

How do school psychologists label and identify emotional disturbance in K-12 public school settings? A critical school psychology analysis of emotional disturbance and school psychologist reflexivity.

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Abstract

How do school psychologists label and identify emotional disturbance in K-12 Public School settings? A critical school psychology analysis of emotional disturbance and school psychologist reflexivity.

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Here I explored how students are identified for special education under the eligibility category of emotional disturbance (ED). Five practicing or retired school psychologists were interviewed to better understand how school psychologists negotiate their reflexivity and positionality when making initial and reevaluation eligibility determinations for special education under the Individuals with Disabilities in Education Improvement Act (IDEIA). Furthermore, I examined how these school psychologists negotiated the social maladjustment (SM) clause in their practice and how they navigated system barriers. The interviews were subsequently analyzed through a critical framework of school psychology (Sabnis & Proctor, 2021) and an interpretivist paradigm was employed to centralize the experiences of school psychologists working in special education systems. Interviewees consistently argued in favor of school systems engaging in effective and student centered outcomes for mental health services like multi-tiered systems of support (MTSS). The concern for stigma of the eligibility category was salient throughout interviews as

well. Additionally, participants conflated the terms ED and emotional behavioral dis/abilities (EBD) due to the definitional ambiguity of the eligibility category. Lastly, reflexivity, defined as critical negotiations of participant positionality and experience, was a process that school psychologists engaged in when considering ED as an eligibility category for providing special education. Identifying the multiplicity of factors determining placement decisions for students identified under the IDEIA eligibility category of ED, provides a holistic portrait of students labeled as ED and/or those exhibiting unsafe behaviors of concern.

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INTRODUCTION

Statement of problem

In the Individuals with Disabilities in Education Improvement Act (IDEIA) of 2004, a federal law that supports special education evaluations, programs, and related services for students with disabilities, emotional disturbance (ED) is a listed eligibility category that grants access to a Free and Appropriate Public Education (FAPE) to students with emotional and behavioral school identified disabilities (Individuals with Disabilities in Education Improvement Act, 2004). ED as a federal eligibility category for special education does not have a concise and agreed upon definition by school psychologists (Algozinne, 2017; Bower, 1982; Center, 1990; Cloth et al., 2014; Epstein et al., 2023; Hughes et al., 2020; Lambert et al., 2022; Merrell & Walker, 2004; Nelson et al., 1991; Scardamalia et al., 2019; Sullivan et al., 2022; Sullivan & Sadeh, 2014; Sullivan, 2017). Due to statewide variability and differences in individual interpretation by school psychologists, the definition varies substantially in interpretation by practitioners (Becker et al., 2011; Cloth et al., 2014; Sullivan et al., 2019; Sullivan & Sadeh, 2014). However, a general sense of agreed upon ambiguity surrounds the definition, specifically relating to the social maladjustment clause (SM) (Center, 1990; Cloth et al., 2014; Hughes et al., 2020; Maag & Howell, 1992; Merrell & Walker, 2004; Skiba et al., 2014; Sullivan & Sadeh, 2014). The SM clause is an indeterminate clause in the federal definition of ED. There is no definition provided for social maladjustment within the Individuals with Disabilities in Education Improvement Act (IDEIA). This has led to confusion, differences in behavioral perceptions, and variance in outcomes for students considered at risk for ED (Becker et al., 2011; Lambert et al., 2022; Maag & Howell, 1992; Scardamalia et al., 2019; Skiba et al., 1994; Sullivan, 2017; Sullivan et al., 2019; Sullivan & Sadeh, 2014; U.S. Department of

Education, 2020; 2022). Additionally, there is concern for the overidentification of Black, Brown and poor students identified under ED (Sullivan et al., 2022; Sullivan, 2017), which suggests a difference in the interpretation of behaviors by student demographics.

Furthermore, IDEIA is a legal act that contains definitions relevant to student functioning within a school setting. The language used relates to law terminology, and is not meant to be used outside of school contexts. However within schools, ED is used interchangeably by school psychologists and education professionals with the term emotional behavioral dis/ability (EBD). Again, this furthers ambiguity surrounding the definition because EBD relates to mental health dis/abilities identified by medical professionals and not school based dis/abilities like ED (Becker et al., 2011; Sadeh & Sullivan, 2017). Yet, in school contexts ED and EBD are often discussed in tandem (Becker et al., 2011; Forness et al., 2012; Hughes et al., 2020; Sadeh & Sullivan, 2017). School psychologists attempting to make sense out of the label of ED use language related to EBDs. Given the history of ED and the conflation of ED and EBD, school personnel tend to associate ED more with behavioral dis/abilities (Center 1990; Becker et al., 2011; Sullivan et al., 2019; Sadeh & Sullivan, 2017). This translates to stigma for students with externalizing dis/abilities like conduct disorder or those exhibiting other perceptually challenging behaviors (Cloth et al., 2014; Hughes et al., 2020). Again, the perception of these behaviors differs by student race and socioeconomic factors (Sullivan, 2017). Families with knowledge of the stigma associated with the eligibility category and/or access to outside medical evaluations, may advocate for their student to be labeled under other health impairment (OHI), a label often associated with internalizing disorders like anxiety and depression. These labels do not carry the same stigma (Cooc, 2022; Fish, 2019; Forness et al., 2012; Gage et al., 2012; Grindal et al., 2019; Skrtic et al., 2021).

Further, the positionalities of school psychologists may impact their qualifying decisions. Nearly 80% of school psychologists that are members of the National Association of School Psychology are White (Goforth et al., 2021). This may lead to a lack of cultural competence and unconscious bias supporting white normative standards when considering students for special education under ED (Sullivan et al., 2019). Given the overidentification of Black, Brown and poor students, stigma of ED, and ambiguity surrounding concise definitions of ED, SM, and EBD in school contexts, it is necessary for researchers to seek out how school psychologists reflexively examine their positionalities as individuals located within broader school systems. Reflexivity as defined by Arora et al. (2022) is “critical self-knowledge about one’s identity and social locations” (p.1). Depending on how a school psychologist interprets ED relationally to students may impact outcomes in identification. Researchers need to examine challenges associated with the label as it is nested within school systems through a critical lens to best understand and encapsulate the intersectional needs of students identified as emotionally disturbed (Sabnis & Proctor, 2021).

Purpose Statement

Critical to unpack is how school psychologists negotiate the limitations of the ED eligibility category including stigma and overidentification, make sense of the definition, and utilize their positionality and reflexivity to advocate on students’ behalves. Here, I qualitatively examine how three current school psychologists and two former school psychologists qualified and interpreted the language of emotional disturbance in primary and secondary public school settings. I engaged in an interpretivist research design to find meaning in the language used to describe eligibility and placement considerations by school psychologists for ED. In using the framework of critical school psychology (Sabnis & Proctor, 2021) emphasizing power dynamics

and observed systemic inequities for students, I seek to highlight a need for progressive systems and a clearly defined consensus regarding emotional disturbance, emotional behavioral dis/abilities, social maladjustment, the value of reflexivity as a tool for student advocacy, and potential barriers that school psychologists may face in serving students. In framing dis/ability as a socially relevant identity, I seek to understand how students presenting as at risk for emotional disturbance by a school psychologist or students already labeled as ED, come to have their behaviors quantified under this dis/ability label in schools.

Literature Review

Here I provide a current overview of the literature surrounding the challenges of the label of emotional disturbance (ED). I specifically define and problematize the federal definition of emotional disturbance as stated within the Individuals with Disabilities in Education Improvement Act (IDEIA) (2004), as well as the subsequent history and rationale behind the label of ED and the attached social maladjustment clause. Next, I provide support for how differences in ED interpretation by school psychologists leads to conflation of the law term ED and the medical term emotional behavioral dis/ability (EBD). Following, I attend to the change overtime in the definitional interpretations of ED relating to internalizing and externalizing behaviors. Subsequently, I identify how ED is defined by its stigma as a “low status” dis/ability with different outcomes by student racial demographics, and define the ambiguity surrounding the overidentification of Black, Brown, and poor students under the ED label. Lastly, I describe the need for proactive and multi-tiered systems of support to address the inequities related to the identity label of emotional disturbance, and define reflexivity as a critical tool of engagement for practicing school psychologists.

Dis/ability labels such as ED are subjective to label due to “societal interpretations of and responses to specific differences from the normed body...[as] notions of dis/ability shift over time according to the social context” (Connor et al., 2016, p. 10). Due to the social variability by which a given dis/ability is labeled and the specific locales surrounding the dis/ability, it is crucial to understand the process by which an evaluation team labels a student as qualifying for special education. As school psychologists are the responsible individuals writing evaluative reports about student functioning, their narratives ultimately carry heavy significance during the process of referral and evaluation for special education. No student is innately dis/abled unless

the social contexts interacting with their subjecthood create the need for a dis/ability label.

Although dis/ability labels are socially constructed, the application of these labels has very real social, cultural, political, and economic consequences. Beyond servicing these children under special education, there is a need to examine how these children are problematized within school sites.

Federal Definition and History

Under the Individuals with Disabilities in Education Improvement Act (IDEIA) emotional disturbance (ED) is defined federally as:

- a) an inability to learn that cannot be explained by intellectual, sensory, or health factors,
- b) an inability to maintain or build healthy relationships with peers and teachers,
- c) inappropriate types of behavior under normal circumstances,
- d) a general pervasive mood of general unhappiness or depression, [and]
- e) a tendency to develop physical symptoms or fears associated with school personnel or school problems" (Individuals with Dis/abilities in Education Improvement Act, 2004, Sec 300.8).

Additionally, IDEIA (2004) presents an exclusionary clause whereby students who are socially maladjusted (SM) may not receive a diagnosis of ED unless “it is determined that they have an emotional disturbance” (Sec. 300.8). Social maladjustment is not operationally defined in the federal definition. The definition applied to ED federally has long come under scrutiny for its broad conceptualization and use of subjective language (Algozinne, 2017; Bower, 1982; Center, 1990; Cloth et al., 2014; Epstein et al., 2023; Forness et al., 2012; Hanchon & Ryan, 2013; Hughes et al., 2020; Lambert et al., 2022; Maag & Howell., 1992; Merrell & Walker, 2004; Nelson et al., 1991; Scardamalia et al., 2019; Skiba et al., 1994; Sullivan et al., 2022;

Sullivan & Sadeh, 2014; Sullivan, 2017). While there have been several changes to the definition, such as the removal of the terms autism and adjustment from *seriously emotionally disturbed*, ultimately the core federal definition has remained untouched since 1975.

Eli Bower (1957)

The history behind the federal definition of the term emotionally disturbed is rooted in a 1957 study headed by psychologist Eli Bower to examine the mental health functioning and academic outcomes of students with emotional and behavioral disorders in school (Bower, 1982). Bower (1982) stipulates that “the original definition [of emotional disturbance] attempted to bring [student mental health and academic outcomes] within the scope of the teacher and enhance the possibilities of the school to be effective in treating this problem” (p. 58). It may be observed that the original intent of the study was to highlight how schools may better serve students exhibiting mental health distress. Five conclusions were drawn from the original study, all with the intention to better support the development of school based mental health related services. When creating the eligibility category of ED during the formulation of Public-Law 142 or what is commonly known as the Education for All Handicapped Children Act (EHA) in 1975 (now reauthorized as the Individuals with Disabilities in Education Improvement Act (IDEIA)), lawmakers borrowed the five conclusions of Bower’s original study and added the exclusionary clause of social maladjustment, to create the eligibility category of *seriously emotionally disturbed*. As stated, the original impetus of Bower’s study was to provide a basis for mental health services within schools. Instead, the definition was misapplied to justify exclusion for student behaviors identified as too challenging to serve within the general education school setting (Bower, 1982). In noting the historical implications behind the current federal definition of the term emotionally disturbed, I hope to provide context for defining the language used

federally. How current practitioners negotiate the application of the terminology provides insight on how behaviors of concern and mental distress are conceptualized within schools.

Furthermore, changing policy overtime has left the definition relatively untouched. Values policy makers had during the inception of EHA (1975) remain after almost 50 years despite practitioners arguing for systemic solutions and definitional clarity (Merrell & Walker, 2004; Sullivan, 2017). Implications behind lawmakers inclusion of the social maladjustment clause are discussed below.

Social Maladjustment Clause

Important to the definition of ED, is the exclusion of the term socially maladjusted (SM) which is not operationalized federally. In summarizing the history behind the exclusion of SM from the EHA (1975) definition of ED, Hochbaum (2013) states that the SM clause originally appeared in an omnibus bill funding the training of teachers for students with dis/abilities. Children with dis/abilities defined by Bower included “children who [were] maladjusted emotionally and socially, including the institutionalized delinquent” (Hochbaum, 2013, p.4). When Bower conceptualized his terminology in 1957, the EHA (1975) was not enacted. Lawmakers did not want to be fiscally incentivized to serve these students when they were deciding how to appropriately direct funding for teacher training programs (Hochbaum, 2013; Merrell & Walker, 2004). Although passing the Senate floor in 1963, instead of being sent to The House Committee of Education the bill was sent to a House subcommittee for Interstate and Foreign Commerce. In this house committee, it was determined that social maladjustment could be used to define students with antisocial behavior and those likely to be identified as juvenile delinquents engaging willingly in behaviors of concern (Hochbaum, 2013). The social maladjustment clause follows from the original omnibus bill and remained a part of the

definition for ED, despite Bower and advocates arguing against the clause (Bower, 1982).

