

A Study on the Effectiveness of Life Space Crisis Intervention for Students Identified with Emotional Disturbances

Carol A. Dawson

This research reports the effects of Life Space Crisis Intervention (LSCI) training with staff in a junior high school serving students with emotional disturbance. An experimental and a control school were selected from a large city where students came from neighborhoods in which abuse, poverty, violence, gangs, and drugs were prevalent. The schools were located a few miles apart in fairly new facilities, and each served over 40 students with a staff of counselors, teachers, and paraprofessionals. Students had similar backgrounds, and the schools both used behavior management programs based on points and levels with students presenting significant behavior problems being sent to staff in Crisis Resolution Rooms. Experimental school staff received LSCI training as a solution strategy for crisis, while control school staff received regular support in developing their own solutions for crisis. Data were gathered to compare specific outcomes related to these two interventions. Frequency of crises decreased significantly in the LSCI school while increasing significantly in the control school. In addition, there was a significant difference in the frequency of crises between the LSCI school and the control school at post-test. There was a greater decrease in suspensions in the LSCI school than in the control school. More students in the LSCI school were mainstreamed and transferred to less restrictive settings. Students in the LSCI school also had higher attendance rates. All staff in the LSCI school reported that they felt able to manage crises, while only 2 of 16 staff in the control school reported this competence. The author offers recommendations for use of LSCI with troubled students and for future research.

The Setting

This article summarizes research on the implementation of Life Space Crisis Intervention in a school for troubled students in New York City.¹ New York operates the largest public school system in the United States with an enrollment of over one million students. Approximately 161,000 of these students are identified as needing special education services. Of these, 21,600 more seriously disabled students are served by a special District 75, which has over 9,000 educational staff and provides alternative programs of special educational services in 63 school organizations, located in 324 buildings spread across all five boroughs of New York City. Approximately 12,000 of these students are identified as emotionally disturbed and have multiple needs, which require more intensive special education ser-

vices. These troubled students represent the full range of trauma and social problems that challenge the professional skills of the most competent educators and schools.

The administrative staff of District 75 is committed to providing teachers with the support and the skills to develop effective interventions for their students. While considerable resources are available, an unacceptable number of student crises continued to occur. In 1992, District 75 contracted with the Life Space Crisis Intervention Institute to develop a five-day certification program in Life Space Crisis Intervention (LSCI) for selected principals, administrators, clinical, and educational staff. The goal was to reduce the frequency and intensity of student crises. The evaluations of the LSCI program were strongly positive and a new series of LSCI certification programs were offered

over the next four years to District 75 staff. The staff evaluations following these training sessions supported the need for expanding LSCI training. District 75's response was to develop and staff the Office of Positive Behavior Support, with the goal of providing inservice training programs based on best practices. In 1997, three staff members from the Office of Positive Behavior Support and one administrator from District 75 were certified as Senior Trainers of LSCI. In the following three years, more than 600 staff were certified in LSCI.

LSCI is a therapeutic, strength-based strategy using a student's crisis as an opportunity for personal insight and accountability. It goes beyond the narrow focus of containment, coercion, and control common in some crisis management models. LSCI involves strategies for connecting with and teaching children and youth in crisis. It helps youth understand and change chronic patterns of self-defeating thinking and behavior that have proven difficult to address with traditional behavior management strategies. This comprehensive, multi-modal intervention is based on 26 specific staff competencies. The theory and research foundation of LSCI is an integration of psychodynamic, developmental, behavioral, cognitive, and social learning principles.

Evaluations by frontline staff who received LSCI training in District 75 found this model of intervention to be well-received. While staff ratings are important, there was little empirical evidence on the efficacy of LSCI with emotionally disturbed students. For LSCI to be accepted as "best practice" with troubled students, research based on student outcome measures was needed. Experimental studies rarely happen in public school systems because of legal, financial, administrative, staff, and parental issues. Securing the administrative support and approval procedures to develop and implement such research in the public schools is a complex and time consuming task. District 75 needs to be commended for its professional willingness to oversee this study of the efficacy of LSCI training on a school with troubled students.

