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Shades of Aggression: What Role Does Race Play In Educational Decision-Making?

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SHADES OF AGGRESSION: WHAT ROLE DOES RACE PLAY IN EDUCATIONAL DECISION-MAKING?

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ABSTRACT

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Ashley M. Oliver

Though there is an awareness of African American students being disproportionally overrepresented in special education, research is limited in the examination of the role of race on how school psychologists and special education decision-makers perceive and make educational decisions. The present study examined the perception of 547 practicing school psychologists and special education decision-makers who were randomly assigned to a video vignette (African American or White male child) displaying the same aggressive behavior in a classroom and were asked to report on the intensity of the aggressive behavior, view of the behavior as a problem, perception of academic functioning, utility of interventions, potential special education decision-making, as well as demographic variables. The results indicated participants who viewed the video with the African American child reported rating the behavior as .474 more of a problem, more likely perceive academic functioning to be below grade and would more likely follow up with interventions other than an observation (e.g., applied behavior analysis, behavior rating scale, etc.) compared to White, same-aged peers. Results also suggested participants of a different racial/ethnic makeup than the child in the video vignette more often rated the male child's academic functioning to be below grade level compared to those of the same racial/ethnic match. Limitations and implications for the practice of school psychology are discussed. Keywords: aggression in school, special education, disproportionality, school psychology

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TABLE OF CONTENTS

LIST OF TABLES

CHAPTER 1

Introduction

Aggression is a range of primarily interpersonal actions that are multifaceted in their etiology yet can be problematic concerning their consequences (Bandura 1973; Lochman et al., 2012). Within children and adults, aggression varies greatly in its form (physical versus relational) and function (reactive versus proactive) (Coyne et al., 2011). Most children display some form of aggressive behavior; however, only when the aggression is severe and frequent is it indicative of psychopathology (Lochman et al., 2012). Specifically, Sukhodolsky et al. (2016) indicated that the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) notes that anger/irritability is a primary symptom of oppositional defiant disorder (ODD) and aggressive behavior is frequently associated with conduct disorder (CD). As early as elementary school, African American boys are found to be labeled as aggressive and violent more often than White American students for similar behaviors, which in turn leads to harsher disciplinary consequences (Eitle & Eitle, 2004; Bradshaw et al., 2010; Coyne et al., 2011). Furthermore, African American students who display aggression, especially boys, are overrepresented in referrals to special education, suspensions, and office referrals in elementary and middle school settings (Skiba et al., 2008; Bradshaw et al., 2010).

In addition to the disproportionate school disciplinary practices as a function of race, African American students, especially boys, perceived as aggressive are disproportionately referred to and placed in the high-incidence, more subjective stigmatizing special education categories of emotional disturbance and intellectual disability (Zhang & Katsiyannis, 2002; Blanchett, 2006). Similarly, Planty et al. (2009)

found that African American students in elementary and middle school settings are referred for special education services based on these subjective behavioral issues that lead to more restrictive placements at significantly higher rates than their White peers. Given the significant racial and gender disparities in special education, there are clear, fundamental problems that exist in the practices that contribute to the referral, identification, and placement of students in special education (Donovan and Cross, 2002). School psychologists could help change the trajectory of this disproportionality with practices that encourage and lead to appropriate, nonbiased special education decision-making (Forman et al., 2013).

The primary goal of this research is to explore the role of race in how school psychologists and special education decision-makers (i.e., directors of special education and district committee on special education chairpersons) perceive the intensity and severity of physically aggressive behavior in school-aged children (African American versus White American boys). In addition, this research aimed to identify specific factors of school psychologists' judgment that might contribute to the further disproportionality of African American students in special education.

CHAPTER 2

Literature Review

Disproportionality in Special Education

Previously named the Education for All Handicapped Children Act, the Individuals with Disabilities Education Act (IDEA) is a law that ensures and promotes a free appropriate public education to children with disabilities (IDEA, 2004). IDEA (2004) mandates that for a student to be placed in special education following an eligibility determination process, the student must have access to nondiscriminatory identification and assessment practices to receive special education services. Furthermore, the placement of a student in special education should not occur as a result of their racial/ethnic difference or exposure to environmental disadvantage (Terry & Irving, 2010). In December 2016, the U.S. Department of Education amended the IDEA legislation to establish a standard in determining if significant disproportionality based on race or ethnicity exists and mandating that districts address and remedy the under-identification and over-identification of children (Office of Special Education and Rehabilitative Services, Department of Education, 2016). Since the inception of the 2004 revision of IDEA, congress identified disproportionality in special education as one of three focal priorities in the revised act (Office of Special Education Programs, 2007). Specifically, IDEA outlines explicit provisions concerning disproportionate racial/ethnic groups in specified disability categories, stating that a federally funded institution must maintain and assess data regarding minority groups that are disproportionately represented in special education (Office of Special Education Programs, 2007).

Within special education, disproportionality refers to the over- or underrepresentation over a particular group in an educational category or setting

compared to the group's proportion in the overall population, where an individual's membership in a particular group impacts the probability of being classified as requiring special education services (Donovan & Cross, 2002; Zhang et al., 2014). Disproportionality can be problematic when disparities result from misidentification and, therefore, inappropriate receipt of special education services. Disproportionality concerning the overrepresentation of African American children in special education services in United States schools was first addressed in research by Lloyd Dunn (1968), which suggested that 60-80% of children receiving special education services were from low socioeconomic backgrounds and underrepresented minority groups such as African Americans, Hispanics, and Native Americans. Following Dunn's research, subsequent empirical findings have consistently supported that African American students, especially boys, are overrepresented in special education and simultaneously underrepresented in programs for the gifted and talented (Donovan & Cross, 2002; Skiba et al., 2008; Artiles et al., 2010; Zhang et al., 2014). For African American students, the impact of being inappropriately placed in a special education classification puts them at an elevated risk than White peers for being in restrictive educational settings, displaying fewer academic achievements, and remaining in special education for a more prolonged period (Sullivan & Proctor, 2016; U.S. Department of Education, 2016).

Data from the 38th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act (2016) revealed that African American students ages 6 to 21 possess the highest risk ratio of being placed in a special education program compared to all other racial or ethnic groups combined for every disability category except autism, deaf-blindness, and orthopedic impairments. Additionally,

African American students aged 6 to 21 were at least two times more likely to be placed in a special education program under the Individuals with Disabilities Education Act (IDEA) than all other ethnic groups combined (U.S. Department of Education, 2016). Statistics from the U.S. Department of Education reveal that African Americans are most over-identified in the special education classification of emotional disturbance and intellectual disability (U.S. Department of Education, 2016). Research over the past two decades has found that racial minority students are overrepresented in more high-incidence (i.e., emotional disturbance, intellectual disability, and speech and language impairments), behaviorally subjective disability categories and can furthermore be disproportionately subject to exclusionary disciplinary practices (Donovan & Cross, 2002; Losen, 2014). The disability categories to which disproportionality of African American students, especially boys, is most prevalent are also the most subjective, which makes them subject to error and difficult to differentiate whether findings were interpreted relative to actual disability or bias (Sullivan & Proctor, 2016).

Disproportionality in special education has multiple contributing factors, and therefore, fully understanding the specific mechanisms underpinning disproportionality is complex. The National Research Council Report by Donovan and Cross (2002) addressed disproportionality in special education and found that while there is sufficient research to support bias in special education referrals, empirical evidence is lacking concerning bias in the identification process, which continues to be true today. The findings by Donovan and Cross (2002) emphasized the existence of numerous false positives and false negatives in the identification process but were unable to empirically determine the cause within the finding. More recent research that has attempted to investigate the mechanisms driving disproportionality yield conflicting results. Sullivan and Artiles (2011) reviewed

the previous literature and attempted to analyze findings within a structurally theoretical framework. They concluded that minority populations, such as African Americans, are more likely exposed to economic, cultural, or environmental disadvantage, which makes them differentially susceptible to certain disabilities categories. At the same time, other researchers argued that racial disparities were the result of broader social inequities. As supported in a study by Scheiber (2016), assessments of cognitive ability and academic achievement in children should be unbiased, display construct validity, and use culturally appropriate test instruments. Although McDermott, Watkins, and Rhoad (2014) found that widely used assessments contained significant assessor bias. An additional contributing factor based in Critical Race Theory (CRT) (Crenshaw et al., 1995) postulates that there are structural factors that exist within the framework of institutions, such as schools that are inherently biased toward racial minorities, such as African American students, which may intentionally or unintentionally perpetuate disproportionality in special education while simultaneously reinforcing disadvantage (Zion & Blanchett, 2011; Sullivan & Artiles, 2011).