According to Merrell and Walker (2004) “this clause was added to satisfy the concerns of legislators and educational administrators who did not want schools to be mandated to provide services to delinquent and antisocial youth, a notoriously difficult to reach population” (p. 901).

Center (1990) emphasizes that when lawmakers were enacting the EHA in 1975, Bower’s original definition of ED was consistent with social maladjustment. SM was interpreted as an effect of ED, indistinguishable, and to be treated jointly in schools (Bower, 1982). Bower himself was an advocate for the mainstreaming of students with disabilities into the general education setting and for students with mental health concerns to receive in school services and protection under federal law (Bower, 1982). However, lawmakers feared it would be too expensive to serve students identified as “delinquents” in school (Skiba et al., 1994). Skiba et al. (1994) note that by excluding SM youth, the federal government attempted to control “the potentially high cost of service... by restricting services to certain populations, such as adjudicated juvenile delinquents” (p. 269), thus implementing the SM clause as an avenue to save on federal spending for education.

Therefore, the exclusion of SM by policymakers during the creation of the EHA, can be interpreted as an attempt to prevent a “floodgate” of students from being served under ED, thereby disqualifying these students from precedents that protect them from expulsion and punishment under federal law (Nelson et al., 1991). Due to the effects of lawmakers adding the SM clause into the definition of ED, schools nearly 50 years later still trend towards discipline like suspension, over a matrix of support for students contextualized as socially maladjusted (Cloth et al., 2014). There are no parameters preventing expulsion for general education students, while there are for students receiving special education (Cloth et al., 2014). Students kept from

service protections under special education may receive adverse punishment due to the perception of their behaviors. Still, according to the U.S Department of Education (2022) students identified as ED have the highest rates of dropout (32.4%), the greatest rates of removal to an alternative education setting, and the highest rates of both in school and out school suspension/expulsion than for any other dis/ability category, thus signifying an element of exclusion for these students. Furthermore, individual states are allowed to interpret how the social maladjustment clause will be applied in practice, and nearly 75% of states do not provide clear guidance on the terminology (Becker et al., 2011).

Maag and Howell (1992) contend that to best capture the needs of students with ED and students with SM, total system restructuring is needed where “individuals address practice by rethinking and modifying the traditional system [by]...labeling environments instead of individuals” (p.42). Thus showing how the restructuring of school environments away from models that problematizes individual students better addresses the needs of youth with behaviors of concern. Currently, the National Association of School Psychologists (NASP) and the Every Student Succeeds Act (ESSA) supports widespread social emotional support in schools (National Association of School Psychology, 2009; 2016). As shown above, debates surrounding the definition and access to protection under special education law extends beyond 30 years.

Differences in interpretation: variability among school psychologists

In examining the application of the federal definition of ED by practicing school psychologists (SPs), Scardamalia and colleagues (2019) found significant inconsistency in the interpretation of behaviors by a mock student labeled with an emotional and behavioral disorder. Out of 179 SPs from around the country, 56 found that the student qualified for special education under ED with 11 different combinations of the eligibility criteria. Statements issued by the SPs

were inconsistent, thus showing a lack of reliability in how the federal definition is applied to students. Specificized language defining ED would help practitioners identify and implement successful mental health intervention in schools (Scardamalia et al., 2019). If there was a more concise definition of ED, school psychologists would be able to use more accurate and precise assessment tools to identify and provide successful interventions regarding ED in school settings (Hanchon & Allen, 2013). Despite best intentions, school psychologists may have different interpretations of special education support needs due to how the federal definition is conceptualized.

For example, Sullivan et al. (2019) provided three case studies to school psychologists from one northeastern state where there was either clear ambiguity in assessment data or a lack of ambiguity in assessment data for ED. If there was ambiguity in assessment data, school psychologists relied on their own individual interpretations of the federal definition. School psychologists were more comfortable ruling out ED when ambiguity was present due to a general reluctance to label students under the eligibility category (Sullivan et al., 2019). Thus supporting the findings of Scardamalia et al. (2019) who found there is inconsistency and ambiguity surrounding how school psychologists identify and label students with emotional disturbance. Therefore, ambiguity in the definition of ED leads to differences in the interpretation of ED by school psychologists. However, Barnett (2012) found that school psychologists do engage in advocacy work in various ways to appropriately write evaluative reports for students with ED and that they negotiate different sites of oppression and privilege to holistically identify ED. While there may be differences of opinions regarding the interpretation of the federal definition of ED, school psychologists do consider the impact of their decisions on student outcomes (Barnett, 2012). Yet, as no study examines the actual impact of school

psychologist positionality on ED identification and placement, it is valuable to understand how that may impact ED assessment and identification.

Defining ED and EBD

To complicate the process associated with ED identification, researchers clarify how the language associated with ED in the IDEIA (2004) is used interchangeably in research and by practitioners to represent behavioral or emotional disorders. ED is a law term, not a medical term, that is used to grant access to FAPE for students with dis/abilities (Becker et al., 2011; Forness et al., 2012; Sadeh & Sullivan, 2017; Toffalo & Pederson, 2005). Students with diagnosable mental health disorders may also qualify for services under ED however this is not required for eligibility. Although students with ED comprise only 5% of those receiving special education services in the United States, nearly 20% of school age children will present with symptoms of a mental health disorder during their kindergarten through 12th grade schooling, with that percentage estimated to be low (Twenge et al., 2019 as cited in Hughes et al., 2019). Forness and colleagues (2012) indicate that there is a discrepancy between the number of students identified under ED and the prevalence of emotional and behavioral dis/abilities (EBDs) in school. In a meta-analysis of the literature reviewing the point prevalence and cumulative prevalence of EBD in school age children, Forness et al. (2012) found that there is a high likelihood that students who may have behaviors or mental health concerns are not receiving appropriate support in school for their dis/abilities in school. Point prevalence refers to how many school age children meet criteria for EBDs at a specific moment in time, while cumulative prevalence refers to how many school age children meet criteria at any point during their academic experience (Forness et al., 2012). Forness et al. (2012) estimated that based on prior research, nearly 12% of school age children meet criteria with at least moderate academic impact

when measured at specific points in time. The cumulative data however, suggests that nearly a third of students have at one point in their academic careers exhibited symptoms related to an emotional or behavioral disorder. Provided that only 1% of school age children are served under ED, this provides support for a large gap in services (National association of School Psychology, 2009; U.S. Department of Education, 2022).

Furthermore, Hughes et al. (2019) suggest that some students who are considered for the ED eligibility category do not receive services due to a school team's findings of the student as SM, often associated with conduct disorder and oppositional defiant disorder. Important to note however, is that students who may present with EBD symptoms could be served under other eligibility categories. For example, those receiving services under learning, communication, and/or intellectual dis/abilities may have comorbidity (Forness et al., 2012). Additionally, some students may be eligible for services under ED, but instead receive specialized instruction for another dis/ability. To this point, Toffalo and Pederson (2005) found that when students had a diagnosable psychiatric condition, they were likely to be identified under another eligibility category such as other health impairment (OHI), over ED. Unfortunately, by not including a precise definition of SM within the federal definition of ED, legal safeguards are removed that protect students from receiving adverse punishment related to their behaviors in school.

To better serve and understand student social emotional development, it is crucial to understand how the interactions between school personnel and individual students lead to the dis/ability label of ED. When characterizing how students are served and identified under the eligibility category of ED, researchers have shown that varying factors influence the application and interpretation of the language used federally. On one hand, ED identification may serve as a protective factor for students whose behaviors of concern would otherwise put them at risk of

disproportionate punishment related to their dis/ability. The label increases likelihood that a student may receive appropriate specialized instruction for their dis/ability. On the other hand, students who are identified as ED have a high likelihood of experiencing adverse life and academic outcomes such as dropout. The variability of service needs and identification for ED means that the academic experience of students with EBD is not ubiquitous.

Change overtime in behavioral interpretation

Additionally, over time there has been some degree of both change and stability regarding how educators interpret internalizing and externalizing disorders related to ED. Epstein and colleagues (2023) compared two data sets outlining the five areas of concern for students receiving services under emotional disturbance as outlined in the IDEIA. To perform their data analysis, the researchers utilized the newly updated Scales for Assessing Emotional Disturbance-Rating scale (SAED-RS), an assessment designed to quantify the five characteristics of ED in the IDEIA (inability to learn, relationship problems, inappropriate behavior, unhappiness or depression, and physical symptoms or fear) to explore the degree of change in characteristics between a 1998 and 2020 cohort of students labeled as ED. Students in the 1998 cohort demonstrated significantly higher behaviors of concern related to relationship problems, problems between interpersonal interactions, and inappropriate behavior, which is operationally defined as disrespect towards teachers, than the 2020 cohort (Epstein et al. 2023). Furthermore, the degree of behaviors of concern was higher among the 1998 cohort than the 2020 cohort. However, there were no significant differences between the 1998 and 2020 cohorts on an inability to learn (poor academic skills), physical symptoms or fear (anxiety), or unhappiness or depression (hopelessness). Three possible explanations may account for differences between the cohorts.

Firstly, widespread adoptions within schools of MTSS may account for the decrease in externalizing behaviors related to relationship problems and inappropriate behavior. However, MTSS may not adequately address internalizing behaviors of concern such as anxiety (fear) or unhappiness (depression), or be effectively implemented to address academic concerns.

Secondly, schools may be less likely to refer students for services under ED when they present with relationship problems or inappropriate behavior, however this may not be true when students present with poor academic skills, anxiety, or depression. Lastly, schools are not identifying students under ED to the same degree in 2020 as they were in 1998. Epstein et al. (2023) state this decline may not equally affect all domains of ED equally. Between the two cohorts, outcomes for students labeled under ED have remained relatively stable over 22 years, thus showing that while improvements in school wide systems may be present, there remains a need to better target academic and emotional interventions for students with ED. How school psychologists conceptualize these changes overtime is important to question.

“Low” status Dis/abilities and Stigma

It is also valuable to untangle how ED is classified as a low status dis/ability label correlating to a stigmatized identity for students. Low status dis/abilities refer to dis/abilities that are stigmatizing and lead to more restrictive program placements due to the perception of these dis/abilities by educational personnel (Fish, 2019; Skrtic et al., 2021). Skrtic and colleagues (2021) present an argument to show how “low” and “high” status disabilities are racialized depending on the historical and social relevance of their meaning. Skrtic et al. (2021) found that in an analysis of a longitudinal federal data set between 1997 and 2007, White students were overrepresented in “high status” dis/abilities such as ADHD-Other Health Impairment (OHI) and Autism (ASD) that may include medical diagnoses, while Black and Latinx students were

overrepresented in low status dis/abilities such as Learning Disability, Intellectual Disability, and ED. Skritic and colleagues (2021) indicate that while the IDEIA monitors for differences in racial equity, it does not account for parental influence protected by procedural safeguards. Therefore, if White affluent parents possess greater knowledge of the education system and legal safeguards, they may be able to influence decisions in student placement. The researchers note that “high” and “low” status dis/abilities are not ahistorical. Instead, they are ecologically relevant and depend on current socio, political, and cultural contexts surrounding dis/ability. Dis/ability identification and eligibility labels are racialized, and dependent on student class.

Fish (2019) found that as the population of White students in a school increases, the rate at which Black students labeled under “low” status dis/abilities increases. She categorized ED as lower status dis/abilities because of the stigmas they present. Autism, other health impairment, and speech language disorder were categorized as higher status dis/abilities because service providers have access to better resources and there is less stigma surrounding them. Fish (2019) found that when Black students comprised the minority demographic within a school, they were more likely to be identified with a lower status dis/ability such as ED. White students however were more likely to be identified with a higher status dis/ability when they were a minority group within a school. She writes “*racial distinctiveness* (emphasis provided in original text), or being surrounded by fewer same-race peers, appears to drive the salience of race in sorting into special education” (Fish, 2019, p. 2595). The impact of low status and high status dis/abilities is dependent on how student identity uniquely interacts with the broader racial geography of a school site itself. Therefore, being a minority demographic in a school has a different capacity of meaning for Black and Brown students than it does for White students.

It may be hypothesized that White families are more likely to utilize their racial privilege and access to outside medical diagnoses to protect their children from stigmatizing identity labels such as ED. Racial distinctiveness has different outcomes on student special education placement for Black, Brown, and White students. How school psychologists encounter this phenomenon in practice is worth exploring to understand the spectrum of stigma that students experience in school.

Overidentification and subsequent ambiguity

According to The Annual Report to Congress on the Implementation of IDEIA (U.S. Department of Education, 2022) when accounting for the racial and ethnic differences in students served under the IDEIA, Black students ages six through 21 were more likely to receive services under the dis/ability category of ED than any other race or ethnicity. Despite documented disproportionality rates, there remains ambiguity surrounding why Black students are overidentified for services under ED and placed into more restrictive program placements (Sullivan, 2017). Lambert et al. (2022) examined the emotional and behavioral characteristics of Black students labeled under ED. The researchers sought to examine how the similarities of emotional and behavioral traits of Black students with and without ED differed in the school population, if the emotional and behavioral traits of Black students with ED were similar to White students with ED, and if the emotional and behavioral traits of Black students with ED were similar to White students without ED. Lambert et al. (2022) found that Black students labeled under ED had significantly higher behaviors of concern on all five domains of the IDEIA (2004) eligibility category than their non-disabled Black peers. However, Black students with ED differed minimally from their white peers labeled with ED.

