Tenets for this pathway (i.e., Pathway One) include a) youth-focused, b) strength-based, and c) collaborative approaches. Pathway One transition services are coordinated activities based on the youth's strengths and needs that are results-oriented and prepare youth for a successful transition to post-secondary employment,

academics, or community participation (Morningstar & Clavenna-Deane, 2017; Office of Special Education and Rehabilitation Services, 2017; Talapatra et al., 2018). Stakeholders in this transition pathway typically include the youth, family, special education teacher, transition coordinator, and community agency staff (Morningstar & Clavenna-Deane, 2017; Plotner et al., 2020). The special education teacher or transition coordinator are the stakeholders usually tasked with leading the development of the transition plan, coordinating activities for the transition process, supporting the youth through the process as well as any other stakeholders (i.e., family, community agency staff), and ensuring collaboration among all stakeholders (Morningstar & Clavenna-Deane, 2017).

For Pathway One, the National Technical Assistance Center on Transition (NTACT) advocates for youth-focused planning practices such as a self-directed IEP (Arndt et al., 2003; Branding et al., 2009; Kelley et al., 2013; Martin et al., 2006), youth development practices for academic transition services such as anchored instruction (Bottge et al., 2015), peer tutoring (Jones et al., 2016; Moeyaert et al., 2019), and youth development practices for employment transition services such as the self-determined learning model of instruction (Burke et al., 2019; Lee et al., 2015; Raley et al., 2018). Independent living activities include teaching food preparation and home maintenance with response prompting and situated learning (Meyers, 2011). NTACT also provides “toolkits” (see <https://transitionta.org/>) for transition stakeholders that range from competitive integrated employment (Brewer, 2005) to youth progress monitoring (NTACT, 2018). These toolkits offer stakeholders an overview of the transition process, their roles in the process, and resources to help stakeholders achieve success in the process. Other transition services supported by research include family-school-community partnerships and community-based skill instruction with collaboration among all stakeholders (i.e., school staff,

community partners, and family; Lipscomb et al., 2017; Talapatra et al., 2018). In all, Pathway One has been well researched and organized to promote more success for transition from high school to the workforce or post-secondary education with activities adaptable for youth with different disabilities and goals (Morningstar & Clavenna-Deane, 2017).

Pathway Two

The second pathway (i.e., Pathway Two) is an emerging area of research and involves youth transitioning from juvenile corrections (another type of residential placement) back to a community setting, typically the workforce after earning a GED or diploma while incarcerated, and this transition is referred to as reentry as these programs and practices help prepare the youth to return back to the community-at-large and family (e.g., Abrams et al., 2014; House et al., 2018; Mathur & Griller Clark, 2014; Miller & Therrien, 2019; Ochoa, 2016; Sinclair et al., 2017; Unruh et al., 2007; Unruh et al., 2018). Researchers suggest there are three main tenets for this transition pathway: 1) multi-tiered systems of support, 2) relationships and collaboration, and 3) building on youth strengths (Bilchick, 2011; Council of Juvenile Correctional Administrators, 2017; Leone & Weinberg, 2012).

Multitiered systems of support (MTSS) is a framework whereby instructional practices across domains are tiered by intensification and dosage (e.g., universal, targeted, intensive) and decision-making of the evidence-based practices are data-based with system supports as directed by a team of stakeholders (Jolivette et al., 2015; Jolivette, 2016; Jolivette et al., 2016; Kauffman et al., 2018; Melloy & Murry, 2019). MTSS is supported by a) positive relationships and environments, b) collaboration, and c) strength-based approaches. Researchers found that youth being served in juvenile justice facilities have benefitted from positive environments and relationships with all those involved in their education and treatment (Council of Juvenile

Correctional Administrators, 2017; Gagnon & Richards, 2008; Jolivette, 2016). Also of importance is the collaboration of those involved in the youth's life (i.e., youth, family, teachers, therapists, community partners, etc.) regarding services received in the secure juvenile justice setting and with community partners once the youth is back in the public environment (Gagnon & Richards, 2008; Hagner et al., 2008; Mathur & Griller Clark, 2014; Mathur et al., 2018; O'Neill, 2019). Ensuring the strengths of the youth are highlighted and allowing them leadership opportunities based on these strengths, helps the transition process for each youth to become more accessible (Gagnon & Richards, 2008; Hagner et al., 2008; Leone & Weinberg, 2012).

These three main tenets (i.e., multi-tiered systems of support; relationships and collaboration; building on youth strengths) each reinforce the concept of personalized reentry (e.g., transition) supports (Mathur et al., 2019). Personalized supports place the youth at the focus of programming within a juvenile justice facility as well as any planning that occurs for the youth's release back into the community. One transition service that has been studied, allowing for personalized supports, is the use of a transition specialist (Black et al., 1996; Brier 1994; Hagner et al., 2008; Griller Clark et al., 2011; Karcz, 1996; Unruh et al., 2009). O'Neill (2019) states the role of a transition specialist is to provide a) soft skills instruction, b) social skills instruction, c) task instruction, d) coaching in self-advocacy and problem solving, e) helping youth enroll in school, and f) locating services for the youth.

There are several examples of the use of a transition specialist in Pathway Two. First, Karcz's (1996) project found that the Youth Reentry Specialist (YRS), a stakeholder who was tasked with helping youth with E/BD in juvenile corrections transition back into public education settings across all domains, was beneficial to reentry into the community and other aftercare services (e.g., working with a parole officer). The job of the YRS was to a) determine the reentry

procedures for the youth, b) obtain information about available vocational programs or work opportunities for the youth in their home community, c) help ensure funding for the youth to participate in the vocational program, d) enroll the youth in special education programming in their home community, and e) collaborate with other stakeholders (i.e., parole officer, parents, special education teacher).

Second, Unruh et al. (2009) implemented Project SUPPORT for juvenile offenders to help youth with E/BD transition from juvenile corrections back to the community. Project SUPPORT provided a transition specialist who worked with each youth to develop a transition plan coordinated with the youth's parole plan. The plan was developed per the youth's strengths and needs and then implemented in three phases: 1) within the juvenile facility, 2) reentry into the community, and 3) ongoing community support. Activities within the juvenile facility included vocational assessments, psychological evaluations, and development of a transition plan with the youth, parole officer, and transition specialist. After the youth exited the facility, activities included ensuring health insurance was secured and helping the youth find and maintain employment and/or post-secondary training. Researchers found that 68% of the youth were positively engaged in the community, through school or vocational activities, per their transition plan.

Third, Mathur et al. (2018) implemented personalized reentry (i.e., transition) supports by developing transition portfolios where the transition specialist and youth met regularly to add items to the portfolio such as IEPs, resumes, transcripts, academic assessments, and vocational assessments. Project RISE used a transition specialist and project coordinator to work closely with personnel in public schools where youth would be returning. The project's goals were to: 1) increase youth participation and responsibility, 2) facilitate the youth's interaction in the

community, 3) allow for the implementation of new resources and supports, and 4) track the youth's interaction with the community partners. Mathur et al. (2019) found for a youth to be successful (e.g., active community engagement and no recidivism) all stakeholders (e.g., youth, family, transition specialist, community partners) needed to collaborate with one another to contribute to the success of the youth.

From these studies, transition researchers established that having a dedicated transition specialist is beneficial to youth transitioning from juvenile justice facilities back into the community, including home and school. The job of the transition specialist is to help the youth while they are in the facility and after they transition from the facility. Incorporating ideas from IDEA's mandate on transition, the transition specialist in these studies helped to promote the strengths and needs of these youth while collaborating with community partners and stakeholders to ensure the best possible plan was created to help the youth's transition process.

In addition to reentry supports such as a dedicated transition specialist, the National Technical Assistance Center for the Education of Neglected and Delinquent Youth (NDTAC) has developed several toolkits to help youth with their transition from juvenile justice facilities back into the community (i.e., Transition Toolkit 3.0; Griller Clark et al., 2016). These toolkits provide strategies for the four phases of the transition process: 1) entry into the juvenile justice system; 2) residence in the juvenile justice system; 3) exit from the juvenile justice system; and 4) aftercare, or after reintegration back into the community. The toolkit authors recommend activities that are youth-centered, family-centered, and community-centered throughout each phase. Activities for the first phase include: requesting records, assembling a transition team, developing a transition plan, revising the transition plan, and monitoring and tracking the youth's progress, with the youth participating in all activities. For each additional phase, researchers

advocate for the transition team to use data-driven decision making and revise the transition plan according to the data. The youth also should participate in transition training and begin working with a mentor. After exit from the juvenile justice setting, the youth and the community should be mutually engaged, with engagement for the youth entailing enrollment in school or vocational training, getting along with others, and making appropriate decisions while engagement for community stakeholders entails actively communicating with all those involved in the youth's transition plan to ensure success (Griller Clark et al., 2016).

In looking at the first two pathways, there are several similarities. First, the transition process (mandated by IDEA) is built upon the youth's strengths, needs, and preferences (Martin et al., 2007) while secondly requiring an array of planning such as individualized assessment, basic academic instruction, and social skills training (Marshall et al., 2012). Third, transition planning should focus on and fully involve the youth (Shogren et al., 2018). Fourth, each pathway discusses collaboration as a successful indicator of transition (Plotner et al., 2020). Collaboration should not only include the youth, but any other stakeholders involved in the process, whether a special education teacher, transition specialist, school administrator, family member, or community partner. However, there are still barriers to these pathways. Barriers include a) lack of support from either the family and/or community (Mathur et al., 2014); b) poor interagency collaboration (Plotner et al., 2020); and c) specifically regarding Pathway Two, sending youth back into communities in which they originally struggled (O'Neill, 2019).

Pathway Three

Pathway Two addresses transition from one of the most restrictive settings for youth with E/BD (i.e., those served in residential secure juvenile justice facilities), while Pathway One typically addresses youth transition from a less restrictive setting (i.e., neighborhood schools).

But there is a setting between these two, and this pathway is emerging. Pathway Three is the transition of youth with E/BD currently residing in and receiving education, programming, and treatment in an RTF back into their neighborhood K-12 school to complete their education. It is important to note that Pathway Three is not exclusive to high-school aged youth with E/BD, but instead encompasses all youth served in RTF including elementary and middle school-aged.

Youth who have spent time in RTF, where they receive 24-hour, 7-days a week care across all domains, may experience difficulties as they transition to a less restrictive school environment where there is more freedom of movement and choices, more peers and teachers to interface with, and larger class sizes (Freeman et al., 2019); all which can be difficult under any circumstances but made more challenging if transition planning and services are not provided to youth with E/BD (Whittaker et al., 2015). For youth with E/BD in an RTF, it is imperative that a transition plan be implemented to help them successfully move from the highly structured, therapeutic living and academic environment to a less restrictive and structured setting such as a neighborhood school. Studying this pathway is of importance because when youth, specifically those with E/BD, are placed in an RTF and then transition from an RTF, their life is disrupted (Leichtman & Leichtman, 2002). Thus, it is imperative to plan for a successful transition beginning upon intake at the RTF (Mathur & Griller Clark, 2013; Unruh et al., 2019); otherwise known as ‘exit upon entry.’