In addition to the disproportionality of African American students in special education, gender disparities in special education are also significant. School-aged boys make up about two-thirds of the U.S. special education student population (U.S. Department of Education, 2016). Specifically, boys are overrepresented in special education at a ratio of between 1.5–3.5 boys for every one girl (Sullivan & Bal, 2013), and are found to be placed in more restrictive settings than girl peers in special education (Stoutjesdijk, Scholte, & Swaab, 2012). A study by Bryan and colleagues (2012) found that boys are predominantly overrepresented in referrals for behavioral problems. Given

the growing awareness in disproportionality of African American boys in special education, inappropriate classifications and placement bias is a relevant and necessary problem to remedy.

Blanchett (2010) found that a higher percentage of African American students with a special education disability classification spent less than forty percent of their day in a general classroom and were more likely to attend a separate school facility for students with disabilities compared to students with disabilities of any other race/ethnicity. Taken together, these findings suggest that it is imperative to understand contextual factors and potential bias that may inform decision making in special education services.

Aggression in Children

Based on the Social Learning Theory of Aggression by Bandura (1973), aggression is defined as verbal or physical behaviors in an interpersonal context that are destructive to others or objects. Most children will display some form of aggressive behavior in childhood. However, the aggression becomes indicative of psychopathology if it is remarkably severe, frequent, and/or chronic (Lochman et al., 2012). A study by Olweus (1979) found consistencies and correlations in aggression over childhood, adolescence, and adulthood in males. This research has been supported in longitudinal studies demonstrating that aggression is highly stable over time, with some degree of variability in early adolescence and increased stability from early adolescence onward (Huesmann et al., 1984; Loeber & Hay, 1997; Piquero et al., 2012). Specifically, Petersen et al. (2015) measured aggression developmentally from childhood to adulthood and found that aggression decreases from early childhood (before age 5) to preadolescence

(ages 5–10), then increases somewhat during adolescence (ages 11–18), and then decreases again into adulthood (after age 18). Furthermore, Connor (2012) has identified aggression as a heterogeneous construct, and therefore definitions of aggression or aggressive behaviors can vary across contexts (i.e., within educational settings, mental health settings, etc.), as no single term can adequately define the diverse makeup of aggression. Lochman et al. (2012) found that children who display high levels of aggressive behavior are most often diagnosed with oppositional defiant disorder (ODD) or conduct disorder (CD), and their aggressive behavior can be comorbid with other disorders such as attention-deficit/hyperactivity disorder (ADHD) or posttraumatic stress disorder (PTSD). Due to the disruptive nature of aggression (i.e., classroom disruptions, anger outbursts, victimization of peers, etc.), aggressive children are frequently referred for mental health services than peers with other forms of psychopathology (Sukhodolsky et al., 2016; Lochman et al., 2012).

Aggressive behavior in school-aged children can vary significantly depending on gender differences. A meta-analysis by Card, Stucky, Sawalani, and Little (2008) found that male students are more likely to be physically aggressive than female students in preschool, elementary school, and middle school. Stereotypically, research has found that boys are more aggressive than girls; however, when aggression was identified using factors other than simply physical violence, research shows that girls are just as aggressive as boys (Coyne et al., 2011). As postulated by Crick (1997), boys may be more likely to be physically aggressive than girls due to how male children are socialized within culture and society to be “tough.”

Aggression and related behaviors in children are complex and possess an array of diverse etiologies and consequences (Conner, 2012). Aggressive behavior can be problematic in school settings because it is associated with lower levels of academic achievement and higher risk for placement in special education programs as early as first grade (Gottfredson, 2001; Ialongo, Poduska, Werthamer, & Kellam, 2001). Problematic behaviors, such as aggression, drive referrals for special education at a higher rate than academic concern, especially for African American boys as compared to other groups (Skiba et al., 2008; Bryan et al., 2012). The consequences for aggressive behaviors within school settings vary depending on race and gender and yield higher rates of exclusionary and punitive effects. Despite the absence of evidence that African American boys disproportionately display aggressive behaviors more than their White peers, several studies found that African American students, especially boys, in elementary and secondary school settings are more likely to receive office disciplinary referrals (Bradshaw et al., 2010; Planty et al., 2009; Skiba et al., 2011), to be suspended for problematic behavior (Sullivan, Klingbeil, & Van Norman, 2013), and to be referred to the school disciplinary office for subjective offenses (e.g., disrespect, aggression) compared to White same-aged peers (Bryan et al., 2012; Skiba et al., 2008).

Perceived Aggression in Schools as a Function of Race

The social perception of innocence is a central characteristic afforded to children, especially concerning the younger the child is (Giroux, 2000). However, the perception of innocence and may not be viewed equally among children across various racial/ethnic backgrounds by adults in society (Goff, Jackson, Leone, Lewis, Culotta, & DiTomasso, 2014). Specifically, African American boys as young as ten years of age might not be

viewed with the same lens of childhood innocence as their White American peers. Goff and colleagues (2014) found that African American boys in the United States are perceived as older and more culpable for their behaviors relative to same-aged peers of different races and these racial disparities were predicted by the implicit dehumanization of Blacks by undergraduate and police populations, as evidenced by dehumanizing associations for African Americans through the dehumanization implicit association test (IAT). McLoyd (1985) found that as early as preschool, teachers rated African American boys engaging in play as more aggressive and threatening than peers. A study by Neal et al. (2003) found that middle school teachers perceived students who displayed movement styles related to African American culture as highly aggressive and more likely to need special education services than students with standard movement styles. Bradshaw et al. (2010) found that aggressive behavior in elementary school students predicted negative life outcomes and early involvement with the juvenile justice system at higher rates for African American children compared with other racial/ethnic groups. Similarly, Howard (2014) found that African American boys perceived and labeled as aggressive in elementary school would often receive more negative responses by teachers, harsher disciplinary practices, social isolation, and more criticism compared to same-aged peers. Therefore, equal levels of aggression among school-aged children may result in worse outcomes for African American students.

A history of psychological research has found that African Americans, compared with White Americans, are often subjected to bias and automatic negative stereotypes (Devine, 1989). Wilson, Hugenberg, and Rule (2017) conducted a series of studies involving about 1000 participants from around the United States and demonstrated that

people have a bias to perceive young African American boys (as young as 16 years old) as bigger and more physically threatening (more capable of harm) than young White boys. Also, their research found that African Americans with darker skin complexions and more stereotypically Black facial features received the most bias in how they were perceived (Wilson, Hugenberg & Rule, 2017). These findings are consistent with previous research that has found that African American boys are more likely than White boys to be seen as threatening or aggressive, less innocent, and more capable of causing harm in a hypothetical situation (Duncan, 1976; Sagar & Schofield, 1980). Wilson, Hugenberg, and Rule (2017) demonstrated that there was systematic bias in the participant's perceptions of the physical formidability of African American boys. Specifically, White and other Non-Black perceivers' overestimated African American boys harm capability, which mediated the link between size perception and the justification of using forceful measures to lessen the threat. Furthermore, African American perceivers likewise overestimated African American boys as threatening. However, the degree of the perceived threat was significantly lower compared to other White and Non-Black participants. Within the context of a school setting, such perceptions may have alarming consequences for adults to perceive and behave toward African American students.

School-aged children who display aggressive behaviors within school are referred for mental health services at higher rates than peers who are referred for other forms of psychopathology (Lochman et al., 2012). Aggressive behaviors within the school environment can be problematic, especially if the behaviors are subjectively viewed as disruptive or concerning to others. Gottlieb and colleagues (1991) looked at parent and

teacher referrals for psychoeducational evaluations in elementary and middle schools. Specifically, they found that teachers referred African American students for exclusively behavioral reasons at a rate of five times more than the students' parents, whereas teachers referred White students at a rate equal to the students' parents. Furthermore, the authors identified significant racial disparities in the classification of African American students in special educations in that the Black students were more than three times as likely to be classified as emotionally disturbed than White or Hispanic peers (Gottlieb et al., 1991).

Perceived Aggression, Special Education, and the Role of the School Psychologist

As outlined by Gold & Richards (2012), the process to determine a student's eligibility and then being classified with a disability category within special education can be divided into the following steps: 1) referral, 2) assessment, 3) eligibility determination, and 4) placement. Eklund and colleagues (2009) identified that referral decisions made by the teacher regarding behavioral and emotional problems frequently are not consistent with referrals that are made via standardized ratings of the students' behaviors and emotions. Teacher referrals for special education were correlated with the level of disruption in the classroom, therefore less externalizing behaviors in the classroom are perceived as the absence of a disability (Raines, Dever, Kamphaus, & Roach, 2012). Given that the referral process that initiates special education classification and placement is idiosyncratic and may be inaccurate, it may be wise to focus on the eligibility determination and placement process by the committee for special education (CSE) team of specialist who may be more qualified to make determinations (e.g., school psychologist, occupational therapist, speech therapist, etc.). The special education

eligibility determination should be based on the assessment and observable evidence presented as well as the input from members of the CSE (Gold & Richards, 2012). If the CSE team is uninformed about possible cultural differences of African-American students and perceived bias they may carry, the team may inappropriately place a student perceived to have a behavioral disorder in a restrictive classroom environment, which impacts the overall educational trajectory of the said student (Gold & Richards, 2012).