Lambert et al. (2022) state that due to the intense similarities on academic, emotional,

and behavioral functioning between Black and White students with ED, characteristics outside of bias, prejudice, and discrimination may account for the differences between non-disabled Black students and Black students with ED. Unfortunately, the researchers comment that there is still ambiguity surrounding disproportionality rates despite relatively similar functioning and outcomes of Black and White students with ED. Therefore, Lambert et al. (2022) suggest that more research is needed to better understand the social, emotional, and academic needs of Black students with ED, and state that within school systems there is a greater need to understand and utilize evidence based practices for Black students with ED. They suggest that MTSS needs to incorporate cultural responsiveness and awareness when used in practice.

Although Black boys are over-identified for services under ED, this may only be true for neighborhoods with high levels of income (Forness et al., 2012). Being a Black boy in a White affluent neighborhood increases the chances of being identified for special education services under ED, which is inline with findings by Fish (2019). However, this is not consistent for low-income neighborhoods with the same racial/ethnic demographic makeup. Thus, behaviors of Black boys in primarily White affluent neighborhoods do not carry the same social meaning as the behaviors of Black boys in low income neighborhoods with similar racial/ethnic demographics.

Furthermore, Grindal et al. (2019) highlight how student income and race affect school based dis/ability labels to varying degrees of impact. School based dis/ability labels are defined by dis/abilities that are identified in schools and not exclusively by medical professions (Grindal et al., 2019). These researchers found that when analyzing the differences between special education placement, racial disparities between income levels, and alternative program placement among three states, Black and Brown students were more likely to be identified with

an emotional dis/ability (school based dis/ability label) than White students within the same income bracket. There was no racial disproportionality present for sensory dis/abilities (typically identified in medical settings). Importantly, regardless of income level, Black and Brown students were also more likely to be identified with a school based dis/ability label than their same income White peers (although this was less profound for low income students between racial groups) and to be placed into more restrictive eligibility programs. Even so, disparities among White students by income levels were larger than for Black and Brown students, and varied by state. While the researchers did not discuss state specific demographics to protect anonymity, it may be inferred that poor White students are not protected from the effects of behavioral stigma to the same degree as White affluent students, and that this differs by environmental locale. While students of color may be overidentified in school based dis/ability labels, low income White students have a higher chance of being identified for special education under ED than their non-low income same race peers, to a degree higher than Black and Brown students, and this translates to more restrictive program placements. When discussing inequities associated with the eligibility category of ED, it is critical to examine the overidentification of Black, Brown, and poor White students, and how this impacts program placement by school locale.

As only about 50% of students with ED spend 40-80% of their academic day in the mainstream classroom, the determining factors of more restrictive program placements require defining (U.S. Department of Education, 2022). When critically examining the factors that impact which students receive services under the eligibility category of ED, the racial and economic disproportionality of those qualifying for services surfaces. In speaking to the racial disproportionality of school based dis/abilities, placement into special education, and student

outcomes, Cooc (2022) states that a lack of inclusion into the general education settings among children of color (CoC) with disabilities may help account for the disparities. In using longitudinal data from a population dense school district over a 10 year period, Cooc found that while there were improvements in the percentage of time that all students with dis/abilities received their education in their least restrictive environment (LRE) (spending time in the general education setting at least 80% of the time), racial disparities persisted. The greatest of these documented disparities was among CoC. Cooc (2022) argues that “if the overrepresentation of students of color in special education identification represents a form of exclusion, so too does the lack of access to general education settings among students of color with disabilities” (p. 45). This may provide reasoning to the findings of Grindal et al. (2019) who find that Black and Brown students do not have equitable access to their LRE.

Importantly, Cooc (2022) notes that while CoC with dis/abilities spend less overall time in the general education setting, this number was greatest for Black students (66%). This may provide reasoning to the findings of Grindal et al. (2019) who found that Black and Brown students do not have equitable access to less restrictive program placements. Previously, it has been hypothesized that due to an overrepresentation of CoC in more restrictive dis/ability categories, CoC spend less time in the general education setting. Therefore, it may be hypothesized that Black student performance in school is used quantitatively to segregate these students into more restrictive environments. Critical then, is understanding how the nuances behind racial disproportionality access to LRE relates to school personnel decisions regarding how Black students are placed not only into school based dis/ability categories, but also into more restrictive classroom environments than their non-Black peers. Yet, given the salient impact of income and school geography on both the frequency of qualification under ED, and program

placement for White students, the causation of disproportionality under emotional disturbance requires a varied and complex understanding. For example, Sullivan (2017) cautions against causal and simplistic understandings of disproportionality in ED identification amongst researchers and practitioners. How school psychologists conceptualize the cause of overidentification alongside potential solutions such as MTSS, is valuable to understand to create a more equitable and just education system.

As mentioned above, disproportionality extends into racial categories, is influenced by interpretation of student behavior, changes depending on school contexts, impacts placement decisions, and renegotiates behavioral interpretations of social economic statuses. While it is thoroughly documented that a problem of disproportionality exists (namely overrepresentation of Black CoCin ED), racism without the lens of additional systems of oppression and contrasts in school location cannot adequately explain student placement, experience, and outcomes.

Multi-Tiered Systems of Support (MTSS)

The National Association of School Psychologists (NASP) supports the usage of models like multi tiered systems of support (MTSS) in order to implement “preventative services that provide support for all students, to intensive, individualized supports for severely struggling students” (National Association of School Psychology, 2009). These systems are designed to provide preventative structuring before placement into special education programs, and to support the academic and behavioral functioning for all students in a school system. MTSS is a three tier system designed with the intention to provide “increasingly intensive support” for all school age community members. All students, including students with dis/abilities are provided evidence based practices like social emotional learning, widespread academic support, and when needed intervention strategies that are data driven and effective. Additionally, the Every Student

Succeeds Act (ESSA) identifies MTSS as a “framework for effectively integrating multiple systems and services to simultaneously address students' academic achievement, behavior, and social-emotional well-being” (National Association of School Psychology, 2016). School psychologists play an integral role in helping schools implement tiered systems and develop comprehensive planning to monitor proactive intervention strategies for the academic and social emotional development of students. The NASP actively encourages stakeholders to utilize school psychologists to help implement MTSS for the total development of student success (National Association of School Psychology, 2009; 2016). Zaheer et al. (2019) argue that structure and predictability, positive classroom climate, effective instructional strategies, and assessment and data-based decisions are all ways to support students with EBDs in school, before referral to special education under ED. Importantly, this is accomplished through proactive system supports like MTSS, which create the “successful and sustained implementation of these practices” (Zaheer et al., 2019, p. 124) leading to overall positive student outcomes. Specifically in relation to ED, Algozzine (2017) argues that MTSS is not new but “what remains left to accomplish is the systemic application of it...[that] results in meaningful and effective education programs for all students” (p.4). What barriers school psychologists face in the implementation of MTSS is necessary to address the inequities within an educational school site that leads to disproportionality and ineffective student support for students at risk of or currently identified under ED.

Reflexivity and Critical School Psychology

When school psychologists are involved in school teams that allow them to actively participate in MTSS activities, they are more readily available to assist with the implementation and data collection of proactive support for students. School psychologists are key figures on

multi-disciplinary teams when school leaders prioritize the mental health functioning of their students. Additionally, beyond participating and leading MTSS activities and multi-disciplinary teams, school psychologists need to engage reflexively in practice. A praxis of reflexivity demands an acute awareness of how the interactions between one's positionality and society lead to subjective encounters with reality. Key here is understanding how individuals engaged in scholarship and practice within school psychology enter the field carrying meaning making identities that influence the perspective they view the world from. Proctor et al. (2017) argue for school psychologists in the field to view their practice through a lens of intersectionality (Crenshaw, 1991) whereby the varying positionalities of students and staff intertwine distinctively, and produce varied experiences of oppression and marginalization. Critical awareness for this phenomenon is necessary for school psychologists hoping to utilize their positionalities to produce systemic change in institutional outcomes for students with, or considered at risk of ED. Critical school psychology (Sabnis & Proctor, 2021) seeks to analyze how school psychologists become complicit in the retention of dominant systemic and institutional forms of oppression. I seek to understand how school psychologists make placement decisions by negotiating ambiguity in the federal definition, what system barriers impact practice, and how they engage with their positionality through reflexivity.

Students with behaviors of concern and ED exist relationally in school. How they are identified or remain invisible to services is determined by the unique and compounding multiplicities within their school as an institution and as a site of systemic oppression. I am interested in the processes that school psychologists undergo when interpreting the language of the IDEIA relating to ED, what the interaction is between student demographics and the likelihood that a student will be served under the dis/ability category of ED in schools is, and

how do factors related to the larger student body and surrounding school geography influence a school psychologist's perception of student qualification for ED.

Disability Critical Race theory (DisCrit) (Annamma et al., 2013) is a theoretical framework that employs both Disability Studies (DS) and Critical Race Theory (CRT) to explicate the experiences of dis/abled CoC. In applying Intersectionality Theory (Crenshaw, 1989) Annamma et al. (2013) bring forward the need to reexamine how CRT and DS applied separately fail to account for the multiplicities of experiences found in special education. In particular, they cite the need for researchers to examine where race and di/ability intersect. Inspired by this work, Sabnis and Proctor (2022) adopt the foundational theories within DisCrit, (DS, CRT, and Intersectionality) to create a critical theory of school psychology. Here, I employ the recommendation of Sabnis and Proctor (2022) to utilize this critical framework when examining power negotiations in school settings. This is to best understand the meaning making and values that school psychologists engage in when constructing recommendations for dis/ability services under ED. The experiences of CoC and White children with dis/abilities are unequivocally distinctive. Of value to this work is the foundational idea that, "intersectionality is not additive. It's fundamentally reconstitutive" (Crenshaw, 2020, Twitter).

I take up the statement by Sullivan et al. (2022) that "[school psychologists] cannot shy away from critical reflections on how racism and ableism shape ED [identification] at all levels of educational systems" (p. 128). For example, ideals related to normed behavior differ by student race with distinct impacts for CoC. Dis/abled CoC are more likely to receive their education in more restrictive environments (Cooc, 2022; Grindal et al., 2019; Lambert et al., 2022) and are impacted by higher rates of expulsion and have higher dropout rates than White peers with similar behaviors of concern (US Department of Education, 2022). Secondly,

ambiguity surrounds the identification/assessment procedures for ED. How assessment procedures are interpreted, differs by student identity factors (Sullivan, 2017). Thirdly, as mentioned above, students labeled as ED have the poorest outcomes of any dis/ability category (Merrell & Walker, 2004; U.S. Department of Education, 2022) and Black students with ED are rated as showing distinctive needs than their non-dis/abled Black peers (Lambert et al. 2022). It is crucial to understand that material consequences of ED labeling differ by student intersectionality (Proctor et al., 2017; Sullivan et al., 2022). Further, the history and context of meaning surrounding the federal definition of ED is rooted in exclusionary tactics to silence children that challenge normative standards of behaviors (Center, 1990; Merrell & Walker, 2004). Importantly, institutional policies surrounding ED and other high-incidence dis/ability categories have led to an over representation of CoC receiving services under these labels, with historical underpinning (social and political) leading to racial bias (Skritic et al., 2021; Sullivan et al., 2022). Lastly policy makers, and practitioners can engage in varied forms of activism to combat and challenge systemic forms of oppression that CoC and poor students with ED face.

Framework

Examining student experience in special education is difficult to locate within a singular nexus system of oppression. Instead, examining the compounding experiences of racism, ableism, and classism in tandem better elucidates how to serve students with multiple marginalized identities. To best approach how these systems conceptualize the experience of students labeled with ED in schools, I utilize the framework of critical school psychology (Sabnis & Proctor, 2021) in order to qualitatively examine how school psychologists engage in reflexivity when qualifying students for ED. This work attempts to further explore how placement decisions can be examined as sites of identity negotiations for students with invisible

dis/abilities, or dis/abilities that only arise when behaviors are interpreted as debilitating within schools.

I chose to interview those in school psychology who make eligibility determinations. These individuals by nature of their work occupy spaces of privileges. My experience working directly with students labeled as ED cautions me of the political climates of educators working on “the ground”. The contradictions and failures to implement systems of support and lack of training in best practices led to fear, misunderstanding, and stigma related to behaviors and poor student outcomes. My discomfort and curiosity caused me to pursue this work. I did not interview students themselves and I am aware that this limits an accurate portrait of student voice. However, students themselves do not decide placement. Therefore, to best understand practice related to identification, reflexivity, and systemic constraints, I chose to focus on school psychologists. In responding to Arora et al. (2022) calls for researchers and clinicians to state their positionality to actively support reflexivity, I base this research in my values of anti-oppressive frameworks as a privileged POC pre-service special education teacher.