Youth with E/BD in an RTF have a history of poor interpersonal relationships with both teachers and peers (Mathur & Rutherford, 1989) with comorbid academic deficits (Sanders et al., 2018) and social-emotional or mental health needs (Marvin et al., 2017). These needs coupled with a history of adversity (Abt Associates, 2008; Acri et al., 2018; Dowling, 2016; Freedman & Woods, 2013), mental health diagnoses (Whaley et al., 2017), and change of placements,

whether home or school (McCurdy & McIntyre, 2004; Miller et al., 2019), may hinder the youth's successful transition from an RTF back into a neighborhood school. It is important to create a transition process where the youth continues to work on their needs across domains as well as continue to maintain positive relationships with others. Such a process may help the new school's stakeholders understand the youth's strengths, needs, and how to best serve the youth within their new school setting. Without understanding the youth and making proper accommodations built upon their strengths, preferences, and needs, the youth may continue to have difficulty in the neighborhood school setting (Griller Clark et al., 2013; Unruh et al., 2009).

Gaps in Literature

Transition has been studied in terms of transitioning high school graduates with disabilities to a) post-secondary employment, b) post-secondary education, and/or c) being actively engaged in the community (i.e., community activities, services, or social activities), such as in Pathway One. Also studied is the transition of youth from juvenile justice facilities back into the community setting (i.e., Pathway Two). However, there is a lack of literature on transitioning youth with E/BD from RTF schools back to a neighborhood school. First, it could be hypothesized that some of the same salient principles from Pathways One and Two could be guiding tenets (i.e., collaboration, youth-centered) for Pathway Three. Second, it is unknown whether it is feasible to use the research from Pathways One and Two to help inform the practices needed for transitioning youth with E/BD from RTF back to neighborhood schools. Feasibility issues arise due to the complex nature of transition planning (Mellard & Lancaster, 2003) and the transition process needing to be modified to atone for the differences between traditional transition planning (e.g., pre-graduation transition) and juvenile justice transition planning (e.g., being able to earn alternatives to a high school diploma) to the new pathway of

RTF to neighborhood school transition process (Mathur et al., 2019). Third, transition researchers must discuss if it would build upon the current science of transition. There has been a lack of involvement, explicitly in Pathway Two, from stakeholders outside of the secure facility (Mathur & Griller Clark, 2014) which may be an impediment in this study, also leading to feasibility issues. While recommendations cannot be provided due to the lack of literature regarding this specific type of transition, the purpose of the study is to begin with the stakeholders and service providers in the RTF to help connect the dots between transitioning the provision of educational services across all domains from a more secure and structured environment (i.e., RTF) to provision of educational services in a neighborhood school setting (i.e., typical neighborhood school).

Gaps Per My Professional Experience

While I have not always worked with youth with E/BD, I have interacted with these youth in each of my work settings, whether in RTF or public-school settings. During this time, specifically after working with youth with E/BD in an RTF, I began to realize that there was a lack of transition processes and services for these youth as they went back to a local school. First, many of these youth came into the RTF without any educational supports (i.e., 504 plan or IEP) even though they presented characteristics associated with E/BD. Second, I began to see that once these youth received supports such as smaller class environments, extended time to complete assignments, breaks, and small group instruction, they made progress with decreased maladaptive behaviors. Third, I witnessed many neighborhood schools unwilling to work with these youth, even saying that they “could not serve them” when they returned to the local school. Fourth, I observed some of our youth quickly exiting the RTF with little notice and with no means to collaborate with the new school.

Study Purpose

The purpose of this study is to identify the components of transition processes for youth with E/BD moving from RTF to neighborhood schools. In this study, transition refers to all domains of education, treatment, and programming (e.g., academic, behavior, and social). The central research question was: How do RTF stakeholders understand and describe the components of transition planning for youth with EBD from RTF to neighborhood schools?

Impact of COVID-19

The focus of this study is on transition, which can occur in many ways. At the time of this study, the United States was going through a transition of its own with a pandemic that has affected the everyday life of humans throughout the world. So, before delving into the specifics of this study, it is important to discuss the role of the novel coronavirus (COVID-19) and how the transition from pre-COVID-19 to living during COVID-19 affected my data collection and the subsequent findings. My proposal for my dissertation was to complete a comparative case study at two RTF within the same state both identified as having transition processes. However, my proposed data collection timeframe coincided the same week that COVID-19 was beginning to negatively impact the United States in substantial, but various, ways. My proposal was approved by my committee a week prior to my scheduled data collection whereby three days later, my study processes had changed. In a 48-hour timespan I went from being able to study the transition process of two RTF to being able to collect data at one RTF; this was the week of March 13, 2020 when most schools and businesses within the state were closed with wide-societal closures across the country. To preserve the safety of both the youth served and staff, these two RTF were not allowing any non-essential employees or visitors access to the campus or their residents. In conjunction with my committee chair who happened to be in the same state

working with other state residential systems at this same time, we discussed next steps and how things could change even more; meaning I would need to be flexible and to reconcile my hopes and dreams for my dissertation experience.

On a Sunday, I had traveled to the site city with the intent of beginning data collection Monday morning, but something inside of me knew I should check in with my site contact. I checked in early Monday morning to learn that amongst the chaos of trying to coordinate COVID precautions within an RTF, they had forgotten I was coming (and who could blame them). We reconfigured my visitation plan for me to access the facility on Tuesday when we would immediately begin the focus group; thus, data collection occurred prior to the RTF closing its doors entirely to visitors (and such non-essential personnel closures continue to the present day – more than 5 months later). After completing the focus group, I spoke with the principal and we constructed a schedule for the interviews, as I would not be able to conduct them on-campus as originally planned. The principal also gave me five de-identified, archived transition plans to study on my own. Because I was only able to stay at the RTF for half a day, I was unable to complete my proposed ethnographic field note data collection methods. It was my plan to observe the transition coordinator throughout the week participating in her everyday routines to gather more insight as to what a typical day and/or week looked like for the transition coordinator and to observe how it aligned with the themes constructed from the other data collection methods (i.e., focus groups and interviews); and to repeat this process at the second RTF.

While I was upset that my study did not go as proposed, I still feel that I gained valuable insight into the RTF's transition process for youth with E/BD transitioning back into a neighborhood school. In my experience, working within an RTF, especially when working with

youth with E/BD, one must be flexible. Many days, things do not go as planned just as my study did not go as I intended. COVID-19 has presented many challenges to our world and has had a significant impact on how RTF operate on a day-to-day basis. In my experience within my own RTF, I have noticed just how resilient our staff and youth are. They have adapted to the enormous amount of change that has affected their daily life due to COVID-19 and have responded admirably.

Methods

Design

I used a qualitative intrinsic, instrumental, descriptive case study design. According to Merriam (1988), a case study is an “intensive, holistic description and analysis of a single instance, phenomenon, or social unit” (p.21) with Stake (1995) emphasizing the “cases of interest” in education typically are of people or programs. Thus, a case study explores a “bounded system”—meaning the case is seen as a single entity, and the focus of my study is closely bounded to the research question which is closely connected to the context (Merriam, 1988; Stake 1995). Intrinsic case studies focus on cases that are distinctive because they are not illustrative of other studies due to the researcher’s interest in the case (Crowe et al., 2011). Because Pathway Three has not been fully studied, this makes it intrinsic due to my vested interest in the topic of this specific transition pathway (Stake, 1995). While an RTF was studied, the transition process itself is the bounded system, or the case, but instrumental in nature because stakeholders are interviewed to understand the transition process (Stake, 1995). I examined the collected data and did analyses in detail, making sure to focus on the specific case and help not only create new themes, but “inform, confirm, refute, and further shape a priori theories” (Tobin, 2012, p. 289).

Statement of Subjectivity

It is important to note that I do have a vested interest in this research. I am currently Manager of Education Programs for an RTF in the Southeastern United States; however, not where this research occurred. Thirty-six of the youth in the RTF where I work are served in the intensive program on campus and 10 others are served in the short-term program on campus. The youth in the short-term program typically reside there for 30 to 90 days depending on their needs. The intensive program serves youth from six months to three years depending on the severity of their needs, and the ability of the Department of Human Resources (DHR) to secure their next placement. In my present position, I too had to navigate the effects of COVID-19 and take measures to keep our youth and staff safe.

Prior to my current employer, I worked in another RTF where my interest in ensuring improved transition processes for youth with E/BD emerged for those moving from the RTF back into a public education system. I began to realize that if some of these youth had proper transition supports or there was a solidified transition process, then the youth may have an improved chance at succeeding back in those settings. Additionally, I also have worked in two public schools, where each had pioneered self-contained classrooms for youth with E/BD. I witnessed the youth with E/BD served in these classrooms making exponential progress, behaviorally and academically, due to the smaller class environment and instruction, coupled with accommodations matching the needs of the youth. Overall, I think it is important to state that I acknowledge the value in applying successful transition processes and components for youth with E/BD from RTF back into public education settings. Furthermore, by introducing the theoretical framework below, I must recognize the framework will shape the way I will study the

collected data. While I have noted my vested interest in this research, I must admit that I will be looking at the transition process relative to the youth's strengths and needs across domains.

Theoretical Framework

Sociocultural theory is an umbrella theory some argue has no clear-cut definition (Schoen, 2011). For this study, I relied on Nieto's concept of sociocultural theory (i.e., SCT) due to my intrinsic belief of Nieto's focus on education as a basic right. Nieto (2002) states a person's knowledge is influenced by society and culture with an emphasis that everyone deserves a basic education. While sociocultural theory has a lot of "baggage" and it includes many ideas and no definitive explanation, a sociocultural lens can be useful in educational research as it is built on integrating knowledge from three domains (social, individual, and cultural) to help analyze contexts to inform practice (Schoen, 2011).

Nieto (2002) provides characteristics of what basic education for all youth may look like, with the following pertinent to this study - education is important for all youth and social justice education. While Nieto (2002) focuses on youth from minority cultures, the overall vision of SCT can be interpreted to include youth with disabilities, particularly those with E/BD and their inclusion within neighborhood schools. The parallels include: a) children from a minority population are often viewed as liabilities in the classroom and it can be argued the same can be said of youth with E/BD, especially those with aggressive behaviors and who are served in RTF due to these behaviors; and b) youth voice must be included in any improvements or planning processes, which also is pertinent to a successful transition process for youth with E/BD.

Nieto's (2002) interpretation of SCT emphasizes how all youth are capable of learning and have the basic right to an education. Using an adapted version of Nieto's view on SCT that targets youth with E/BD, I use this theory to inform the creation of themes within the collected

data. This theory entails looking at the societal and political norms of the cultural context to see how they interact with youth with E/BD. In this instance, the cultural context will be the RTF. By using SCT, I look to see how the political and societal norms of the RTF look in terms of education as a basic right for all. Again, this will relate back to the idea that the youth is the focal point of the transition process, and how the process is not only implemented, but received by others.

Context of the Study

I conducted this study at an RTF in the Southeastern United States that is accredited by the Joint Commission and AdvancED, among others. The RTF is in the metropolis of the state and has an acknowledged transition process within their school. Within the Title 1 residential school, there are 12 classrooms with a certified teacher in each. Seventy-five youth with E/BD and/or mental health disorders such as depression, anxiety, bipolar disorder, impulsivity, mood-dysregulation disorder, and self-harming behavior reside at the RTF. The average stay for a youth is usually dependent on their age: a) elementary-aged youth typically stay six to nine months, b) middle school youth an average of four to five months, and c) high school youth with an average stay of 45 to 60 days. See Table 7 for additional youth demographics. In addition, the RTF implements MTSS with universal expectations (i.e., STAR: Show respect, Take responsibility, Accept adult directions, and Respond appropriately) and examples of their Tier I practices include: a) morning check-ins, b) “mini-vacations,” c) three-minute coloring activities, d) self-soothing baskets, d) dialectical behavior therapy, e) mindfulness (e.g., breathing techniques, “dropping anchor,” using a calm app which is guided by adults), and f) restorative practices.