School psychologists are educational professionals who assess and determine the appropriateness of special education placements and classifications, along with the CSE team. School psychologists spend approximately half of their time focused on special education decision-making (Castillo et al., 2012). The National Association of School Psychologists (NASP) advocates for the rights of all students to receive a free, equitable, and appropriate public education. NASP endorses inclusive school environments where students are not disproportionately placed in inappropriate restrictive educational settings (NASP, 2013). NASP endorses the implementation of inclusive schools where specific groups of children are not disproportionately represented in restrictive educational settings (NASP, 2013). School psychologists' practices and decision-making are integral to preventing further minority disproportionality in special education. When a referral for special education services is proposed, it is essential that school psychologists contribute to appropriate and valid educational placements. The fundamental issue of disproportionality is not merely the demographic distribution of students across the various disability classifications, but rather the inherent problem lies in the practices that contribute to the referral, identification, and placement of students (Donovan and Cross, 2002). School psychologists can potentially help change the trajectory of

disproportionality in special education with practices that encourage and lead to appropriate, nonbiased decision-making.

Given the current diversity that exists in kindergarten to 12th grade school settings today, understanding the domains in which educational inequities and disparities exist is essential to implementing practices and institutional standards that are justly appropriate for every student (Rogers & O'Bryon, 2008; Skiba et al., 2011; Speight & Vera, 2009). School psychologists are in a unique position to support equity in education by observing and challenging institutional structures, policies, and practices rooted in bias (Speight & Vera, 2009). In accordance with the *School Psychology: A Blueprint for Training and Practice III* by Ysseldyke and colleagues (2006), school psychologists seek to work to improve issues of diversity and equity at all levels within the school setting. Similarly, the Model for Comprehensive and Integrated School Psychological Services (NASP, 2010b) explains that school psychologists should use evidence-based strategies to enhance service delivery to diverse populations, such as African American students. For instance, Mustian (2010) found that the use of interventions empirically based on the function of the behavior problem, such as a Functional Behavioral Assessment (FBA), may help to decrease the overrepresentation of African American male students in special education. The school psychology literature is limited in critically examining how the practice of school psychology may contribute to educational inequities for disenfranchised populations, especially African American boys (Speight & Vera, 2009). Noltemeyer, Proctor, and Dempsey (2013) conducted an analysis of the research in school psychology and found that more research focused on race/ethnicity disproportionality is needed that includes school psychologists as participants and

identifies their view on African American overrepresentation in subjective special education categories. Though challenging, school psychologists must examine themselves and identify if they do consciously or unconsciously engage in practices that have historically maintained disparate outcomes for minority students, especially African Americans (Rogers & O'Bryon, 2008; Speight & Vera, 2009; Noltemeyer, Proctor & Dempsey, 2013).

CHAPTER 3

Hypotheses

The purpose of this study is to extend the existing literature by empirically examining the role of race on how school psychologists and special education decision-makers (i.e., directors of special education and district committee on special education chairpersons) perceive and make decisions concerning aggressive behavior in male, school-aged children. Specifically, differences in how school psychologists and special education decision-makers perceive physically aggressive behaviors in African American versus White American boys. First, this study explores how school psychologists and special education decision-makers perceive physically aggressive behaviors in school-aged children of different races/ethnicities, specifically in African American versus White American boys. Second, the present study attempts to identify factors, which may inform their judgment about perceived problematic behavior and may contribute to the further disproportionality of African American students in special education. Empirical evidence, that aids in the understanding of how perceptions of aggression inform educational classifications may be helpful in identifying and preventing discrepancies in ways to mediate with students who exhibit aggressive behaviors.

The present study was designed to test three central hypotheses: Similar to Bradshaw et al. (2010) findings of a significant main effect and bias against African American boys in elementary school, concerning higher rates of office disciplinary referrals compared to White peers, it is hypothesized that:

1. School psychologists and special education decision-makers would be more likely to rate the intensity of the aggressive behavior and view the aggressive behavior as

more of a problem when viewing an African American male child compared to the same aged, White American male peer.

2. School psychologists and special education decision-makers would be more likely to report that the viewed level of physically aggressive behavior warrants an intervention to manage aggressive behavior in the African American male child compared to the White American male child.

3. Based on previous research on client-therapist ethnic match, it is hypothesized that school psychologists and special education decision-makers of same racial/ethnic makeup to the child randomly assigned within the vignette would rate the overall aggressive behavior of the child as less severe compared to school psychologists and special education decision-makers with a different racial/ethnic makeup to the male child in the vignette (Maramba & Hall, 2002; Sue, Fujino, Hu, Takeuchi, & Zane, 1991).

CHAPTER 4

Methods

Participants

The sample was 547 practicing school psychologists and special education decision-makers (i.e., directors of special education and district committee on special education chairpersons) working in a school setting in the United States. Data was collected from December 3, 2019 through January 24, 2020. Of the 1500 participants recruited, the survey was conducted with the use of Qualtrics, where 796 participants started the online survey. From the 796 participants, 547 of them completed the survey questions and were used in subsequent analyses, as a total of 249 participants were excluded from the data set because they did not complete any of the survey questions.

Study participants were 547 practicing school psychologists and special education decision-makers (i.e., directors of special education and district committee on special education chairpersons) working in a school setting in the United States. 36.6% of participants reported being between 31 - 40 years of age (n = 200), 26.5% between 41 - 50 years of age (n = 145), 17.9% between 20 - 30 years of age (n = 98), 14.2% between 51 - 60 years of age (n = 78), 4.6% between 61 - 70 years of age (n = 25), and 0.2% 71 years of age and above (n = 1). 84.6% of participants identified as female (n = 463) and 14.8% (n = 81) identified as male. The participants in the study included 453 who identify as White (82.8%), 41 who identify as Black/African American (7.5%), 33 who identify as Hispanic/Latinx (6%), 8 who identify as Mixed Race (1.5%), 6 who identify as Other (1.1%), 5 who identify as Asian (0.9%), and 1 who identifies as Pacific Islander (0.2%). Most participants reported working in an elementary (kindergarten through 5th

grade) school setting (n = 170, 31.1%). The majority of participants reported a frequency of exposure to physically aggressive behavior in their professional work setting on a weekly basis (n = 181, 33.1%) or monthly basis (n = 113, 20.6%). A total of 249 participants were excluded from the data set because they did not complete any of the survey questions. Table one further details the participant demographics and provides a breakdown of this information.

Table 1.

Participant Demographics

	School Psychologists and Special Education Decision-Makers (*N*=547)	
Characteristics	*N*	%
Age		
20 - 30 years of age	98	17.9%
31 - 40 years of age	200	36.6%
41 - 50 years of age	145	26.5%
51 - 60 years of age	78	14.2%
61 - 70 years of age	25	4.6%
71 years of age and above	1	0.2%
Gender		
Female	463	84.6%
Gender Variant/Non-conforming	2	0.4%
Male	81	14.8%
Transgender Male	1	0.2%
Gender of Partner		
Female	82	14.9%
Gender Variant/Non-Conforming	2	0.4%
Male	391	71.5%
Single	72	13.2%
Ethnicity		
Asian	5	0.9%
Black/African American	41	7.5%
Hispanic/Latinx	33	6%
Mixed Race	8	1.5%
Other	6	1.1%
Pacific Islander	1	0.2%
White	453	82.8%
Marital Status		
Divorced	27	4.9%
Married/Cohabitating	421	77%
Separated	5	0.9%
Single	93	17%
Widowed	1	0.2%
Children		
No	176	32.2%
Yes	371	67.8%
Work Experience		
0 to 5 years	158	28.9%
5.1 to 10 years	128	23.4%
10.1 to 15 years	90	16.5%
15.1 to 20 years	60	10.9%

Over 20 years	111	20.3%
Work Population		
Preschool (P)	9	1.6%
Elementary school setting (K - 5th grade) (E)	170	31.1%
Middle school setting (6th – 8th grade) (M)	57	10.4%
High school setting (9th – 12th grade) (HS)	81	14.8%
College-aged and beyond (C)	4	0.7%
P & E	17	3.1%
P & E &HS	4	0.7%
P & E & M	17	3.108
P & E & M & HS	101	18.464
E & HS	12	2.2%
E & HS & C	1	0.1%
E & M	28	5.1%
E & M & HS	33	6%
E & M & HS & C	2	2.2%
M & C	1	0.1%
M & HS	9	1.6%
HS & C	1	0.1%
Frequency of Exposure to Aggressive Behavior at Work		
Daily	87	15.9%
Every few months	78	14.3%
Monthly	113	20.6%
Never	8	1.5%
Weekly	181	33.1%
2 to 3 times per year	54	9.9%
Yearly	26	4.7%

Procedures

Participants were recruited electronically through announcements of the study and a URL link to participate via direct email and various social networking websites such as Facebook. Appendix A has a complete list of Facebook pages used in this study. Recruitment also involved the dissemination of the recruitment flyer and URL link via email and word of mouth correspondence to various school psychology professional organizations. Access was granted to recruit via Facebook from the following school psychology state associations: California, Connecticut, Florida, Hawaii, Indiana, Maine, Maryland, Nevada, New Jersey, New York, North Carolina, North Dakota, Ohio, Pennsylvania, Rhode Island, Vermont, Virginia, Washington, and West Virginia. The researcher posted recruitment announcements to various professional and public groups of school psychologists and/or potential members of committees on special education via social media school (i.e., Facebook).

