[Image description: Masculine-presenting elementary student of Color in a six-photo collage, with six different facial expressions.]

Equity by Design:

Equity-Oriented Social, Emotional, and Behavioral Screening

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Many school systems integrate screening to assess the adequacy of supports for students' social, emotional, and behavioral (SEB) capacities into multitier systems of support and other initiatives to support student wellbeing (Sugai & Horner, 2020). With concern for widespread increases in needs for support given acute and protracted challenges related to the COVID-19 pandemic (Sullivan et al., 2021a), there is likely to be increased attention to students' mental health in the coming years. Data-based decision-making is an increasingly central feature of both prevention and intervention efforts, making

> ### KEY TERMS
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> **Screening:** the process of proactively screening students in a building or setting in order to understand needs in a given domain. (Center on Multi-Tiered Systems of Support, n.d.)
>
> **Data-based decision making:** the process of using reliable and valid data (rather than intuition or heuristics) to inform choices made and actions taken. (Center on Multi-Tiered Systems of Support, n.d.)
>
> **Multitier Systems of Support (MTSS):** a framework of data-based decision-making and service delivery that utilizes screening, progress monitoring, problem solving to inform universal, group, and individualized supports to address the students' educational needs. (Center on Multi-Tiered Systems of Support, n.d.)

appropriate practices a cornerstone for responsive, effective systems. In this brief, we discuss the challenges associated with SEB screening and its potential role in supporting equity in related practices and outcomes. We offer guiding principles for equity-centered SEB screening as part of prevention and intervention efforts.

Current Status of SEB Screening in Practice

Despite an increased focus on prevention efforts in school settings in recent years, and growing appreciation of the importance of SEB functioning on student outcomes, research suggests that SEB screening efforts in schools are generally lacking. That is, both the scope and methods of implementation are inadequate. For example, data from a recent national survey revealed that the most commonly used "screening methods" include office discipline referrals (ODRs) or internal referrals from teachers (Dineen et al., 2021). These methods of "screening" frequently marginalize racially minoritized youth and are inadequate when moving away from a wait-to-fail model of intervention, given that they rely on data generated from educators' responses to behavior deemed problematic. These *reactive* indicators are subject to a range of biases and can be associated with future discipline disparities (e.g., Amemiya et al., 2020). In addition, they often do little to allow for identification of necessary environmental changes or specific support needs. Continued reliance on these methods suggest that key stakeholders need further support and guidance in identifying appropriate methods, such as universal screening, to identify students' SEB needs.

Universal screening, or the process of proactively screening all students in a building to understand SEB needs, remains relatively rare, with estimates suggesting implementation occurs in only 6% (Dineen et al., 2021) to 13% (Bruhn et al., 2014) of schools or districts. Thus, there is significant opportunity to improve widespread implementation efforts to ensure that student needs are appropriately identified and supported.

The Role of SEB Screening in Supporting Equity

Equity-centered MTSS focuses on the whole child operating within the broader socio-political and ecological context, and emphasizes comprehensive and integrated service delivery (Sullivan et al., 2021a; Sullivan et al., 2022). To this end, it is critical that SEB screening functions in the same manner. It is essential that screening efforts are planned and implemented within a broader context of comprehensive and integrated student supports, such as equity-centered MTSS (see also Sullivan et al., 2022). Failure to embed screening efforts within this context can result in misuse and deleterious consequences (e.g., inappropriately identifying *students* as at-risk when the environment is not conducive to providing sufficient support to meet their *needs*). Particularly where the focus or result is categorizing students, support for student wellbeing is undermined (for discussion, see Sullivan et al., 2021b).

When appropriately implemented, universal screening has the potential to transform access and opportunity to provide support, particularly in a way that can alter within-

child, deficit-based thinking. By re-conceptualizing the primary focus and purpose of screening, from (a) *identifying students as at-risk* to (b) *ensuring appropriate universal supports and linking students and families to enhance opportunity and access to various services*, screening can be instrumental in supporting equity.

Schools are commonly the most accessed providers of mental health support for children and youth (Farmer et al., 2003). Critically, schools provide important points of access for mental health services, particularly for minoritized youth. That is, school-based services reduce numerous barriers to access found in outpatient settings, including transportation, cost, and family involvement (Whitaker et al., 2018). Universal screening can set the foundation for increased access to support across the continuum of needs for social, emotional, and behavioral support.

[Graphic image description: Profile of a child's head made out of paper. There is a cut-out shape of a person rolling back a portion of the paper head, revealing gears inside.]

