Examine the Relationship Between Effective Classroom Communication and Student Behavior and Classroom Efficiency or Loss of Instruction Time

Kirstin Blass

Elizabethtown College, blassk@etown.edu

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Examine the Relationship Between Effective Classroom Communication and Student Behavior and Classroom Efficiency or Loss of Instruction Time

Kirstin Blass
Elizabethtown College
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Abstract

Special education teachers and paraprofessionals work together on a daily basis during school hours to assist individuals with disabilities. Throughout the school day, these coworkers interact directly and indirectly with each other. The conversations and interactions between these individuals could have an effect on the students within the classroom either positively or negatively, depending on the interaction. Therefore, the purpose of this study was to examine the relationship between effective classroom communication and student behavior and classroom efficiency or loss of instruction time. This mixed methodology study included input from two different special education teachers from two schools in Pennsylvania and six different paraprofessionals. It also included observational data from thirteen students with Autism Spectrum Disorder. The major findings focus upon the benefits of classroom organization as well as open and positive exchanges between the adults within the classroom.

Introduction

Six point six million students, or thirteen percent of all public-school students, receive special education services according to the National Center for Education Statistics (U.S. Department of Education, 2017). This group of students qualify for additional educational services. These students may receive instruction in a special education classroom, a general education classroom, or time in both settings. Individuals receiving special education services may also encounter paraprofessionals on a daily, weekly, or monthly basis depending on the setting and severity of their disability. Paraprofessionals provide daily support to students within the school setting receiving special education services. Students with moderate to severe Autism Spectrum Disorder are often placed in a segregated special education classroom for the majority of their school day. These individuals will interact, work with, and be supported daily by special education teachers and paraprofessionals. Not only do the interactions between the student and
the paraprofessional, or special educator, in the classroom matter, but the interaction between the paraprofessional and special educator matters as well.

Effective teacher relationships are expected and desired, but there are several factors that could influence this relationship. Possible factors include classroom organization and structure, communication, the training of the special educator, the training of the paraprofessional, and challenges associated with paraprofessionals. However, paraprofessionals are crucial for providing individualized services and are becoming progressively involved in instruction of individuals with disabilities of all ages. They serve as an important team member for students with low incidence disabilities (Mirenda, 2014). Classroom duties for paraprofessionals may be varied based on the school district, the state, or even the classroom setting. According to the research by Fisher and Pleasants (2012), the number one goal identified amongst paraprofessionals is to provide social and behavior support to the students within the classroom.

If there is a lack of communication and organization between the teachers and paraprofessionals this could lead to a longer transition period which may then lead to less instruction time. Previous studies have shown that if paraprofessionals are given schedules to follow by the special education teacher and the roles are explicit, transitions become quicker and there are fewer miscommunication errors (Banda, Grimmett, & Hart, 2009). Also, depending on if the interactions between the paraprofessional and special education teacher are negative or positive it could also impact the attitude, behavior, or learning of the student.

Throughout a typical day, students transition multiple times. Whether it is from one activity within the classroom to another, from classroom to classroom, to the bathroom, or to lunch, there are several opportunities for students to shift from one event to another. This also applies to students with disabilities in special education classrooms. According to the Diagnostic
and Statistical Manual for Mental Disorders, Fifth Edition (DSM V) (2013), individuals who are diagnosed with Autism Spectrum Disorder display insistence on sameness, rigidity with routines, or ritualized patterns or nonverbal behavior (American Psychiatric Association, 2013). This could mean that unless transitions are the same every day, or there is an established routine, these parts of the day could cause stress in students with Autism. Therefore, special education teachers need to be organized, have effective communication techniques, and create a conducive environment for maximizing instruction time.

The growth of students served in public schools with autism has grown from 93,000 in 2000-01 to 538,000 in 2013-14 (Department of Education, 2017). Thus, the need for classrooms that accommodate these students has also grown along with the number of paraprofessionals and special educators needed. Few studies have explored the effects of the relationship between paraprofessionals and special educators. Therefore, the purpose of this research is to examine the relationship between effective classroom communication and student behavior and classroom efficiency or loss of instruction time.

Review of Literature

Introduction

The purpose of this study was to examine how the relationship between special educators and paraprofessionals affects students in autistic support classrooms. Through comprehensive research, the review of literature identified theories and publications that were similar to the research topic.

The literature will include three sections: (a) the duties, qualifications, and roles of the paraprofessional, (b) empirical studies relating to the dynamic of the special educator and
paraprofessionals, and (c) the impact their relationship has on instructional time, and on student behavior. The present review encompasses a wide variety of school age students, classroom settings, demographics, and professionals.

This research study’s literature review includes information from journal articles, articles, books, and dissertations. The material resources were retrieved through ERIC, ProQuest, EBSCO, Sage Publications, and Elizabethtown College Library Interlibrary Loan.