Measures

Practicing school psychologists and special educations decision-makers who consented to participate in the study completed a web-based survey via Qualtrics online survey platform. Participants accessed the survey via a hyperlink that directed them to the study's consent form (Appendix B). The consent form informed the participants of the purpose of the research study, participation requirements, the benefits of participation in the study, as well as the voluntary and confidential nature of participation. Participants were notified that the study pertained to further understanding decision-making in special education classifications of children who displays physical aggression. Upon review of the consent form, participants first were instructed to read a short description and watch one of two randomly assigned videos. Two 14-year old male child actors (one African

American and one White) were provided with an identical script displaying physical aggression to replicate across individual videos and recorded a 25-second video vignette. Each actor represented a separate condition to which participants were randomly assigned. To ensure comparability in the child actors, each actor was of similar height and weight and dressed in similar clothing and shoes (i.e., a plain black short sleeve shirt, blue jeans, and black sneakers). To ensure consistency of detail in the two versions of the videos, the videos were recorded in the same location and each actor followed a consistent script concerning the frequency and intensity of the behaviors they displayed. The only modification between the videos was the race of the two child actors portraying the behaviors. To simulate a school setting, each video vignette was filmed in an actual high school classroom with the child actors initially seated at a desk. Appendix C further details the video vignette description and the video script.

Participant Video Vignette Questionnaire. Following the viewing of the randomly assigned video, a brief 8-item questionnaire was administered (Appendix D). Participants were asked to rate their perception of the intensity of the aggressive behavior (adapted from the Visual Analogue Scale on the Staff Observation Aggression Scale – Revised (SOAS-R) (Nijman et al. 1999), view of the aggression as a problem, predictions of academic functioning, follow-up interventions, recommendations for potential classroom or school placement changes, likelihood to refer for an assessment for special education, and perception of an educational classification as defined by the Individuals with Disabilities Education Act (IDEA).

Demographics Questionnaire. A brief questionnaire of 9 items was administered (Appendix E). Basic demographic information was gathered from participants, including

age, gender, ethnicity, marital status, children, number of years as working professionals (i.e., school psychologist, director of special education and district committee on special education chairperson), current educational setting, frequency of exposure to physically aggressive behavior in their educational setting, and degree of referrals/involvement in classifying children. Upon completion of the survey, participants had the opportunity to provide their email address to be entered into a lottery in order to receive a $100 gift certificate on Amazon.com. Participants' identifying information was not linked to their survey responses.

Statistical Analysis

First, frequencies for the demographic questions were calculated. For the first hypothesis, between-group comparisons were made using independent-samples t-tests. For the second hypothesis, independent-samples t-tests and chi-square tests for association were conducted. Specifically, the t-test was used to determine if there were differences in the rating of the likelihood to refer the child for an assessment for special education between participants who viewed the video vignette of the African American boy versus the White American boy. Also, chi-square analyses were run to assess the relationships between the video vignette groups and perceived academic functioning, follow up interventions, recommendations for a more intensive school placement, whether the behavior warranted an intervention and the belief that the child has an educational classification as defined by the Individuals with Disabilities Education Act (IDEA). For the third hypothesis, a dummy variable was created to use logic statements to match the ethnicity of participants to the same racial/ethnic makeup of the child actor randomly assigned within the video vignette. Participants who did not identify as either

African American or White were excluded from the analysis. Between-group comparisons were made using independent-samples t-tests and chi-square analyses.

CHAPTER 5

Results

Ratings of Aggressive Behavior by Vignette

To test the first hypothesis, independent samples t-tests were run. These analyses were conducted to determine if there were differences in the rating of the intensity of the aggressive behavior, and the view of the aggressive behavior was a problem between participants who viewed the video vignette of the African American versus White male child. First, an independent-samples t-test was used to determine if a difference exists between the two groups (i.e., the group that viewed the video vignette of the African American boy and the group that viewed the White boy) and ratings of the intensity of the aggressive behavior shown.

With the video shown to the participant as the grouping variable and rating of intensity of the aggressive behavior displayed by the child as the dependent variable, there was no statistically significant difference between the groups, M = -.234, 95% CI [-.517, 0.48], $t(544) = -1.632$, $p = .103$. Thus, the ethnicity of the male child in the video vignette did not make a statistically significant impact on the rating of the perceived intensity of the aggressive behavior displayed by the boy in the video. Therefore, there was no support for the hypothesis that school psychologists and special education decision-makers perceive the intensity of aggression differently in African American male children compared to same-aged, White male peers.

Based on an independent samples t-test with the video shown to the participants as the grouping variable and the rating to which the aggressive behavior displayed by the child is viewed as a problem as the dependent variable. There was a statistically

significant difference in the rating in the view of the behavior as a problem between the groups (M = -.474, 95% CI [-.770, -.178]; $t(539)$ = -3.148, p = .002). On average, the participants who viewed the video of the African American male child (M = 4.978, SD = 1.755) rated the view of the problem as .474 more than participants who viewed the video of the White male child (M = 4.504, SD = 1.748) on a scale of 1(not a problem at all) to 10 (extremely severe). However, the difference of .474 was a small effect (scale range: 0 to 10; d = -.271) at a statistically significant level (p = .002) (Cumming & Calin-Jageman, 2019).

Ratings of the intensity of the aggressive behavior and ratings of the degree to which the aggressive behavior displayed by the child is viewed as a problem for each group of participants revealed homogeneity of variances, but not normal distribution, as assessed by Shapiro-Wilk's test ($p < .05$). Although scores were not normally distributed as assessed by Shapiro-Wilk's test ($p < .05$), the variables' skew and kurtosis were analyzed as part of assumptions testing, and no variables exhibited skew and kurtosis higher than the absolute value of 2, indicating an acceptable range for normal distribution (Cooper & Schindler, 2014; West et al., 1995). Intensity scores were normally distributed for the group with the video vignette of the African American male child with skewness of 0.303 (SE = 0.147) and kurtosis of -0.673 (SE = 0.294) and for the group with the video vignette of the White male child with skewness of 0.440 (SE = 0.147) and kurtosis of -0.453 (SE = 0.294). The variables are being treated as a ratio rather than ordinal scales. By only labeling the endpoints, the sliding scales have multiple points for participants to choose (i.e., 10 points), which provides granularity of data, and there is no forced absolute difference in the mid values.

Based on the results described above, there was no evidence to support that school psychologists and special education decision-makers perceive the intensity of aggression differently in African American male children compared to same-aged, White male peers. However, on average, school psychologists and special education decision-makers who viewed the video with the African American child reported rating the view of the problem as .474 more than those who viewed the video of the White child on a scale 1 to 10. These results suggest that race/ethnicity does have a small effect size on how school psychologists and special education decision-makers view aggressive behavior as a problem in African American male children compared to same-aged, White male peers. Therefore, the hypothesis was partially confirmed. Tables two and three present these analyses.

Table 2.

Independent samples t-test results comparing the African American and White video vignettes

		Levene's Test for Equality of Variances		t-test for Equality of Means						
								95% Confidence Interval of the Difference		
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper	Cohen's *d*
Intensity of aggressive behavior	Equal variances assumed	.118	.731	-1.632	545	.103	-.234	.144	-.517	.048	
	Equal variances not assumed			-1.632	544	.103	-.234	.144	-.517	.048	
View of behavior as a problem	Equal variances assumed	.285	.594	-3.148	544	.002	-.474	.151	-.770	-.178	-.271
	Equal variances not assumed			-3.148	544	.002	-.474	.151	-.770	-.178	

Table 3.

