



**Testimony to House and Senate Education Committees on “A Study of Paraprofessional Use and Outcomes”
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The University of Massachusetts Donahue Institute (UMDI) study report captures key issues regarding the use and efficacy of paraprofessionals in addressing the needs of students with disabilities in Vermont school districts. The data sources employed including surveys, interviews in selected supervisory unions, and AOE achievement and behavioral data all contribute to a credible view of the strengths and concerns that accompany extensive use of paraprofessionals in the education of students with disabilities. The findings that resonate strongly with many special education administrators’ experience and are valuable in creating forward momentum follow.

Study Findings that Support Further Study and Action:

- The researchers found “...tremendous commitment to improving special education, not only through consideration of the role of paraprofessionals, but through a broader view of how the special education delivery system can best be structured to meet student needs.”
- Financial considerations, parental advocacy as well as the cultural tradition of employing paraprofessionals are well articulated. These factors need to be addressed within Vermont’s educational system as a whole to create meaningful change.
- Consistent supervision appears to be an indicator for reduced paraprofessional use.
- School wide behavior programs implemented with consistency result in decreased use of paraprofessionals.
- Academic outcomes as measured by NECAP data in the area of reading is comparably lower when paraprofessional density is higher. And there is a slight decrease in math achievement scores at the elementary and middle school levels when “density of paraprofessionals increases” While these results may not be definitive given the limitations of the measure used they certainly provide important information for thoughtful study and action.
- The implementation of PBIS on disciplinary referrals and the increasing comprehensive implementation of PBIS through the tiers of intervention result in a decreased number of reported disciplinary referrals.
- There is evidence of paraprofessional being asked to assume roles and responsibilities that would be better performed by professionals including direct instruction, and behavior management and planning. And the study results support an ongoing examination of the conditions under which paraprofessionals may be best used.
- Strategies focusing on the specialized instruction as opposed to student support are recommended.
- Both the number and seriousness of behavior challenges are increasing. De-escalation training for all staff is supported as a first step in insuring the safety of all concerned.
- Size of school is a factor in the employment of paraprofessional staff with large schools having more paraprofessionals per pupil. This finding certainly invites more study.

Recommendations: Three areas are recommended as the focus of action in response to this study.

- 1. Expanding implementation of Multi-tiered Systems of Support (MTSS): A multi-tiered system of support that focuses on first instruction for all students and strengthens the role of the classroom teacher in providing instruction for all in collaboration with the special educator provides a strong base.**

A. Academics:

- Collaboration between special educators and classroom teachers maximizes their collective expertise through co-teaching and other strategies such as Universal Design for Learning. The complex needs presented by many students require such skilled professional instruction.
- The employment of paraprofessionals “introduces into the policy and professional debates questions that extend beyond the role of paraprofessionals.” The key relationship between special education teacher and classroom teacher is being examined in many schools in Vermont through the implementation of MTSS. This collaboration maximizes the strengths of classroom community and content specialist, the classroom teacher, and the expertise of the special educators in adapting and modifying instruction for students with disabilities. Increasing awareness of the downside of extensive use of paraprofessionals includes the understanding that independence skills and social connectedness desired for all students may well be compromised by a student’s dependence on a paraprofessional. This danger needs to be at the forefront of consideration.
- It is the view of many special education administrators that the students with the most complex needs are too frequently being provided instruction by the least trained and knowledgeable adults. The pressures to expand paraprofessional use remains widespread. It is frequently viewed as a good option for including students with disabilities in the classroom. And yet the data provided in this study does not support strong positive academic data arena for the expanded use of this strategy.

B. Behavior: Positive Behavior Intervention Supports:

- Using a multi-tiered system of supports is a valuable framework for behavior as well as for academics. Strengthening the instruction at the classroom level regarding expected behaviors and reinforcing these positively within the context of building the classroom and school community creates safety and security for all children and most particularly for those students with mental illness or have been traumatized and therefore lack security and safety in other parts of their lives.
- Interventions such as Behavior Interventionist and de-escalation training need to remain part of the continuum of support available to students when needed. However, it is critical to look at each intervention within the context of a flexible and responsive tiered system of supports. Choosing the most effective and efficient strategy that can be employed when needed is a hallmark of a PBIS system.
- That more paraprofessionals were found to be employed in schools with higher poverty levels is not surprising. As the number of children living below the poverty line increases nationally it is also increasing in Vermont. Increases in poverty are closely aligned with increases in disabilities of all kinds. Adverse childhood experiences including exposure to food scarcity, poor nutrition, and housing insecurity, unemployment, illegal substance use and domestic instability and abuse are sources of trauma. Each additional source of trauma creates greater health and mental health consequences. Without directly addressing the underlying poverty and its stresses on families it is hard to imagine that emotional and behavioral difficulties are going to be reduced any time soon. Schools need to remain a safe place for children and a large part of that is addressing the trauma that children have experienced at home and in the community. It is important to note that serious behaviors are occurring at younger ages than have been seen previously and are challenging both early childhood and primary grade staff.

C. Interagency Collaboration and Supports from Agency of Education:

- In many cases students with the most severe behavioral and emotional difficulties intensive and comprehensive educational and therapeutic interventions over time are required. A paraprofessional addressing student needs may help keep other children safe but may not address the underlying issues for the child. Comprehensive interventions require skilled professional staff across disciplines and are costly.
- Vermont has the highest percentage of students relative to other states in identifying students with behavioral and emotional disabilities. To address this need the partnerships between schools, mental health and child protection need to be strengthened at a time when budget reduction pressures are very high. Our next generation is in the cross hairs of this funding dilemma.
- Strong data systems across agencies serving children are critical functions that need financial support.