The facility transition coordinator develops an individualized transition plan for each youth based on their unique needs by a) advocating for the youth and family, b) serving as a team member at the transition meeting with the home school, c) providing the home school with any domain data available, and d) making recommendations for school support through a School Transition Plan. The beginning of the transition process involves the transition coordinator notifying all parties of the discharge date (which is usually determined by the treatment team, insurance company, or parents), contacting the school to schedule a transition planning meeting, and providing the school with all records available. Additional non-school interventions included in the youth transition plan may include a) in-home therapy, b) community-based skill coaching, c) skill development, d) attachment-based interventions, and e) family crisis and safety plan development.

Adult Stakeholders

Adults in the RTF involved in the transition process are the focus of the study. The purpose for choosing these participants was to understand how the transition process works, who participates, and the viewpoints of those involved. The identified participants included the principal, assistant principal, transition coordinator, lead special education teacher, and a teacher whose role is to help create individual behavior plans for the youth who need more intensive interventions at the RTF school. See Table 8 for additional participant demographics.

The participants were identified by the principal as having an important role in the educational portion of the RTF transition planning. Furthermore, she stated that the transition coordinator and assistant principal have the most vested roles in the transition process. According to the principal, her role within the transition process is to support the transition coordinator with parent and school contact and/or communication, as well as helping teachers

create transition plans. The assistant principal stated her role includes working with the transition coordinator to obtain the youth's records to send to the youth's home school, while also communicating with the home schools to ensure the youth is taking the correct classes at the RTF. The teacher stated his role in the transition process was to complete transition plans for the youth on his caseload. He stated that creating plans includes but is not limited to a) identifying parental concerns, and b) giving suggestions and strategies to help the youth be successful in their new school. The lead special education teacher stated her role was to write transition plans illustrating student needs and supports to foster success in school, while also meeting with the neighborhood school to help bridge the gap. Lastly, the transition coordinator is the main contact between the neighborhood school and the RTF school with her duties including: a) coordination of receiving and sending school records; b) scheduling re-entry meetings when it is time for the youth to discharge; c) educating parents/guardians on their 504 or special education rights; d) serving as Local Education Agency (LEA) at the IEP or Eligibility meetings; and e) attending all treatment team meetings and reporting information back to the education team.

Measures and Data Collection Procedures

The RTF was chosen due to the type and ages of youth served, in addition to having a specialized transition process. Recruitment of participants was based on everyone's role within the identified transition process and consent was secured with data collection following per the approved University IRB.

I used qualitative research methods to allow myself to learn and understand issues through the lenses of the involved population. According to Mack et al. (2005), qualitative research allows for complex data to be considered and expanded upon, often giving meaning to experiences that cannot be conveyed through rigid data found in quantitative data. Additionally,

qualitative methods allow for the complexity of each given situation to be shared, and “maximum explanatory value” (Silverman, 2016). The methods included record review, interviews, and a focus group.

Record Review

The first step in the data collection process was a record review. While called a record review for the purpose of this study because of the nature of the facility, this also is known as a document analysis in qualitative studies. Document analysis is a “systematic procedure for reviewing or evaluating documents” (Bowen, 2009, p. 27). Document analysis allows for insight to previous information, and for information that cannot be directly observed, and is especially beneficial for qualitative case studies (Stake, 1995). Furthermore, document analysis can assist the researcher in developing new questions for focus groups and individual interviews (Bowen, 2009).

The purpose of the record review was to look at archived (and deidentified) transition plans to see how the youth’s background informs the transition plan created by the RTF. These plans were provided to me by the RTF and I then analyzed them off-site after the interviews and focus group. I looked for common factors within the transition plan (i.e., listed strengths and needs) in light of the transition tenets researched for Pathways One and Two, and how these factors informed the transition plan. I looked at 7 transition plans from the RTF which were deidentified and looked for the following: a) each area of the RTF that was involved in the plan; b) if the plan listed the youth’s strengths; c) if the plan listed the youth’s needs; d) if the plan was created based on the strengths and needs; and e) if collaboration with the public school occurred.

Focus Groups

Second, I conducted one focus group (see Table 9 for a list of the guiding focus group questions). The idea of the focus group was that the participants not only interacted with me as the researcher, but with each other as well (Kitzinger, 1995). For example, not only did I ask questions and elaborate on their responses, but the participants elaborated on each other's responses as well. While I provided questions, I acted more as a moderator as participants interacted with each other and built on each other's answers (Morgan, 2009). In short, this means that as the researcher, I provided the topic, while the participants provided the data (Morgan, 2009). This allowed me to use a less formal approach, so participants felt comfortable in adding any input desired.

Interviews

The third step in the data collection process was individual interviews (see Table 10 for a list of guiding interview questions). I used interviews to help me gain a deeper understanding of who each participant was as an individual and their importance in the transition process. Interviews allowed the roles of the stakeholders to be explained (Mack et al., 2005) and allowed for answers to be more fluid, rather than rigid, as in responses from surveys (Gray, 2018). Reflexive interviewing potentially allowed the participants to go in-depth on their contributions to the transition process. Ensuring that I used strategic reflexivity allowed me to shape questions to not only find the meaning in the participant's discourse, but the meaning I constructed as well (Finlay, 2014). Furthermore, when interviewing in ethnographic study, it can involve three forms: oral history, personal narrative, and a topical interview (Madison, 2012). Within this study, all took place, but the topical interview may be of most importance as topical interviews typically focus on programs or processes. However, it was still important to gather the oral

history of each participant and the process, as well as how each participant told their story and viewpoint on what makes the facility's transition process successful.

Narrative Inquiry for Focus Groups and Interviewing

It is important to note that both the interviews and focus groups were conducted in a narrative matter. Narrative inquiry allowed for storytelling to “understand experience as narratively constructed and narratively lived out” (Clandinin, 2006, p. 21). The use of narrative inquiry methods when interviewing and conducting focus groups was imperative to capturing each participant's story telling. According to Jovchelovitch et al. (2000), the narrative interview allows the researcher to help the participant (or storyteller) to explain a significant experience in one's life. For the purpose of this study, it was imperative I understood the interviewing to be more fluid and to phrase questions allowing for each participant to tell their story (Shelton, 2014). Furthermore, while I did have protocols with a set of questions for each the interview and focus groups (see Tables 9 and 10), I understood that narrative interviewing allowed for flexibility and some answers may spur more questions not previously listed (Shelton, 2014). For instance, answers in response to the question about what led each participant to work in an RTF may include more than just being interested in helping youth with mental illness and may lead to talking about how mental illness had affected their life overall.

Data Analyses

I used both a priori coding and inductive analysis. A priori coding allowed themes to be developed before examining the collected data (Johnson & Christensen, 2020; Stemler, 2000). Due to having a personal history in this field in addition to previous studies completed in other restrictive residential settings (i.e., juvenile justice facilities), I expected certain themes to be identified during the data collection process, and a priori coding allowed for this construction

(King et al., 2003). A priori coding also informed themes that were constructed during inductive analysis (Elliot, 2018) with critical data needing preestablished codes (Stake, 1995). While a theme was pre-established, it was revised throughout analyses to ensure all possible themes were encompassed (Stemler, 2000). It is important to note with a priori coding, I had to safeguard against looking just for the a priori codes during analyses, and understood that they could be revised (King et al., 2003). I also had to ensure that I also kept the research question in mind and coding the data according to the question (Stake, 1995).

Inductive analysis is an approach that allows the researcher to find concepts or themes from raw data (Thomas, 2006). Stake (1995) asserts that all meaning is found in patterns, and one way of establishing patterns is by coding. By using inductive coding, I was able to find themes that are significant by using a “bottom up” approach to where observations were made, patterns were detected, a possible hypothesis was created, and finally forming a conclusion (Trochim, 2006). I transcribed the focus group and interviews myself to produce themes. After coding, I labeled each theme, gave a description of each theme, and then selected themes from the interviews and focus group to support and provide context to each theme.

Findings and Discussion

The primary research question for this study was: How do RTF stakeholders understand and describe the components of transition planning for their students with E/BD who are moving from their RTF to neighborhood schools? Per this question, I present each finding via: 1) presentation of theme, 2) presentation of evidence for each theme, and 3) analyses of each theme and how it relates to sociocultural theory. It is important to note that while five participants provided their understanding and descriptions through focus group participation, most of the findings are derived from the responses of two participants - the current transition coordinator,

Laron, and the former transition coordinator who is now the assistant principal, Elizabeth. While the three other participants did participate in the focus group, each of them often deferred to Laron when asked questions regarding the transition process. Furthermore, after the focus group was conducted, I spoke with the principal, Sara, who stated the interviews would need to be held with the transition coordinator and former transition coordinator, as the other participants are not as involved in or knowledgeable about transition processes. Moreover, I had planned to conduct field notes where I would observe Laron throughout the day, but due to COVID-19 and new restrictions that continue to this day, I was unable to remain at the RTF to complete these observations.

Before delving further into the themes, I want to discuss a topic that seemed prominent throughout analyses which was the idea of “then” and “now.” This topic materialized throughout listening to the participants as well as transcribing and analyzing the data. Throughout my interactions with the participants, specifically in the focus groups, I kept hearing phrases of “we used to” or “but now.” I think one of the reasons these types of responses were heard was not only because the participants were comfortable with each other and considered themselves family but additionally, many of them have worked at the RTF for an extended length of time, giving them perspectives from different roles across that time. For instance, the current assistant principal was the former transition coordinator when it was considered a part-time assignment. She held the position while she also was a teacher within the RTF, which allowed me to gather more information on what the transition coordinators duties were before and after this change.

I keep bringing up “the change” but have yet to describe it. The term refers to when the RTF began accepting private insurance as their main means of funding, which then altered the youth population served. According to the participants, the nature of the youth’s E/BD changed

from externalizing behaviors, such as aggression or property destruction, to more internalizing behaviors, such as being withdrawn or self-injurious. Prior to accepting private insurance, the RTF served youth comprised mostly of wards of the state, usually due to family dysfunction. Many of these youth had experienced a form of abuse (e.g., emotional, verbal, physical or sexual) and had mental health diagnoses related to their abuse experiences (e.g., PTSD) with others displaying aggressive or externalizing negative behaviors. However, when the RTF began accepting youth who had privatized insurance, many of the youth admitted were still in the custody of their families and were arriving from other states. Many of these youth were entering the program with diagnoses such as depression and anxiety and engaged in self-injurious behaviors.

Due to this change in population, the way the RTF delivered services to the youth and their families also had to change. Participants stated that when the youth they served were primarily wards of the state the length of stay could be years. However, many youths now may stay as long as one month, with a few staying for the maximum of six months. Several of the participants mentioned that due to the previous length of stays being longer, they became family with the youth, and some even felt as if they were their “mamas.” They were able to get to know the youths’ strengths, interests, and needs. Additionally, many of the youth who needed increased behavioral supports prior to returning to a traditional public school would attend a separate public school in self-contained classrooms for youth with E/BD. Prior to the change, the participants mentioned they were able to build a solid relationship with the staff at the neighborhood schools, as well as the alternative public schools, which made the transition for the youth easier as they moved along the continuum from the RTF school to a neighborhood school.

Now, due to the change in the population, it seems this contextual circumstance (i.e., change in population due to change of insurance) has affected the transition process for the youth when moving from an RTF school back to their neighborhood school, as many of these youth are going back to the school in which they came from. Because these changes affect the circumstances of the transition process, the change also has inherently influenced the created themes of this study. It is important to note sociocultural theory is based on context, and in this case, the context (or the change) has shaped the cultural norms of the RTF and thus the transition process.