Descriptive statistics of ratings of intensity and the view of the behavior as a problem

	Intensity of aggressive behavior		View of behavior as a problem	
	White child	African American child	White child	African American child
Valid	273	274	273	274
Missing	0	0	0	0
Mean	3.681	3.916	4.504	4.978
Std. Error of Mean	0.100	0.103	0.106	0.107
Std. Deviation	1.653	1.703	1.748	1.755
Variance	2.733	2.901	3.054	3.081
Skewness	0.440	0.303	0.282	0.013
Std. Error of Skewness	0.147	0.147	0.148	0.148
Kurtosis	-0.453	-0.673	-0.970	-0.974
Std. Error of Kurtosis	0.294	0.294	0.295	0.295
Shapiro-Wilk	0.941	0.949	0.930	0.944
P-value of Shapiro-Wilk	< .001	< .001	< .001	< .001
Minimum	1.000	1.000	2.000	2.000
Maximum	9.000	8.000	9.000	9.000

Video Vignette Shown and Interventions

The second hypothesis was tested using an independent samples t-test and chi-square tests for homogeneity. These analyses were conducted to determine if a difference exists between school psychologists and special education decision-makers reporting on potential interventions to manage aggressive behavior based on the race of the child (i.e., African American male child compared to a White American male child). Difference scores were created using an independent samples t-test to compare group differences between participants who viewed the video vignette of the African American versus White male child and their likelihood to refer the child for an assessment for special education. A Welch t-test was used due to the assumption of homogeneity of variances being violated, as assessed by Levene's test for equality of variances (p = .004). Participants who viewed the video vignette of the African American male child (M = 2.176, SD = 1.097) reported a higher likelihood to refer the child for an assessment for special education than those who viewed the video of the White male child (M = 1.926, SD = 0.918), a statistically significant difference, M = -.249, 95% CI [-.420, -.079], $t(543) = -2.877$, p = .004. The ratings for referral for special education for each video vignette condition showed a deviation from normality, as assessed by Shapiro-Wilk's test ($p > .05$). Ratings for the likelihood for referral for special education were distributed for the group with the video vignette of the African American male child with skewness of 0.840 (SE = 0.147) and kurtosis of 0.212 (SE = 0.294) and for the group with the video vignette of the White male child with skewness of 0.809 (SE = 0.148) and kurtosis of -0.453 (SE = 0.294), indicating an acceptable range for a normal distribution

given skew and kurtosis was less than the absolute value of 2 (Cooper & Schindler, 2014; West et al., 1995). Tables four and five present the results of the t-test.

Five hundred and forty-seven practicing school psychologists and special education decision-makers were randomly assigned to either the video vignette group with the White male child (n = 273) or the group with the African American male child (n = 274). Based on a chi-square analysis between the video vignette shown to the participant and predictions of the child's level of academic functioning, there was a statistically significant difference in academic functioning based on the video shown to participant, χ^2 (2, N = 547) = 10.477, p = .005. Of the participants who viewed the White male child video, 209 (76.6.%) perceived academic functioning to be below grade level, 11 (4%) at above grade level, and 53 (19.4%) at grade level. In comparison, of the participants who viewed the African American male child video, 237 (86.5%) perceived academic functioning to be below grade level, 3 (1.1%) at above grade level, and 34 (12.4%) at grade level. Though there was a statistically significant difference, Goodman and Kruskal's λ was .072, showing the actual strength of the difference is weak (λ = .072) (Agresti, 2018). Concerning steps to follow up on the child's behavior, there is a statistically significant difference in the steps to follow up on the child's behavior and the video vignette shown to the participant χ^2 (4, N = 547) = 10.431, p = .034. In addition, though there was a statistically significant difference, Goodman and Kruskal's λ was .053, showing the actual strength of the difference is weak (Agresti, 2018).

There was no significant difference based on the chi-square analyses between a recommendation for a more intensive school placement and the video shown to the participant, the rating of the behavior warranting an intervention and the video shown to

the participant, and the belief that the child has an educational classification as defined by the Individuals with Disabilities Education Act (IDEA) and the video shown to the participant ($p > .05$). Table six presents the results of the chi-square analyses.

This data suggests that practicing school psychologists and special education decision-makers perceive the African American male child to be below grade level on academic functioning and would more likely follow up with interventions other than an observation (e.g., applied behavior analysis, behavior rating scale, etc.) compared to White, same-aged peers. After viewing a 25-second video vignette, 86.5% of participants perceived the African American child's academic functioning to be more likely to be below average, compared to only 76.6.% of participants who viewed the vignette of the White child. Although the significant differences found between perceived academic functioning and the follow-up on interventions based on the video vignette shown to participants yielded a weak difference, the hypothesis is accepted.

Table 4.

Independent samples t-test results comparing the video vignette shown with likelihood to refer to special education

	t	df	p	Cohen's d
Likelihood to refer for special education	-2.877	529.277	0.004	-0.246

Note. Welch's t-test.

Table 5.

Descriptive statistics of ratings of likelihood to refer to special education

	Likelihood to refer for special education	
	White child	African American child
Valid	273	274
Missing	0	0
Mean	1.926	2.176
Std. Error of Mean	0.056	0.066
Std. Deviation	0.918	1.097
Variance	0.843	1.204
Skewness	0.809	0.840
Std. Error of Skewness	0.148	0.147
Kurtosis	0.256	0.212
Std. Error of Kurtosis	0.294	0.294
Shapiro-Wilk	0.830	0.851
P-value of Shapiro-Wilk	< .001	< .001
Minimum	1.000	1.000
Maximum	5.000	5.000

Table 6.

Chi-square comparisons for overall recommendations for African American versus White male child

	N	Pearson Chi-Square value χ^2	df	Asymptotic Significance (2-sided)	Fisher's Exact Test Exact Sig. (2-sided)	Fisher's Exact Test Exact Sig. (1-sided)	Nominal by Nominal Lambda λ
What steps would you take to follow up on the child's behavior?	547	10.431	4	.034*			.053
What are your predictions of the child's level of academic functioning?	547	10.477	2	.005*			.072
Would you recommend a more intensive school placement?	547	.455	1	.500	.582	.296	.012
Does the behavior warrant an intervention?	547	.615	1	.433	.446	.256	.017
Do you believe the child has an educational classification as defined by the Individuals with Disabilities Education Act (IDEA)?	547	.615	2	.433			.031

Note. *= $p < .05$

Ethnicity Match of The Participant to Character in Video Vignette

The third hypothesis was tested using an independent samples t-test and chi-square test for homogeneity. These analyses were used to determine if a difference exists between school psychologists and special education decision-makers reporting given the racial/ethnic match to the child randomly assigned within the video vignette (i.e., African American male child compared to a White American male child). Participants who did not identify as African American or White were excluded from the analyses.

Based on an independent samples t-test with race/ethnicity match as the grouping variable, there was a statistically significant difference in the rating of the view of the behavior as a problem (M = -.352, 95% CI [-.664, -.041]; $t(487) = 2.222$, $p = .027$). On average, the participants of same racial/ethnic makeup to the child randomly assigned within the video vignette tended to rate the view of the problem behavior as .352 less than the participants of different racial/ethnic makeup to the child randomly assigned on a scale of 1(not a problem at all) to 10 (extremely severe). There was no statistically significant difference between the race/ethnicity match as the grouping variable concerning rating the intensity of the aggressive behavior and the likelihood to refer the child for special education ($p > .05$). Table seven presents the results of the independent samples t-tests.

Chi-square analyses comparing differences between the school psychologists and special education decision-makers racial/ethnic match to the child randomly assigned within the video vignette to overall intervention recommendations, there was a statistically significant difference in the rating of perceived academic functioning, χ^2 (2, $N = 494$) = 12.260, $p = .002$. Of the participants who identified as a racial/ethnic match to

the male child in the video, 189 (77.1.%) perceived academic functioning to be below grade level, 12 (4.9%) at above grade level, and 44 (18%) at grade level. In comparison, of the participants who did not identify as a racial/ethnic match to the male child in the video, 218 (87.6%) perceived academic functioning to be below grade level, 2 (.8%) at above grade level, and 29 (11.6%) at grade level. Though there was a statistically significant difference, Goodman and Kruskal's λ was .075, showing the actual strength of the difference is weak (Agresti, 2018).