The Study

This research used a quasi-experimental design with two matched school populations. Staff in one school received the LSCI model of crisis training, while staff in a second school received support in developing their own strategies for managing crisis. Pre- and post-intervention results were compared with an emphasis on student outcomes as displayed in more positive behavior in the school setting.

The Schools and Students

Two inner city junior high school special education sites serving emotionally disturbed students between the ages

of 11 to 15 were selected for this study. Both sites were located in the wings of buildings separated from the general education students. The experimental group (JHS-1) was selected by a coin toss, leaving the other site to be designated as the control group (JHS-2). Both programs had been formed the previous year and were located 14 miles from each other. All students received federally funded, free breakfast and lunch. Both programs were administered, funded, and staffed by District 75 Alternative Programs. Both programs had 17 licensed educational staff. Each classroom consisted of a special education teacher and a full-time paraprofessional assistant and was limited to a maximum of 12 students. The educational staff of both programs were evaluated and found to be similar in educational, ethnic, teaching experience, and racial backgrounds. Therefore, the condition of matched settings and staff was accepted.

The experimental group (JHS-1) had 44 students and the control group (JHS-2) had 47 students. The experimental group consisted of 27 African-American and 17 Hispanic students. Thirty-eight of the students were males and six were females.

The control group consisted of 29 African-American and 18 Hispanic students. Thirty-six of the students were males and 11 were females. The students of both groups were compared on key demographic variables such as age, gender, racial distribution, social economic status, and level of emotional disability. No significant differences were found between the two groups on any of these variables. The assumption that these troubled junior high school students were representative of the same population was supported.

Organization of the Study

This research took place over three school semesters and involved three separate phases. Phase One took place during the spring semester of 1999 (January-May), when all baseline or pre-test data were collected. Phase Two took place during the fall semester of 1999 (September-December) and was used to train and certify all staff in the experimental group in the skills of LSCI. Staff in the control school received consultation support during this period. Phase Three took place during the spring semester of 2000 (January-May), when all post-test data were collected.

Both groups had similar behavior management programs based on a level and point system. Both also employed crisis management rooms and staff for more serious behavior problems. They differed on the methodology for dealing with students in crisis. In the fall semester of 1999, staff in the Life Space Crisis Intervention program participated in a prescriptive, 40-hour course in Life Space Crisis Intervention principles and skills. Staff in the control school were provided consultation enabling them to develop

their own approach to challenging student behavior. Students in the experimental group who had a crisis were seen immediately and were involved in the reclaiming stages of the LSCI process. Students in the control groups who had a crisis were managed by the current special education guidelines and faculty-designed strategies for crisis intervention.

Hypothesized Outcomes of Interventions

Prior research led us to hypothesize differential outcomes for various interventions with emotionally troubled students. A national study by the Bank Street College of Education (Knitzer, Steinberg, & Fleisch, 1990) characterized the prevailing behavior management strategies employed in special schools for disturbed students as a *curriculum of control*. These students have been removed to segregated settings because their emotional and behavioral problems interfere with school performance. When placed together with other challenging students, high levels of conflict may overtax the capacity of even trained special educators.

Surprisingly, most special educators lack formal training in working with students in crisis. This was apparent in the current study where fully 90% of staff in both schools initially reported that they did not believe they were competent in managing crises presented by students. Adults who feel overwhelmed by student crises can be expected to either retreat from dealing with problems or revert to coercive interventions. When adults cannot effectively manage crisis and stress in the school setting, this negatively impacts faculty effectiveness (Stempein & Loeb, 2002), which is likely related to the poor outcomes for this population of special education students. Thus, it was hypothesized that staff, left to their own inclinations, might be unable to deal effectively with their most difficult students, and problems would escalate.