I must explain how the themes from this study were created in order to detail them. Butler-Kisber (2017) introduced the idea of “Starting with the Story” which allows researchers to gather accounts of lived experiences through interviews and requires trust between the researcher and participants. One way this happened was the participants knew I also worked within an RTF as the educational manager, as well as previously as a teacher, which allowed trust to be built, in my opinion, as the participants knew I understood the complexity of their positions within an RTF and allowed for more free-flowing conversation, as the phrase “as you know” or “you understand” was stated towards me throughout the data collection process. Additionally, having a trusting relationship with these participants required me to constantly think about my own assumptions throughout the study, not only when listening, but when transcribing and conducting analyses. In thinking about my own assumptions, I used cross-case analysis (Parry, 2011) to ensure the themes being created, as well as identifying support for my a priori codes, were evident throughout each of the transcribed texts. Cross-case analysis involves identifying common themes across the data sources (i.e., interviews, focus group, transition plans) and using these themes to support the case (Khan & VanWynsberghe, 2008). Furthermore, I noticed there

was a stark difference in the themes regarding how they pertained to the RTF in two ways: 1) within the RTF and 2) outside of the RTF. Within the RTF meant activities supported the themes which occurred while the youth were in the RTF (i.e., “rounds”). Outside of the RTF refers to theme supported activities which occurred outside the physical walls of the RTF, such as transition meetings with the home school, family support, etc.

A Priori Coding

Prior to the analyses process, I believed the following themes would be constructed: a) partnership or relationship, b) strengths, c) individualization, and d) involvement (see Table 11). I specifically chose these themes as they related to the transition literature, whether from the established Pathway One or the evolving Pathway Two. Previous researchers have indicated collaboration between all stakeholders in a youth’s transition process, whether it be reentry from juvenile justice settings, the transition to work, or to post-secondary life after high school, is beneficial to the youth (Luecking et al., 2016; Sprunger et al., 2018). I purposefully chose the ideas of partnership or relations because of my belief working with youth with E/BD requires more than just collaboration. Collaboration is working with someone to produce a result, which in theory, is what researchers are looking for when transitioning youth in all pathways. However, working with youth with E/BD in RTF, mainly due to maladaptive behaviors, takes more than just collaboration to ensure effective treatment and a successful transition happens. In my experience, it takes partnering and building a relationship with all of those (e.g., youth, parent, RTF teacher, and neighborhood school staff) involved. Researchers also have shown that building upon a youth’s strengths and individualizing their transition plan to those strengths is beneficial for youth (Epstein et al., 2000). Again, I believe individualization and building upon strengths is more imperative when working with youth with E/BD in their transition from RTF

back into the neighborhood school. It is easy for neighborhood school personnel to look at the youth's history of negative actions and experiences and believe that the youth do not have anything positive to build on. This is where the partnership and relationships enter, encompassing trust, so the RTF personnel see those strengths and build upon them to create a transition plan not only helping the youth, but helping the neighborhood school be successful. Furthermore, researchers assert student involvement in planning is essential for a successful transition (Cavendish & Connor, 2018). Inherently, by including the youth in the transition planning process, will help ensure that the plan is individualized.

Themes

I noticed the created themes seemed to appear in two contexts: within the RTF and outside the RTF. Most of the themes will be detailed below, split between each context. The following themes were constructed during analyses: 1) communication, 2) collaboration, 3) education, and 4) involvement and individualization. Furthermore, there were two key takeaways from the study: a) the importance of a transition coordinator, and b) how do we educate others on working with youth with E/BD? These takeaways are explored in the implications and future directions section. As far as the created themes, I present communication and collaboration first, followed by education, which shadows collaboration. These created themes had distinct differences when it came to within the RTF and outside the RTF. For involvement and individualization, these were combined in the sense that to individualize treatment, you must involve the youth. Furthermore, the evidence supported these themes as only occurring within the RTF as the treatment was implemented and the transition plan created.

Communication within the RTF

During the interviews and focus group, the phrase “constant communication” was heard several times which referred to the communication between staff members at the RTF, allowing me to construct the communication theme. Due to the way the RTF was configured, there are staff members who work on the cottages (where the youth live) and staff who work in the school. For effective treatment to take place and ensure all staff are working collaboratively, they keep daily point sheets indicating the youth’s behavior, whether positive or maladaptive. Behaviors listed on the point sheet included: being cooperative, using coping skills, hyperactivity, withdrawal, avoidance, asleep, defiance, verbal aggression, homicidal threats, terroristic threats, sexualized behaviors, disruption, and unauthorized movement. Laron stated that “our teachers and behavior specialists are always in constant communication with each other about the needs of the student.” These communication logs help the staff stay informed of the youth’s day, with Laron stating “if something happens in school, the cottage is gonna know about it by the time they [the youth] get there, and same, if something happened on the cottage, we’re gonna know about it when they [the youth] come to school so that we’re all on the same page.” Additionally, the data from these logs can be reviewed at rounds, which is a specific time where many of the RTF stakeholders convened to discuss the youth’s week, whether they were making progress or needed more intensive treatment.

Second, within the RTF, the participants noted open communication lines with the therapists also aided in the treatment of the youth. Communicating well allowed stakeholders to know if a youth was having behavioral issues in the school, which then prompted staff to speak with the therapist to ensure a special treatment plan was developed encompassing all domains (cottages and school) to help address the youth’s issues. Laron stated how school staff will say

“you know such and such has been displaying this behavior, you know consistently, is there any way we can get a special treatment plan?” However, the participants did note how some staff members are “out of the loop” on certain treatment plans if the behaviors were not happening in the school environment, although the plan should also be implemented there. The participants agreed the RTF’s goal is to “tighten up communication” and “improve communication between different departments.”

To ensure successful transitions, including those moving from RTF back to the neighborhood school, stakeholders must communicate with one another throughout the process, so the youth receives appropriate services (Osher et al., 2012). While the term “constant communication” was used multiple times throughout the data collection process and seems to be part of the norm at the RTF; the evidence outlined above also shows there is a lack of communication within the RTF. It is imperative to improve the transitions of these youth by the RTF continuing to build upon a norm of “constant communication” between all stakeholders and across all settings within the RTF.

Communication Outside of the RTF

Communication with other stakeholders outside of the RTF did not occur as much as the communication with stakeholders within the RTF. For instance, most of the communication between stakeholders within and outside the RTF occurs about 2 weeks prior to the youth discharging from the facility, with Laron scheduling the transition meeting. The purpose of the meeting is for the RTF stakeholders to make recommendations to the school and involve the parent in the meeting. However, she also mentions that after the youth transitions back to their neighborhood school follow-up is minimal. “Um, I typically don’t follow-up once they’ve discharged from us, and uh, you know all the paperwork has been sent to the school...um, you

know basically, my cover letters basically just say shoot me an email.” Laron did state she receives e-mails “every now and then” from schools asking for her suggestions on how to handle a certain situation. When she does receive these emails, she sends it to the youth’s former RTF teacher or therapist for them to reach out to the school with suggestions.

It appears most of the communication with stakeholders outside of the RTF is between Laron and each youth’s parents. According to Laron, she is “in constant communication with the parent” and tells the parents “let’s just go to the table with a time frame in mind...and you all as a team can meet to see what kind of progress the child makes and see if they’re deemed worthy or ready to go back.” However, while I constructed the theme of communication from the information given by Laron and her involvement with the youth’s parents, communication eventually lead to another constructed theme (e.g., education) which will be discussed later.

The responses from the interviews and focus group suggest most of the communication is between Laron and the youth’s parents; however, researchers assert that for proper transition planning to occur, communication between all stakeholders should begin as soon as the youth enters the RTF, or even before if possible (Griller Clark et al., 2016). Within the “Exit upon Entry” literature, it is imperative that communication between all stakeholders occur as soon as the youth is admitted to the RTF. Nonetheless, communication between all stakeholders should continue to happen after the youth transitions as well (Osher et al., 2012). While the RTF will not be involved in the day-to-day life of the youth once they transition, they can provide valuable input on mental health and behavioral strategies to help the youth continue to succeed in the neighborhood school.

Keeping sociocultural theory in mind, it is interesting to note how Laron used the phrase “deemed worthy” when discussing schools accepting youth with E/BD. Nieto (2004) discusses

how the sociocultural and sociopolitical context of schools reflects the culture of the school. For instance, Nieto (2017) discusses how terms like “at-risk” are demeaning towards youth are marginalized, which includes those with E/BD. When dissecting this phrase, it is important to think about if Laron was discussing the context of the neighborhood school, or if even the context of the RTF. Using this type of language is reflective of the culture of the school (or RTF), suggesting the culture believes these youth are not “worthy” of being served in the general education setting (Nieto, 2017). Therefore, it is imperative future, adult stakeholders take responsibility in shifting this culture to a more affirming one, therefore supporting these youth and their educational needs (Nieto, 2004).

Collaboration Within the RTF

As with communication, collaboration within the RTF seems to manifest more on a day-to-day basis than collaboration outside of the RTF. Laron stated a strength was “the collaboration with different departments” (e.g., clinical, education) to aid in the treatment plan for the youth. Specifically mentioned were the collaboration between a youth’s therapist and the school to develop a specialized treatment plan for a youth displaying new or worsening behaviors. Additionally, Laron spoke about “rounds” which are a designated day and time each week for the whole treatment team (i.e., psychiatrist, nursing, cottage staff, therapist, educational staff) to discuss each youth. “I share information from our educational rounds back to the treatment team and the treatment team shares whatever information is pertinent to the education staff” but does say “about 70% of the information shared during rounds pertains mainly to the therapeutic side of things.” However, she also stated if a youth is struggling in school, this is a good time to ensure that all departments are aware of the issues and collaborate to develop a specialized treatment plan that will be “applicable to all environments” at the RTF.

Another way collaboration is evident within the RTF is due to the use of the positive behavior interventions and supports framework and the use of a daily point sheet which moves with the youth from place to place at the RTF (e.g., cottage to school). After looking at examples of their point sheets (see Appendix G for an example), and thinking of Laron's responses, it appears these are communication tools for use between departments. Point sheets also seem to assist each department collaborate when it comes to the youth being able to earn privileges and each youth being held responsible for their behavior for the day (e.g., being cooperative vs. being defiant). Each student can earn up to two points per class period with the lowest value a "0". Allen (behavior specialist) stated that this is beneficial because previously when it was just "1" or "0", where "you lose your points and that's it...then we had behaviors the rest of that period because once they [the youth] lost their points, then why would they get back on track? Because they already knew they were already gone." So, with the chance to earn at least one point instead of just earning a "0" when the youth eventually "pulled their behavior together" and displayed better behavior for the remainder of instruction for that class, Allen would tell his students "something is better than nothing." However, when a "0" is noted, there are codes that staff members write that show why the youth failed to earn a "2" or "1." On one example, a youth received "0" points due to being agitated, defiant, and unauthorized movement (i.e., running away). On another point sheet for the same youth, he failed to earn a "1" or "2" in one classroom due to verbal aggression and defiance. By indicating what the failure to earn points is for, staff in other departments can not only discuss with the youth what may have led to this behavior, but as stated before, know what privileges the youth has earned for the evening. Laron states everything that a youth does at school "translates to the cottage in terms of privilege restriction" or the youth being able to "participate in whatever activity the cottage has planned." Laron emphasized this is

an important lesson for the youth to learn what they do in school affects what they do after school, just like “it is in life...if you screw up in your job, you’re not going to be able to get paid.” In addition, it is important that the youth understands that when they transition back to the neighborhood school, the actions also have consequences and repercussions.