Positionality

My identity as a non-Black person of color, shapes my relationship to Black and Brown students through an adjacent, yet distinctive lens of marginalization. I exist in a space of privilege through my education and relationship to White normative cultural standards which I occupy due to one of my parents' decades long experiences within the field of special education. My lens of criticality was developed through my dad's history of schooling, marked with stories existing at the intersection of racism and classism. As a social worker, he always encouraged me to wonder beyond behaviors, and to compassionately ask myself the “why” questions associated with human emotionality and experience. I attended most of my key developmental periods of

schooling in a predominantly white, and one of the most affluent cities in the nation. For years, this shaped my perception of academia, and provided me with a roadmap for how to succeed within normative systems of privilege. Even still, within this system I was labeled with academic underachievement disorder due to an emphasis on unattainable standards of Whiteness that I did not understand at the time. When I transitioned schools, that label disappeared, and has since shaped my perception of the socially constructed nexus of identity and ability. Simultaneously, I have never experienced what it is to be labeled with a school based dis/ability under the IDEIA. I do not have intimate knowledge of special education through that lens. While I maintain my identity as a woman of color I experience the privileges associated with colorism and I am non-dis/abled.

METHODOLOGY

Restatement of Purpose

The purpose of this research was to qualitatively examine how school psychologists negotiate and make meaning of the language used federally to describe the category of emotional disturbance when making eligibility determinations for students in K-12 public school systems. Specifically, how these school psychologists made meaning out of the ambiguity of the definition and the redundancy of the social maladjustment clause. School psychologists were interviewed to understand how folks occupying positions of power and varying positionalities in special education negotiate, maintain, or challenge barriers they face in practice. An interpretivist research design through a critical school psychology framework, focused how these individuals engaged with reflexivity and showed an awareness for how the multiplicity of student ontologies may lead to bias in identification and service recommendations within special education systems.

Research questions

Four questions centered this research.

1. How do school psychologists label and identify students w/ ED?
2. How do school psychologists negotiate the social maladjustment clause in their practice?
3. How do school psychologists navigate system barriers in their practice?
4. How do school psychologists negotiate their reflexivity and positionality when making eligibility decisions?

Research Design

I employed an interpretivist research design, utilizing semi-structured interviews to qualitatively understand the experiences of five practitioners in the field of school psychology. I use the term interpretivist to situate my data analysis in the language that participants in this

study utilized to show their processes of meaning making. Ontologically, the term interpretivist precisely locates my experience in this process as an interagent. As humans “our institutions, our policies, [and] our language...are human creations, not objects independent of us” (Yanow & Schwartz-Shea, 2013, p. 9). Interpretivism seeks to understand how individual actors acquire and build knowledge through experiences and senses within social phenomena. Individuals exist “in and with a social world” (p.12)... “each knower comes to his subject with prior knowledge that has grown out of past experience, education, training...background, and character” (p.12).

Participants

In total, five individuals were interviewed throughout the course of this study. All five individuals had primary work experience within public education. Participant experience ranged from seven years to decades working within the field. Three school psychologists were currently practicing, one was a former school psychologist working as executive director of a large suburban school district, and one participant was recently retired. All five individuals had primary work experience within Western Washington. One individual had experience working within Oregon, Minnesota, and Washington, another in Washington and Idaho, one in Washington, Kentucky, and Colorado, and lastly another in Washington and Florida. Only one individual had experience solely in Washington state. Four out of the five individuals identified as female, and one participant identified as male. Three individuals self-reported their race as white, while one participant identified as mixed race ($\frac{1}{2}$ Chinese and White) and one as Black. Henceforth, pseudonyms will be utilized for anonymity.

Table 1: Participant Demographics

Name	Role	Experience	Gender	Race	Grade level experience
M	Retired	Oregon , Minnesota,	M	White	K-12th

		Washington			
C	School Psychologist	Florida, Washington	F	Mixed race (½ Chinese, ½ White)	Pre-K-5th
H	Director	Washington	F	White	K-12th
K	School Psychologist	Colorado, Washington, Kentucky	F	Black	K-12th, currently 6-8th
D	School Psychologist	Washington, Idaho	F	White	K-5th

Participant recruitment

Convenience sampling was utilized in order to recruit participants. Three participants were recruited through a familial connection and proximity. One participant was recruited through word of mouth by a mutual connection, and one participant was recruited through my school site. Individuals were contacted by phone or email and sent consent forms detailing the study purpose where they could confirm or deny participation in the study. After, individuals were contacted and interviews were scheduled by email or phone. Four interviews were held over zoom to allow for greater flexibility for scheduling, and one interview was held in person.

I came to know these participants through shared social connections in my personal life and education. I engaged in interviews with the participants that were influenced by my experience within and related to special education. Although situating myself from within this perspective, I also occupy the role of an outsider in the field of school psychology. My epistemological awareness exists from within this standpoint. Provided that “knowledge understands human reality as socially constructed” (Berger, 1966, p.211) it is appropriate to situate myself as an intersubject in this research (Yanow & Schwartz-Shea, 2013) . Meaning that

conclusions drawn from this research are situated exclusively within this data, participant experiences, and my interpretations of the text. My interviews with the participants in this study generated conversations drawn from within our mutually constitutive and socially constructed realities. As the experience of working in school psychology is socially situated, I chose to interview these participants to best understand the phenomenon of identification of Emotional Disturbance in special education.

Data collection and procedures

As this study used a qualitative paradigm, interviews were used as the primary procedural tool because “interviewing is necessary when we cannot observe behavior, feelings, or how people interpret the world around them” (Merriam & Tisdell, 2022, p. 108). Given that this study used an interpretivist research design, whereby conversations center participant meaning making, interviews were the best research tool to help uncover participant experience and interpretation. Four interviews took place over zoom to provide the greatest flexibility for time and to work around location restraints of interviewees. One interview took place in person. Audio recording was gathered during these sessions to assist transcription and coding following the interviews.

Semi-structured interviews

A semi structured research protocol was used in order to create a framework for the interviews. Given that “less structured formats assume that individual respondents define the world in unique ways” (Merriam & Tisdell, 2022, p.110), it was important to allow participants the freedom of question interpretation. Specifically, 23 questions served as a loose guide to best focus the conversations. Interview questions were expanded and adapted from experimental activities developed by Sullivan et al. (2022) to help guide practicing school psychologists and counselors on critical approaches to ED identification. These questions were adapted to help

target the processes of identification during the evaluation process for ED, and considerations that school psychologists make given their specific locales of experiences. Attention was applied to engagement in reflexivity and navigation regarding system barriers. The structure of open ended questioning allowed me to ask interviewees to expand or elaborate on the responses given, while maintaining the core objectives of the conversation to answer the research questions.

Data analysis

I employed elements of guideline of thematic analysis suggested by Kiger and Varpio (2020) to best explore the “social, cultural, [and] structural contexts that influenced[d] [participant] experiences” in the field of school psychology and to describe “meanings that are socially constructed” (p. 847). For example, I began data analysis immediately preceding my first interview. This allowed me to organize and situate my transcriptions early and relative to my research purpose, which was to derive meaning from participant language and experience. Audio transcription and analysis began immediately preceding the first interview. Data was stored with participant initials to protect participant identity. Audio was transcribed using text to speech on Microsoft word, and then organized adjacent to my interview questions. Afterwards, I began the process of category construction in open coding (Merriam & Tisdell, 2022) where I took “notes on potential data items of interest, questions, connections between data items, and other preliminary ideas” (Kiger & Varpio, p. 850) in the margins of my pages to find “segments in [my] data responsive to [my] research question” (Merriam and Tisdell, 2022, p. 203). This allowed me to generate categories in my data sets, defined as individual participant interviews. To best keep track of relevant ideas shared, I grouped words or phrases recorded in the margins of the data set that participants mentioned on a separate piece of paper. This process, known as analytic coding, reflected my interpretations of participant narratives relevant to my research

purpose (Merriam & Tisdell, 2022). I then used inductive analysis whereby my themes were derived “expressly from the coded data” (Kiger & Varpio, 2020, p. 850). For each data participant interview I completed this process four times to refine my themes generated. Since I examined my data through an interpretive research design, my concern in data analysis was on the “iterative nature of knowledge and knowledge making” (Yanow & Schwartz-Shea, 2013, p. 255) and dialogue on “race and dis/ability as socially constructed and maintain[ing] systems of oppression... [that] justify limiting access” to students with ED (Annamma et al., 2016, p. 28).

RESULTS

My intentionality behind this research was to examine the processes of meaning making that school psychologists partake in when negotiating the language of ED as it is defined by the IDEIA. I employed a critical school psychology framework through an interpretivist paradigm to explore the limitations that school psychologists made when encountering the dis/ability label. Findings indicated that in varying ways, participants engaged in reflexivity to center student narratives and prevent overidentification of Black, Brown, and poor students. The challenges associated with the eligibility category were prevalent in the narratives, particularly in relation to how ED is contextualized in different school environments, the stigma associated with the label, school emphasis on behavior over social emotional support, challenges in identification related to systems barriers, and label ambiguity. I explore how given constraints associated with ED, school psychologists develop their advocacy in these spaces. For example, participants advocated for tiered systems like MTSS and Positive Behavioral Intervention Supports (PBIS) to establish academic and social emotional support for students outside of special education. Additionally, participants engaged with their own positionalities explicitly and covertly to support reflexive evaluations. The findings provide an in depth description of each participant, with subsequent themes garnered from individual analysis preceding each description.

Findings

Mark

Mark is a recently retired school psychologist, identifying as a non-disabled white man aged 65. He completed his practicum in Wisconsin and Minnesota. His primary work experience was in Oregon and Washington. In Oregon he worked in a town with a large public university, describing the district as “highly educated”. Here he worked with researchers from a public

university to establish positive behavioral support systems (PBIS) within the district, working with people from a university in the area to set-up PBIS. In Washington he worked in two school districts located in Western Washington, serving leadership roles. His most recent work experience was in a large urban city that he described as “probably one of the most diverse elementary schools in the state of Washington and probably socioeconomically pretty challenged”. In this district he worked at between 10 and 12 different school sites, all from distinct economic neighborhoods in the city. When speaking on his experience setting up PBIS in his last district he said “I don’t know that [PBIS] was set-up to be sustained as well but that was another good experience [with PBIS].”

Out of analysis from Mark’s interview, two themes were identified outlining the identification of students with emotional disturbance. For Mark, provided his experience contributing to research on tiered school systems, a school system and the physical location of a school system were integral factors to his advocacy as a school psychologist. Firstly, the theme of ineffective school systems was identified, and secondly the theme of school specific demographics in identification was developed. Themes are discussed below.

System Barriers

Mark argued that his own agency and power to impart change within a school was largely dependent upon the structures in place. For example, his role as a school psychologist was limited in schools with ineffective proactive and preventative supports. In large districts his role was relatively transactional, in that he was required to maintain a heavy load of assessment administration. He explained, “as a school psychologist in a large school district the role is pretty limited...there’s a heavy load of doing assessment work and evaluation work...[you] become really good and efficient at doing [assessments].” Because of the huge time demands of

his assessment schedule, he explained that for the most part, in contexts like this, there was not time to engage in any preventive or proactive systems like MTSS “[You] have to carve out time to be involved in whole school systems like PBIS data teams or MTSS activities...it’s probably the most frustrating part of the job is that the assessment takes up such a big part of your job and the front loading of services takes a back seat”. M’s ability to engage in MTSS or PBIS work which he saw as foundational to the work of supporting students was stymied by the more assessment focused components of his job responsibilities.

In these schools without MTSS or PBIS structures in place, the school psychologists’ agency and ability to advocate for students was relatively limited. In systems without established and effective MTSS, school psychologists are highly limited in their advocacy. To Mark, there is often internal pressure from within the school site by principals or teachers to label and place students into the eligibility category of ED. He identified that parents, principals, and teachers would often request an evaluation for a student. He explained, “it would be typical that you get an email from the principal or a parent demanding that you do an evaluation and get [a student] into a special education program...those are difficult because as a school psychologist one of your bosses is the principal.” As a school psychologist he was not in a position to exercise his professional judgment and explore support before a formal evaluation was required because of the power hierarchy within the school system. He explained that teachers too might “think they are advocating for the student” and request that a particular student “needs to be in a special program.” Requests for evaluation (and the subsequent labels that result from evaluation) could come from myriad people, and without MTSS or PBIS in place, there was no systematic support, and little a school psychologist could do to disrupt the evaluation process. When schools had established tier systems, school psychologists more readily had support to continue students

in general education “with support” because “it was everybody’s responsibility” to keep students in their least restrictive environments. In situations that arise like the one presented above, a school psychologist faces the challenge of advocating for students' needs to remain in general education, while simultaneously navigating internal pressure from those who may hold positions of power above them.

In conclusion, when Mark worked in schools without established MTSS and PBIS, his role as a school psychologist was limited to assessing students, and did not afford enough time to be part of the broader school systems. To best serve as an ally for student support, the ability of school psychologists to be part MTSS and PBIS is a necessary component of effective school systems. Agency as a school psychologist for Mark, was dependent on his ability to be an active member of his school community.