In contrast to the curriculum of control, Life Space Crisis Intervention trains staff to use naturally occurring problems to teach youth more effective coping skills. A crisis is reframed as an opportunity to help youth learn alternatives to aggressive, disrespectful, or discouraged behavior. In LSCI parlance, staff zero-in on specific behaviors with laser-like focus. LSCI interventions are designed to target chronic problems related to poor student outcomes, such as recurrent conflict, poor attendance, school suspension, and escalation of problem behavior leading to more restrictive placements. The goal in LSCI is to teach youth positive alternatives to self-defeating patterns of thinking, feeling, and behaving. If effective, LSCI intervention would be expected to increase positive behavior support and provide youth with proactive skills.

Thus, it was hypothesized that there would be significant differences between schools in these outcomes related to crisis in schools:

1. The number of student crises based on records kept by crisis room staff
2. The number of student suspensions based on administrative records
3. The student attendance rates recorded in administrative records
4. The number of students transferred to more restrictive placements
5. The number of students transferred to less restrictive placements
6. The number of students partially mainstreamed to general education
7. Staff ratings of their own perceived ability to manage student crisis

Experimental and control schools were compared on these seven dependent variables through pre- and post-intervention analysis.

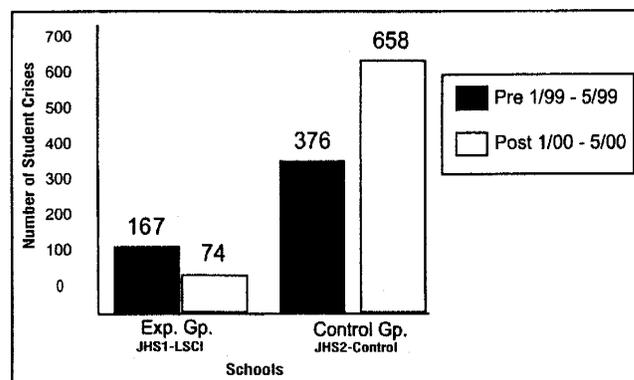
The Findings

Below we briefly summarize key results of this study. For a more exhaustive analysis of the data and methodology, see the original study (Dawson, 2001). Here we organize our discussion around seven questions related to the study hypotheses.

1. Did the number of student crises decrease in the LSCI program?

Figure 1 compares the frequency of pre- and post-test student crises of the experimental and control groups.

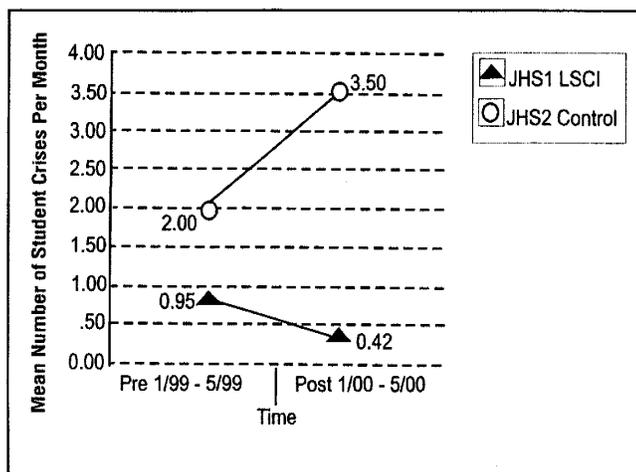
Figure 1. Number of Pre- and Post-Test Student Crises



The experimental group had a total of 167 student crises, and the control group had a total of 376 student crises during the four-month, pre-test data collection period. The reasons for this initial difference are unclear, but in each case, the direction of change could be measured. During the four-month, post-test period, crises in the experimental group decreased by more than half. In the control

group, the number of crises increased to a total of 658. Are these changes between and within groups significant? An Analysis of Variance [ANOVA] test of significance was calculated by converting the total number of student crises per semester into a mean average crisis score per student per month over the four months of the pre- and post-test data collection periods. Figure 2 presents these converted mean average student scores.