The use of the point sheets by the RTF staff, in addition to the information provided by Laron, exemplifies the RTF is making efforts to implement meaningful collaboration amongst all stakeholders at the RTF. For instance, by implementing a point sheet system where all staff members are able to view a youth’s daily performance and coupling this with “rounds”, the RTF is aiming to support a youth’s treatment goals across all settings. However, while the adult stakeholders are putting forth a collaborative effort, it is important the RTF look at involving the youth in their own treatment (Griller Clark et al., 2016).

Collaboration Outside of the RTF

While I noted how continuous communication sometimes lacked between stakeholders, collaboration appears to be distinctive. For instance, Laron stated many of the private insurance companies require a transition meeting be held (in person or via teleconference) once a youth is ready to discharge which somewhat forces collaboration to occur between stakeholders. Laron stated because “they [the home school] have to coordinate a lot more schedules than we do” she will do her best to schedule the transition meetings where everyone can be involved. However, while these transition meetings are crucial in helping create an environment for a smooth transition back to the neighborhood school for the youth, the RTF also shared stories where they went what could be considered “above and beyond.”

During the focus group, specifically talking about working with the home schools, Laron, in passing said “...and if it’s just a matter of putting an extra behavior specialist in a teacher’s

classroom for them...”, which I brought back up after she finished speaking. I, almost confused, said “Wait...so you actually got someone from [facility name] to go into the public school?” and both Sara and Laron noted that they have. Laron continued to tell me that for this particular student who struggled in school, especially with anxiety, they were able to work with the neighborhood school to allow one of the RTF staff members the youth was comfortable with go with her to school those first couple of days she returned. The group stated once the youth was comfortable, they were able to pull their staff member out and return to the RTF with the youth doing well in her neighborhood school.

The main takeaway from this theme when thinking of sociocultural theory is how the change to private insurance shifted the context of the RTF, which therefore transformed the norms of the RTF. While the insurance companies require these transition meetings to take place before a youth can discharge from the RTF, it seems these meetings can happen swiftly and do not adhere to the “Exit Upon Entry” literature in which the transition planning should begin at admission. Albeit, the evidence also shows what can happen when true collaboration happens between all stakeholders, as evidenced by the RTF allowing an RTF staff member to go into the neighborhood school with the youth to ensure a positive transition. Not only did this entail true collaboration between stakeholders, it also required planning built upon the youth’s needs, which is a tenet of the transition literature (Griller Clark et al., 2016; Osher et al., 2012).

Educating within the RTF

When completing analyses, it did not surprise me that communication and collaboration were constructed themes. However, one other theme began to be constructed throughout the analyses of both the focus group and the interviews which was knowledge, specifically referring to education. While the term education in this sense has various definitions depending on the

stakeholders involved, the overall idea was the need for the educational staff to educate other stakeholders on issues pertaining to working with youth with E/BD. Within the RTF, Laron asserted that many of the clinical staff do not understand special education services and how these services are managed when she said “just like we don’t understand all the different that’s that the therapists have to do....they don’t really understand the things we have to do and they don’t understand, the um, the barriers that we have with like, federal law, and seat hours, and if a child is not struggling academically, then you don’t test them or make them special ed.” For instance, Laron and Elizabeth both noted many of the therapists will ask why a youth does not have an Individualized Education Plan (IEP) and how the school needs to create one before the youth leaves. Laron and Elizabeth stated they have to explain to the therapists there are education laws to be followed and it is more difficult for many of the youth to meet criteria for special education services once they have arrived at the RTF because "we don't see any of these behaviors but it’s because they’ve come into the structured environment, and they’re getting their needs met.” Additionally, educational law requires a certain length of time for a school to know a student before referring them for special education services, in addition to implementing Response to Intervention strategies (Fuchs & Fuchs, 2006) and determining their eligibility, which is more time than many of the youth are now residing at the RTF. Some therapists ask youth to receive a 504 plan for behaviors the youth have displayed in the past, although they are no longer displaying the behaviors. Laron states a lot of times the behaviors the therapists are referring to are behaviors not as noticeable as behaviors such as aggression or property destruction, which are harder to take data on because “it’s not necessarily an outward behavior that everybody’s seeing and it’s not necessarily impacting their academics until it’s too late.”

From this evidence and keeping sociocultural theory in mind, it almost seems the cultural norm of the RTF is everyone “stays in their lane”, which, to me, was reiterated whenever the participants would pass a topic to Laron so she could speak on it solely given her role as the transition specialist. However, because communication and collaboration are important in ensuring successful treatment and transitions for youth, it is crucial the RTF take a deeper look at how they can change this context. It is a matter of people feeling certain tasks are not their job, and if so, how do they educate their staff on ensuring there is a truly collaborative effort taking place? For instance, would providing training to clinical staff on how special education services are determined and teaching special education law help the clinical staff understand it is not the educational staff not wanting to collaborate, but simply that there are timeframes that educators must follow in order to properly refer and evaluate youth for special education services?

Education Outside of the RTF

The word advocacy continued to appear throughout the analyses, specifically stated by Laron multiple times regarding working with the parents of a youth who received specialized education services. After digging further, the constructed theme is again education, as Laron stated, “I can tell and will educate you on your rights as a parent,” and alluded to this multiple times. Laron stated while she does go to the transition meetings with the school, she knows there are some schools that will try to stop the youth from attending as they have stated “they cannot serve that child.” Laron stated this is when she ensures the parents are educated by giving “them buzzwords to use, not in a threatening way, but in a way of ‘I know what I’m talking about...I know what’s fair for my child’ and ‘I understand what my child could be getting and I just ask that you do the right thing by my child.’”

Lastly, the idea of helping the neighborhood schools understand the youth lends to the constructed theme of education. In the focus group, the participants spoke about some school's being excited to work with the youth and learn about the "new child" that will be either coming to them for the first time or returning to them. However, the participants also spoke about schools which did not want to work with the youth or take time to understand how to help the youth. Allen, who previously worked as a teacher in a public school, detailed how one of his previous principals just wanted to keep data on children with E/BD so they could "get them out" of their school so the school did not have to "deal with" the youth. While Allen said the way these administrators typically dealt with these youth was to talk down to the youth, and he felt "like a lot of public-school teachers don't have the skills to deal with behaviors." Laron affirmed this notion by stating when she also taught in a public school setting, she would receive students in her class who did not necessarily meet the criteria to be in there, but wanted to be there because Laron "understood how to work with them" and the youth appreciated that. All participants echoed the same sentiment that working in an RTF trained them to "meet the needs of the child" before anything. They further stated how working in an RTF educated them on how to work with youth of all backgrounds and manage maladaptive behaviors displayed by youth with E/BD.

Osher et al. (2012) asserts for neighborhood schools to be better equipped when working with youth with E/BD, school staff need to develop the social-emotional skills necessary for working with these youth. By developing these skills, the adults can "address implicit biases about youth, be less reactive when confronted by troubling behavior, and handle the stresses of teaching and providing services" (Osher et al., 2012, p. 5). While the participants noted they have heard schools say, "they cannot service a child", federal law prohibits schools from denying

a child a Free and Appropriate Education. The Individuals with Disabilities Education Act requires all schools receiving federal funds provide an education for all youth, including those with disabilities. If a school feels as if they cannot provide the youth with an appropriate education, then the school must find a placement that best fits the needs of the student, including paying for any educational related costs. Furthermore, the Neglected and Delinquent program as part of the Title I of the Elementary and Secondary Education Act states there must be improved transitions for youth between secure care and local education programs (Every Student Succeeds Act, 2015). Moreover, using Nieto's view on sociocultural theory, it is the job of the neighborhood school to provide education to all youth, including youth who are marginalized (i.e., youth with E/BD) and create a culture that affirms the ability of all youth (Nieto, 2017).

The I's

As mentioned before, one of the themes I expected to be constructed throughout analyses of the data was individualization, specifically based on transition and special education literature. Additionally, I expected involvement to be a constructed theme in the sense I believe individualization and involvement go together as if a plan is to be individualized, then it should involve the youth. I constructed these themes, that I call the "I's", but they were not constructed in the way I expected or hoped. Throughout the focus group and interviews, I specifically asked if youth were involved in their transition meetings. For the most part, the participants gave me a resounding "no." Elizabeth stated "if the kid asks to be included in the meeting, or the parents or the school want them to be in the meeting, sometimes we will include them in the transition meeting" while Laron said they let youth participate if the parent asks for them to. However, for most cases, Laron stated the youth's involvement in the meetings is "just a matter of letting them know it's coming up." Laron said if they do involve the youth in the meeting, there is prep-work

to be done including: 1) learning the youth's thoughts on the transition; 2) learning the youth's thoughts on what they can do and how it will be different this time; and 3) asking the youth what they have learned at the RTF that will help them transition and stay in school successfully. I questioned if the youth participated in the rounds when it his or her case was being discussed and Laron stated youth do not participate in rounds because "the information is, is very detailed and a lot of stuff is talking about their history, why they're at [facility name], somethings the child is aware of, other things the child is not."

Corresponding with involvement, I expected that individualization might be a constructed theme, and again, it was, but not in the sense that I thought it would be. When going through deidentified, archived transition plans (see Appendix H for an example), I expected to see them have specific, and detailed instructions and support for the school in working with the transitioning youth. However, after looking at five transition plans during document analysis, I noticed not only were the plans not thorough (two pages maximum), but each lacked specifics. For instance, on school goals for a middle school aged youth was to "Use DBT skills if she becomes upset or agitated in school," neglecting to specify what specific DBT skills are useful for this youth so that the school stakeholders could assist her in using these skills when they noticed she was upset or agitated. This was a common theme throughout the five transition plans with a lack of specifics regarding skills to use when becoming upset. Additionally, there were phrases in the suggestions that said "use incentives" but did not specify what incentives have worked for the youth while at the RTF. Each plan seemed to be a short document providing a broad overview of the type of therapeutic programming the RTF offered, instead of methodically individualized documents. The closest instance to individualization was "[student] sits in the front of the class which helps her stay engaged and on task."

According to Osher et al. (2012), a transition plan should include the following: a) planning as a team, b) focusing on the youth, c) placing the youth in the least restrictive environment, d) transferring school records, e) providing professional development and support, and f) providing effective services post-transition. From the evidence, it appears while some of Osher et al.'s tenets are taking place (i.e., effectively transferring records and helping the school place a youth), there are still areas needing improvement, including focusing on the youth and planning as a team, which includes the youth. Furthermore, while providing effective services post-transition is not historically the responsibility of the RTF, it would help if they were able to provide more concrete examples and strategies on what helps each youth.

The philosophy of "Exit Upon Entry" builds upon ensuring the youth's strengths and needs are the forefront of the treatment they receive when in a RTF, and these needs must be considered not only while in care, but post-transition as well (Development Services Group, Inc., 2017). Furthermore, Griller Clark et al. (2016) assert that if a youth is involved in the decision making and transition process, they are more likely to be successful post-transition. Overall, the stakeholders need to keep in mind that the transition plan should be written with the youth and not for the youth. While there is work to be done on this front, it is essential to remember this may not be a product of "bad" transitioning, but the role of transition specialist is new to the RTF and still being developed. This is still a learning process for everyone involved and has become even greater of a challenge with the "change" that happened when the RTF started taking youth through private insurance. This context affects the way youth transition, specifically because many of these youth are not staying as long, and the RTF stakeholders may not get to know the youth as well as once before.