School specific demographics in identification

Given the diversity of his school experience, Mark shared that the differences in identification and role that families play in student eligibility under ED, depends on the economic contexts of a school. For example, in Oregon Mark worked in a school district that contained a large public research institution. Here he shared that parent influence was a large determinant to whether students would be labeled under the category of ED or other health impairment (OHI) despite similar behaviors. For example “[he] saw a lot of parents in that environment that were not okay with looking at the category of ED but they’d be more comfortable with their kid having an attentional disorder...under OHI”. These parents were able to use their influence and knowledge of the school system to prevent their student from being labeled with an emotional dis/ability “even though the challenges and the needs of the student might be the same”. He shared that parents were highly educated and white. The eligibility

category of OHI served as a protective category for these families in preventing their students from being labeled as ED, even when other families in this district without that influence had their child labeled under the eligibility category. Often the stigma that ED carries would dissuade families from accepting the label. In knowing the school system, the white and affluent families in this district were able to keep their students out of more stigmatizing categories.

When asked to elaborate on the differences between districts more impacted by socioeconomic factors, Mark shared that from his perspective, families living within districts that were less affluent were more likely to over identify students for emotional disturbance, particularly students of color. For example stating that, “[he]felt in areas more impacted by lower SES or areas where parents didn’t have the capacity to understand the system and the whole process [of special education] there’s less reticence to label kids as showing behavioral or emotional disabilities, particularly students of color”. This counters his experience in Oregon. When parents have knowledge of the school system and the impacts of the stigma associated with a dis/ability label, they are able to advocate more openly on behalf of their students when families of color do not have the same privilege.

Furthermore, within these areas first generation families who had less experience within the American school system were more likely to trust those holding positions of power than families who had experienced multi-generational poverty. From Mark’s perspective “they haven’t had negative experiences to the degree that some people have...there’s more optimism on the part of the parents because they haven’t experienced generational challenges with school systems or authority figures”. Within districts there is variance to the degree that CoC will be labeled as emotionally disturbed. In areas where there is a larger population of first generation families, the awareness of stigma may not be as accessible than in families experiencing

multi-generational poverty. Additionally, Mark utilized his whiteness and experience to advocate on behalf of students, sometimes countering colleagues. He shared that “when [he] would raise the issue of overidentification somebody would say “just because he’s African American we can’t label him as ED?” and [he] would say no but..[they] really need to consider overidentification”. Here Mark shows his awareness of the overidentification of Black students into the category of emotional disturbance. The interpretation of the stigma of emotional disturbance changes depending on the wider economic contexts of a family.

Families with awareness of the impacts of stigma associated with emotional disturbance, were more likely to advocate for their students to be placed under the eligibility category of other health impairment, which does not carry the same stigma. In areas where families do not have the capacity nor experience to advocate for less stigmatizing labels or support for their students, there was less restraint to label students under emotional disturbance. Mark used his privilege in these spaces to occupy the role of advocate for those families.

Christina

Christina is a school psychologist completing her 12th year as a practitioner. She described her experience as primarily at the preschool and elementary level. She has worked in two school districts in Western Washington, both urban servicing populations. She stated that her only secondary experience was during her internship in Florida. She currently works as a building school psychologist, serves on the screening assessment team for preschool, and is on the child find screening team. She identifies as “half Chinese half white, but... raised in a white centric culture” sharing that she “was the Chinese kid and... [they] had one Black kid at [her]school”.

Provided Christina’s current work as a school psychologist, she was able to provide

current considerations when implementing evaluations and re-evaluations for students with emotional disturbance. Three themes were derived from data analysis of her interview. They are stigma and overidentification, comprehensive assessments, and emotionality in EBD. Through our conversation Christina identified that she was hesitant to label students with emotional disturbance because the stigma of the label leads to more restrictive placements and contributes to overidentification. Additionally, comprehensive assessments serve as a way for Christina to advocate for students and families. Lastly, she shared that while mental health disorders are often a catalyst for student behaviors, schools tend to neglect the emotionality associated with behaviors and she conflates ED and EBD.

Stigma and overidentification

For Christina, the label of emotional disturbance stigmatizes students. She shared that the stigma of the label leads to an overidentification of CoC, specifically Black students. When asked to share her experience identifying students considered at risk for ED, Christina stated that the category itself is “very challenging” due to “the stigma that’s related to it and the overidentification of students that are Black”. When students are labeled under emotional disturbance, schools tend to focus on behaviors perceived as disruptive to the learning environment. Often the perception of these behaviors directly relates to a student’s racial and ethnic identity. In her experience, educators often interpret these students as needing more restrictive placements and environments. She reasoned like M that proactive school systems help prevent the labeling of behaviors of concern. She elaborated that if there were “better tier-2 and tier-3 general education resources [schools] wouldn’t move so quickly towards special education evaluations”. Therefore, the reputation of the label sustains a stigmatizing identity for disruptive behaviors. Because students of color are often perceived as engaging in these behaviors, this

contributes to the overidentification of CoC in the eligibility category. Furthermore, better tier systems that attend to students' needs outside of special education help mitigate the reactivity of schools.

Furthermore, students without access to outside medical diagnoses are more likely to be placed into school based labels like ED. Christina commented that she believes this also contributes to the overidentification of students of color into this eligibility category. For her, “part of [the stigma] comes with disproportionate access that families have to outside medical evaluations that can open up other eligibility categories like health impairment or Autism”. Families without access to medical diagnoses are more likely to receive stigmatizing dis/ability labels than families with access to the medical diagnoses. She always considers the overidentification of Black boys because “their outcomes are not as good as other students”. Without access to a “high status” dis/ability label, there is pressure put on school psychologists to label a student under emotional disturbance. When she does have access to a medical diagnosis she will try to use other qualifiers. She is “very conscientious of what other medical diagnoses [a student has]”. For example, “if a student has a diagnosis of ADHD [she] is considering if OHI is more appropriate”. If a student has an outside medical evaluation, school psychologists will often utilize this diagnosis as a preventive factor in placing students under stigmatizing identity labels. When working with younger students Christina often is “using the category of developmental delay...to give that family more time before they really get into special education”. Given her work experience in preschool and primary education settings, Christina is able to use other eligibility categories as tools for advocacy whereby she can potentially shield students from stigma associated with ED and “being tracked” into special education.

The stigma of ED leads to an overidentification of Black students in school systems that are reactive to student behavior. To protect students from the consequences associated with the label like “poor outcomes”, school psychologists use outside medical evaluations of students and student age to advocate for students of color. The stigma of the label and how this impacts the overidentification of Black students leads to her selecting less stigmatizing dis/ability labels.

Comprehensive assessments

Comprehensive assessments and reports were ways for Christina to actively advocate on behalf of families and students. For example, when asked to share what tools she utilizes when making assessment decisions for students being considered under ED she said “ the biggest thing is not to use one qualifier...[she’s] always going to want to do observations... a parent interview to hear about [a students’] background and when the concern first came about, or any traumatic events that may have preceded any of the behaviors”. Behaviors for Christina are one component of a student’s evaluation report. While behaviors and assessment tools related to behaviors identify where a student may need support in school, observations, parent interviews, and preceding events are more valuable to her when collecting data. While indicating that she utilizes behavior rating scales such as the Behavior Assessment Rating Scale for Children (BASC) these scales are only one portion of the assessment process and need to be taken “with caution”. She elaborated that “it’s really important that parents are part of the conversation and that they have a seat at the table, and they’re sharing stories of their child and their hopes and what their aspirations are”. At times she “has done home visits...try[ing] as hard as possible” to get family input.

In stressing the value of family input in comprehensive assessments, Christina stipulates that parent involvement is a necessity when advocating on behalf of students. For school

psychologists to write accurate reports of student skills, family contribution is highly valued.

Conflation of EBD and ED

When asked to share her perspective on addressing the overidentification of Black boys with ED Christina highlighted how schools and school systems tend to over identify behavior as the primary concern for EBD while neglecting the emotional aspect associated with EBD, “specifically anxiety”. As the definition of emotional disturbance falls under a law term and not a medical term, this neglects students who are impacted by mental health concerns like anxiety and depression. If these students have access to outside medical diagnoses then they are more likely to be labeled under OHI. Students with marginalized identities who have mental health concerns adversely impacting their school functioning without medical diagnoses, may not be eligible for the legal protection that IDEA provides. For Christina, she shared that from her perspective, “anxiety is an emotional disorder and if anxiety is the thing most impacting [students] at school, then we probably should be looking at the EBD category”. She continued that “if [school psychologists] thought about [ED] as an emotional dis/ability and started identifying those students where anxiety is the primary cause that they need SDI for, it would help with reducing the stigma”. This presents a dilemma that school psychologists face when encountering the label of emotional disturbance. While a dis/ability label itself may provide students with mental health dis/abilities legal protections in school, the stigma and impact of the category as a behavioral dis/ability prevents school psychologists from accurately identifying students under emotional dis/ability even when appropriate. This argument echoes Mark’s beliefs that “[school psychologists] should educate people that [ED] doesn’t mean the same thing as a clinical diagnosis”.

When ED is treated primarily as a behavioral dis/ability, the label becomes stigmatizing

leading to the overidentification of Black students. From Christina's perspective, if ED was associated more with qualifying mental health disorders like anxiety, then the label would not be as stigmatizing and there would be a decrease in the overidentification of Black students.

Harper

Harper is the current executive director of special education of a large suburban school district. She previously worked as a school psychologist for 11 years in the same district. After working as a school psychologist, she transitioned to an administrative role in an adjacent urban school district. She described this experience as "eye opening" as the racial demographics of the two school districts varied substantially. In that district she supervised the school psychology team serving in an administrative position, before moving back to her previous district in the role of director. She identifies as a white non-dis/abled woman.

Throughout analysis, three themes were developed from her interview. The first theme developed was reflexivity. Harper is particularly aware of how her unconscious biases impacted her eligibility decisions when she was practicing in the field. Importantly, the lens of administrator and the awareness that comes with that title, allows her to be reflective and center teams awareness of trends in disproportionality in her district particularly with "Black and American Indian Students". Second, the theme of ambiguity was developed. She shared that the definition of emotional disturbance was often "difficult to tease apart" and that the meaning of the label was contextually ambiguous. Lastly, the theme of correlation of ED and Anxiety was developed. The severity and increase of internalizing disorders like anxiety over the course of her career has impacted her understanding of the definition and its relationship to anxiety.

Reflexivity

Throughout the course of her career in education, Harper now places a greater emphasis

on understanding implicit bias than when she was working in the field. While she was practicing as a school psychologist she shared that “at the time there was not nearly the awareness level of [bias and race] as there is now” and that her “district [is] looking at it all the time now and...working with [her] staff to recognize potential biases and impacts”. When she worked for a district serving a greater population of Black students her “awareness increased quite a bit because the population is so much higher than it is [in her current district]... [there were] a lot of conversation around the criminalization and disproportionate eligibility placement or potential of that for Black boys”. Working in a school district where she was exposed to a greater population of Black students encouraged Harper to focus on “cultural awareness or cultural competence” in “[her] work as an administrator” which she shared has been an “ongoing conversation”. Here she highlights that working closely with Black families and students contextualized her perception of Black students. When she was tasked with leading school psychology teams Harper had to develop a critical awareness for the impact of disproportionality on this community of learners. She uses this experience as a director to be “aware of the narratives that [her district] is forming about [their] students and their behavior” as they are “different from white dominant culture”. Conversations surrounding outcomes for Black students were integral to her development as a leader and how she chooses to help guide school psychologists in her district now.

In order to prevent disproportionality and the unnecessary qualification of Black and Brown students under ED, school leaders must engage in conversations challenging dominant systemic narratives about the behaviors of Black and Brown students. Without active awareness of the impacts of unconscious bias and without engaging in a process of reflexivity, school psychologists play a key role in maintaining institutional inequity for Black and Brown students. For Harper in particular, it was her experience working intimately with Black families that

caused her to reevaluate how she approaches assessment decisions under ED, and what values are important to her as a district leader.

Ambiguity of ED

When asked how she navigated the language within IDEA and how that applies to the social maladjustment clause, Harper commented that she does not believe she “navigated the language in IDEA very well because it’s so ambiguous”. The definition shifts depending on the contexts surrounding student behavior, and that during pre-referral phases her team often engaged in conversations to “dissect what this di/sability category actually means”. The social maladjustment clause led to confusion for teams attempting to find eligibility for students showing signs of an emotional and behavioral dis/ability. Her dilemma as a school psychologist and team leader surrounded finding appropriate procedures to measure social maladjustment and any potential EBDs a student may need school support with. A lack of a clear consensus on the definition of ED led to uncertainty among team members on how to best approach the definition with clear and unbiased assumptions surrounding student behavior. In practice, the definition contradicts itself, leading to challenges qualifying students. The federal definition “is so circular...and [Harper doesn’t] know that [they] were ever truly confident in saying that it was social maladjustment, EBD, or both”.

For schools tasked with servicing students with dis/abilities, without a clarity of definition behind social maladjustment, the clause may be interpreted as a disqualifying tool preventing students from receiving special education. The clause contains just enough subsistence to remain attached to the federal definition. As school psychologists help guide program placement and student time spent in the least restrictive environment (LRE), some students with EBDs may not qualify for special education or qualify for special education with

more a more restrictive LRE or program placement due to the interpretation of their behaviors as a legitimate dis/ability or not a legitimate dis/ability in school.