Guiding Principles for Equity-Centered SEB Screening

Below, we outline seven critical considerations and guiding principles to enhance equity-centered screening. With the understanding that there is no one-size-fits-all approach to universal screening for SEB needs, this brief serves as an initial resource on SEB screening to guide administrators' decision relative to the larger context of their school's environment.

1. Identify the Focus of Screening Efforts

SEB screening should be predicated on shared goals or purpose for understanding and supporting SEB needs or supports in the particular school context in which screening occurs. Too often, SEB screening methods are selected and implemented haphazardly, with little attention to (a) the intended goals and uses of the screening data and (b) the characteristics and needs of the student population and broader community (Dineen et al., 2022). Importantly, administrators and leadership teams must ask the critical question: *What are we screening for?* In the landscape of available universal social, emotional, and behavioral screening methods, numerous options exist, with various approaches capturing different constructs (Miller et al., 2015). For example, some screeners focus on identifying: (a) externalizing and internalizing problems, (b) self-awareness, self-management, social awareness, relationships, and responsible decision-making, (c) social-emotional competencies, (d) social, emotional, and academic behaviors, (e) behavior concerns and adaptive skills, or (f) emotional problems, conduct problems, hyperactivity, peer problems, and prosocial behavior, etc. (Miller et al., 2015). These constructs are not interchangeable or necessarily compatible with any given screening focus. The identified focus—that is, the what and why of screening—should guide selection of screening methods so that selected methods and instruments match the pre-specified purpose.

It is important to consider how the constructs assessed will then be linked to decision-making, supports, and services within an equity-centered MTSS model or other service delivery model. Equity-centered screening emphasizes child-within-context, and does not conceptualize problems as originating exclusively from within the child. Consequently, the focus of equity-centered screening efforts must also include the consideration of ecological factors and their impacts on students and the community served by the school.

2. Adopt a Comprehensive and Integrated Approach

SEB screening should not occur in isolation. Errors of omission can be relatively common in SEB screening efforts, such that a school adopts a particular framework (e.g., school-wide positive behavior interventions and supports) and implements some screening effort constrained to that framework (e.g., ODRs). By applying a siloed approach such as this to screening, we fail to adopt a comprehensive and integrated approach consistent with equity-centered MTSS or other equity initiatives (Atkins, 2013; Sullivan et al., 2022). That is, attributions regarding "problem behavior" – in this case, behavior deemed problematic *by others* –

become centered on the student, without considering the ways in which other aspects of functioning (e.g., wellness, mental health, social skills, academic skills, etc.) and the broader environment (e.g., instructional practices, student-teacher relationships, behavior management) might contribute. We encourage a unified approach to screening, adopted within a comprehensive and integrated equity-centered MTSS framework.

[Graphic image description: Six overlapping thought bubbles. Each has one word on it: where, why, who, how, what, and when.]

3. Remember Language Matters

In this brief, we have intentionally used the term "social, emotional, and behavioral needs" in an effort to enhance clarity and inclusivity of the concepts of focus, avoiding a dogmatic approach unique to a particular framework that might hinder communication between and across stakeholders. One of the challenges of work in this area is that different terms are used to describe similar concepts, and there is limited attention to inconsistencies with terminology used and how that can become a barrier to effective systems. For example, the following terms have all been used in various ways to describe the general idea of SEB screening:

- mental health screening
- social-emotional screening
- behavioral screening
- assets screening
- behavioral health
- non-cognitive factors
- social emotional learning
- positive youth development, etc.

Yet their meanings, associated practices or policy initiatives, and associated scholarship can vary substantially. Intent and terminology used should clearly align.

Key stakeholders must be intentional and deliberate about selecting the terms intended, and use them with precision and consistency. We need to recognize that a lack of shared understanding regarding scope and focus of SEB screening can undermine efforts, such as when leadership team members operate from different assumptions of intent and meanings that contribute to conflicting interpretations of data or related practice and policy change (Miller et al., 2015). Further, we must understand that some terms may be potentially stigmatizing to particular audiences (e.g., the term mental health screening might also convey the idea of mental illness to some, which may carry stigma).