Implications, Tools, and Future Directions

Importance of Transition Coordinator

From the evidence provided by Laron and Elizabeth, it appears that the role of the transition coordinator requires a substantial amount of time and effort, especially now that the youth at the RTF are there for shorter periods of time, requiring that the transition coordinator work more closely with the youth, RTF staff, the youth's family, and the neighborhood school. Laron is also having to help with the transition process for more youth due to the shorter time frame of stays. Additionally, by speaking with the previous transition coordinator, along with the current, it seems that the role fulfills an important need within the RTF. This was not only evident by the analyses, but the focus group participants giving a resounding "yes" when I asked them if the implementation of a transition coordinator has made a difference.

It is important to have a designated person to fill the role of transition coordinator when transitioning a youth with E/BD from RTF back to their neighborhood school. Due to the workload entailed by this job description (Mellard & Lancaster, 2003), specifically when working with an everchanging population due to short treatment times, having a central person that is tasked with working with the stakeholders within and outside of the RTF is essential. It is my suggestion that all RTF start looking at hiring someone for this designated position. However, due to limited funding and resources, some RTF may need to start by giving the role to a teacher who splits his or her time between teaching and acting as transition coordinator. While this may increase the workload on the teacher, it would hopefully be a steppingstone to ensuring a smoother, and hopefully more successful, transition process for each youth as they get ready to return to a neighborhood school.

Educating Others

When using an SCT lens, I noted it is important to value education as a basic human right for all. But I noticed that as the theme of education was constructed through analyses, it appears the need is to help educate other stakeholders outside of special education, in addition to helping the neighborhood schools staff learn how to work with youth with E/BD. RTF should begin to look at new ways to collaborate with not only the stakeholders within the RTF, but the neighborhood school as well. Within the RTF, holding short training sessions could be an invaluable experience for special educators to teach other RTF staff, specifically clinical staff including therapists, about special education law. The following topics could be included: a) the referral process; b) the evaluation process; c) receiving special education services and d) transition pathways. By educating clinical staff on what special education mandates entail, the clinical staff will be better equipped to understand why or why not an IEP is developed for a particular youth, and specifically why one may not be put in place for a youth while in the RTF.

Furthermore, the participants stated that many of the neighborhood schools are not trained to work with youth with E/BD. My recommendation would be to hold professional development sessions with the neighborhood schools that the RTF closely works with. Bringing in RTF staff who are trained to work with youth with E/BD is imperative as they have closely interacted with these youth versus having trainers who have just attended a session on de-escalation practices. It is my opinion from personal experience and based on what I learned from the interviews and focus group that the following topics could be included during professional development provided by RTF staff: a) E/BD definition; b) E/BD characteristics; c) behaviors that may be displayed by youth with E/BD; d) de-escalation practices; e) how to develop a proper behavior management plan; and f) ensuring that all youth are capable of learning.

Additionally, training that focuses on helping a youth with E/BD transition back into the neighborhood school and the role of the school staff would be beneficial. These trainings should be made available to all staff at the neighborhood school, not just special educators.

Transition Plans

Literature from both Pathways One and Two emphasize the need for individualized transition plans for youth, with supporting evidence from this research. However, it is crucial that RTF focus on creating meaningful transition plans specifically incorporating the youth's strengths and needs, simultaneously involving the youth throughout the process. A detailed transition plan should include the following: a) the youth's strengths; b) the youth's needs; c) the youth's interests; d) academic recommendations based on the former; and e) behavioral strategies and recommendations based on the strengths, needs, and interests of the youth. For the behavioral strategies, it is important that the RTF detail what has worked for this youth in their setting so that the neighborhood school can implement those strategies and/or interventions within their school setting.

Tools

The above implications may seem broad which can be expected due to the research for Pathway Three being novel. However, there are tools from Pathways One and Two that educators, and other transition stakeholders can adapt to help aide in the transition process of Pathway Three. The first set of tools relates to involving youth in their transition planning. The Self-Determined Learning Model of Instruction (SDLMI; National Technical Assistance Center on Transition, 2016) is one example of how adult stakeholders can help youth take part in self-directed and self-regulated learning. Additionally, the National Technical Assistance Center on

Transition (2016) provides descriptions on how to actively involve youth in their planning by using the Self-Directed IEP and the Self-Advocacy Strategy.

Another tool that can be adapted for Pathway Three comes from Pathway Two. Merging Two Worlds (Nybakken et al., n.d) is a curriculum designed by juvenile justice stakeholders and provides resources that include assessing the youth's strengths, interests, and needs. After the assessment, adult stakeholders are provided 40 lessons that help them individualize and involve the youth in their transition planning. Lessons are divided into four categories which include: a) Who Am I; b) Where am I going; c) How do I get there; and d) How do I keep it together?

Lastly, the Colorado Department of Education (n.d.) provides their Charting a Course for the Future toolkit which includes tips for adult stakeholders, as well as worksheets and templates for adult stakeholders to help them individualize and involve the youth in the transition planning process. Additionally, the toolkit contains information on how to effectively collaborate with community agencies and involve the family in the transition planning process.

Future Studies

While the RTF staff are an integral part of the transition planning team, it is important for future qualitative studies to expand to other stakeholders: the youth's parents, the neighborhood school, community partners, and most importantly, the youth his or herself. When completing these studies, it will be important to look at the cultural context of each, and what the norms are, specifically when interacting with youth with E/BD in the transition process. For instance, when completing a study on the neighborhood school, what are their cultural and political norms when providing a free and appropriate education for these youth? Is it to go ahead and send them to an alternative school? Or do they look past their biases and look for the least restrictive environment for the youth so that they are integrated into the school? Second, researchers should look at the

development and implementation of a transition protocol specifically created for the transition of youth with E/BD from RTF back to neighborhood schools. This protocol would benefit the transition team as a whole as it lays out a roadmap of what exactly an RTF and neighborhood schools should do to ensure a successful transition for the youth. Lastly, completing a comparative case study that analyzes transition processes from two or more RTF that could demonstrate not only the similarities in transition processes, but the differences and why these may occur.

Limitations

The results of this study should be interpreted with caution as limitations exist. First, due to the study focusing on only one RTF and to COVID-19 emergency access issues, generalization of the findings may not be applicable. Due to RTF serving a varying youth population of mental health needs, there is no consistency between the different programs, staff, or transition processes between each RTF. However, this is a starting point on research for Pathway Three and future researchers should include a variety of different sites. Second, the design itself also could be a limitation. Qualitative research does not allow its results to be greatly generalizable. Furthermore, because case study research focuses on a single phenomenon, it is not able to be replicated, which some will argue means it is not statistically representable. The last limitation is related to the consequences of the COVID-19 pandemic. I was unable to observe the transition process under normal conditions and had limited access to the stakeholders involved in the transition process. Thus, it is important that future researchers conduct their activities under more typical, normal circumstances.

Conclusion

The purpose of this study was to better understand the process of transitioning youth with E/BD from RTF to neighborhood schools. The research aimed to (a) identify how stakeholders understand the transition process, and (b) identify the components of the transition process from RTF schools back to neighborhood schools. I found that communication, collaboration, education, individualization, and involvement are all necessary components to aide in the transition of youth with E/BD from RTF back into neighborhood schools. These themes offer insight on how adult stakeholders a part of Pathway Three can support the many youth with E/BD being served in RTF and their eventual return to their neighborhood school.

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APPENDIX A: TABLES AND FIGURES

Table 1.

IDEA Definition of Emotional Disturbance

Emotional disturbance means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.

(B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.

(C) Inappropriate types of behavior or feelings under normal circumstances.

(D) A general pervasive mood of unhappiness or depression.

(E) A tendency to develop physical symptoms or fears associated with personal or school problems.

From the Individuals with Disabilities Education Act, Sec. 300.8 (c) (4) (2004).

Table 2.*Features of Specific Emotional and Behavioral Disorders*

Features	Specific Emotional and Behavioral Disorders				
	Anxiety Disorders	Bipolar Disorder	Conduct Disorder	Obsessive Compulsive Disorder	Psychotic Disorders
Hyperactivity		•			
Aggression			•		•
Withdrawal	•	•			
Impulsivity		•		•	•
Learning Difficulties	•	•	•	•	•

Table 3.

Comparative Analysis of Demographics

% of E/BD compared to Youth with Special Needs	6
Race	
<i>White</i>	51
<i>Black</i>	25
<i>Latino</i>	17
<i>Two or More</i>	5
<i>Native Hawaiian</i>	8
<i>Asian</i>	2
<i>American Indian</i>	1
Age	
<i>Elementary</i>	
<i>Middle and High</i>	52
Least Restrictive Environment	
<i>General Education >40% of the day</i>	65
<i>General Education <40% of the day</i>	18
<i>Separate Day School</i>	13
<i>Secure Facilities</i>	2
<i>Residential Treatment Facility</i>	1

Note: These numbers represent the percentage of youth with E/BD as compared to the total population of youth with special needs.

Adapted from Samuels, C.A. (2018). Students with emotional disabilities: Facts about this

vulnerable population. *Education Week*. Retrieved from:

<https://www.edweek.org/ew/articles/2018/03/21/students-with-emotional-disabilities-facts-about-this.html>

Table 4.

Federal Mandate on Transition

Transition services. Beginning not later than the first IEP to be in effect when the child turns 16, or younger if determined appropriate by the IEP Team, and updated annually, thereafter, the IEP must include—

1. Appropriate measurable postsecondary goals based upon age appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills; and
2. The transition services (including courses of study) needed to assist the child in reaching those goals.

Transition Domains	Best Practices	Stakeholders involved
Academics and Training	Post-secondary training counseling; Youth-focused planning	Youth, Local Education Agency, Community based partners
Career and Occupation	Job exploration counseling; work-based learning experiences; Youth-focused planning	Youth, Local Education Agency, Community based partners, Vocational Rehabilitation personnel
Independent Living	Financial planning; self-determination instruction; life skills training	Youth, Local Education Agency, Community based partners
Social and Emotional	Role playing; participation in programs for social and emotional learning; stakeholders creating a positive school climate; self-determination instruction	Youth, Local Education Agency

Adapted from the Office of Special Education and Rehabilitative Services (2020). A transition

guide: To postsecondary education and employment for students and youth with

disabilities. Retrieved from:

<https://www2.ed.gov/about/offices/list/oseers/transition/products/postsecondary-transition-guide-may-2017.pdf>

Table 5.*Exit Upon Entry Best Practices*

Stage	Best Practices	Stakeholders Involved
Entry	<ul style="list-style-type: none"> • Creation of prerelease plan • Communication between transition team • Transfer of records 	<ul style="list-style-type: none"> • Youth • Guardian • Mentor • Transition coordinator • Mental health counselor • Neighborhood school
In Care	<ul style="list-style-type: none"> • Social, emotional, and behavioral skill development • Individualized education plans • Data monitoring • Data based decision making 	<ul style="list-style-type: none"> • Youth • Guardian • Mentor • Transition coordinator • Mental health counselor
Exit	<ul style="list-style-type: none"> • Timely transfer of education records • Transition team meetings • Seek community mentor • Prerelease visits • Coordinate services for family 	<ul style="list-style-type: none"> • Youth • Guardian • Mentor • Transition coordinator • Mental health counselor • Neighborhood school • Probation officer
Aftercare	<ul style="list-style-type: none"> • Education tutoring • Job skills training 	<ul style="list-style-type: none"> • Youth • Guardian • Mentor • Transition coordinator

- Individual therapy
- Community based services focusing on life skills
- Mental health counselor
- Neighborhood school
- Probation officer
- Community mentor
- Community providers

Adapted Griller Clark, H., Mathur, S. R., Brock, L., O’Cummings, M., & Milligan, D. (2016).