Correlation of ED and Anxiety

As a district leader, Harper noticed a shift towards identifying students under ED that present with behaviors stemming from internalizing behaviors like anxiety more frequently than when she was practicing as a school psychologist. Specifically in her district, “there’s significant increases in more internalizing kinds of mental health related needs” although “externalizing behaviors are going to be the ones that people are more concerned about”. There has been a gradual shift towards identifying more students that present with “school refusal behavior because the school setting makes them so anxious”. Students are not attending school due to their high levels of anxiety. While she noticed a decline in qualifying students for ED after COVID, behaviors that are appearing more frequently are related to anxiety. The detrimental impacts of the COVID-19 pandemic on student mental health functioning are exhibited by the degree at which internalizing disorders and related behaviors have increased in the school setting. While her district still qualifies more students for ED that present with externalizing behaviors like aggression, the significant increase in referrals for anxiety is noticeable, and shows the need for responsiveness within school settings.

While the eligibility category is not used frequently now “[they] may be a bit more liberal in [their] interpretations of the definition [because] there was real concern for stigma when [H] was practicing”. The landscape of school psychology when Harper was working in the field has shifted towards understanding the “crippling impacts of [anxiety] and... the significant mental health needs associated and services needed”. Internalizing disorders such as anxiety do not carry the same meaning in the context of emotional disturbance as externalizing behaviors do. Given

the stigma associated with externalizing behaviors, school psychologists “would look at eligibility categories that might not be as stigmatizing”. Like Christina, who often labels students under OHI, the concern for how the label would impact students later in their education careers, prevented the usage of category “even if it was appropriate”. Their concern regarded how school personnel might “assume the student belonged in a certain place”. Here, it is not the label of emotional disturbance itself that causes more restrictive outcomes for students, but the association of the label with more externalizing behaviors. However as a district leader Harper observed a shift in her district towards “more willingness to label what [her school psychologists] think is actually impacting the student more now”. In her district, an increase in referrals for special education under internalizing disorders gradually is leading towards renegotiations of what the label of ED means in context.

To summarize, following the COVID-19 pandemic there was a shift towards a more encompassing interpretation of ED. Previously, due to stigma there was reticence to use the label of emotional disturbance even when appropriate. Now school psychologists are more open to using the eligibility category for students impacted by anxiety related behaviors.

Kara

Kara is a school psychologist currently working at a large suburban district serving 100,000 students in Kentucky. She described 12 years of experience in the field, primarily serving middle and elementary schools. She received her training in Colorado, and afterwards worked six years in a large urban district in Washington state. She described Colorado as “way different than Washington”. In Kentucky, she described her role as more administrative, overseeing five different schools' placement decisions. Demographically she stated that her current district is “very diverse...[speaking] several languages...reach[ing] populations in all the

IDEA eligibility categoriesall SES levels; low, middle, high poverty, [and] also all educational backgrounds”. Kara identifies as a highly educated non/disabled Black woman.

Throughout our interview Kara shared extensive experience working with students considered at risk or identified for special education under emotional disturbance. She shared clear examples of identifying students for special education services where emotional disturbance was considered as an eligibility category. From data analysis, four themes were contrived. Firstly, the theme of middle school and anxiety was developed. Kara observes that middle school serves as a critical period of development in which referrals for ED increase. Secondly, the theme of ambiguity of the social maladjustment clause. Without observance and clear directions from educational leaders in a school district, the ambiguity of the clause leads to confusion around appropriate identification. Thirdly, the theme of social emotional support and behavioral interventions helped to identify where Kara sees potential steps her school district could make to better serve students considered at risk of emotional disturbance. Lastly, the theme of positionality was critical for Kara’s framework as a school psychologist. Kara’s Blackness is a valuable aspect to her identity as a school psychologist as she is able to relate and communicate to students and families in a way that establishes trust and rapport. Relevant themes are discussed below.

Middle school and Anxiety

Given her current work in secondary settings, she highlights the transitional period of middle school as a time where she often sees an influx in referrals following elementary school. For example, she shared that often “[teachers] make a referral and students are in a new school, with new teachers, and new systems and the students are nervous”. The anxiety that students face during the period immediately following elementary school, leads to behaviors correlated with

anxiety. These behaviors are interpreted as disruptive, and students are referred for services.

Middle school is a critical period for students being considered for ED. During this time students are developing and potentially have multiple mental health diagnoses which may conflict with one another. There is considerable overlap in the definition between ED, social maladjustment, and other mental health dis/abilities, which leads to potential confounds in eligibility.

When asked to provide a case study of a student considered at risk for ED, she shared a recent example of a student she qualified under OHI. Initially, he had been referred for exhibiting “bizarre and strange behaviors” entering middle school. Due to the resignation of his previous teachers, when educators in his new school saw him on paper they “were very limited in how [to] respond and react” because they had no prior experience working with him. Additionally the student was selectively mute. Kara used student interviews to establish rapport with this student and when she worked closely with him, she began to understand that “his behaviors were more motivated by feeling uncomfortable, anxious, nervous, and worried...He actually wanted relationships but he didn’t know how to pursue them. His behaviors were along the lines of anxiety and not emotional disturbance”. Kara defines emotional disturbance as distinctive from anxiety. Anxiety in her eyes relates to OHI to a greater degree than emotional disturbance. This is similar to Christina, who qualifies students with anxiety frequently under OHI.

Ambiguity of the social maladjustment clause

When asked to share how she clarifies the federal definition of emotional disturbance and the social maladjustment clause, Kara stated that her awareness comes from having a doctorate and being “trained in that clinical area”. Additionally, her work in Colorado, one of the few states that provides guidance on the social maladjustment clause, continues to guide her work. The state of Colorado explicitly states that if a student has conduct disorder they cannot be

eligible for emotional disturbance. This lens cautions Kara against using the label of emotional disturbance for students presenting with conduct disorder. She identified her frustrations working in her current district because they “[do] not have anything like that”. While she receives professional development on the overidentification of Black Boys in the eligibility category, there is no guidance for “what [social maladjustment] actually is”. In Washington, she worked in the same district as Mark, and Harper briefly. Here she shared that in that district “they really honed in on if the student is having these behaviors in more than one setting then [they] could rule out [social maladjustment]”. Providing guidance on the social maladjustment clause, specifically as it relates to conduct disorder, helps guide school psychologists to make educated qualifying decisions regarding ED. Different states have different levels of guidance on the clause, and this leads to differences in outcomes regarding disproportionality which Kara notes is present in her current district.

For Kara she believes strongly that “it’s just not [her] role to be pointing out social maladjustment”. She “[doesn’t] understand why the IDEA keeps pushing the same narrative out about how social maladjustment” prevents students from qualifying for ED, asking to “tell [her] a student who has EBD and does not have social [maladjustment] piece”. Again, like Harper, the ambiguity of the federal definition does not make sense in the context of school systems. The law term does not provide guidance on how to identify students with EBDs appropriately. This leaves the interpretation of the term up to states, and oftentimes individual districts. This becomes clear for Kara in middle schools where students “are in a new environment and...sometimes they have conduct disorder and something else”. To Kara, “[she] can’t just say they can’t have EBD because they meet all these criteria and they have a history of conduct disorder”.

The social maladjustment clause varies in clarity state to state which for Kara causes confusion as to what are the appropriate steps to address the clause. She identifies that it is not appropriate to prevent students from receiving special education services because of the clause. Given variability, the clause may be translated differently and result in differences in student outcomes state to state. When there was clear guidance like in Colorado, she knew how to approach the clause.

Social emotional support and behavioral interventions

The third theme developed through analysis was social emotional support and behavioral interventions. Specifically, Kara feels that her current school district does not provide enough guidance to support students' social and emotional development who are engaging in externalizing behaviors “because they don’t want to do the work, because they can’t do the work, and the district is not doing a job supporting those students in those social emotional ways”. To Kara, by providing students with more appropriate systems of support, the root cause of behaviors would be targeted in a more precise and accurate way. This echoes Mark, who argues strongly in favor of proactive school systems. She continued that her district is “very much focused on the behavior” and that they “know *bad behaviors* and *non compliance* [because] these are easier to see”. When students engage in behaviors that are disruptive to a school system without developed academic and emotional support, schools are reactive to behaviors. In her district, Kara feels like they “don’t do a good enough job working with the anxiety part” associated with the perception of academic challenges that students face. If a student is “physically aggressive and trashes that classroom” due to anxiety, then her district “needs to be working with the anxiety and not...putting their behaviors into FBAs and BIPs”. To Kara, anxiety is often the root cause of student behavior, and due to the challenges and systems

needed to target anxiety, schools emphasize targeting behaviors that are visible. However, this does not present an accurate portrait of what students need to be successful in school. For Kara, this doesn't necessarily mean special education services, but instead robust MTSS and tier systems.

Positionality

Kara identifies as a Black woman, which she feels “a lot of students who have EBD respond to [her] upbringing”. She is able to build rapport with Black families who feel comfortable in a space with a Black school psychologist, commenting that “they will say it in front of all those white people too”. She shares she noticed this more when she transitioned to a school district with a higher percentage of Black students and families which was “new to her”. The families in Kentucky “notice [her] Blackness more than [her]”. Families feel comforted and supported by the presence of a Black professional, and this helps establish trust between the school team and families. Initially when asked to share how she reflects on her positionality she shared that she “doesn't think about [her] identity” until recently. This differed from the experiences of the non-Black school psychologists interviewed, who all immediately shared their awareness of their race when working with Black students and families. The experience of being racialized allows Kara to enter into spaces with other Black folks with a deep understanding of what it means to be Black and to come from a Black family. This was not something she needed to become aware of, unlike other participants in the study. This awareness is a privileged identity that Kara holds in this space.

Additionally, when she is working with ED students and when she “need[s] to be firm, they understand that [she] mean[s] business” and that they “do not get to come in [her] office and mess around”. As a Black woman working with a large percentage of Black students, Kara has

cultural capital to build trust and work with these students that white psychologists do not have. This is not something she has learned how to do, but is instead a skill that is deeply felt. She understands their Blackness because of her “upbringing and [her] Blackness”. For the most part, Kara tries to “show up as [her] authentic self” in meetings, as a “highly educated Black woman”. However, she shares that white psychologists are aware of the rates of disproportionality in referring Black boys for ED and that her coworkers “share in responsibility” to prevent overidentification. Her positionality as a Black woman provides Kara with intimate knowledge of Black communities that she uses to advocate on behalf of Black families. This part of her identity allows her to communicate directly with students in a way that is responsive to their identity, and comforting to families.

Before working in a school district with a larger percentage of Black families, Kara was not as aware of her racialized identity before moving to her current district. For her, as an educated Black woman who occupies that identity in meeting spaces with families, families view her as an ally and that provides them comfort. While white school psychologists are also aware of rates of disproportionality, Kara’s relation to her Blackness and Black culture allows her to be direct with students to sustain relationships needed for relevant evaluation reports.

Debra

Debra is a school psychologist in a small district in Idaho. Previously she worked at a mid size suburban school district in Western Washington. This is her seventh year as a practicing school psychologist. Currently she works at an elementary school describing the demographics as a “kind of a mix of affluent and then some kids that are [of] lower socioeconomic status”. Importantly, she “[has] never done an initial evaluation using EBD”. However, “because [she] did have the self-contained behavior program at [her] school there were students that [she] did

reevaluations on”. She identifies as a white woman, “married to a Hispanic man so [her] children even though they look white have that background” and states that “because [she’s] had that kind of interaction in [her] personal life [she] always tries to make sure [she’s] keeping everybody else's background in mind too when [she’s] making decisions for kids”.

Given Debra’s relatively limited experience working with students identified for emotional disturbance, in data analysis one theme, economic impacts, was developed which is discussed below.

Economic impacts

For students who served in her previous school district's self-contained program for students with emotional dis/abilities, “most children unfortunately were from lower SES...it tended to be the children that were less affluent in terms of resources that were in that program”. While she commented that there was a diversity of racial and ethnic backgrounds, poor families made up the highest composite of students in that program. For her, “family life stressors can play a big role in why children may be exhibiting certain behaviors” and that that is “something [she] keeps in mind”. Less affluent families may not have time and resources to advocate on behalf of their students placement into restrictive special education environments, particularly those designed for students with EBDs. For her, that district “did not provide sit down training” but that there was some guidance on ED. She commented that of the students she remembers evaluating, both were Black. Given the relatively small percentage of Black students (less than 3%) within this school district, and the relative wealth of the school district as a whole, behaviors disruptive to the learning environment caused by the impacts of economic disparity, may lead students being identified with emotional disturbance and placed into a self-contained program.

Summary

Throughout data analysis from five participant interviews all with varying degrees of experience in identifying or evaluating students under the dis/ability category of emotional disturbance, 13 individual themes were identified and developed. They are listed in Table 2: participant themes. Summary and subsequent discussion of the themes are presented below.

Table 2: Participant Themes

Participant	Themes
Mark	-Ineffective school systems, School specific demographics in identification
Christina	-Stigma and overidentification, Comprehensive assessments, Conflation of EBD and ED
Harper	-Reflexivity, Ambiguity of ED, Correlation of ED and anxiety
Kara	-Middle school and anxiety, Ambiguity of ED, Social emotional support and behavioral interventions, Positionality
Debra	-Economic impacts.

