

Behavioural Consultation in Preschool Settings for Children with Behavioural Difficulties: Two
Case Studies

Irene Pastras

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By: Irene Pastras

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Signed by the final examining committee:

Dr. Elsa Lo _____ Examiner

Dr. Miranda D'Amico _____ Examiner

Dr. Hariclia Petrakos _____ Thesis Supervisor(s)

Approved by

Kim McDonough and Sandra Martin-Chang (Graduate Program Directors)

March 8th 2024
Date of Defence

Pascale Sicotte (Dean of Faculty of Arts and Science)

ABSTRACT

Behavioural Consultation in Preschool Settings for Children with Behavioural Difficulties: Two Case Studies

Irene Pastras

Approximately 5%-20% of preschool children exhibit significant challenging behaviours within the classroom, stemming from underlying behavioural or emotional difficulties (Campbell, 1995; Charach et al., 2020). However, most early childhood educators do not feel supported or equipped to handle these challenging behaviours due to a lack of training and resources, low confidence, and a growing pressure to perform (Arnold et al., 2006; Moore et al., 2017). This qualitative research study investigated the impact of implementing Behavioural Consultation (Kratochwill & Bergan, 1990) in preschool classrooms to support educators who intervened with children with behaviour challenges. Collaborative meetings with educators over the course of 10 weeks were implemented to investigate changes in educators' knowledge of children's behavioural needs, educators' knowledge of appropriate strategies, educators' self-efficacy, and children's display of challenging behaviours. Findings from pre- and post- intervention interviews, questionnaires, and child observations were analysed. Thematic coding revealed that preschool educators' experiences with the consultation process partially improved their self-efficacy when they used more developmentally appropriate behaviour strategies that positively impacted the children's behaviours. Educators' use of positive behavioural strategies matched the children's developmental and individual needs and served to improve the educators' perceptions of the children. These findings have implications for designing professional development programs in preschool settings to support educators who intervene with children with behavioural difficulties.

Keywords: Behavioural Consultation, Preschool, Behaviour Problems, Early Intervention, Teacher Support

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Introduction

Challenging behaviours are defined as inappropriate, disturbing, or harmful behaviours (Barnett et al., 2006). Approximately 10-20% of preschool-aged children exhibit significant challenging behaviours, stemming from underlying behavioural or emotional difficulties (Campbell, 1995; Charach et al., 2020). These difficult behaviours can be caused by an interaction between environmental and genetic mechanisms, impairing the children's social and emotional functioning (Campbell, 1995). For some children, such behaviours become far reached from the norm in terms of their intensity and longevity, requiring a DSM-V diagnosis. A diagnosis can span from Attention-Deficit/Hyperactivity Disorder (ADHD), Oppositional Defiant Disorder (ODD), or Conduct disorder (CD) (Campbell, 2002). Since difficult behaviours identified in preschool often persist into later childhood and adolescence, successful intervention begins early while children are on a fast developmental track and behaviours are malleable (Campbell & Ewing, 1990; Keenan & Shaw, 1994).

Early childhood settings represent an important avenue for intervention; however, preschool educators do not feel prepared or equipped to support children with behavioural difficulties in their classrooms (Arnold et al., 2006; Moore et al., 2017). Self-efficacy, as defined by Bandura (1995) in his social learning theory, refers to "the belief in one's capabilities to organize and execute the courses of action required to manage prospective situations" (p.2). Therefore, a teacher's self-efficacy is tied to their belief in their ability to implement appropriate strategies to manage their classrooms. Educators with low self-efficacy are not confident in their ability to manage challenging behaviours and are therefore more likely to experience emotional exhaustion and stress during periods of heightened classroom disturbance (Dicke et al., 2014; Tschannen-Moran & Hoy, 2001). Furthermore, teachers in early childhood settings report that it is challenging to run a classroom while trying to accommodate children with behavioural or emotional difficulties, which can mark an additional contributing factor to feelings of low self-efficacy (Mark-Wilson et al., 2002). Teachers often express their need for additional training and support for coping with challenging behaviours (Center for Evidence-Based Practices, 2005). Therefore, raising teachers' self-efficacy, essentially supporting their ability to manage challenging behaviors and boosting their confidence, may contribute to a positive change in children's behaviours.