Figure 2. Mean Number of Student Crises Per Month

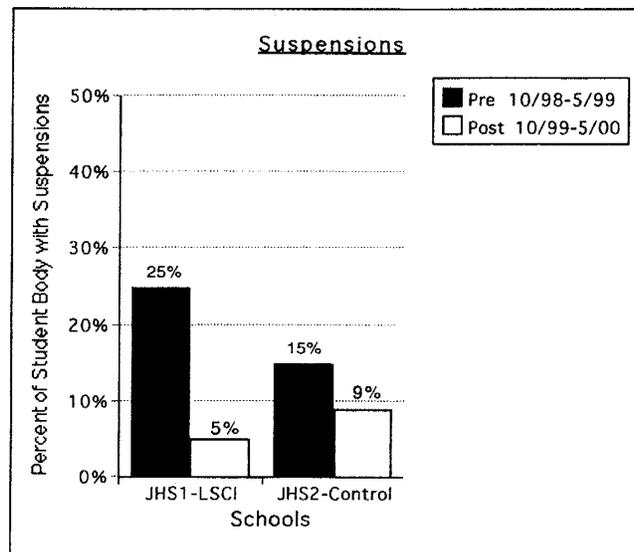


During the pre-test period, the experimental group had a mean average score of 0.95 student crises per student per month and a post-test mean average score of 0.42 student crises per month. During the pre-test period, the control group had a mean average score of two crises per student per month, and a mean average score of 3.5 crises per student per month during the post-test period. An ANOVA analysis of the mean average crises scores resulted in two significant findings:

1. The experimental group had a significant decrease in the number of student crises in comparison to the control group. ($F [1,102] = 40.61, p. <.001$).
2. There was a significant within-group interaction between the two groups. The experimental group significantly decreased the number of student crises over time, while the control group significantly increased the number of student crises over time. ($F [1,102] = 7.00, p. <.01$)

In sum, the number of student crises was significantly reduced in the LSCI program.

Figure 3. Suspensions



2. Did student suspensions decrease in the LSCI program?

Figure 3 presents a bar graph of the percentage of students in the experimental and control groups who were suspended because of unacceptable behavior: 15% of the 47 students in the control group were suspended during the pre-test period, while 25% of the 44 students in the experimental group were suspended.

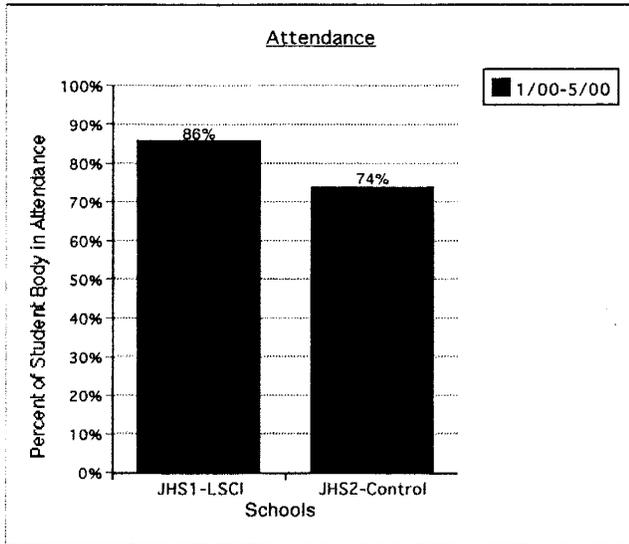
During the post-test period, 5% of the students in the experimental group and 9% of the students in the control group were suspended. While both groups decreased the number of pre- and post-test student suspensions, the experimental group showed a decrease of 20% and the control group showed a decrease of 6%. Thus, the experimental group had a greater reduction in the number of student suspensions than the control group.