SUMMARY, DISCUSSION, LIMITATIONS/ IMPLICATIONS, AND CONCLUSION

Through this research, I aimed to provide a holistic portrait of how school psychologists identify(ed) and evaluate(d) emotional disturbance in primary and secondary education settings, and how their particular experiences and positionalities informed this process. I interviewed five individuals with experience evaluating students for emotional disturbance in schools, through interpretivist paradigm with a critical lens. Given the over identification of Children of Color (CoC) into the eligibility category, I was particularly concerned with the processes by which participants considered overidentification and stigma related to the eligibility category. Additionally, I investigated how they negotiated system barriers in practice, and how this influences their student advocacy. Here are the research questions that helped to guide my interviews and analysis: (1) How do school psychologists label and identify students with ED? (2) How do school psychologists negotiate the social maladjustment clause in their practice? (3) How do school psychologists negotiate their reflexivity and positionality when making eligibility decisions? (4) How do school psychologists navigate system barriers in their practice?

Summary of Findings

Findings and associated themes are discussed in relation to each individual participant as this is how I structured my data analysis. Overall, participants identified a need for MTSS in schools, highlighted the nexus of anxiety, stigma, overidentification, and ambiguity of the definition, and showed attempts to advocate on behalf of students.

1. How do school psychologists label and identify students with ED?

During the process of labeling and identifying students for special education under the eligibility category of ED, participants showed a sense of awareness for the stigma associated with the label and were hesitant to identify students under ED. Participants noted that behaviors

interpreted as disruptive to a school environment often lead to placement into programs designed for emotional and behavioral dis/abilities. When education personnel would see the students on paper they would assume students would need special program assignments. This was particularly true for schools without effective MTSS systems established, as highlighted by Mark. Harper commented that in her district she now sees more students being referred for internalizing behaviors associated with anxiety, especially following the COVID-19 school closures and the pandemic. In her district she also feels like the interpretation of the label has shifted to include more internalizing disorders. She was the only participant to identify the impacts of the COVID-19 pandemic on ED identification and student behaviors. As a director, she also oversees an entire school district and is intimately familiar with percentage rates to a degree higher than the practicing school psychologists. Anxiety or trauma however was discussed by multiple participants as an antecedent for behavior that caused referral. Kara, Christina, Harper, and Mark all discussed how anxiety or EBDs could be treated in the general education setting with appropriate student supports and tier systems. While not discussed in detail in the findings of this paper, Mark and Kara also mentioned how a lack of academic support and appropriate intervention under MTSS for students, also leads to behaviors associated with ED. If social, emotional, and academic support were established in a school, this would limit special education referrals and students identified under ED would not have the same degree of stigma.

However, stigma of ED is still a relevant factor preventing school psychologists from using the ED label. Given her experience in preschool and working with younger students, Christina was the only participant to identify developmental delay as an alternative eligibility category. However, OHI was identified by Kara, Mark, and Christina as an alternative category

that school psychologists use to protect students from the stigma of the ED label. Mark also stated that families uncomfortable with the stigma of ED in affluent areas will advocate for OHI and less restrictive program placements for their students. Mark shared this differed from his experience working in environments that were not as aware of the stigma of the label and did not have as much awareness as families who had experienced the impacts of multi-generational poverty. First generation families would be more willing to accept the label from school systems due to lack of experience and capacity to understand the systems. This was also echoed by Debra's commentary that her district's self-contained program, although racially diverse, contained students who were nearly all from low income backgrounds. The theme of comprehensive assessments (specifically the inclusion of parent voice) was identified from Christina's data set explicitly. While not discussed in the findings, Kara, Mark, Debra, and Harper all stated that including family, and when possible student voice, was critical accurately portraying student support needs in school.

Christina highlighted that the rate of students experiencing anxiety and depression does not match the percentage of students qualifying under ED. She questioned why special education was the only option for students needing support in these areas, while admitting that if the ED label more appropriately addressed anxiety related concerns, the stigma associated with ED would diminish. This is critical commentary on the inadequacies of the federal definition to appropriately address the full spectrum of emotional support for students. Access to medical diagnosis it may be assumed are key to shielding students from being identified as ED. For Christina and Kara, medical diagnoses and/or mental health diagnoses are more in line with OHI than ED. Kara also commented that her district overly emphasizes behavior as it is disruptive to a system, versus trying to untangle the root cause of non-compliance which she believes relates

to emotional functioning like anxiety. As a district leader, Harper's concern for anxiety related behaviors may show a shift towards by school leaders to address the emotional side of EBDs in school. Now as an administrator, Harper shares that due to overwhelming impacts of anxiety, school psychologists in her district are negotiating how they conceptualize ED with more plasticity. However, while addressing the stigma of ED, simply qualifying more students under ED does not provide a solution to system level inadequacies within school sites.

How school psychologists label and identify students for special education under the eligibility category of ED is relative to the stigma of the label, family influence, conflation of ED/EBD, and tiered support in schools. The participants in this study were attentive to disproportionality, family voice, and anxiety as a root cause of behaviors.

2. How do school psychologists negotiate the social maladjustment clause in their practice?

Variations in state definitions of ED and a lack of clarity surrounding the ambiguity of the social maladjustment clause, impacts how school psychologists interpret the federal definition. Kara shared her frustration regarding her district's lack of refinement of the social maladjustment clause, which was present in other states. For example, if a student had conduct disorder, they could not be identified as ED in Colorado, but that was not as clear for Kentucky. Harper also shared that when she was practicing, there were often disagreements among team members as to how to define the social maladjustment clause, which may have prevented students from receiving appropriate support in school. She also shared that it was hard to determine what the ED category actually means, and how it relates to EBDs. Harper later described the social maladjustment clause as "circular" and Mark described it as "nebulous". Kara saw social maladjustment as consistent with ED in practice, and students qualified under ED were also

socially maladjusted. For her, her clinical training and experience in Colorado helped her tease apart the clause with more fidelity she believed than other practitioners. In total, participants did not understand why the clause was present.

How school psychologists negotiate the social maladjustment clause in their practice shifts depending on the influence of state and district policy regarding ED definitional clarity. Mostly participants showed confusion and frustration at the presence of the clause.

3. How do school psychologists negotiate their reflexivity and positionality when making eligibility decisions?

Given his awareness of the impact of the label, Mark used his experience and Whiteness to advocate for students without parental awareness for the impact of the ED label to help these students receive less restrictive program placements. School psychologists advocating for students need to be aware of the overidentification of families of color in order to advocate on behalf of students. Mark was aware that his Whiteness was a tool of agency, and that even in school systems limited by a lack of tiered support, he could still try to engage in student centered work. Furthermore, reflexivity is a critical component of Harper's understanding of school psychology. Namely, Harper is honest that her experience as a school psychologist was limited by her lack of awareness towards her unconscious bias favoring normative White standards. When she engaged in conversations that were open about the criminality associated with Black boys and ED, she became reflexive towards her Whiteness. Now, as a director she centers conversations around disproportionality to reflect critical engagement for how Black student behavior is viewed in her district. This is an area that she says is constantly an area of development for her and her district. Additionally, to Christina comprehensive assessments with parent involvement are how she is able to expressly advocate for students. Parent perceptions of

student behavior are integral components of her work as an advocate. She also stated that she always keeps the overidentification of Black students as forethought when making eligibility decisions and recommending program placements. Kara's identity as a Black woman informs her work with Black students and families. She has cultural capital to understand the behaviors of Black students and build rapport with Black families. Although her coworkers are aware of overidentification and show caution around using the eligibility category, her Blackness allows her to communicate with Black students in a way that students are responsive too. Importantly, it was her transition to a district with a higher degree of Black families, that caused her to become more aware of her Blackness in meeting spaces due to the vocality of parents. Lastly, Debra discussed her reflexivity and positionality in relation to her own family and her children's experience. She commented that she tries to keep the different cultural experiences of families when making eligibility decisions.

School psychologists do engage in a process of reflexivity when making eligibility decisions under ED. Importantly, more familiarity with diverse student populations influenced the degree at which participants engaged in this process. Confronting their own positionalities was largely influenced on the demographics of a school environment showing that more experience with families of color and poor students may lead to less restrictive eligibility qualifications and program placements. All school participants identified an awareness for the disproportionate impact of race, economic status, and/or a combination of the two, on the likelihood that a student will be recommended for evaluation under ED.

4. How do school psychologists navigate system barriers in their practice?

Nearly all participants advocated for established and refined MTSS systems which they argued would more adequately serve students emotionally and academically. In turn, they

believed this translated to supporting or reducing behaviors of concern in school settings. Mark worked to establish himself and participate in the larger school community to best advocate for MTSS. Over the course of his career, Mark participated in early research on MTSS, and was able to implement a variety of proactive systems throughout his work in varying school districts. Schools with established tier systems were supportive of his work as a school psychologist, and valued his participation as an active member of the school community. Without proactive systems, there was pressure to evaluate a student under more restrictive eligibility categories. If a school psychologist had established themselves within the system, often they would not face this internal pressure to qualify a student under ED. When school systems had established tier systems, school psychologists did not feel the same degree of pressure to transition students out of general education settings and could advocate for student centered eligibility decisions. For Christina, solutions to the systemic confounds of the ED label were built around effective school systems like MTSS which support student functioning without necessarily a special education label. To Christina, if schools had the capacity to identify mental health disorders, the label of ED might be used more appropriately to identify EBDs instead of OHI, reducing stigma. Christina uses the eligibility category of Developmental Delay and OHI to protect students against the negative systemic consequences of restrictive program placements and stigma. Along with Kara, Mark, and Harper, the role of comprehensive assessments was critical to providing evidence to school leaders against the ED label. Additionally, Kara navigates systemic barriers associated with the label of ED by pushing back against qualifying students under ED and through the usage of OHI. Kara imagined that if the eligibility label of ED was more developmentally appropriate, less students would be flagged for referral, particularly at key developmental milestones. Debra shared that in districts where there is less exposure to students

of color and they are not equipped to deal with the impacts of poverty, students of color may be overidentified for ED. She used the eligibility label only to reevaluate students.

Generally speaking, participants in this study identified MTSS as a critical element to reducing system and institutional barriers associated with the ED label. Participants would also identify students under other dis/ability labels to prevent poor student outcomes associated with the stigma of the label such as less access to the general education setting. They advocated for academic interventions (although not discussed in length here) and social emotional support to better situate the needs of students in school. Comprehensive assessments were also valuable tools to prevent disproportionality in ED identification.

Discussion

Through this analysis of school psychologists' experience in the field of education, I utilized a critical framework of school psychology (Sabnis & Proctor, 2021) situated from within an interpretivist research paradigm to qualitatively examine the extent to which school psychologists within K-12 public school settings label and identify students under the IDEIA eligibility category of emotional disturbance (ED). I investigated how school psychologists confront the ambiguity of the definition label, specifically in relation to the social maladjustment clause, what barriers in the school system do they encounter when making these decisions, and through this process how do they engage with their positionalities reflexively to advocate for students.

The experiences highlighted by the participants in this study support current literature regarding student demographics within specific locales as impactful on the identification of Children of Color (CoC) and poor students under ED (Cooc, 2022; Grindal et al., 2019; Fish, 2019; Forness et al., 2012; Skritc et al., 2021). Student race and economic factors impacted who

was recommended by educational personnel to be evaluated by participants in school systems without established MTSS. The impact of anxiety and trauma was seen as impactful on student behaviors. While not discussed in this paper, trauma associated with the effects of poverty and racial prejudice was identified as impacting student behaviors. Furthermore, the perception of these behaviors in a wider school system was likely to influence which students were recommended for evaluation. Schools not equipped to handle the impacts of systemic inequities felt by students, may use special education as a way to mitigate the behaviors caused by these students (Cloth et al., 2014). Participants commented that they faced pressure to qualify students when systems were not established. Unfortunately, this disproportionality impacts Black, Brown, and poor students.

Additionally, externalizing and internalizing disorders were conceptualized differently by practitioners. Notably, in line with findings by Epstein and colleagues (2022) comparing behavioral trends over time within ED, students are now qualifying under ED for behaviors that are less externally directed. Importantly, there has been stability in high rates of poor academic skills, anxiety, and depression. This was supported by participants who shared their concern in an overall lack of support for students regarding social emotional learning, academic skills, and behaviors associated with anxiety. While there has been a decrease in the rates of qualification, a perspective also shared by participants, problems in these areas persist overtime. Participants also noted that shifts towards internalizing disorders have become more visible in later years, showing particular salience following the COVID-19 pandemic and school fall-out from the negative consequences on school systems and student mental health. Supportive school structures like MTSS or Positive Behavioral Support Systems (PBIS) would proactively address student social emotional development. However, while participants supported tier systems and

believed a lack of well-established systems contributed to the reactivity of schools to student behavior, beyond implementing Behavior Intervention Plans, a component of PBIS, participants stated plainly that school districts need to address internalizing concerns in school systems before implementing behavior plans. This falls in line with Epstein et al. 2022 who note PBIS may not fully address mental health needs in school given the emphasis on behavior over cause.

Furthermore, problems in the identification of emotional behavioral disorders relate to the stigma of the label. The stigma is expressly related to “socialized aggression” (Center, 1990) or behaviors that are externalized. Participants expressed concern for the weight attached to the stigma of the label, even when the label was appropriate. Participants used the eligibility category of other health impairment or developmental dis/ability to protect students from stigma and the poor outcomes associated with ED and special education for CoC (U. S. Department of Education, 2020). This is a dilemma that school psychologists make when identifying ED. On one hand, stigma leads to poor outcomes and program placements for students considered for ED. The label becomes synonymous with externalized behaviors. Externalized behaviors are stigmatizing in schools because without established tier systems they lead to restrictive program placements. On the other hand, if ED was associated more with internalizing disorders like anxiety, overidentification would decrease because more students would be eligible for the category. If participants felt that school systems were more proactive to student social emotional learning there would be better outcomes for students associated with ED, and school psychologists would not have the same degree of reticence when using the label.