**Key terms defined.**

*Paraprofessional –*

1. A trained aide who assists a professional person (such as a teacher or doctor) (*Merriam-Webster Collegiate Dictionary, 2011*).

2. A school employee who works under the direction of a certified staff member to support and assist in providing instruction programs and services to children with disabilities or eligible young children (IDEA, 2004).

3. Related to a teaching position and generally supervised by the classroom teacher, a paraprofessional is responsible to provide assistance in general or for special education classroom settings. The position is also known as paraeducator, instructional assistant, education assistant, teacher’s aide, or classroom assistant (American Federation of Teachers, 2009).

*Special Educator –*

1. Teachers who work with students who have a wide range of learning, mental, emotional, and physical disabilities. They adapt general education lessons and teach various subjects, such as reading, writing, and math, to students with mild and moderate
disabilities. They also teach basic skills, such as literacy and communication techniques, to students with severe disabilities (Bureau of Labor Statistics).

Low Incidence Disabilities –

1. A visual or hearing impairment or simultaneous visual and hearing impairment; a significant cognitive impairment; or any impairment for which a small number of personnel with highly specialized skills are knowledgeable are needed in order for children with that impairment to receive early intervention services or a free appropriate public education (IDEA, 2004).

Autism Spectrum Disorder –

1. Autism spectrum disorder is a condition related to brain development that impacts how a person perceives and socializes with others, causing problems in social interaction and communication. The disorder also includes limited and repetitive patterns of behavior. The term “spectrum” in autism spectrum disorder refers to a wide range of symptoms and severity (Mayo Clinic, 2017).

Paraprofessionals – Qualifications/Training and Duties/Roles

Paraprofessionals serve as an important team member for students with low incidence disabilities (Mirenda, 2014). Their role has been around for over 50 years bringing in an assortment of backgrounds and experiences to their profession. They are crucial for providing individualized services and are becoming progressively involved in instruction of individuals with disabilities of all ages. Federal law requires that paraprofessionals receive appropriate training and supervision by a certified professional, such as a special educator, because of their central role in supporting students with low incidence disabilities (U.S. Department of
Education, 2005). Yet, research has continuously and consistently noted that paraprofessionals lack the proper training, supervision, and clarity in roles despite there being a federal mandate (Giangreco, Edelman, Broer, & Doyle, 2001; Giangreco, Suter, & Doyle, 2010).

**Pennsylvania qualifications and training.**

Instructional paraprofessionals have qualifications they must meet in order to be considered capable. There are three options which include having at least two years of postsecondary study, possessing an associate degree or higher, or meeting rigorous standard of quality as demonstrated through a state or local assessment (Klunk, 2010). In the United States, 32% of paraprofessionals hold an associate’s degree or higher, 38% have completed college, and 29% have at most high school diplomas. The individuals with college experience tend to have increased confidence in collaboration and communication with teachers. After one of these credentials are met, paraprofessionals must also meet training requirement standards. Each school year, these individuals must provide evidence of twenty hours of staff developmental activities that are related to their job assignment (Klunk, 2010).

**Classroom job duties and roles.**

Classroom duties for paraprofessionals may be varied based on the school district, the state, or even the classroom setting. According to the research by Fisher and Pleasants (2012), the number one goal that was identified amongst paraprofessionals is to provide social and behavior support to the students within the classroom. The secondary goal was found to be having paraprofessionals implement teacher-planned instruction or lesson plans that were already created by the special educator. The least important goals included having paraprofessionals
develop lesson plans as well as being language interpreters. This data was collected by survey from 1,867 paraprofessionals. (Fisher & Pleasants, 2012).

In another article, Carter, O’rourke, Sisco, and Pelsue (2008), 313 paraprofessionals provided information about their job-related tasks through a four-page questionnaire. Their responses showed that 97% of paraprofessionals who were surveyed reported the most frequent task they do either weekly or daily was providing one-to-one instruction. The results showed 87% reported facilitating social relationships among students, 85.3% reported providing instructional support in small groups, 79.4% reported implementing behavior management programs, and 79.2% reported doing clerical work (Fisher & Pleasants, 2012).

Whether they are working one-on-one with a student, transitioning into general education classes with the student, supervising lunch and specials, or helping collect data, paraprofessionals are utilized in several different ways depending on the school district, classroom, and teacher.

**Dynamics of Special Educator and Paraprofessional**

In a special education classroom, there is almost always going to be a paraprofessional. Studies have shown that preparation, organization, and communication have led to a more positive relationship between the special educator and paraprofessional. Both of these individuals have direct contact with the students in the classroom on a daily basis and, most likely, play a role in their development academically, socially, and occupationally. They also will play an important role with each other. The paraprofessional follows instruction from the special educator and works with the special educator, and the special educator utilizes the paraprofessional to carry out duties both separately and together (Biggs, Gilson, Carter, 2016).
Special educator.