Transition toolkit 3.0: Meeting the educational needs of youth exposed to the juvenile justice system. Washington, DC: National Evaluation and Technical Assistance Center for the Education of Children and Youth Who Are Neglected, Delinquent, or At Risk (NDTAC).; Nellis, A., & Wayman, R. H. (2009). *Back on track: Supporting youth reentry from out-of-home placement to the community* (pp. 1-48, Publication).

Washington, D.C.: Youth Reentry Task Force; U.S. Departments of Education and Justice, Guiding principles for providing high-quality education in juvenile justice secure care settings, Washington, D.C., 2014.

Table 6.

Sample Transition Plan

Goal: Youth will transition from RTF back into the neighborhood school.

		Activities and Involved Stakeholders
Strengths		
<i>Academic</i>	Performing at grade level	Complete coursework
<i>Behavior</i>	Has leadership qualities	Become a peer mentor
<i>Social-Emotional</i>	Knows what upsets him	SEL self-management instruction
<i>Career</i>	Like to work with others	Identify careers involving colleagues
Needs		
<i>Academic</i>	Take ACT for college entry	Take ACT prep class
<i>Behavior</i>	Aggressive when upset	Take anger management course
<i>Social-Emotional</i>	Poor decision making at times	SEL decision making instruction
<i>Career</i>	Poor interpersonal skills	Participate in social skills instruction

Adapted from Griller Clark, H., Mathur, S. R., Brock, L., O’Cummings, M., & Milligan, D.

(2016). Transition Toolkit 3.0: Meeting the educational needs of youth exposed to the juvenile justice system. Washington, DC: National Evaluation and Technical Assistance Center for the Education of Children and Youth Who Are Neglected, Delinquent, or At Risk (NDTAC)

Table 7.*Sampled Residential Treatment Facility (RTF) Demographics*

	RTF
Sex	
Male	49%
Female	51%
Race	
Caucasian	60%
African American	21%
Other	19%
Age	
Elementary and Middle	20%
High	76%
Special Education Services	
Receiving	44%
Not Receiving	56%
Disability Categories	Depression, Anxiety, Bipolar Disorder, Impulsivity, Mood Dysregulation, Self-Harming Behavior
Types of Programming	Residential, Outpatient, In-home therapy
Average Length of Stay	3 months
MTSS	Yes
Charged with Transition?	Transition Coordinator

Table 8.*Participant Demographics*

Participant Pseudonym	Position	Sex	Race	Highest Degree Earned	Years working at current facility	Total Years Working with Youth with E/BD
Sara	Principal	Female	Caucasian	Doctorate	15	25
Laron	Transition Coordinator	Female	African American	Master's	9	19
Elizabeth	Assistant Principal	Female	African American	Education Specialist	18	18
Allen	Behavior Specialist/Teacher	Male	African American	Bachelor's	19	19
Ann	Lead Special Education Teacher	Female	Caucasian	Bachelor's	20	20

Table 9.

Focus Group Guiding Questions

-
1. Describe what it is like to work in a residential facility.

 2. Describe what behavior management tools you use facility wide.

 3. Discuss the transition process for youth returning back to public school.

 4. Discuss the adults' roles in the transition process and interactions you may have had with these adults, whether in the facility or in public school.

 5. Think back to a transition you participated in. Describe what worked or why it was successful? What about one that did not succeed?
-

Table 10.

Guiding Interview Questions

-
1. Can you describe your background to me as it pertains to working with youth with emotional/behavioral disorders and RTF?

 2. Think about your time at [facility name]. Describe what the experience has been like.

 3. As a(the) [job title], what are your responsibilities at [facility name]. Now, describe your responsibilities as they pertain to the transition process.

 4. As a(the) [job title], detail what your role is in the transition process for a youth. Give examples.

 5. As a(the) [job title], describe what you think has made the transition process successful and how you are involved in that success.

 6. In your role, what type of supports do you offer the transitioning youth after they begin the transition?
-

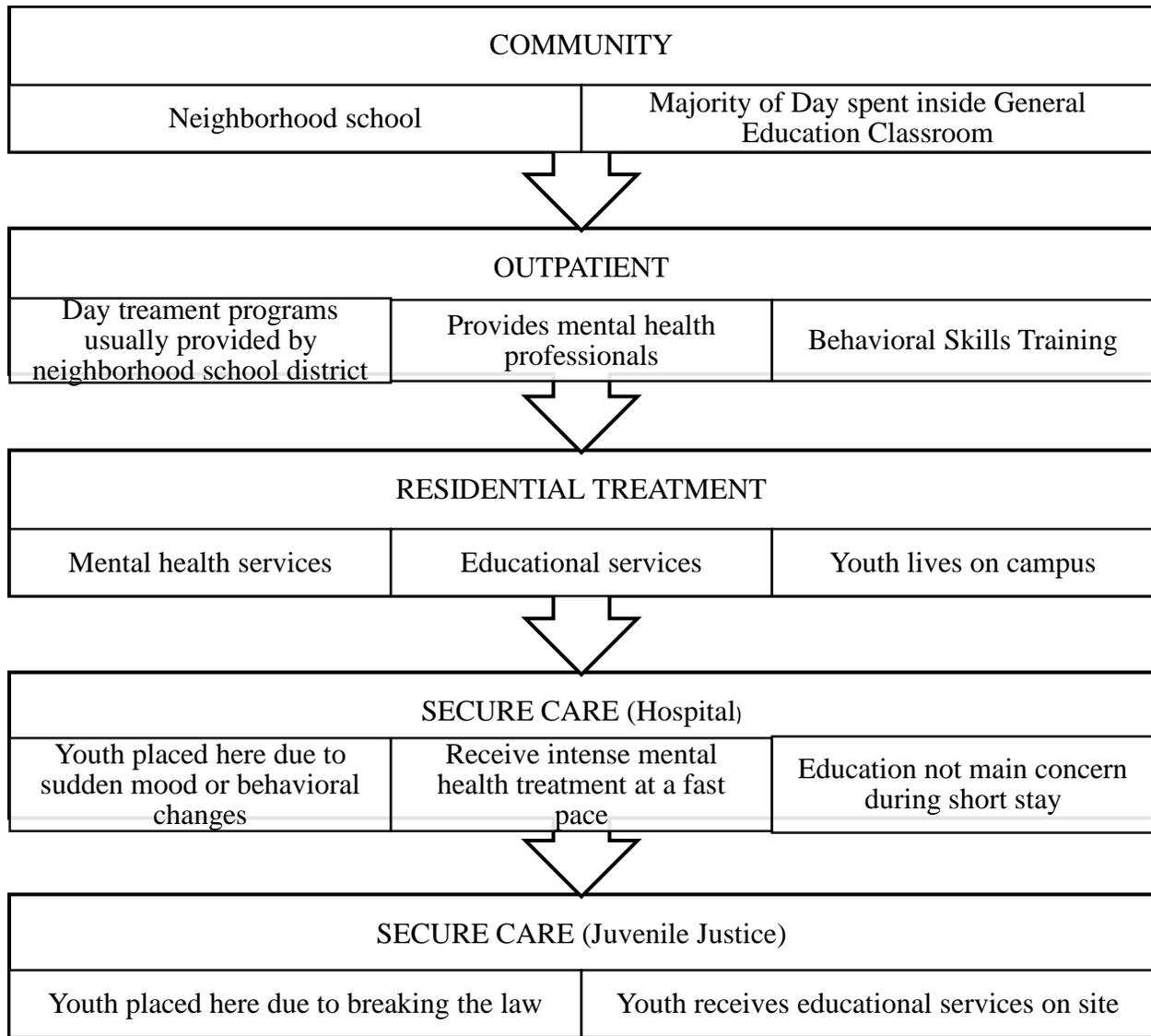
Table 11.

A Priori Codes

Code	Definition
Partnership or Relationships	A shared responsibility of educating youth
Strengths	Actions that the youth does well
Individualization	Youth are treated as one

Figure 1.

Continuum of Education Services for Youth with E/BD



Adapted from the PACER Center (2020). Overview of Mental Health Care and Treatment

Options for Children and Youth. Retrieved from: <https://www.pacer.org/parent/php/PHP-c284a.pdf>

Figure 2.

The Relationship between Pathways One and Two

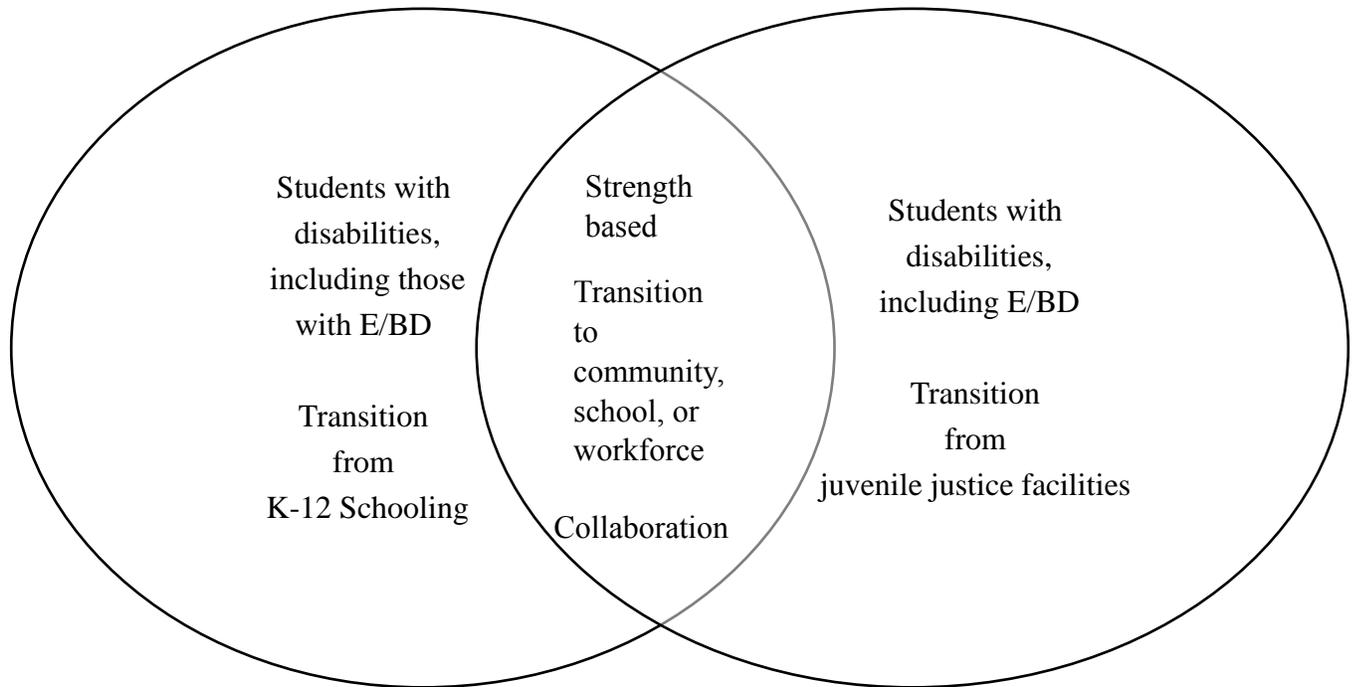
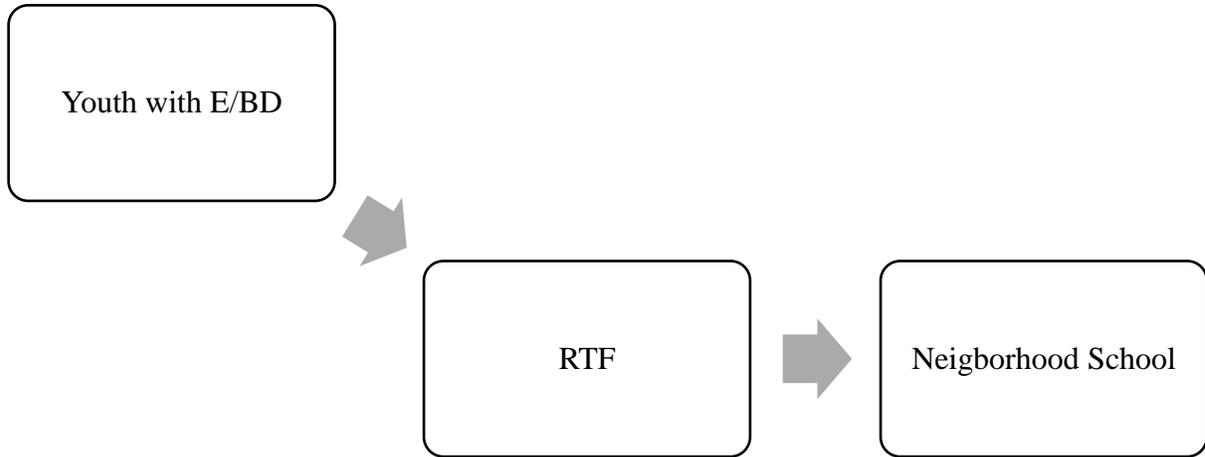