Importantly, access to medical diagnoses protects students from “low status” dis/abilities and dis/abilities that are identified in schools such as ED (Fish, 2019; Grindal et al., 2019; Skrtic et al., 2021). Medical diagnoses open up other eligibility categories such as OHI. Parents with

awareness of the school system and the impacts of the label are able to advocate against the ED label. Fish (2019) notes that racial distinctiveness in a school system increases the rate at which students will be identified for ED and placed into self-contained programs. This reflects participant experiences who shared that white affluent neighborhoods are less likely to accept the ED label. Additionally, the behaviors of Black/Brown, and poor students in affluent neighborhoods are often perceived as more extreme than affluent students (Forness et al., 2012) despite the behavioral concerns of Black and White students with ED as being nearly identical (Lambert et al., 2022). This was inline with the experiences of participants in the present study, who found that poor students and CoC labeled with ED were likely placed in self-contained programs in affluent neighborhoods which is supported by findings by Grindal et al. (2019). Furthermore, participants also noted that generally Black and poor students with behaviors interpreted as unsafe were frequently referred under ED. This follows the conclusion of Baglieri and Shapiro (2017) who write that “being a boy, being Black, and/or poor increases one’s likelihood of being identified as emotionally disturbed” (p. 98). This also reflects why overidentification may be present for Black students, or poor students unable to attain medical diagnosis like anxiety or attentional disorders. Participants also discussed the overall higher rates of CoC being recommended for non-inclusive programs as stated by Cooc (2022). Instead the overall lack of academic support for students that leads to behaviors of concern in school, leads to recommendations for special programs. However it may be hypothesized that if a school environment is not proactively providing support for students' behaviors, school psychologists may choose to use the ED category as a way for students to receive support for their behaviors and to provide legal sanctions. As noted by Sullivan (2017) disproportionality in ED identification is complex and influenced by multiple factors. Participants noted general trends

away from using the eligibility category due to stigma which was a huge determining factor for the reluctance to qualify students under ED.

As supported by researchers (Cloth et al., 2014; Merrell & Walker, 2004) and echoed by participants, the language used federally presents challenges in identification for students considered for evaluation under emotional disturbance. Given the historical underpinnings of the eligibility category operating as a tool of exclusion for the legal protections afforded under special education (Center, 1990; Hochbaum, 2013; Maag & Howell, 1992; Nelson et al, 1991; Skiba et al., 1994) the social maladjustment clause allows for deferential treatment of students with behavioral challenges. However, participants noted definitional overlap between emotional disturbance and social maladjustment, seeing social maladjustment as consistent with emotional disturbance. The definition of ED as outlined in IDEIA (2004) is stigmatizing for students, leading to alternative eligibility categories. Teams tasked with untangling the definition would often face the fear of the stigma that the label presented for students. Program placements often relied on the extent to which participants interpreted the language as student need of a more restrictive program placement. The unreliability in consistent interpretation of ED stated by participants, supports researchers arguing that steps towards appropriate mental health support for students considered for ED becomes ill-defined. Importantly, state variability leads to differences in guidelines and policies for the social maladjustment clause (Becker et al., 2011; Scardamalia et al., 2019). The relationship between social maladjustment and conduct disorder was outlined explicitly in some states (e.g. Colorado) and not in other states (e.g. Washington, Idaho, Oregon, Kentucky). Additionally, for K in particular, her clinical experience allows her to more precisely locate conduct disorder and social maladjustment as intertwined. Although, even for her the definitions were often indistinguishable if states did not provide

precise definitions for social maladjustment. While participants saw the arguments for definitional transparency as nebulous and circular, Sullivan and Sadeh (2014) remind practitioners that outcomes of due process cases are dependent on language used federally.

Consistent with Becker et al. (2011), Forness et al. (2012), and Sadeh and Sullivan (2017) who note that researchers and school psychologists use the terms ED and EBD interchangeably, participants in this study often conflated the language of ED and EBD. This distinction is important as redefining ED to be more objectively inclusive of EBDs including anxiety and depression, reduces stigma and overidentification associated with the category. The prevalence of students in K-12 public school settings presenting with symptoms of diagnosable mental health disorders is high (Forness et al., 2012; Hughes et al., 2019), and these students are often underserved in schools without clear support systems. Initially, the intention behind the foundational research of Bower was an attempt to argue in favor of schools providing mental health services to students (Bower, 1982). When schools are not obligated by law to provide special education services for students exhibiting disruptive behaviors within a system, then schools are not obligated to provide safeguards against expulsion (Nelson et al., 1991). Transition points during secondary education highlights key periods of development as leading to expulsion (Cloth et al., 2014). Which was found in this research, as middle school relates to anxiety, and an increase in referrals for behaviors during this time. Early researchers within the field of school psychology advocated for system restructuring addressing the ineptitudes of school systems (Maag & Howell, 1992). This present study supports a near 50 year fight among school psychologists and researchers advocating for robust, proactive, and student centered systems like MTSS to be implemented widespread within schools (NASP 2009, 2016). Following recommendations from the National Association of School Psychologists, Algozzine

(2017), and Zaheer et al. (2019) that EBPs must be implemented through tier systems that create supportive school climates, participants also shared similar views away from mere qualification for special education. Additionally, without MTSS established effectively in schools, assessment becomes a primary focus of school leaders that complicates a school psychologist's ability to implement strategies and interventions effective for student mental health support. Stakeholders in schools that lacked appropriate levels of support, would argue pre-referral for students to be placed into special education. Participants showed awareness for poor student outcomes by arguing for student retention in the general education population. The role of a school psychologist to serve as a student advocate first begins with involvement in the wider school community. The agency felt by school psychologists relies on the establishment of MTSS which provides a shift towards preventive outcomes for students.

Despite varied experiences working in the field of school psychology, nearly all participants engaged in various forms of advocacy and reflexivity. This supports the research of Barnett (2012) who echoed that school psychologists use their positionalities to engage in student centered work when considering emotional disturbance. For example, when families did not have innate knowledge nor the capacity to challenge the school system, Mark would push back and challenge members of school teams against unnecessary special education placement, and encourage them to consider the overidentification of Black students. Christina uses her knowledge of the overidentification of Black students by qualifying students under OHI or developmental delay, in order to protect them from stigma. Again, the stigma of the label carries the perception that students with emotional disturbance require more restrictive program placements. Furthermore, she uses comprehensive assessments, specifically by way of emphasizing family voice in her evaluations to engage in advocacy. Harper's reflexivity emerged

through her experience working in a district with a high degree of Black families, which caused her to closely consider how she situated her unconscious biases favoring white normative culture, when she was practicing. Through her director position she is able to impart program and policy changes, enacting widespread conversation around disproportionality and cultural awareness. Additionally, she is able to center conversation around the impacts of internalizing disorders, and how widespread systems in her school may sustain anxiety. Kara utilized her Blackness as a way to engage with families and communicate directly and efficiently with Black students. Given that most participants had experience where the majority of the student population were CoC, they needed to engage in reflections on race and ethnicity. However as Black woman, Kara at first needed to reflect on how she engages in reflexivity in her practice. Her Blackness was a privilege to her in terms of understanding Black student experience, in a way that non-Black participants did not share. They had to learn this reflexivity, where for Kara it was natural for her. Kara also highlighted that white school psychologists in her district are also aware of the challenges of the label and share the responsibility of preventing overidentification. Sullivan et al. (2019) found that school psychologists do not show racialized bias when making eligibility decisions under ED, which is echoed by the experiences of participants in this study. In all, school psychologists are aware of the effects of the label and weary of the overidentification of poor students and CoC. They argue against special programs that sustain these contextual identities, and instead seek system restructuring that problematizes systems over students.

Limitations and Implications

I utilized an interpretivist paradigm to situate the conclusions drawn from participant experience. This locates the conclusions of this analysis to my data set. While this allowed me to

develop themes that were reflective of participant experience, it also limits the generalizability of this study. Additionally, my population of interviewees was small, and fairly homogenous in terms of proximity to white normative culture. Given how the perception of reflexivity shifted considering participant racial experience, a wider diversity of participants would create a more developed sense of how participants engage with their positionalities relative to student advocacy. Further, I was concerned with school psychology meaning making, and did not interview students labeled with an emotional disturbance. Given that I prioritized the voices of those holding positions of power, it is not equitable to generalize the conclusions of this study, as those experiencing marginalization did not have their voice recorded. More so, participants mostly made sense of reflexivity through a racialized and economic lens. Given the variety of multiplicities experienced by students, I did not directly explore gender, and how it relates to marginalization as a site of exclusion and invisibility. This is a limitation of my analysis, and future research should examine the interactions between multiple systems of oppression and school locale. In relation to MTSS and special education, participants identified a need for MTSS to more effectively address academic concerns in schools. Given the generally agreed upon reluctance to use ED as a qualifying eligibility category, future research should address assessment outcomes in relation to the overidentification of intellectual dis/abilities and school locale, given that the prevalence rates of this dis/abilities is significantly higher. It would also be helpful to analyze the experiences of school psychologists working in states that clearly operationally define the social maladjustment clause as conduct disorder, like Colorado, or those that remove the clause in total. This would be helpful to compare the experiences and system barriers that folks in these states experience comparatively to those that work in states that retain the clause. Understanding from the perspective of stakeholders how this has impacted student

social, emotional, and academic outcomes in schools, might provide insight on positive and negative functioning of students. Additionally, the connections I used to garner participants were from my personal life. While this means that I had an already established sense of rapport with some of the participants, a sense of objectivity cannot be established. Given my own subjective feelings towards participants, and intimate knowledge of their work, this may have shadowed my interpretations of the study. It would also be valuable to see how school psychologists working in states with different operational definitions of the social maladjustment clause conceptualize ED identification, and how they perceive the subsequent impacts of the definitions. While I examined how positionality and experience impacts school psychologist decision making regarding ED, it would be valuable for research to expand on how school psychologist demographics impacts reflexivity in practice.

Conclusion

I conducted interviews on five recently retired or practicing school psychologists to understand their experiences associated with the identification and qualification of students for emotional dis/abilities (ED) provided in the Individuals with Disabilities Education Act. In all, participants shared that the overidentification of students of color and poor students qualifying under ED, is compounded by stigma, school locale, interpretation of behaviors, and school specific demographics. Variability in the definitional interpretation of ED from state to state, in addition to guidance or a lack of guidance from stakeholders, conflation of ED and EBD by practitioners, the corresponding social maladjustment clause, and the degree at which multi-tiered systems of support are established in a school, leads to challenges identifying and providing support for not only ED students, but all students. While the intention of this research is not to provide an overview of EBPs for student academic and mental health support, nor to

pinpoint effective mental health interventions in school, conclusions may be drawn that in order to adequately address the stigma the ED label carries, ambiguity of the label, and the overidentification of CoC and poor students, it is necessary for schools to implement MTSS utilizing the expertise and skill of school psychologists (Algozzine, 2017; National Association of School Psychology, 2016).

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Appendix A

Interview Questions

- 1. To start things off, please state your name, school district, and state that you work in.*
- 2. How would you describe the student demographics of your current placement:*
- 3. What is your work experience within and related to the field of school psychology?*
- 4. What is your experience working with students identified or considered at risk for emotional disturbance?*
- 5. Can you think of a time when you were asked to evaluate a student when the school or family was seeking services within this eligibility category?*
- 6. How did you navigate that process?*
- 7. What assessment tools did you find helpful/useful when making that decision?*
- 8. How did you navigate the language within IDEA pertaining to the ED dis/ability category?*
- 9. Was there ever a time you had to differentiate between SM and EBD using the language of IDEA?*
- 10. What psychological measures do you use when making ED eligibility determinations?*
- 11. What professional or personal tools have the greatest impact on your decision making when making eligibility determinations for ED?*
- 12. How do you prioritize family and student voice in your decision?*
- 13. Can you describe a time when you were making eligibility decisions for EBD, that your racial/ethnic/SES/gender/cultural/disability status became visible to you as a professional?*
- 14. How do you consider race, disability, SES, gender, culture, etc when making eligibility*

decisions?

- 15. Can you think of a time when you have consulted the DSM when making a decision surrounding assessment and data collection for a student being referred to for evaluation for services under emotional disturbance?*
- 16. Can you think of a time when you disagreed with a school team's recommendations for referral under EBD?*
- 17. Can you think of a time when a family/ caregiver disagreed with a school team's recommendations for referral under EBD?*
- 18. Within your school school district, what are the current regulations surrounding EBD determination decisions?*
- 19. Does your school district provide a distinction surrounding the SM/ ED determination category?*
- 20. Have you ever worked for a district where there were clear measures for making EBD/SM decisions?*
- 21. In your professional experience, what students do you often see referred to for assessments in EBD?*
- 22. Over the course of your career, have you noticed a shift either towards or away from using the EBD eligibility category?*
- 23. "In my work I think about how my particular identities inform how I see the world. What identities do you hold?*