As mentioned in the definitions at the beginning, a special educator is a teacher who works with students who possess a wide range of (dis)abilities. These teachers also adapt general education lesson plans and explicitly teach other important basic skills. Williams (2016) stated the importance of having an effective special education mentor to support a new teacher while scaffolding the development of skills. The overall benefits from having mentoring programs for beginning teachers include higher commitment, satisfaction, and retention. The special educator is responsible for creating individualized educational plans, generating and adapting lesson plans, minimizing student behaviors, providing duties for paraprofessionals, and collecting data on the students both academically and behaviorally.

Effective vs ineffective relationship.

There are several factors that lead to effective and ineffective relationships between special education teachers and paraprofessionals. In the classroom, effective teacher relationships are desired in order to create the most beneficial environment for the community of learners. Topics that influence this relationship are communication, training of the special educator, training of the paraprofessional, classroom organization and structure, and challenges associated with paraprofessionals.

Communication.

A causal-comparative mixed methods study, which attempts to discover a cause-effect relationship, was conducted to identify special educator leadership skills that special educators and paraprofessionals perceive as more imperative to team effectiveness (Nakama, 2015). The researchers found that special educators must provide respect and communicate effectively with
paraprofessionals in order to build team effectiveness. This is because they are dependent on the special educators and other paraprofessionals to provide them with direction, which is often presented ineffectively through poor communication and inadequate expectations (Nakama, 2015).

Morgan and Ashbaker (2001) voiced,

It is your [teacher] duty to identify and correct serious misunderstandings about the extent of your paraeducator’s responsibility and authority... However, the important point is that you should be very explicit in communication with what you want – and do not want – your paraeducator to do. (p. 16)

Douglas, Chapin, and Nolan (2016) found that teachers communicate with aides regarding a variety of topics on a daily, or weekly, basis. For example, they talk about changes that need to be made in the classroom, student needs, curriculum, planning and scheduling, sharing ideas, and expressing appreciation. The challenge that was mentioned most frequently for communication between the paraprofessional and special educator was the lack of time that they had to communicate with each other. However, they gave tips for improving communication between special educators and paraprofessionals which include meeting regularly as a team to discuss and share ideas, using and posting schedules, providing written instructions, and reviewing expectations.

**Training of special educator.**

Despite the significant role of teachers in supporting paraprofessionals, many educators have reported insufficient preparation for their supervisory role of paraprofessionals, especially in pre-service and in-service training programs (Wallace, Sin, Bartholomay, & Stahl, 2001).
Requirements in relation to the supervision of paraprofessionals have not been implemented in the majority of special education and general education endorsement and certification programs. The changes that were made to the Individuals with Disabilities Education Act (IDEA) have placed a renewed importance on preparing paraprofessionals to adequately deliver special education services with proper supervision. Although there is evidence of a long history of developing training resources for preparing paraprofessionals for their roles in the classroom, the history of identifying skills, knowledge, and preparation required by special educators to direct the work of paraprofessionals is not as extensive (Wallace, Sin, Bartholomay, & Stahl, 2001).

**Training of paraprofessional.**

More recently, paraprofessionals have been given more responsibilities related to meeting students’ educational needs. Several studies have specified that paraprofessionals may not have the extra planning time with teachers, proper preparation and training, and guidance and supervision that they need in order to confidently and effectively perform their job duties. In fact, paraprofessionals often report inadequate preparation prior to entering the classroom (Riggs & Mueller, 2001). The population of students with intense medical and behavioral needs continues to grow in special education programs. Therefore, the lack of appropriate training is on the rise. For example, The National Institute for Occupational Safety and Health reports that it is beyond the duty of any employee to have to manually lift a person of more than fifty pounds once a day. However, it is not uncommon for some school personnel to lift ten times that amount as they assist students with bathroom needs and transportation (AFT, 2009, p. 39).

The paraprofessionals at Dauphin and Columbia County schools do not have their own set of guidelines in a handbook. Rather, the schools inform their paraprofessionals to follow the
handbook that is provided to the students. This does not provide specific guidelines relevant to their job duties.

**Classroom organization and structure.**

Classroom organization and structure can lead to a successful classroom. Activity schedules are a beneficial educational strategy to assist with transitions for students with autism. These schedules provide a visual support system in a chronological format to represent a targeted order of the student’s day which offers predictability throughout the day. Studies have also shown that if paraprofessionals are given schedules to follow and explicit roles, the transitions become quicker and fewer miscommunication errors occur (Banda, Grimmett, & Hart, 2009).