There was no significant difference based on the chi-square analyses between a recommendation for a more intensive school placement and the racial/ethnic match to the child assigned in the video vignette, the steps to follow up on the child's behavior and the racial/ethnic match to the child assigned in the video vignette, the rating of the behavior warranting an intervention and the racial/ethnic match to the child assigned in the video vignette, and the belief that the child has an educational classification as defined by the Individuals with Disabilities Education Act (IDEA) and the racial/ethnic match to the child assigned in the video vignette ($p > .05$). Table eight presents the results of the chi-square analyses.

Based on the results described above, practicing school psychologists and special education decision-makers who identified as the same racial/ethnic match to the male child in the video vignette rated the view of the aggressive behavior of the child as slightly less of a problem compared to participants of a different racial/ethnic makeup to the child. Additionally after initially viewing a 25-second video, practicing school psychologists and special education decision-makers who identified as the same racial/ethnic match to the male child in the video vignette more often perceived the

academic functioning of the child to be at or above grade level compared to those of a different racial/ethnic makeup to the child. Practicing school psychologists and special education decision-makers of a different racial/ethnic makeup than the child in the video vignette more often rated the male child's academic functioning to be below grade level compared to those of the same racial/ethnic match. Although significant differences were found, there were no significant differences in ratings of the severity of the aggressive behavior; therefore, the hypothesis is rejected.

Table 7.

Independent samples t-test results comparing race/ethnicity match to the video vignette shown with intensity of aggressive behavior, view of the behavior as a problem, and the likelihood to refer to special education

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Intensity of aggressive behavior	Equal variances assumed	.129	.720	-1.341	492	.180	-.201	.150	-.497	.094
	Equal variances not assumed			-1.341	491.996	.180	-.201	.150	-.496	.094
View of behavior as a problem	Equal variances assumed	.143	.706	-2.222	487	.027	-.352	.159	-.664	-.041
	Equal variances not assumed			-2.222	486.901	.027	-.352	.159	-.664	-.041
Likelihood to refer for special education	Equal variances assumed	5.066	.025	-1.917	490	.056	-.170	.089	-.344	.004
	Equal variances not assumed			-1.920	481.673	.055	-.170	.088	-.344	.004

Table 8.

Chi-square comparisons for overall recommendations with race/ethnicity match as the grouping variable

	N	Pearson Chi-Square value χ^2	df	Asymptotic Significance (2-sided)	Fisher's Exact Test Exact Sig. (2-sided)	Fisher's Exact Test Exact Sig. (1-sided)	Nominal by Nominal Lambda λ
What steps would you take to follow up on the child's behavior?	494	7.457	4	.114			.045
What are your predictions of the child's level of academic functioning?	494	12.260	2	.002*			.075
Would you recommend a more intensive school placement?	494	.264	1	.607	.666	.356	<.001
Does the behavior warrant an intervention?	494	1.303	1	.254	.285	.157	.026
Do you believe the child has an educational classification as defined by the Individuals with Disabilities Education Act (IDEA)?	494	2.887	2	.236			.040

Note. *= $p < .05$

CHAPTER 6

Discussion

Discussion of Hypotheses

The purpose of this study was to examine the role of race in how school psychologists and special education decision-makers (i.e., directors of special education and district committee on special education chairpersons) perceive and make decisions about aggressive behavior in male, school-aged children. Specifically, differences were explored in how school psychologists and special education decision-makers perceive physically aggressive behaviors in African American versus White American boys. This study further explored potential factors that may contribute to the further disproportionality of African American children in special education.

Bradshaw et al. (2010) conducted a multilevel exploration of factors contributing to the overrepresentation of African American students in office disciplinary referrals. This study intended to extend Bradshaw and colleagues' research by exploring factors contributing to the overrepresentation of African American students in special education and the perception of the educational professionals' placement in decision-making. The results of the present study found that school psychologists and special education decision-makers rated aggressive behavior as more of a problem with the African American male child compared to same-aged, White American male peers. Extending upon previous studies, a major goal of this study was to examine the possible influence of race on perception and decision-making with male children who display aggressive behavior. Consistent with the literature (Eitle & Eitle, 2004; Bradshaw et al., 2010; Coyne et al., 2011), school psychologists and special education decision-makers who

viewed the aggressive behavior of the White male child rated the behavior as less of a problem on average as compared to the exact behavior of the African American male child. Therefore, race/ethnicity of the male child had a small effect on how school psychologists and special education decision-makers view aggressive behavior as problematic. Upon further examination of the results, there was no significant difference in how school psychologists and special education decision-makers perceived the intensity of aggression in African American male children compared to the same aged, White male peers. Despite the previous finding, school psychologists and special education decision-makers would benefit from continuing to seek out continuing educational training opportunities to develop skills to address cultural competence and respond to differences in race and ethnicity, especially concerning dealing with aggressive behavior. Overall, school psychologists and special education decision-makers appear to view aggressive behavior as more of a problem with an African American male child compared to a same-aged, White American male peers.

After viewing the 25-second video vignette, the present study found that on average, practicing school psychologists and special education decision-makers perceive the African American male child who displayed aggressive behavior to be below grade level on academic functioning and would more likely follow up with interventions other than an observation (e.g., applied behavior analysis, behavior rating scale, interview) compared to White, same-aged peers. Consistent with the literature (Howard, 2014), African American boys perceived and labeled as aggressive would often receive more negative responses, harsher disciplinary practices, and more criticism compared to same-aged peers. Based on this information, it seemed likely that practicing school

psychologists and special education decision-makers would perceive the African American male child who displayed aggressive behavior to be below grade level concerning academic functioning and would more likely directly follow up with a concrete intervention rather than an observation of the behavior. The results of the current study suggest that differences do exist in the perception of aggressive behavior in African American male children compared to same-aged White peers, which may inform the direct follow up in response to the aggressive behavior. Additional analyses to assess the strength of association found that there were significant differences in the race/ethnicity of the male child in the video vignette and the perception of academic functioning and primary way to follow up on the aggressive behavior.

According to Gold and Richards (2012), it is integral that the committee on special education be informed about possible cultural differences of African-American children and perceived bias they may carry, as decisions made can impact the overall educational trajectory of said child. Consistent with the literature, the results of the present study found that practicing school psychologists and special education decision-makers who identified as a different racial/ethnic match to the male child in the video vignette rated the view of the aggressive behavior of the child as slightly more of a problem compared to professionals of the same racial/ethnic makeup to the child. In addition, practicing school psychologists and special education decision-makers who identified, as the same racial/ethnic match to the male child in the video vignette more often perceived the academic functioning of the child to be at or above grade level compared to those of a different racial/ethnic makeup to the child. Practicing school psychologists and special education decision-makers of a different racial/ethnic makeup

to the child in the video vignette more often rated the male child's academic functioning to be below grade level compared to those of the same racial/ethnic match. The aforementioned results are informative as they help to illustrate how the racial/ethnic match of school psychologists and special education decision-makers with children who display aggressive behavior makes a difference in the perception of the view of the behavior as a problem and projections of academic functioning.

After the viewing of a 25-second video vignette, practicing school psychologists and special education decision-makers made statistically significant determinations on perceiving aggression as more problematic with the African American child and perceiving the African American child's level of academic functioning being more so below average than the White child. Overall, this study suggests that race can play a role in perceptions about aggressive behavior, whether they are positive or negative, and can potentially influence the way in which a child is viewed, ultimately impacting student outcomes.

Strengths and Limitations of the Present Research

The current study can help to provide quantitative data on how practicing school psychologists and special education decision-makers perceive and potentially respond to dealing with aggressive behavior in school-aged children of different race/ethnicities, specifically in African American versus White American boys. While there has been some research on examining how decision-making practices in special education may contribute to educational inequities for African American boys (Speight & Vera, 2009; Noltemeyer et al., 2013), little was known about the role of race on how school psychologists and special education decision-makers perceive and make decisions with

regard to aggressive behavior in male, school-aged children. The study was also helpful in identifying differences in how school psychologists and special education decision-makers perceive and intervene in aggressive behavior.

A strength of the present study is that it adds to the research by Bradshaw and colleagues (2010) and identifies the role of race in educational decision-making. Based on the viewing of a 25-second video vignette, practicing school psychologists and special education decision-makers, were biased in their perception of aggression as more problematic and indicative of an increased likelihood for below average academic functioning for African American boys. With the overrepresentation of African American students in special education, it is necessary to understand bias, which may inform perception and decision-making with school placements. Further exploration of other referral, assessment, classification, and school contextual factors may help us begin to understand why African American students continue to be at increased risk for prejudice and overrepresentation in special education. Though the current study has strengths, there are also several limitations.

The first limitation of the current study pertained to the composition of the sample. School psychologists and special education decision-makers participating in this study were informed that the study pertained to decision-making in special education classifications of children who display physical aggression. Therefore, the current group of participants may represent a self-selected sample of school psychologists and special education decision-makers who showed an interest in offering their perceptions on this particular topic. As a result, the final sample may be biased in that regard.