4. Ensure Appropriate Use

All screening methods are developed for a particular purpose. The identified focus of screening should inform subsequent selection of screening methods to ensure the resulting data are appropriate for the intended use by stakeholders and the

developers of the method. Broadly, screening aims to identify student needs in the areas of social, emotional, and behavioral functioning to inform student support efforts (tiered service delivery). This process of need identification is a necessary foundation within an MTSS framework and serves an important role in understanding the potential landscape of social, emotional, and behavioral supports. Screening data can be used for many purposes, including but not limited to:

1. Evaluating sufficiency of core programs and practices.
2. Identifying student SEB support needs.
3. Enhancing equity by better understanding who programs are not serving well.
4. Assisting in administrative decisions surrounding resource needs and allocation.
5. Supporting school improvement efforts.
6. Reporting to key stakeholders (parents, other administrators, etc).

Clarifying the intended purpose and use of the data will ensure that needs of the system are also being met.

Appropriate use also involves understanding the characteristics and needs of the student population and broader community. Importantly, all screening methods are developed for use with a *particular group*. For example, a screener may be developed exclusively for secondary age students as a self-report measure of behavior. Another screener may be developed for K-8 screening of social emotional competencies via teacher

report. Both screeners may have been developed and normed with distinct student samples that vary in age, grade, culture, language, and diversity (e.g., the relative heterogeneity of individuals involve in development). Thus, appropriate use of a screener involves understanding the purpose of the measure and who it was developed with (e.g., a nationally representative sample of students, inclusion of students from marginalized or minoritized groups, etc.; Glover & Albers, 2007). It is critical to ensure alignment between the population the measure was developed for, and the population the measure will be used with.

Relatedly, appropriate use involves ensuring adequate psychometric properties of the measure to support valid decision-making. Making sure there is sufficient evidence to support both the reliability (consistency) and validity (interpretation and use) of scores is critical (Glover & Albers, 2007). Finally, appropriate use also requires that the data are used for ethical decision-making, consistent with the principles of beneficence and non-maleficence. That is, screening efforts should act *for the benefit of those being screened* and we must take care to ensure that our practices do no harm.

5. Consider Contextual Appropriateness
Equity-centered screening practices ensure that the method used is appropriate for the context in which it is used. One facet of appropriateness is the perceived fit, relevance, or compatibility of the screening practice to the school and community context (Glover & Albers, 2007). Consistent with the guiding principles outlined above,

this means an intentional focus on risk factors and exposure(s) potentially impacting students and communities served by the school. For example, exposure to poverty, racism, or other trauma can affect SEB needs (Margherio et al., 2019), yet we can perpetuate oppressive systems if the approach to screening disregards these issues. Ignoring these ecological factors reproduces inequity, mischaracterizes students, and can lead to further disparities in school systems (Kim et al., 2021). Contextually appropriate screening involves understanding the challenges and needs faced by a community and situating screening within that context so that measure selection and data interpretation account for the richness and complexity of context. It involves understanding that, for example, housing insecurity can impact SEB needs, and that using screening to merely identify students for a small group-based skill-building intervention is woefully insufficient in addressing the issue. Contextual appropriateness involves linking students and families to needed services in order to enhance opportunity, access, and wellness.

6. Understand Limitations

Stakeholders and decision-makers must understand the limitations of their universal screening practices, including:

   a) consequences of potential under- or over-identification,
   b) potential unintended negative consequences of screening, particularly for those from marginalized or minoritized groups, and
   c) the likelihood that different informants (i.e., student, parent, or

teacher) will likely provide different perspectives regarding SEB needs.

For example, student informants tend to be better at providing information regarding their own internal, emotional experiences (Kettler et al., 2017), yet students must also be old enough (typically 3rd grade) to complete self-report measures. Similarly, there is a certain convenience in having teachers complete screening measures, as it often results in a high completion rate;

[Image description: Masculine-presenting teacher of Color helping a feminine-presenting elementary-aged student of Color with classwork.]

however, it is important to consider that teachers are also more likely to report externalizing behaviors (Kettler et al., 2017) and may impart biases on the process. Equity-centered screening involves transparency in understanding the limitations of various approaches, and recognizing that invariably, at some point, there is a high likelihood that we will simply get it wrong (i.e., false positive or false negative). This, in turn, necessitates proactive consideration for how to reduce and correct harm.

In the context of equity-centered screening, home-school-community collaboration becomes more important than ever. In particular, a connected systems approach (Adelman & Taylor, 2012) is critical in order to integrate mental health, community, school, and family partners to enhance collaboration and outcomes. Pooling resources across settings can be a powerful mechanism for support. Engaging families early in the process can be instrumental in ensuring contextual appropriateness, supporting buy-in, and enhancing the impacts of screening efforts (Bender et al., 2021).