3. Was student attendance better in the LSCI Program?

Figure 4 (see p. 246) presents a bar graph of the daily attendance rate of students at school during the experimental period (1/00 – 5/00).

An examination of the attendance data revealed that the attendance rate for the students in the experimental group was 86%, while the attendance rate for the students in the control group was 74%. The experimental group had a 12% greater attendance rate than the control group.

Figure 4. Attendance

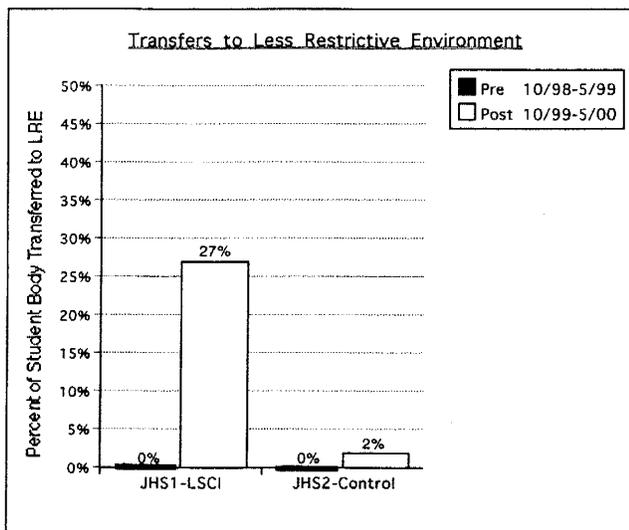


4. Was transfer to more restrictive programs prevented in the LSCI program?

Figure 5 presents a bar graph of the percentage of students in the experimental and control groups who were transferred to a more restrictive program.

During the pre-test period, neither group transferred any students to a more restrictive program. However, during the post-test period, the control group transferred 3 of their 47 students (6%), while the experimental group transferred none of their students to a more restrictive program. These data indicate that the experimental group was successful in maintaining students in the program.

Figure 5. Transfers to Less Restrictive Environment

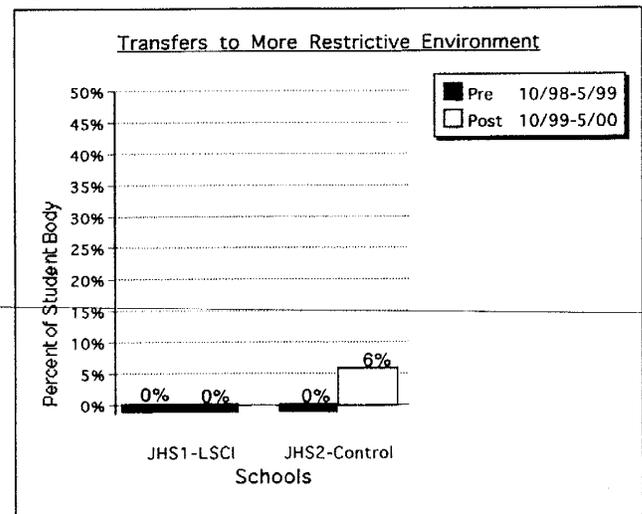


5. Did transfer of students to less restrictive programs increase in the LSCI program?

Figure 6 presents a bar graph of the percentage of students in the experimental and control groups who were transferred to a less restrictive program.

During the pre-test period, neither of the groups transferred any student to a less restrictive program. However, during the post-test period, the experimental group transferred 12 of the 44 students (27%) to a less restrictive program, while the control group transferred 1 of the 47 students (2%) to a less restrictive program. Thus, the experimental group increased the number of students transferred to a less restrictive program over the control group by 25%.