A second limitation of the current study was the usage of self-report measures. While self-report measures are advantageous in the convenience of efficiency to obtain information quickly, the capability to collect a large amount of data, and can be anonymized to protect sensitive information, there can be disadvantages in potential social desirability bias and acquiescence. For example, participants may have provided more favorable responses to select questions.

A third limitation was the measure that was created to assess perceptions of aggression, interventions, and decision-making for special education. The items were developed by the investigator and were not standardized as a scale, or tested entirely for reliability or validity as a single measure. Future work may involve improving the measure to be more rigorously evaluated for content validity and reliability. In addition, responses to vignettes may not predict how an individual will behave when they are exposed a physically aggressive child or how they will intervene with regard to decision making for a potential referral for special education (Reynolds & Karraker, 2003). Differences in individuals reporting versus their actual behavior can be due to behavioral trait tendencies and the different facets of a situation (Reynolds & Karraker, 2003). Research investigating the actual behavior of school psychologists and special education decision-makers toward physically aggressive children in a naturalistic context may be of benefit.

Directions for Future Research

Although the present study attempts to fill certain gaps in the literature regarding how school psychologists and special education decision-makers perceive and respond to aggressive behavior in school-aged children of different races/ethnicities, there continue to be many research questions still to be investigated. The methodology of this study

could be expanded upon to include a more diverse group of special education decision-makers, such as teachers, speech and language pathologists, and all other individuals who can refer for special education. More information and data on individuals who make referrals for special education could be beneficial. Furthermore, the impact of the type of school placement (e.g., general public school, private school, etc.), as well as the socioeconomic status of the individual school districts may also be of interest for future research.

Although the current study surveyed school psychologists and special education decision-makers using a video vignette example, differences may exist in a naturalistic context, which measures how an individual will behave. Future research that measures differences in behavior and responses of school psychologists and special education decision-makers may be beneficial in further understanding disproportionality in special education, especially for African American boys. Furthermore, the utilization of a measure with good internal reliability and validity may be beneficial in measuring the perceptions and decision making factors of school psychologists and special education decision-makers. Also, a better understanding of differences that may exist in perceptions and decision-making factors could help identify and understand the implicit bias that may be occurring.

CHAPTER 7

Implications for the Profession of School Psychology

The results of this study can help to inform research and practice within the field of school psychology by documenting how school psychologists perceive and make decisions concerning aggressive behavior in male, school-aged children of different race/ethnic backgrounds, specifically in African American versus White American boys. The data suggest that race/ethnicity does have a small effect on how school psychologists view aggressive behavior as a problem in African American male children compared to same-aged, White male peers. Furthermore, the data suggest that school psychologists perceive the African American male child to be below grade level concerning academic functioning and would more likely follow up with interventions other than an observation (e.g., applied behavior analysis, behavior rating scale, etc.) compared to White, same-aged peers. School psychologists are afforded an opportunity to support equity in education by observing and challenging institutional structures, policies, and practices that may be rooted in bias. Through the use of evidence-based interventions, school psychologists can enhance service delivery and educational decision making with all children, especially those from diverse populations. As schools become increasingly diverse, it is important for school psychologists to promote inclusive educational environments that respect and respond to differences in race and ethnicity. Through partnerships, training, online resources, and advocacy, school psychologists can promote cultural competence in all areas of school psychological service delivery.

Along with the CSE team, school psychologists are the educational professionals who assess and determine the appropriateness of special education placements and

classifications. School psychologists' practices and decision-making are essential in preventing further minority disproportionality in special education. Providing valid and appropriate interventions and practices that encourage and lead to appropriate, nonbiased decision-making are integral. Specifically, school psychologist's use of interventions empirically based on the function of the behavior problem (e.g., functional behavioral assessment) can be beneficial with aggressive behavior. Though challenging, it is necessary that school psychologists examine themselves and identify if they do consciously or unconsciously engage in practices and perceptions that may be biased and potentially maintain disparate outcomes for minority students, especially African Americans boys.

It was hypothesized that school psychologists who identified as the same racial/ethnic match to the male child in the video vignette rated the view of the aggressive behavior of the child as slightly less of a problem compared to participants of different racial/ethnic makeup to the child; however the current study disconfirmed this hypothesis. Instead, the current study found that school psychologists who identified as the same racial/ethnic match to the male child in the video vignette more often perceived the academic functioning of the child to be at or above grade level compared to those of a different racial/ethnic makeup to the child. Furthermore, school psychologists of different racial/ethnic makeup to the child in the video vignette more often rated the male child's academic functioning to be below grade level compared to those of the same racial/ethnic match. Therefore, school psychologists should be aware of their potential bias in perceptions of academic functioning in making intervention determinations.

Lastly, the current study focused specifically on issues surrounding race/ethnicity; however, there are many dimensions of diversity, which may require future research. School psychologists would benefit from analyzing and considering their own potential bias on multiple dimensions of diversity (e.g., socioeconomic status, gender, religious, and sexual orientation diversity). Also, school psychology training programs should dedicate additional time and resources to train future school psychologists in diversity, equity, and inclusion. There is a need for school psychologists to increase engagement in advocacy and equity work that both supports the rights and opportunities of all and recognizes institutional and systemic obstacles that serve as barriers. School psychology programs should teach and provide future school psychologists with an operational framework for social justice practices within the field. School psychology graduate education and professional development may benefit from further discussion on the efficacy of practices emanating from a social justice framework and contextual strategies in which school psychologists can advocate at the school, district, state, and national level for more equitable policies and practices.

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APPENDIX

Appendix A: Facebook Groups.

Name of Facebook Page	URL Link
Said No School Psychologists Ever	https://www.facebook.com/groups/SNSPE
The Life and Times of a School Psychologist	https://www.facebook.com/groups/458125637612383
School Psych to School Psych	https://www.facebook.com/groups/568921983238924
Evidence Based School Psychology Community	https://www.facebook.com/groups/639127956513203
Get School Psyched Up	https://www.facebook.com/groups/1628609357448643
Bilingual School Psychologists	https://www.facebook.com/groups/1854449254843389
Behavioral School Psychologists	https://www.facebook.com/groups/62944334424
School Psychologists	https://www.facebook.com/groups/1719031775015901
Psychology Forum	https://www.facebook.com/groups/217912718241267
The Testing Psychologist Community	https://www.facebook.com/groups/testingpsychologistcommunity
Early Childhood School Psychology	https://www.facebook.com/groups/157987471422643
The New School Psychologist	https://www.facebook.com/groups/2199068210198745
Professional Mental Health Counselors, Social Workers, & Psychologists	https://www.facebook.com/groups/mentalhealthpractitioners
School Psych Sistahs	https://www.facebook.com/groups/schoolpsychsistahs
School Psych Side Hustlers	https://www.facebook.com/groups/2227235654190767
School Psychology Social Skills Resources	https://www.facebook.com/groups/145639365603303
NYC-DOE Psychologists: Best of the Best	https://www.facebook.com/groups/632803036741250
African American School Psychologists	https://www.facebook.com/groups/AfricanAmericanSchoolPsychologists
California Association Of Black School Psychologists (CABSP)	https://www.facebook.com/groups/calblackschoolpsychs
NYASP Chapter N: NYC School Psychologists	https://www.facebook.com/groups/891093630947046

North Carolina School Psychology Association	https://www.facebook.com/NCSchoolPsychology/
Connecticut Association of School Psychologists	https://www.facebook.com/CTSchoolPsychology/
Hawaii Association for School Psychologists	https://www.facebook.com/HASP808/
New Jersey Association of School Psychologists	https://www.facebook.com/NJASP/
Illinois School Psychology Association	https://www.facebook.com/IllinoisSchoolPsychologistsAssociation/
California Association of School Psychologists	https://www.facebook.com/CASP-California-Association-of-School-Psychologists-503767386367612/
Nevada Association of School Psychologists	https://www.facebook.com/groups/NVASP
Washington State Association of School Psychologists	https://www.facebook.com/groups/wsasp
Maryland School Psychologists' Association	https://www.facebook.com/mdspaonline
Ohio School Psychologists Association	https://www.facebook.com/OSPAonline/
Association of School Psychologists of Pennsylvania	https://www.facebook.com/groups/108540385831875/
Maine Association of School Psychologists	https://www.facebook.com/masponline/
North Dakota Association of School Psychologists	https://www.facebook.com/groups/572877066199970/
West Virginia School Psychologists Association	https://www.facebook.com/WVSPA/
Indiana Association of School Psychologists	https://www.facebook.com/IASPonline/
Rhode Island School Psychologists Association (RISPA)	https://www.facebook.com/Rhode-Island-School-Psychologists-Association-RISPA-149690705128130
Vermont Association of School Psychologists	https://www.facebook.com/VASPonline
Virginia Academy of School Psychologists (VASP)	https://www.facebook.com/VASP4kids

Appendix B: Consent Form.