Despite feelings of inadequacy, teachers are still expected to implement effective strategies for behaviour management within their classrooms. Schools emphasize the Response-to-Intervention (RTI) approach, meaning that teachers are expected to implement evidence-based class-wide behavioural management practices, by identifying and supporting children with difficulties, in order to minimize referrals to outside interventions. Thus, RTI promotes an inclusive classroom environment (Reinke et al., 2013). RTI aims to prevent specific difficult behaviours in the classroom, as well as their long-term risks (social and academic). The RTI approach is a tiered model that requires different levels of support at each tier: Tier 1 involves class-wide intervention to improve student engagement and behaviour; Tier 2 involves supplemental intervention to students who are not responding well to Tier 1, in which additional intervention to gain specific skills is provided by teachers guided by professionals; Tier 3 involves individualized intervention for children not responding to Tier 2, in which case, objectives are set and monitored for progress by parents, professionals, and teachers (Barnett et al., 2006). Based on the RTI framework, it seems the brunt of the responsibility of implementing and subsequently evaluating the efficacy of evidence-based practices for reducing challenging behaviours falls on the shoulders of educators. However, the training and resources needed to

match this expectation are missing (Reinke et al., 2013). A study by Reinke, Stormont, Herman, Puri, and Goel (2011) investigated teachers' perceptions of their own experiences, knowledge, and training needs surrounding mental health initiatives in the school setting and discovered that most teachers who were working with children with socio-emotional difficulties perceived school psychologists as having a greater role in supporting children's socio-emotional development than themselves. Teachers disassociate teaching academic lessons from teaching social-emotional lessons, when in reality, they are intertwined. This explains why teachers perceive their own training and role expectations as solely involving academic teaching. Furthermore, teachers reported feeling unprepared to appropriately manage children's challenging behaviours in the classroom *specifically* due to a lack of training and skill in emotional teaching. Teachers who feel unsupported by a lack of training and knowledge are less likely to take proactive steps towards supporting children with socio-emotional difficulties (Woolfolk et al., 1990). Therefore, an intervention that supports teachers by providing them with appropriate knowledge and training could prove useful in incorporating teaching social competence into their role as educators and improving their perception of their own abilities to manage children with socio-emotional difficulties.

Implementation of a successful intervention can provide teachers with appropriate knowledge and strategies for managing difficult behaviours and help them reduce feelings of low self-efficacy and promote positive classroom environment. This type of intervention may benefit teachers by increasing their confidence in supporting children with behavioural difficulties and potentially limit burnout, emotional exhaustion, and high employment turnover that may come from trying to meet the high expectations of RTI with minimal support. Increased self-efficacy in educators could also facilitate important changes and set the course for positive child outcomes. If educators fail to provide adequate early intervention, preschool children with behaviour difficulties could experience strained social interactions, stigmatization as "problem children," and fail to develop behaviours associated with "school readiness" (preparation for elementary school). Remaining unaddressed, children's challenging behaviours may also disrupt their peers' learning and socialization environments, therefore, considering the classroom as a whole is also important. Taking on a class-wide approach considers that the impact of interventions for children with behavioural difficulties are nested within the classroom context. Thus, the successful implementation of an intervention considers a mechanism of change starting with the improvement of teachers' self-efficacy, through additional training and resources, leading to the improvement of specific children's challenging behaviours, and ultimately leading to a more "positive" classroom environment, i.e., an environment conducive to learning with minimal disruptions (Grannan et al., 1999; Mashburn & Pianta, 2006). Many interventions have primarily considered parents of children with behavioural difficulties, while few have prioritized teachers (Webster-Stratton, 2001). Classroom-based interventions for teachers in the preschool setting, specifically involving teacher training, are uncommon in the literature of the field (Webster-Stratton, 2001). Therefore, the classroom presents a promising setting for the implementation of behavioural consultation practices.

Originating in social psychology, behavioural consultation as a practice has gained importance in the past decades. In the field of social psychology, a shift from assessment-related approaches to problem-solving approaches resulted in the use of consultation in educational settings to improve children's challenging behaviours (Kratochwill & Stoiber, 2000). As developed by Bergan in 1977, later refined by Kratochwill and Bergan in 1990, the behavioural consultation model is a four-stage problem-solving approach used to remediate children's