Figure 6. Transfers to More Restrictive Environment

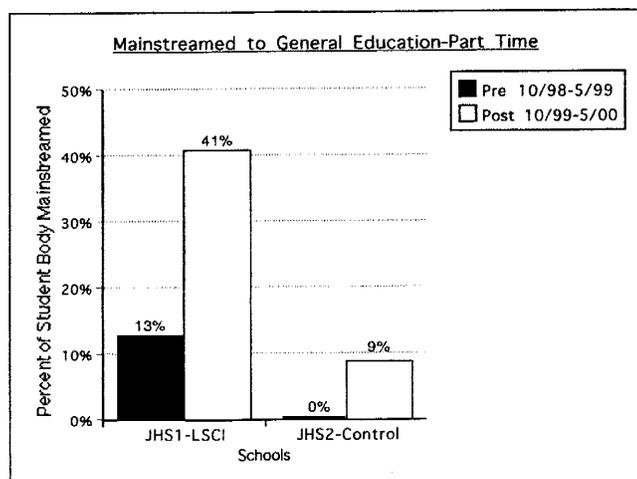


6. Did mainstreaming in general education increase in the LSCI program?

Figure 7 presents a bar graph of the number of students in the experimental group and control group who were partially mainstreamed to a general education program.

During the post-test period, 41% of the students in the experimental group and 9% of the students in the control were partially mainstreamed. The pre- and post-test data of the experimental group documented a 28% increase in the number of students partially mainstreamed. A pre- and post-test comparison between the experimental and control group showed that the experimental group partially mainstreamed 19% more of its students than the control group (28% in the experimental group versus 9% in the control group).

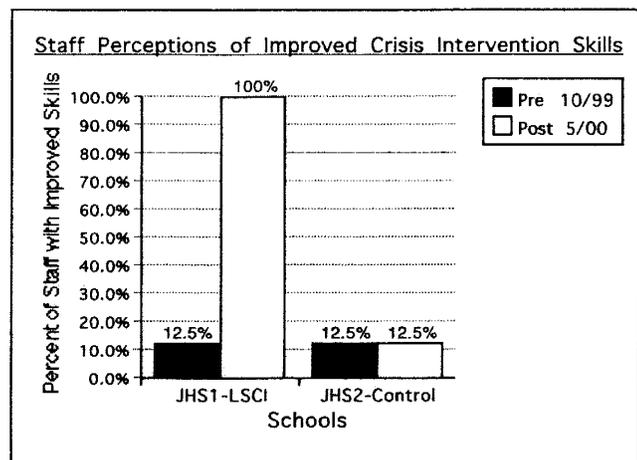
Figure 7. Percent of Student Body Mainstreamed



7. Did staff who received the LSCI training report improve crisis intervention skills?

Figure 8 presents the pre-post staff ratings of crisis intervention skills of the experimental and control groups. During the pre-test period, both groups had 2 of 16 staff members (12.5%) who indicated they felt competent to manage a student crisis successfully. At the end of the study, 16 staff members (100%) of the experimental group felt they had the skills and confidence to manage a student crisis successfully. Concurrently, there was no improvement in perceived crisis skills among the staff of the control group. However, 87.5% of the experimental staff reported improvement in their crisis intervention skills.

Figure 8. Staff Perception of Improved Crisis Intervention Skills



Discussion

The results of this experimental study of Life Space Crisis Intervention consistently support all seven hypotheses about improved student and staff outcomes. There were significant reductions in the number of student crises, and there were fewer suspensions. While transfers to less restrictive settings increased, there were no transfers to more restrictive settings. There were also higher rates of student attendance and improvement in the number of students partially mainstreamed in general education. Finally, staff certified in LSCI felt more confident in their abilities to deal with student crises.

These findings are consistent with qualitative data suggesting that Life Space Crisis Intervention enables staff to gain a sense of personal efficacy. One paraprofessional commented, "I used to be afraid of the students and not know what to say or do. I was very quiet and avoided contact with them. Now I am confident in my abilities. I find that every time I use Life Space Crisis Intervention, I become closer to the students, and now they come to me when they have problems. It feels good to make a difference in their lives." In contrast, staff from the control group became increasingly exasperated by the "revolving door" of crisis situations. When disruption continued, the philosophy frequently was "students need more discipline," which took the form of phone calls home, additional time out of the classroom, and more punishment and alienation.

