

Problem–Solving Interdisciplinary Collaboration to Address Complex Behavior Problems

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EXECUTIVE SUMMARY

One dilemma special education administrators face is coordinating professionals' interdisciplinary efforts to support the behavioral needs of students with disabilities. This case study presents a scenario where the behavior of a student with autism spectrum disorder would be best addressed through collaborative efforts rather than professionals engaging in territorialism and a siloed delivery of services. This case study highlights barriers to working collaboratively, defines competencies for collaboration, and applies a framework for facilitating interdisciplinary collaboration to meet the needs of students within the school setting.

INTRODUCTION

As the complex needs of students with disabilities, specifically autism spectrum disorder (ASD), continue to evolve, so do each of the disciplines supporting them within school settings. Special education has continued to progress to meet the needs of students with autism and their families through thoughtful collaboration across services. This deliberate partnership across disciplines allows for the ethical education

of students with disabilities by capitalizing on the range of expertise offered by an interdisciplinary team. Getting professionals to work harmoniously together can present challenges and can include obstacles to the seamless delivery of services.

Professional collaboration across disciplines in the school setting has become critical in assessing, planning, and implementing goals and objectives for students with or without disabilities (Hernandez, 2013; Friend, 2000). While the potential impact of professionals collaborating is great, the varied training, theoretical perspectives, and backgrounds of professionals often lead to different viewpoints on how best to address the needs of students with disabilities. These diverse and often divergent perspectives leave teachers and related service professionals needing direction from special education leaders to work together effectively to increase student achievement.

The reauthorization of the Individuals with Disabilities Education Improvement Act (IDEIA) (2004) and the Elementary and Secondary Education Act, or the No Child Left Behind Act (2002), required students with disabilities to have access to the same curriculum as their peers without disabilities and has increased special education leaders' roles in ensuring these federal and state mandates are implemented within their districts and school buildings. To effectively do so, special education leaders are tasked with promoting collaboration across educators and related service providers to ensure thoughtful and appropriate provision of instruction and support services for students with disabilities. While IDEIA does not provide a specific definition or parameters for collaboration, it does promote improved collaboration (Hernandez, 2013). As such, professional organizations such as the Council for Exceptional Children (CEC), Association for Behavior Analysis International (ABAI), the American Occupational Therapy Association (AOTA), and the American Speech-Language-Hearing Association (ASHA) have filled this void by incorporating requirements and suggestions for collaborative practices into their guidance and standards.

Within special education, three approaches provide a framework for partnerships: multidisciplinary, interdisciplinary, and transdisciplinary collaboration (Hernandez, 2013; Bowman et al., 2021). Critical variables across these models contribute to successfully transferring skills and knowledge during school collaboration. At the foundational level, each model provides a structure and outline for interaction between team members, and with collaboration aimed at creating a comprehensive support system for students that combines knowledge areas that transcend traditional professional boundaries (Bowman et al., 2021).

Multidisciplinary collaboration involves the synthesis of information gathered by professionals who work separately and independently of one another. This form of collaboration includes converging assessment results and intervention outcomes from the perspective of individual disciplines. Still, it does not include joint planning or intervention and involves limited professional interactions (Bowman et al., 2021).

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