Cautions and Opportunities in SEB Screening: Adverse Childhood Experiences (ACEs) and Trauma Screening

In recent years, there has been an increased emphasis on adopting a trauma-informed approach to supporting students in school settings. This increased recognition of the prevalence and impact of traumatic events is welcome and long overdue. According to SAMHSA (2014, p.7),

> Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.

The term *trauma-informed* is used widely in the research literature, however there is little consensus or agreement on what that term specifically means, and little rigorous empirical evidence exists to guide best practices (Braynard et al., 2019). Although the intent of such an approach is noble, and there is certainly a need to better address and support students exposed to various adverse childhood experiences—including trauma—caution must also be taken in this area, especially related to trauma screening. Importantly, concerns arise related to: (a) increases in mandated reporting, (b) parental informed consent, and (c) potentially re-traumatizing children without adequate support (Spence et al., 2021). This is not to suggest that we unaware of trauma; indeed we have a moral, ethical, and legal obligation to support children exposed to harm and maltreatment. Rather, we offer this as a caution about the potential consequences of universal trauma screening.

Furthermore, in considering ACEs and the commonly cited finding that Black youth are more likely than White youth to report multiple ACEs, research examining why these disparities exist is scarce (Bernard et al., 2021). Bernard and colleagues (2021) point to the need to consider exposure to racism and racial trauma within this broader framework, and adopt a culturally-informed approach to understanding the intergenerational and multi-level impact of racism on the mental health of Black youth. Indeed, failure to do so will only perpetuate oppression as problematic interpretations of such findings will promulgate. As with other initiatives, using trauma screening to label students without appropriate consideration of needed environmental changes in the

school and beyond can be a vehicle for harm rather than support (Gherardi et al., 2020). Consequently, as schools continue to engage in efforts related to trauma and ACEs, these considerations are critical.

Conclusion

Concerns for students – beyond academic performance – have amplified in the wake of the COVID-19 pandemic and continued acts of racial injustice. Indeed, the national dialogue surrounding student mental health, racial trauma, and social-emotional well-being highlight the critical need of schools to comprehensively address SEB needs now more than ever. By embedding universal screening efforts within equity-centered MTSS, we can begin the process of addressing those needs. In doing so, we can ensure that all of our students are set up for wellness and lifelong success.

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References

Adelman, H. S. & Taylor, L. (2012). Mental health in schools: Moving in new directions. *Contemporary School Psychology, 16*, 9-18.

Amemiya, J., Mortenson, E., & Wang, M. (2020). Minor infractions are not minor: School infractions for minor misconduct may increase adolescents' defiant behavior and contribute to racial disparities in school discipline. *American Psychologist, 5*(1), 23-36. https://doi.org/10.1037/amp0000475

Atkins, M. (2013). Ecological principles for interconnecting school mental health and PBIS: Focusing on what matters most. In L. Eber, S. Barret, & M. Weist (Eds.), *Advancing education effectiveness: Interconnecting school mental health and school-wide Positive Behavioral Interventions and Supports* (pp. 123-125). Retrieved August 15, 2022, from https://assets-global.website-files.com/5d3725188825e071f1670246/5d76c6a8344facab50085275_final-monograph.pdf

Bender, S. L., Daniels, B., & Ryan, K. (2021). Engaging families in the social-emotional/behavioral screening process: Implementation considerations. *Communiqué, 49*(5), 4-9.

Bernard, D. L., Calhoun, C. D., Banks, D. E., Halliday, C. A., Hughes-Halbert, C., & Danielson, C. K. (2021). Making the "C-ACE" for a culturally-informed adverse childhood experiences framework to understand the pervasive mental health impact of racism on Black youth. *Journal of Child & Adolescent Trauma, 14*(2), 233-247. https://doi.org/10.1007/s40653-020-00319-9

Bruhn, A. L., Woods-Groves, S., & Huddle, S. (2014). A preliminary investigation of emotional and behavioral screening practices in K-12 schools. *Education and Treatment of Children, 37*(4), 611-634. doi:10.1353/etc.2014.0039.

Center on Multi-Tiered Systems of Support (n.d.). *Essential components of MTSS*. Center on Multi-Tiered Systems of Supports at the American Institutes for Research. https://mtss4success.org/essential-components.