**Challenges associated with paraprofessionals.**

When working with someone else in general, there are bound to be many positives associated with the relationship, but there are also going to be challenges. Special education teachers work with the paraprofessionals in their classroom on a daily basis during the week. Through research, common themes have been discovered with the challenges associated when working with paraprofessionals as a special educator. According to McGrath, Johns, and Mathur (2010), there are 10 challenges that special educators may face when working with paraprofessionals. The first challenge is the “paramother” which is a parent whose children have grown up and come into the paraprofessional position with parenting advice and experiences. The “been there, done that” paraprofessional is the second challenge. This arises when the aide has worked in the school district, or as a paraprofessional, longer than the special educator has and tries to tell the teacher what has worked, what has not worked, and how to do certain tasks. The third challenge is “Mrs. Administrator and Company.” This happens when the
paraprofessional is married, related, or a close friend of a high-ranking school official, causing the special educators to feel like they are being watched closely. The “paratrained” is the fourth challenge which means that the paraprofessionals feel as though the training they have undergone, or the workshops they have gone to, make them more knowledgeable than the special educator. The fifth challenge is “two against one” and occurs when the paraprofessional sides with the student against the teacher (McGrath, Johns, Mathur, 2010).

The sixth challenge is “setting parental boundaries.” Many paraprofessionals live in the same communities as their students and their families and might feel like they are doing a favor to the parents by providing them with information about the school or classroom that might be considered confidential. The seventh challenge, “confronting the overt and subtle sabotage,” includes the paraprofessional creating an immature bond with the student because of lack of connections in their adult world. The eighth challenge is working with the “wanna-be teacher” who has been given too much responsibility and knows more about the student than the special educator does or who did not have the resources to get their teaching degree and wants it to be their own classroom (McGrath, Johns, Mathur, 2010).

The ninth challenge, “working with multiple paraprofessionals in one room,” might be one of the most common to happen in a classroom with students who have low incidence disabilities. Some paraprofessionals tend to think that they have a better strategy than the others. There may also be disagreements between paraprofessionals who partner together to degrade one another. The last challenge is “overreliance may cause isolation.” Educators and paraprofessionals must remember that the overall goal of students within the classroom is success and independence. Therefore, it is important to make sure that students do not become attached to one paraprofessional and become unable to function when working with another one.
EFFECTS OF THE RELATIONSHIP

(McGrath, Johns, Mathur, 2010). By letting paraprofessionals know expectations, schedules, and boundaries before they arise is a proactive way to prevent incidents from happening rather than a reactive way after they occur.

Impacts on Students with Autism Spectrum Disorders

Special educators and paraprofessionals have a direct impact on students with autism spectrum disorder. These professionals are present the whole duration of the students’ school day and play an active role in their education. Classroom management and effective instruction are directly correlated. If there is a deficit in one, it creates problems with the other whereas with purposeful implementation of one can create success with the other. In other words, students who are exposed to effective management practices are then less likely to exhibit problem behavior and, in turn, are more likely to have greater academic success (Fleming, Harachi, Cortes, Abbott, & Catalano, 2004).

Instructional time.

Instructional time is described as the time spent by educators working directly with students to promote learning outcomes. It is the time that is scheduled for the purposes of instruction and other related activities where direct supervision and interaction are maintained. In today’s classrooms, teachers do a lot more than just teach which makes it more complex. Educators are simultaneously managing student behavior, supervising the paraprofessionals in their classroom, implementing the mandated curriculum, participating in high-stakes testing, developing and updating individualized educational plans (IEP), and using advanced technology (Sainato, 1990). A major focus of teachers is on maximizing instruction time by decreasing the amount of time it takes to transition and shortening the latency period.
Transition time.

Transitions happen throughout the day for all individuals and naturally occur frequently. It is inevitable to change from one activity to another and from one setting to another whether in the workplace, school, or home. Individuals with ASD may encounter a greater struggle with shifting attention from one task to another. These individuals also have difficulty with changing routines. This difficulty is related to the need for knowing what is going to happen, or predictability. When transitions are successful, transition time is reduced. There is less reliance on adult prompting. Appropriate behavior also increases during transition periods and as a result, individuals may participate more effectively in school and community settings (Cihak, 2010).

However, as mentioned above, transitions may be an especially challenging time for young children. This is because transitions require children to finish the activity they are doing, follow the teacher’s instructions, and prepare themselves for the new activity. While this is happening, teachers are not necessarily focused on the students who are finishing their previous activity and getting themselves ready for the next (Sainato, 1990).

Throughout the school day, students make several transitions. At the beginning of the day, they transition from either the bus or their car to the classroom. When they are in the classroom, they transition from one activity to another and then to lunch or the bathroom and then to recess or special. Therefore, if transitions are not completed effectively, they may decrease instructional time.

Latency.

Data collection can assist educators with determining whether or not a student’s behavior is problematic and warrants intervention. Educators first operationally define the student’s target
behavior, or the behavior to be changed. Then, they choose a data-collection method that provides the most accurate view of student performance within the classroom (*The IRIS Center*, 2012).