challenging behaviours through collaboration between a consultant and consultee(s) (parent, educator, or both) (Kratochwill & Bergan, 1990). Most often, paraprofessionals, who hold master's degrees in the fields of psychology or social work, act as consultants (Sladeczek et al., 2006). The stages of the model include problem identification, problem analysis, treatment plan and implementation, and treatment evaluation. During the problem identification stage, the consultant and consultee (parent, teacher, or both) discuss the challenging behaviours at hand in observable terms, identify antecedents and consequences of the challenging behaviours, and develop a way to measure improvements in these behaviours. During the problem analysis stage, the consultant and/or consultee evaluate(s) baseline behaviour and develop(s) a manageable intervention plan for target behaviours. During the treatment plan and implementation stage, the consultee works toward implementing the agreed-upon intervention plan. During the treatment evaluation stage, the consultant monitors whether the consultee is following the intervention plan as intended and can subsequently provide feedback or modifications to the plan. The consultation process is complete once the desired level of behaviour is achieved (Kratochwill & Bergan, 1990). The behavioural consultation model emphasizes the importance of a collaborative relationship between the consultant and consultee rather than a hierarchical relationship. In addition, the focus of the intervention suits the concerns and needs of the consultee with the option to modify the plan during the course of the consultation process for optimal adherence (Kratochwill et al., 1995). The behavioural consultation approach is indirect, meaning it aims to improve children's behaviour through intervention with a major figure in their lives (parent and/or teacher) as opposed to a direct approach that focuses on individual therapy. Consultation can be undertaken with parents, teachers, or both in a joint intervention (Sheridan & Kratochwill, 1992). Also, consultation can be either child-centered, i.e., the goal is to address children's individual behaviours, program-centered, i.e., the goal to improve teachers' and/or parents' understanding of children's challenging behaviours, or a combination (Cohen & Kaufmann, 2005). Behavioural consultation is most likely to be effective if the consultee(s) accept(s) the proposed intervention and implements it as intended (Witt & Elliot, 1985).

Behavioural consultation is well established in the United States and has dominated their approach to school intervention. Upon examination of the perceptions of Canadian social psychologists in regard to behavioural consultation compared to U.S. social psychologists, Canadians have a similar perception to their U.S. counterparts, demonstrating a trend to use the consultation model before other interventions and adhere to its methods (Sladeczek et al., 2006). Part of the reason for its preference by Canadian mental health professionals is due to the overall positive outcomes for the children and teachers involved. In a meta-analysis, Sheridan et al. (1996) evaluated the outcomes of school-based consultation and found that 89% of the 46 studies evaluated reported at least one positive outcome for teachers and/or children.

As the likelihood of a preschool teacher having a child with behavioural difficulties in their classroom increases, the search for an appropriate intervention continues and a school-based intervention such as behavioural consultation is a promising avenue; however, behavioural consultation can take on many forms (Campbell, 1995; Earls, 1980). Behavioural consultation has been implemented with teachers *either* for the purpose of reducing difficult behaviours in the classroom *or* difficult behaviours in individual children (Carter & Van Norman, 2010; Fabiano et al., 2018; Gilliam, 2007; Hanisch et al., 2020; McGoey et al., 2013; Perry et al., 2008; Raver et al., 2008; Raver et al., 2009). It has also been used with teachers and parents to improve individual children's outcomes across both settings (home and school) (Upshur et al., 2009; Wilkinson, 2009; Williford & Shelton, 2008). Within the various purposes of implementing

behavioural consultation, behavioural consultation can shift from focus on the outcomes for the children, the teacher, or both (Alkon et al., 2003; Brock & Beaman-Diglia, 2018; Hanisch et al., 2020; Gilliam, 2007). This review of the literature on behavioural consultation focuses on the model's different applications, purposes, and outcomes.