Dineen, J. N., Chafouleas, S. M., Briesch, A. M., McCoach, D. B., Newton, S. D., & Cintron, D. W. (2022). Exploring social, emotional, and behavioral screening approaches in U.S. public school districts. *American Educational Research Journal, 59*(1), 146-179. https://doi.org/10.3102/00028312211000043

Farmer, E. M. Z., Burns, B. J., Phillips, S. D., Angold, A., & Costello, E. J. (2003). Pathways into and through mental health services for children and adolescents. *Psychiatric Services, 54*(1), 60-66. https://doi.org/10.1176/appi.ps.54.1.60

Gherardi, S. A., Flinn, R. E., & Jaure, V. B. (2020). Trauma-sensitive schools and social justice: A critical analysis. *The Urban Review*, *52*, 482-504. https://doi.org/10.1007/s11256-020-00553-3

Glover, T. A., & Albers, C. A. (2007). Considerations for evaluating universal screening assessments. *Journal of School Psychology*, *45*(2), 117–135. https://doi.org/10.1016/j.jsp.2006.05.005

Kim, E. K., Anthony, C. J., & Chafouleas, S. M. (2022). Social, emotional, and behavioral assessment within tiered decision-making frameworks: Advancing research through reflections on the past decade. *School Psychology Review*, *51*(1), 1–5. https://doi.org/10.1080/2372966X.2021.1907221

Kettler, R. J., Feeney-Kettler, K. A., & Dembitzer, L. (2017). Social, emotional, and behavioral screening: A comparison of two measures and two methods across informants. *Journal of School Psychology, 64,* 93-108. https://doi.org/10.1016/j.jsp.2017.05.002

Margherio, S. M., Evans, S. W., & Owens, J. S. (2019). Universal screening in middle and high schools: Who falls through the cracks*? School Psychology, 34*(6), 591-602. https://doi.org/10.1037/spq0000337

Maynard, B. R., Farina, A., Dell, N. A., Kelly, M. S. (2019). Effects of trauma-informed approaches in schools: A systematic review. *Campbell Systematic Reviews, 15*(1-2). https://doi.org/10.1002/cl2.1018

Miller, F. G., Cohen, D., Chafouleas, S. M., Riley-Tillman, T. C., Welsh, M. E., & Fabiano, G. A. (2015). A comparison of measures to screen for social, emotional, and behavioral risk. *School Psychology Quarterly*, *30*(2), 184-196. http s://doi.org/10.1037/spq0000085

Spence, R., Kagan, L., Kljakovic, M., & Bifulco, A. (2021). Understanding trauma in children and young people in the school setting. *Educational & Child Psychology, 38*(1), 87-98.

Substance Abuse and Mental Health Services Administration (SAMHSA). (2014). SAMHSA's concept of trauma and guidance for a trauma-informed approach. https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA_Trauma.pdf

Sugai, G., & Horner, R. H. (2020). Sustaining and scaling positive behavioral interventions and supports: Implementation drivers, outcomes, and considerations. *Exceptional Children*, 86(2), 120-136. https://doi.org/10.1177/0014402919855331.

Sullivan, A. L., Harris, B., Miller, F. G., Fallon, L. M., Weeks, M. R., Malone, C. M., Kulkarni, T., Proctor, S. L., Johnson, A. H., Rossen, E., Nguyen, T., & Shaver, E. (2021a). A call to action for school psychology to address COVID-19 health disparities and advance social justice. *School Psychology,* OnlineFirst. https://doi.org/10.1037/spq0000463

Sullivan, A. L., Nguyen, T., & Shaver, E. (2022). Foundations of equity-centered MTSS. *Equity by Design*. Midwest and Plains Equity Assistance Center.

Sullivan, A. L., Weeks, M. R., & Nguyen, T. (2021b). Students are not their behavior: Returning to the roots of multitier systems of behavior support. *Equity by Design*. Midwest and Plains Equity Assistance Center. https://greatlakesequity.org/resource/students-are-not-their-behavior-returning-roots-multitier-systems-behavior-support

Whitaker, K., Nicodimos, S., Pullmann, M. D., Duong, M. T., Bruns, E. J. Knaster Wasse, J., & Lyon, A. R. (2018). Predictors of disparities in access and retention in school-based mental health services. *School Mental Health, 10*, 111-121. https://doi.org/10.1007/s12310-017-9233-4

About the Midwest & Plains Equity Assistance Center

The mission of the Midwest & Plains Equity Assistance Center is to ensure equity in student access to and participation in high quality, research-based education by expanding states' and school systems' capacity to provide robust, effective opportunities to learn for all students, regardless of and responsive to race, sex, and national origin, and to reduce disparities in educational outcomes among and between groups. The Equity by Design briefs series is intended to provide vital background information and action steps to support educators and other equity advocates as they work to create positive educational environments for all children. For more information, visit http://www.greatlakesequity.org.

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