Latency recordings measure the amount of time that lapses between an antecedent and when the student starts to perform the specified behavior. An antecedent is defined as an event that happens immediately before the problem behavior occurs. To collect data on latency, an educator starts a stop watch when the antecedent is given and stops it when the behavior occurs. The number of seconds, or minutes, that elapsed between the two periods is then recorded (*The IRIS Center*, 2012). For example, when a student is asked to put his or her pencil away, the timer starts. Once the student is in the action of putting the pencil away, the timer stops. The amount of time that passes in between the start time and stop time is the latency period. It is also recorded by watching the clocks within the classroom if a timer is unavailable.

**Student behaviors.**

Behaviors of students with disabilities vary immensely from typically developing students. Depending on the severity of the disability, extra support may be required in order to decrease behaviors and have attention focused on instructional time. Educators have consistently reported that dealing with their students’ behavior is one of the most challenging issues that they face in the classroom on a daily basis (American Psychological Association, 2006; Rose & Gallup, 2005; Westling, 2010).

Behaviors that students exhibit in the classroom can vary widely. Some of the milder behaviors include not listening to directions the first time they are given, calling out, scripting (repeating verses from books, movies, television shows, etc.), and not sitting still. More severe
behaviors that may be seen within the classroom include yelling, punching, kicking, pulling hair, destruction of property, swearing, self-injurious actions, elopement (leaving instructional area), and crawling on the ground. Every classroom will contain a different group of students who exhibit a different combination of behaviors at different severity levels. The professionals within every class have to individualize their intervention and management based on their students. Students may also have behavior intervention plans based on their behavior. These are plans that outline the students’ behaviors and include strategies to decrease target behaviors.

**Diagnostic criteria and characteristics.**

Autism Spectrum Disorder (ASD) includes a “spectrum,” or wide range, of symptoms, skills, and levels of (dis)ability. Some individuals diagnosed with ASD are mildly impaired by the symptoms, but others can be severely disabled by them (*National Institute of Mental Health*, 2013).

Autism Spectrum Disorder follows diagnostic criteria from the Diagnostic Statistical Manual of Mental Disorders fifth edition (DSM-V). According to DSM-V (2013), to qualify for ASD, an individual must be evaluated using three main criteria sections. The first major section pertains to deficits in social interaction and communication in multiple contexts that occur persistently. ASD is manifested, either currently or by history, by deficits in social-emotional interchange, nonverbal communicative behaviors used for social exchanges, and developing, maintaining, and understanding relationships. The second major section pertains to limited and repetitive patterns of behavior, activities, or interests. These have to be manifested by at least two of the following four subcategories. The first is stereotyped or repetitive motor actions, speech, or use of objects. The second subcategory includes persistence on sameness, rigidity with routines, or ritualized patterns or verbal nonverbal behavior. The third consists of highly
restricted and fixated interests with irregular intensity or focus. The last subcategory includes hyper/hyporeactivity to sensory input or having unusual interests in environmental sensory aspects (American Psychiatric Association, 2013).

The Diagnostic Statistical Manual states that symptoms must be present during the early developmental period. However, they may not entirely manifest until social demands exceed limited capacities; or it is possible that they are masked by learned strategies later in life. The symptoms must also cause clinically significant impairment in important areas of current functioning such as social or occupational areas. For a person to be diagnosed with autism spectrum disorder, these disturbances must not be better explained by intellectual disability or global developmental delay. However, comorbidity may occur between autism spectrum disorder and intellectual disability (American Psychiatric Association, 2013).

On a more basic level, individuals with autism spectrum disorders often present typical characteristics. These characteristics include repetitive behaviors, limited interests, ongoing social problems, difficulty communicating, and symptoms that hurt the individual’s ability to function at school/work, socially, or other areas of life (National Institute of Mental Health, 2013).

**Dual diagnosis.**

Dual diagnosis, or co-morbidity, refers to an individual having more than one disability at the same time. A few common related conditions that can accompany autism spectrum disorders are seizures, low IQ, constipation and/or diarrhea, pica, low muscle tone, sleep issues, sensory integration disorder, allergies, immune system problems, pain threshold extremes, hearing impairments, and visual impairments. Other co-existing diagnoses include attention deficit-
hyperactivity disorder, fragile X syndrome, down syndrome, depression, oppositional defiance disorder, and anxiety. Having co-morbid diagnoses may create more difficulties than just having a single diagnosis (Dual Diagnosis, 2013).

**Conclusion**

Overall, special educators have a variety of roles they have to fulfill and there is not always proper training provided. Both pre-service and in-service training would be beneficial to special educators, and in-service training would be beneficial for paraprofessionals. Trainings allow both parties to be prepared to work together, incorporate research-based strategies, decrease behaviors, and maximize instruction time. Individuals with autism spectrum disorder may require more support and could have co-existing diagnoses. Minimizing distractions and disorganization may lead to increased student success. Paraprofessionals and special educators to have open and effective communication which will lead to less confusion, a more balanced power scale, and a better relationship. In turn, improved communication could lead to a more successful classroom schedule with smoother and quicker transitions.