Figure 3.

Pathway Three



APPENDIX B: E/BD RESOURCES

Tantrums, Tears, and Tempers: Behavior is Communication

<https://www.pacer.org/parent/php/php-c154.pdf>

Tips for Teachers and School Staff from Students with Mental Health and Behavioral Challenges

<https://www.pacer.org/parent/php/php-c148.pdf>

Encourage Your Child's Positive Behavior and School Success: Creating a Home Plan with School-wide Positive Behavior Interventions and Supports

<https://www.pacer.org/parent/php/PHP-c218a.pdf>

Health Care, Family, and Community Factors Associated with Mental, Behavioral, and Developmental Disorders in Early Childhood

<https://www.cdc.gov/mmwr/volumes/65/wr/mm6509a1.htm>

Children's Mental Health

<https://www.cdc.gov/childrensmentalhealth/index.html>

Behavior Today

<http://www.ccbd.net/publications/newsletter>

Guides to Social Emotional Learning

<https://casel.org/resources-guides/>

APPENDIX C: RTF RESOURCES

Residential Treatment Program for Teens

<https://www.consumer.ftc.gov/articles/0185-residential-treatment-programs-teens>

Association for Children's Residential Centers

<https://togetherthevoice.org/>

Residential Treatment for Youth with Mental Health Needs

<https://www.isbe.net/Documents/mh-res-trtmnt-hdbk01-12.pdf>

APPENDIX D: PATHWAY ONE RESOURCES

What to Know About Youth Transition Services for Students and Youth with Disabilities

<https://www2.ed.gov/about/offices/list/ose/transition/products/fpt-fact-sheet-transitionservices-swd-ywd-3-9-2016.pdf>

Transition Planning Overview for Parents

<https://www.parentcenterhub.org/iep-transition/>

Transition Planning

<https://transitionta.org/transitionplanning>

Charting a Course for the Future: A Transition Toolkit

https://www.cde.state.co.us/cdesped/transition_tk

Transition Tips for Educators Working With Students With Emotional and Behavioral Disabilities

<https://journals.sagepub.com/doi/pdf/10.1177/1053451212443149>

APPENDIX E: PATHWAY TWO RESOURCES

Addressing the Unmet Educational Needs of Children and Youth in the Juvenile Justice and Child Welfare Systems Requires Within-Agency and Cross-Agency Leadership

https://neglected-delinquent.ed.gov/sites/default/files/resources/documents/NDTAC_LeadershipPractGuide_508.pdf

Creating and Maintaining Good Relationships Between Juvenile Justice and Education Agencies

https://neglected-delinquent.ed.gov/sites/default/files/docs/NDTAC_Tip_Relationships_508.pdf

Transition Toolkit 3.0: Meeting the Educational Needs of Youth Exposed to the Juvenile Justice System

<https://www2.ed.gov/students/prep/juvenile-justice-transition/transition-toolkit-3.pdf>

Improving Outcomes for Youth with Disabilities in Juvenile Corrections: Transition and Reentry

<https://osepideasthatwork.org/sites/default/files/JJ-TIB-TransitionReentry-508.pdf>

From the Courthouse to the Schoolhouse: Making Successful Transitions

<https://www.ncjrs.gov/pdffiles1/ojjdp/178900.pdf>

You Got This: Educational Pathways for Youth Transitioning from Juvenile Justice Facilities

<https://www2.ed.gov/students/prep/juvenile-justice-transition/pathways-transitioning-justice-facilities.pdf>

Transition Planning for Adjudicated Youth

<https://transitionta.org/system/files/bibliographies/Transition%20Planning%20for%20Adjudicated%20Youth%20Annotated%20Bibliography.pdf>

Blueprint for Change: Education Success for Youth in the Juvenile Justice System

<https://www.jjeducationblueprint.org/>

Merging Two Worlds

<https://www.azed.gov/specialeducation/merging-two-worlds/>

APPENDIX F: PATHWAY THREE RESOURCES

Transitioning Adolescents with Emotional and Behavioral Disorders from Most-to-Least Possible Restrictive Environments: Views of Transition Service Providers

<https://eds.a.ebscohost.com/eds/pdfviewer/pdfviewer?vid=1&sid=34d2e7bd-09be-401d-82f0-26b5982aca69%40sessionmgr4006>

Transition Supports for At-Risk Students: A Case Example

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6051749/>

Youth and Parent Perceptions of Aftercare Supports at Discharge from Residential Care

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/cfs.12003>

APPENDIX G: YOUTH INVOLVEMENT RESOURCES

Using the Self-Determined Learning Model of Instruction to Teach Goal Attainment

https://transitionta.org/system/files/resourcetrees/PD_SDLMI_Goal_1.pdf

Using Published Curricula to Teach Student Involvement in the Individualized Education Program (IEP) Meeting

https://transitionta.org/system/files/resourcetrees/PD_pubgoals_0.pdf

Using Simulation to Teach Social Skills at Work

https://transitionta.org/system/files/resourcetrees/Simulation%20-%20Social%20Skills%20-%20Lesson1_0.pdf

Student Development-Life Skills

<https://transitionta.org/evidencepractices>

Paving the Way to Work: A Guide to Career-Focused Mentoring for Youth with Disabilities

http://www.ncwd-youth.info/wp-content/uploads/2017/10/Mentoring_Guide-complete.pdf

APPENDIX H: SAMPLE POINT SHEET

Student Point Sheet

Student: _____

Week: 1/6 - 1/10

	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>
	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>
	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>
	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>
	Lunch/Advisement 12-12:55				
	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>
	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>
	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>
	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 0	Notes: <u>2</u> 1 <u>0</u>	Notes: <u>2</u> 1 <u>0</u>
	Total Points x 4: <u>40</u>	Total Points x 4: <u>37</u>	Total Points x 4: <u>16</u>	Total Points x 4: <u>16</u>	Total Points x 4: <u>4</u>
	8=Cooperative	9=Recovered Points**	10=Using Coping Skills	11=Hyperactive	12=Withdrawn
	13=Agitated	16=Defiant	17=Verbal Aggression	18=Homocidal Threat	19=Terroristic Threats
		20=Sexualized Beh	21=Disruptive	22=Unauth Mov	

Circle "2" if the student participated appropriately with full effort in class

Circle "1" if the student is in attendance but has less than full participation

Circle "0" for the below behaviors; Client **MAY** earn "1" back if able to use coping skill and return to appropriate behavior

- the student becomes behaviorally dysregulated in class requiring staff intervention not to degree requiring removal or Egregious
- the student does not participate in class despite 3 prior prompts (i.e. head down on desk)
- the student remains disruptive despite 3 prior prompts

Circle "0" for the below behaviors and Client may **NOT** earn back "1"

- Receiving an *Egregious* for any reason
- Being sent back to cottage or requiring removal from the classroom due to disruptive behavior
- Misuse of Technology; Pulling Fire Alarm
- Attempting to leave school, or repeatedly attempting to leave the classroom without permission

APPENDIX I: SAMPLE TRANSITION PLAN

High School 2

Date of entry to Home School: March 23rd, 2020

Projected Date of Withdrawal from _____: March 16th, 2020

Home School: _____

Re-entry Grade Level: 11th

Education Case Manager: _____

Transition Coordinator: _____

Home School Counselor: _____

Home School Contact: _____

School Goals

- Use D.B.T. skills if having a difficult time in class
- Remain safe in school
- Understand information taught

Parental Concerns

Parent hasn't expressed any concerns.

Suggestions for success in the classroom:

- Encourage her to use the DBT learned while at _____ ter. feeling unstable.
- Take separations when needed.
- Allow him to have extended time as needed.

TRANSITION TEAM

APPENDIX J: IRB APPROVAL

THE UNIVERSITY OF ALABAMA | Office of the Vice President for
Research & Economic Development
Office for Research Compliance

May 31, 2019

Sara Sanders, Ed.D.
SPEMS
College of Education
Box 870232

Re: IRB # 19-OR-141, "Staff Stakeholder Perceptions"

Dear Dr. Sanders:

The University of Alabama Institutional Review Board has granted approval for your proposed research. Your application has been given expedited approval according to 45 CFR part 16. Approval has been given under expedited review category 7 as outlined below:

(7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.

The approval for your application will lapse on May 29, 2020. If your research will continue beyond this date, please submit the continuing review to the IRB as required by University policy before the lapse. Please note, any modifications made in research design, methodology, or procedures must be submitted to and approved by the IRB before implementation. Please submit a final report form when the study is complete.

Please use reproductions of the IRB approved informed consent forms and recruitment flyer.

Good luck with your research.

Sincerely,

558 Ross Administration Building | Box 620127 | Tuscaloosa, AL 35402-0127
205-348-0561 | Fax 205-348-7185 | Cell 205-673-3270-3069

April 2, 2020

Sara Sanders, Ed.D.
Post-Doctoral Fellow
Department of SPEMA
College of Education
The University of Alabama
Box 870232

Re: IRB # 19-OR-141-R1 "Staff Stakeholder Perceptions"

Dear Dr. Sanders:

The University of Alabama Institutional Review Board has granted approval for your renewal application. Your renewal application has been given expedited approval according to 45 CFR part 46. Approval has been given under expedited review category 7 as outlined below:

(7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.

The approval for your application will lapse on April 1, 2021. If your research will continue beyond this date, please submit a continuing review to the IRB as required by University policy before the lapse. Please note, any modifications made in research design, methodology, or procedures must be submitted to and approved by the IRB before implementation. Please submit a final report from when the study is complete.

Please use reproductions of the IRB approved informed consent form to obtain consent from your participants.

Good luck with your research.

Sincerely,