Students also offered their perspective on the programs. At the end of the study, several youth at each school who had emotional outbursts resulting in removal from the classroom were interviewed. They were asked, "What do you need from teachers when you are most upset?" A typical student at the LSCI school replied, "Kids have a lot on their minds. Sometimes I can't think at school when I am upset. It helps to talk to teachers." In contrast, a youth at the control school answered, "Nothing. Teachers can't help me with my problems. I have to take care of myself."

At its core, LSCI offers a new mind set about problems as opportunities and about troubled students possessing untapped strength and resilience to change. The LSCI process allows the students to connect stressful life events with their thinking, feeling, and behaving and to see the connection between their behaviors and the reactions of others. The students are treated with respect, even in times of crisis, learn to understand and own their behavior, and gain more appropriate coping strategies. Youth and adults experience each other in a more trusting way. Over time, these students no longer find school a hostile and alienating experience but a place where they are accepted, nurtured, and taught new skills. Equally important, staff no longer feel helpless or believe that nothing works with these troubled students. They are empowered with a new

sense of professional confidence and skill in helping these challenging students.

Recommendations

The following proposals for future studies and actions are offered:

- a. Staff working directly with students with emotional and behavioral disorders should be trained in LSCI as part of a comprehensive approach that also includes consistent school-wide and classroom-level behavior management systems.
- b. To insure fidelity, LSCI training should include ongoing support and supervision by an individual proficient in the LSCI philosophy and strategies. The goal should be to integrate a consistent, comprehensive crisis team approach throughout the school setting, augmented by ongoing consultation and periodic refresher workshops.
- c. LSCI reveals not only the observable data of a self-defeating behavior; it also taps the private logic of youth. This provides key information regarding chronic behavior problems that interfere with learning. This information can be incorporated into a Functional Behavioral Assessment (FBA) and a positive behavior support plan. Training programs in this area are being developed (McGowan, 2002)
- d. Crisis training must become a part of pre-service teacher education. LSCI can be a core component in training, providing new teachers prerequisite skills for success with these challenging students. Colleges and universities are strong partners in this joint effort.
- e. Further studies need to be conducted using LSCI with other populations, settings, and longer time periods. Research needs to be pursued regarding populations other than students with emotional and behavioral disorders, different age groups, and settings beyond segregated instructional environments. The potential value of LSCI in an early intervention and prevention program is most intriguing.
- f. The effects of LSCI on academic achievement, self-esteem, and behavioral and emotional strengths need to be the subject of future experimental research.

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¹ This discussion draws from Dawson, Carol A. (2001). *Crisis intervention training and support for school staff of junior high school special education students with emotional disturbances*. Doctoral dissertation. Nova Southeastern University. For a copy of her doctoral dissertation, contact the author at: 718/463-7533 or caroldawson@att.net. For a comprehensive treatment of the LSCI process, see Long, N. J., Fecser, F. A., & Wood, M. M. (2001). *Life Space Crisis Intervention: Talking with students in conflict*. Austin, TX: PRO-ED.



STARR EARTHWORK 2002: Aerial view. World Peace Art Initiative event October 5, 2002, Starr Commonwealth, Albion, Michigan. 130 student-designed peace banners were installed in circles within the crop planting circles.

ERRATUM

In Issue 11:3, the Lawrence P. McGowan biography in "Life Space Crisis Intervention and Functional Behavioral Assessment: The Guiding Models" should state that Dr. McGowan is a staff trainer on the Positive Behavior Support Team of District 75, New York City Board of Education, a senior trainer for Life Space Crisis Intervention, and the founder of Dynamic Behavioral Interventions.