This research, therefore, examines how, if at all, the relationship between the special educator and the paraprofessional can affect the students within an autistic support classroom. More specifically, if the relationship has a positive or negative effect on the amount of time spent on instruction, student’s behaviors, or on transition time.

**Methodology**

Using a mixed methods research design, the research collected both qualitative and quantitative data. The data was collected through questionnaires, behavioral observations, and
latency recordings within four, twenty-minute observational periods. This section is broken into two subcategories - participants and data collection.

**Participants**

The researcher chose two autistic support classrooms in two separate districts in Pennsylvania to conduct the research out of convenience and availability. The first classroom consisted of five students diagnosed with autism spectrum disorder, three boys and two girls. The classroom had one special education teacher, two full time paraprofessionals and two therapeutic support staff. The second classroom consisted of eight students with autism spectrum disorder, four boys and four girls. The classroom had one special education teacher, one full time paraprofessional, and four part-time paraprofessionals. These autistic support classrooms were both elementary grades with ages ranging from five years old to ten years old.

**Data Collection**

For this research, data was collected in four different ways: behavioral observations of the students within the classroom, a questionnaire with the special educator and paraprofessionals, a latency recording, and a measure of the amount of time that was lost during transitions. Five, twenty-minute observations will be conducted within each classroom.

**Methods.**

In order to collect the behavioral data, the researcher used a tally system and chart to mark the frequency in which each challenging behavior occurred. Challenging behavior included crying, screaming, hitting, throwing items, elopement, self-harm, biting, spitting, cursing, refusal, kicking, and breaking items.
As for collecting the qualitative data, separate questionnaires were given to special education teachers and paraprofessionals to be completed within two weeks of the time they received it.

Using the clock, the latency recording measured the amount of time that lapsed between the teacher’s directive, also known as antecedent, and when the student began to actually perform the specified behavior. The researcher used a premade latency recording table from IRIS Peabody that included start time (time of request), end time (time behavior was initiated).

To measure the amount of time that was lost during transitions, the researcher recorded the amount of time using a stop watch that it took for students to begin their new activity once their previous one was completed. The chart included end of first activity, start of new activity, and the amount of time that lapsed in between.

Results

The researcher used a mixed methodology design collecting both quantitative data and qualitative data through questionnaires, latency recordings, and behavioral observations. The results are presented below.

Questionnaires

When analyzing the data collected through the questionnaires that were provided to both special education teachers and paraprofessionals, there were several similar responses as well as varying responses. Three main themes emerged from collection of questionnaires which include: (a) importance of daily schedules, (b) lack of preparation, and (c) no evaluations.
Importance of daily schedules.

Special education teachers were asked whether or not they provided their paraprofessionals with daily schedules. The teacher from Upper Lincoln Elementary stated that she provides a new schedule each day in fifteen-minute increments. Each paraprofessional has their own copy and their part of the schedule is highlighted for them.

The teacher from West Cottonwood stated that she makes a schedule at the beginning of the year, but does not provide a daily schedule. She stated that this is because whenever she plans for something to happen, it rarely ever occurs the way it is supposed to occur.

Both school district paraprofessionals claimed that they felt having a daily schedule was, “important and practical.”

Lack of preparation.

The special education teachers were asked if they received any formal training on working with paraprofessionals within the classroom. Their replies were similar. Upper Lincoln’s special education teacher said that she did not receive any formal training while West Cottonwood’s teacher also replied, “I honestly feel that I was not prepared to work with paraprofessionals in my classroom. There were no classes, discussions, or preparations made to assist educators in working with paraprofessionals.”

No evaluations.

Evaluations are used to provide feedback on individual’s performances and make recommendations for the future. The paraprofessionals were asked if they provide evaluations
for the special education teachers as well as for the other paraprofessionals. Unanimously the answer was no, they have never been asked to provide evaluations for the special education teacher.

**Latency Recordings**

The tables below represent the latency recording data collected when students were provided directive transitions by either a paraprofessional or special education teacher. The bolded section within the tables represents the separate occasions in which the data was collected. Table 1 displays the data from West Cottonwood while Table 2 displays data from Upper Lincoln. The data below shows that the length of time spent between when a directive was given and when the student started the task was greater at West Cottonwood. The amount of time lost during this transition period totaled to around twenty-four minutes for West Cottonwood. Table 2 shows the amount of time lost at Upper Lincoln totaling at around seven minutes. The difference between the two school district classroom is seventeen minutes.
Table 1