Behavioural Consultation Model for Class-Wide Improvement

The school-based behavioural consultation model is used to remediate children's individual behaviours by the entire classroom's behaviour. It is important to note that the emotional climate of the preschool classroom can predict children's self-regulation and learning (Goldstein et al., 2001). Thus, children should be in a positive classroom environment that supports their socio-emotional development. To avoid negative behaviour displayed by one child impacting their peers' behaviour, an educator should be skilled in classroom management. By deploying effective classroom management strategies, the educator would remain in control of their classroom and avoid becoming frustrated by classroom mayhem (Goldstein et al., 2001). To assist educators in creating classrooms that appropriately address challenging behaviours for optimal social-emotional development, a behavioural consultation model can be useful. Using the behavioural consultation model, Raver et al. (2008) undertook a study to test the effectiveness of classroom-based behaviour training on teachers' behaviour management abilities. The goal was to examine whether these services would reduce 3–5-year-old children's risk of behavioural difficulties while preparing them for elementary school. Thirty-five preschool classrooms were included in this study, led by ninety-four teachers. Classrooms were randomly assigned to a control group, who received no intervention, and an experimental group, who received training sessions and coaching lead by a consultant with a Master's in social work. Baseline information regarding the classrooms' emotional climate were collected through observations. Emotional climate encompassed emotional tone of the classroom, teachers' enthusiasm and enjoyment of teaching, teachers' sensitivity to children's needs, and use of management strategies to redirect children's challenging behaviours. The educators in the experimental group were provided with five training sessions (weekly) that covered appropriate classroom guidance strategies and were visited by coaches who provided feedback and modeling. The classrooms who received the training intervention experienced significant improvements in their emotional climate compared to their baseline observations. Also, the educators in the experimental group became more enthusiastic, more receptive to their student's needs, and more likely to employ appropriate proactive strategies for classroom management. In a similar study, Raver et al. (2009) used a teacher training intervention to assess class-wide improvements in behaviour. Thirty-six low-income preschool classrooms participated, half of which were assigned to a control group and the other half to an experimental group. Mental health consultants, who were master's graduates in social work with experience working with children and families, provided teachers in the experimental group with twenty weeks of consultation services. These services included teaching the educators various behaviour management strategies, coaching the educators to implement these strategies, providing educators with stress reduction workshops, and providing child-directed services to the children with the greatest behavioural difficulties. Teacher- and observer-rated baseline data were collected in regard to children's difficult behaviours in the classroom. It was found that preschool children in the experimental classrooms exhibited less disruptive and defiant behaviours, such as physical and verbal aggression, than the children in the control classrooms. These studies demonstrate that through teacher training of appropriate behaviour management strategies, children in the classroom exhibit fewer challenging behaviours and teachers in the

classroom become more considerate of their students' needs and employ greater behaviour management strategies, creating a more positive classroom climate (Raver et al., 2008; Raver et al., 2009).

While studies like Raver et al. (2008) and Raver et al. (2009) used the behavioural consultation model to focus more on professional development in teachers (behaviour management strategies), other studies, like Carter and Van Norman (2010), used the model to focus on helping preschool educators reconfigure their classrooms to be conducive to positive behaviours in children aged 3-to-5 years. Their study provided preschool educators with Positive Behavior Support (PBS) to help manage difficult behaviours in the classroom. The PBS intervention used consultants, who were graduate-level students in early childhood special education, to help teachers redesign their classroom environments, schedules, and materials to promote positive classroom behaviour; also, teachers were trained to acknowledge children for engaging in such positive behaviour. Children's engagement in the classroom and teachers' implementation of PBS practices were evaluated before and after consultation. Following consultation, observations indicated that teachers used more PBS practices in their classrooms, which seemed to elicit an increase in children's classroom engagement. This study demonstrates that by assisting teachers in reconfiguring their classrooms and acknowledging children's positive behaviours, teachers begin to employ these strategies more frequently, leading to an increase in children's classroom participation (Carter & Van Norman, 2010).

Another study by Fabiano et al. (2018) assessed the effectiveness of consultation on teachers' classroom practices by providing coaching and feedback to teachers. Eighty-nine elementary school teachers collaborated closely with consultation coaches, who were undergraduate and graduate students training in school psychology, to create a goal-oriented plan to improve elementary teachers' behaviour management practices in the classroom. Also, feedback and monitoring were provided to the teachers in order to optimize the efficiency of the agreed upon plan. After four thirty-minute consultation sessions, teachers (self-report) and observers reported an increased use of various behaviour management strategies by the teacher. This shows that a collaborative effort between the consultant and consultee (teacher), including the creation of a goal-oriented plan and consistent feedback and monitoring can promote the teacher's use of class-wide behaviour management strategies (Fabiano et al., 2018).

These studies demonstrate that providing coaching services to support and educate preschool and elementary teachers on effective classroom practices, increases teachers' use of behaviour management strategies, their sensitivity to children's needs, and their acknowledgement of children's positive behaviours, contributing to minimizing children's challenging behaviours and creating a more positive classroom environment. In turn, this positive classroom environment can help foster children's socio-emotional development and avoid educator frustration. Therefore, teacher-directed behavioural consultation is effective for class-wide improvement (Carter & Van Norman, 2010; Fabiano et al., 2012; Raver et al., 2008; Raver et al., 2009).