You have been invited to take part in a research study to learn more about decision-making in special education classifications of children who displays physical aggression. This study will be conducted by Ashley Oliver, M.S., School Psychology Doctor of Psychology Program at St. John's University, as part of her doctoral dissertation. Her faculty sponsor is Raymond DiGiuseppe, PhD., St. John's College of Liberal Arts and Sciences Department of Psychology.

If you agree to be in this study, you will be asked to do the following: 1. Complete a questionnaire about your background and relevant experiences (age, gender, education, etc.); 2. Complete a questionnaire about your relevant work experiences; and 3. Watch a short video vignette and answer questions related to the video. Participation in this study will involve approximately 10 minutes of your time. There are no known risks associated with your participation in this research beyond those of everyday life.

Although you will receive no direct benefits, this research may help the investigator understand decision-making in special education classifications of children who displays physical aggression better. At the end of the survey, you will be presented with the option to enter your email address into a drawing for a $100 gift card to Amazon.com. The entering of your email address will not be affiliated with your responses in any way. Any email addresses submitted for this drawing will be deleted after the gift card has been distributed. The gift card will be issued within 30 days of the end of the data collection.

Confidentiality of your research records will be strictly maintained by keeping consent forms separate from data to make sure that your name and identity will not become known or linked with any information you have provided.

Participation in this study is voluntary. You may refuse to participate or withdraw at any time without penalty. For the surveys, you have the right to skip or not answer any questions you prefer not to answer. If there is anything about the study or your participation that is unclear or that you do not understand, if you have questions or wish to report a research-related problem, you may contact Ashley Oliver at 770-718-7811, Ashley.olopherne15@stjohns.edu, or the faculty sponsor, Dr. Raymond DiGiuseppe, Chair digiuser@stjohns.edu 718-990-1955

For questions about your rights as a research participant, you may contact the University's Institutional Review Board, St. John's University, Dr. Raymond DiGiuseppe, Chair digiuser@stjohns.edu 718-990-1955 or Marie Nitopi, IRB Coordinator, nitopim@stjohns.edu 718-990-1440.

This letter is yours to keep. You have received a copy of this consent document to keep. Click the button marked "Continue" to begin the surveys. By continuing to the next page, you are agreeing to participate in the study.

Thank you for your time, your assistance with this study, and your contribution to this

research.

Ashley Oliver, M.S.
Doctoral Candidate, School Psychology
St. John's University
Ashley.olopherne15@stjohns.edu

By selecting the option to continue to the survey, you affirm that you have read the above information, you are eligible to participate, and that you consent to participate in this study.

Do you accept the terms and conditions of this study?
Yes
No

Appendix C: Video Vignette Description and Video Script.

Chris is a 14-year-old boy in the ninth grade. Chris is the eldest of two siblings and he lives at home with his parents. Prior to beginning 9th grade, Chris was homeschooled. Although Chris has fostered friendships with his peers, he has had some difficulty in school. The video below is an example of Chris' present difficulty.

Video Vignette Script

Video begins with child seated at a desk. A worksheet and pencil are on the desk.

(3 seconds pass)

CHILD: Hits desktop with closed fists twice. Followed by a grunt sound

*(3 seconds pass) *child looking down at worksheet with one hand on each cheek*

CHILD: Picks up pencil from desktop and marks an "X" across the entire worksheet. Puts pencil back on the desktop.

(3 seconds pass)

CHILD: Stands up while pushing away chair from the desk using the body

(*takes one step to the right, followed by crossing of arms)*

CHILD: Grunts. Then yells "NO! I'M NOT DOING THIS STUPID WORK. NO!

Screams (1 second)

I WON'T. I WON'T. YOU CAN'T MAKE ME DO THIS!"

Grabs worksheet from desk and tears in half, crumples the sheet, and throws it across the room.

Yells, " I SAID NO! YOU *(hits desk)* CANT *(hits desk)* MAKE *(hits desk)* ME *(hits desk)"*

Begins to stomp feet on the ground twice, arms crossed across the chest

Proceeds to kick the chair

Appendix D: Participant Video Vignette Questionnaire.

1. Please rate the intensity of the aggressive behavior displayed by the child in the video:

1	2	3	4	5	6	7	8	9	10
Not Severe At All									Extremely Severe

2. How much of a problem do you view the behavior?

1	2	3	4	5	6	7	8	9	10
Not a Problem At All									Extremely Severe

3. What steps would you take to follow up on the child's behavior?
   - Applied Behavior Analysis
   - Behavior Rating Scale
   - Functional Behavior Assessment
   - Interview
   - Observation
   - Other

4. What are your predictions of the child's level of academic functioning?
   - At grade level
   - Above grade level
   - Below grade level

5. Would you recommend a more intensive school placement?
   - Yes
   - No

   If so, What?
   - General education classroom with support
   - Partial mainstream/inclusion classroom
   - A special education classroom
   - Specialized program outside of home school district
   - Hospital

6. Does the behavior warrant an intervention?
   - Yes

- No

If so, What?
- Cognitively oriented programs
- Behavioral programs,
- Social skills training
- Counseling/therapy
- Parent training

7. How likely would you be to refer the child for an assessment for special education:

1	**2**	**3**	**4**	**5**
Not At All Likely				Very Likely

8. Do you believe the child has an educational classification as defined by the Individuals with Disabilities Education Act (IDEA)?
- Yes
- Maybe
- No

If so, What?
- Autism
- Blindness
- Deafness
- Emotional Disturbance
- Hearing Impairment
- Intellectual Disability
- Multiple Disabilities
- Orthopedic Impairment
- Other Health Impaired
- Specific Learning Disability
- Speech or Language Impairment
- Traumatic Brain Injury
- Visual Impairment

Appendix E: Participant Demographic Questionnaire.

Age:
- 20 - 30 years of age
- 31 - 40 years of age
- 41 - 50 years of age
- 51 - 60 years of age
- 61 - 70 years of age
- 71 years of age and above

Gender:
- Female
- Male
- Transgender Female
- Transgender Male
- Gender Variant/Non-Conforming

Ethnicity:
- Asian
- Black/African American
- Hispanic/Latinx
- Native American
- Pacific Islander
- White (not of Hispanic origin)
- Mixed race
- Other

Marital Status:
- Single
- Married
- Divorced
- Separated
- Widowed

Gender of Partner:
- Female
- Male
- Transgender Female
- Transgender Male
- Gender Variant/Non-Conforming
- Not Applicable

Do you have children?
- Yes
- No

If so, How many?

- 1
- 2
- 3
- 4 or more

Please enter the number of years you have worked as a school psychologist and/or special education decision-maker:

- 0 to 5 years
- 5.1 to 10 years
- 10.1 to 15 years
- 15.1 to 20 years
- Over 20 years

Please indicate your current educational setting/population you work directly with: *Click all that apply*

- Preschool
- Elementary school setting (K - 5th grade)
- Middle school setting (6th – 8th grade)
- High school setting (9th – 12th grade)
- College aged and beyond

Please indicate your frequency of exposure to physically aggressive behavior in your educational/professional work setting:

- Never
- Yearly
- 2 to 3 times per year
- Every few months
- Monthly
- Weekly
- Daily

Enter your email address to be eligible to win a $100 Amazon Gift Card:

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Appendix F: Posting Announcement.

Dear Colleagues,

My name is Ashley Oliver. I am a Psy.D. student in the St. John's University School Psychology program, and I would like to request your help by participating in my dissertation study on decision-making in special education classifications of children who display physical aggression. This study is being conducted under the supervision of Dr. Raymond DiGiuseppe, PhD.

You are eligible to participate if you are a practicing School Psychologist or Special Education decision-maker (i.e., Director of special education and district committee on special education CSE chairperson).

The study takes about 5 minutes. At the end of the survey, you will be presented with the option to enter your email address into a drawing for a $100 Amazon gift card! The entering of your email address will not be affiliated with your responses in any way. This research has been approved by the St. John's University Institutional Review Board, protocol number IRB-FY2020-139.

Here is the survey link:
https://stjohns.az1.qualtrics.com/jfe/form/SV_e5NRmP38HmRAh9z

Thank you for your time, your assistance with this study, and your contribution to this research.

Ashley Oliver, M.S.
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Vita

Name	Ashley Melissa Oliver
Baccalaureate Degree	Bachelor of Science, Cornell University, Ithaca, Major: Human Development
Date Graduated	May, 2013
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Date Graduated	May, 2018