*West Cottonwood Latency Recording Data*

<table>
<thead>
<tr>
<th>Activity/Instruction</th>
<th>Time Instruction is given</th>
<th>Time when behavior starts</th>
<th>Length of time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Picture Cards</td>
<td>:00</td>
<td>2:10</td>
<td>2 min 10 sec</td>
</tr>
<tr>
<td>OT</td>
<td>:00</td>
<td>1:03</td>
<td>1 min 3 sec</td>
</tr>
<tr>
<td>Read aloud</td>
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<td>1:58</td>
<td>1 min 58 sec</td>
</tr>
<tr>
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<td>:00</td>
<td>2:37</td>
<td>2 min 37 sec</td>
</tr>
<tr>
<td>Movement/Dance</td>
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<td>:57</td>
<td>57 sec</td>
</tr>
<tr>
<td>Reading</td>
<td>:00</td>
<td>1:31</td>
<td>1 min 31 sec</td>
</tr>
<tr>
<td>Lunch</td>
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<td>4 min 53 sec</td>
</tr>
<tr>
<td>Picture Cards</td>
<td>:00</td>
<td>3:11</td>
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</tr>
<tr>
<td>Addition Worksheet</td>
<td>:00</td>
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<td>4 min 17 sec</td>
</tr>
<tr>
<td>Movement/Dance</td>
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Table 2

**Upper Lincoln Latency Recording Data**

<table>
<thead>
<tr>
<th>Activity/Instruction</th>
<th>Time instruction is given</th>
<th>Time when behavior starts</th>
<th>Length of time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter Development</td>
<td>:00</td>
<td>:43</td>
<td>0 min 43 sec</td>
</tr>
<tr>
<td>Play Therapy</td>
<td>:00</td>
<td>:12</td>
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</tr>
<tr>
<td>Reading</td>
<td>:00</td>
<td>:55</td>
<td>0 min 55 sec</td>
</tr>
<tr>
<td>Bean Bag Activity</td>
<td>:00</td>
<td>:45</td>
<td>0 min 45 sec</td>
</tr>
<tr>
<td>Craft</td>
<td>:00</td>
<td>:23</td>
<td>0 min 23 sec</td>
</tr>
<tr>
<td>Reading on grade level text</td>
<td>:00</td>
<td>:09</td>
<td>0 min 9 sec</td>
</tr>
<tr>
<td>Pack up</td>
<td>:00</td>
<td>:38</td>
<td>0 min 38 sec</td>
</tr>
<tr>
<td>Picture Cards</td>
<td>:00</td>
<td>:47</td>
<td>0 min 47 sec</td>
</tr>
<tr>
<td>Letter Recognition</td>
<td>:00</td>
<td>:56</td>
<td>0 min 56 sec</td>
</tr>
<tr>
<td>Specials</td>
<td>:00</td>
<td>1:02</td>
<td>1 min 2 sec</td>
</tr>
</tbody>
</table>

**Behavioral Observations**

During three different observational periods, behaviors were recorded for each school district. Below, Table 3, displays the type of behavior that was exhibited by the students and the occurrence at which it happened over the three time periods. As shown below, West Cottonwood students’ behavior occurred more often in seven of the eight categories. The only category where Upper Lincoln was higher was in verbally responding “no.”
Table 3

Behavioral Observations

Discussion

The results supported the hypothesis that special education teachers who provide clear, concise expectations at the beginning of the school year to all adults that will be coming in and out of the classroom have experienced quicker transitions, less academic time lost, and a stronger relationship with coworkers. Another attribute to successful classrooms is organization. Based on the research, the best method is using a color coded system for each child within your room if applicable. Through the research, it also showed that having a daily schedule for each day has shortened transition periods as well as questions that paraprofessionals are asking. It was also shocking to discover that college programs are not providing instruction to special education teachers on how to work with paraprofessionals. Having the knowledge on how to handle certain situations or how to best use your staff is almost equally as important as the knowledge provided on working with special education students. Paraprofessionals are also not being provided the
same trainings across the board. Learning how to better prepare paraprofessionals is extremely vital because they serve as an important team member for students with low incidence disabilities (Mirenda, 2014).

**Limitations**

One limitation of this study was the small sample size. Due to limited time and access to the classrooms, the availability and recruitment of participants was limited.

A second limitation was that it measured behaviors within an autistic support setting. ASD encompasses a “spectrum” in severity of both behavioral tendencies and abilities academically as related to the study. Therefore, the level and amount of behaviors seen in one classroom can be attributed to the level of severity of the student’s ASD diagnosis. Along with that, individuals may contain a dual diagnosis that also may affect their behaviors.

Another limitation within this study is the unequal teacher to student ratio. Having more or less students within the classroom can hinder students’ behaviors and one on one attention. At Upper Lincoln Elementary, there were five students and three adults while at West Cottonwood there were eight students and four adults.

A fourth limitation encompasses the amount, and type, of training that the special educator and paraprofessionals received. For both school districts, the training and backgrounds were extremely varied. Both special educators claimed of no formal training on working with paraprofessionals pre-service or currently. The paraprofessionals experience and training varied as well. Some paraprofessionals had a background with children while others had no experience working with children before.
A final limitation was the subjectivity within the questionnaires. Teachers and paraprofessionals might have answered in a way to promote themselves rather than answering in a way that could have a negative connotation.

**Implications**

Due to the findings within this study, special education teacher preparation programs need to better prepare future educators on how to work with paraprofessionals. When working in the field of special education, paraprofessionals will more than likely play a huge role. Therefore, it is vital that future special education teachers are fully prepared to work with these individuals rather than just having a few conversations. Stressing the importance of setting clear and concise expectations at the beginning of the year is a major point that should be discussed with future educators. This helps alleviate questions during critical instructional periods and could possibly prevent inappropriate actions that aren’t anticipated within the classroom.

School districts also need to provide more trainings, workshops, and in-service hours to both teachers and paraprofessionals that are already in the profession. Implementation of more frequent evaluation forms is an important piece that school districts could implement. Having this happen more frequently could help prevent bottling up of emotions and sudden outbursts of frustration. Instead, it allows for a proactive response to make adjustments as needed throughout the school year.

As for future research, there should be more data collected on how daily schedules and classroom organization can impact students’ instructional time within the classroom.
Conclusion

In the field of education, the amount of students who require special education services is growing. In turn, the need for support is also growing. Paraprofessionals help provide the support that is needed by this growing population of students. However, they need the proper training and communication from the special education teacher to successfully complete their jobs. As with any career, communication is one of the major keys to success.

This study examined the relationship between effective classroom communication and student behavior and classroom efficiency or loss of instruction time. Within the research, classroom communication and organization proved to lead to less instructional time lost as well as less behaviors exhibited by the students within the classrooms. When the special education teachers weren’t proactive with scheduling, the paraprofessionals felt as though time was wasted showing them what to do in that moment rather than with the students starting the task given.

Overall, more pre-service and in-service trainings need to be provided for both special education teachers and paraprofessionals. It is also beneficial for special education teachers to have organizational techniques within the classroom to make finding and recording information quicker.
References

American Federation of Teachers (2009). The medically fragile child. Caring for with special healthcare needs in the school setting.


Cihak, D. F. (2010). Comparing pictorial and video modeling activity schedules during


Klunk, T. (2010). *Paraprofessional Qualifications* [PDF]. Office of Child Development and
Early Learning Bureau of Early Intervention Services. Retrieved from


EFFECTS OF THE RELATIONSHIP


Latency Recording Data Sheet

Student: _________________________  Observer: _________________________

Behavior:
___________________________________________________________________________
_____________________________________________________________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity/Instruction</th>
<th>Time instruction is given</th>
<th>Time when behavior Starts</th>
<th>Length of time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
<tr>
<td>Behavior</td>
<td>Frequency</td>
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<tr>
<td>-------------------</td>
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<tr>
<td>1. Crying</td>
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<tr>
<td>2. Screaming/Yelling</td>
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<tr>
<td>3. Hitting others</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>4. Throwing items</td>
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<tr>
<td>5. Running into hallway</td>
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<tr>
<td>6. Hitting self</td>
<td></td>
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<tr>
<td>7. Biting self</td>
<td></td>
<td></td>
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<tr>
<td>8. Spitting</td>
<td></td>
<td></td>
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<tr>
<td>9. Falling on the floor</td>
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<tr>
<td>10. Cursing</td>
<td></td>
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<tr>
<td>11. Saying no to teacher</td>
<td></td>
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<tr>
<td>12. Kicking</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>13. Breaking items</td>
<td></td>
<td></td>
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<tr>
<td>14. Elopement</td>
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<tr>
<td>15.</td>
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</tr>
</tbody>
</table>

Date: _____________________  Classroom: _____________________
Special Education Teacher Questions

1. What is it like to work closely with paraprofessionals?

2. What aspects of working with paraprofessionals have gone well, and what tells you this is the case?

3. What aspects of your work with paraprofessionals have not gone so well, and what tells you this is the case?

4. What has helped to strengthen your working relationship with paraprofessionals you work with?

5. What are the responsibilities that your paraprofessionals have within your classroom?

6. What responsibilities do you have in regard to supporting the work of paraprofessionals within your classroom?

7. In what ways were you prepared to work with paraprofessionals?

8. What sorts of work do you delegate to your paraprofessionals to do on their own?

9. How do you think having paraprofessionals enhances or detracts from the quality of education your students receive?

10. How does your relationship with paraprofessionals enhance or detract from your ability to effectively meet the needs of students on your case load?

11. What organization techniques do you use?

12. Do you follow a structured daily schedule?
Paraprofessional Questions

1. What is it like to work closely with special education teachers?

2. What aspects of working with these teachers have not gone so well, and what tells you this is the case?

3. What kind of jobs are given to you to do individually?

4. What tasks do you work jointly with the special education teacher?

5. Do you meet regularly as a team with who you work with?

6. What things do the special education teachers you work with do to help support your work with students?

7. Do you provide evaluations for the special education teachers and other paraprofessionals?