Conjoint Behavioural Consultation Model for Children's Individual Improvement

Conjoint behavioural consultation is a version of the behavioural consultation model in which the consultant works collaboratively with the child's teacher and family to address challenging behaviours (Sheridan & Kratochwill, 1992). Thus, the relationship between home and school is central in this model of behavioural consultation. The benefits of the conjoint behavioural consultation intervention are that the consultant can gather information about the child through multiple sources and child-centered intervention can be offered consistently across

multiple settings (home and school) (Sheridan & Kratochwill, 1992). In the case that intervention is offered across different settings, persistent change in behavioural functioning could continue across early childhood (Sheridan & Kratochwill, 1992). The study of Upshur et al. (2009) is a case where the researchers employed conjoint behavioural consultation to test student and school program outcomes. One hundred and thirty-six preschool children aged 3-5 years, who were exhibiting challenging behaviours such as aggressive behaviour and maladaptive behaviour were separated into control and experimental groups. The intervention involved sessions with teachers, parents, both teachers and parents, and individual children with externalizing behaviour difficulties. The teachers of the children in the experimental group were assigned a consultant that was a Master's-level clinician in mental health or social work, who: focused on providing training on child behaviour and development to teachers; modeled strategies that address challenging behaviours to teachers; and assisted teachers to create parenting education activities. The parents of the children in the experimental group also received parent consultation and family therapy from the consultant. Also, there were parent-teacher meetings mediated by the consultant. Finally, individual children in the experimental group were provided with on-site therapy sessions with the consultant. The behaviour of the children in the experimental group improved significantly more than that of children in the control group, as rated by their teachers. In a similar study, Wilkinson (2005) used conjoint behavioural consultation with the parents and teachers of two elementary school children who were 9 years old with behavioural difficulties, with the goal of improving the teachers' and parents' behaviour management skills. The consultant, who was a school psychologist, held meetings with the parent and teacher, collaboratively setting up goal-oriented intervention plans for each child to be implemented in the school and home settings to improve their off-task behaviours and noncompliance with requests/rules. In these meetings, the discussion of an individualized intervention plan by the teacher and parent focused on target behaviours, in this case, off-task and noncompliance behaviours, goals for reducing target behaviours, and use of concrete strategies. Furthermore, consultant monitoring and feedback was offered to the parents and teachers to keep track of the child's progress. At the end of the consultation process, the two children's self-management abilities, meaning their ability to remain on-task and comply to requests, noticeably improved as rated through formal observations by the consultant. These increases remained stable over time (4 weeks). Additionally, both set of parents and teachers conveyed their satisfaction with the intervention process and its positive outcomes. The studies by Upshur et al. (2009) and Wilkinson (2005) employed a conjoint behavioural consultation model, providing intervention to teachers, parents, and individual children with behaviour difficulties with the goal of evaluating changes in children's difficult behaviours. Both studies showed that such intervention reduces individual children's difficult behaviour, showing overall positive outcomes.

While the studies of Upshur et al. (2009) and Wilkinson (2005) focused on the positive outcomes of conjoint behavioural consultation as it pertains to children with behavioural difficulties, there are also promising studies that shift the focus to parent and teacher outcomes. Williford and Shelton (2008) employed a conjoint consultation model in their study to decrease disruptive behaviours in preschoolers. However, they not only looked at the outcomes of this intervention on the children with externalizing behaviour difficulties but also their parents and teachers. A total of one hundred and three preschool children, aged 3-5 years, participated in this study, evaluated prior to the study as displaying challenging behaviours. The teachers of the children in the experimental group were provided with group and individual training sessions to learn appropriate classroom management strategies (based on the teacher's preference and the

child's difficulties) and strengthen child-teacher relationships. These training sessions were provided to them by consultants who were Ph.D. students in clinical psychology. Additionally, the parents of the children in the experimental group were encouraged to participate in weekly parent training sessions that focused on appropriate strategies for managing their children's challenging behaviours and promoting positive behaviours at home. When compared to the control group, the intervention used in the experimental group decreased children's challenging behaviours, increased teacher-employed strategies for behaviour management, and increased appropriate parenting practices. In another comparison, teachers that received the intervention found various research-based strategies for managing difficult behaviors easier to implement than teachers who did not receive the intervention. Finally, parents of children in the experimental group reported increases in their use of effective parenting practices relayed to them through the training sessions.

These studies demonstrate that providing joint consultation services to the teachers and parents of children with behavioural difficulties leads to positive outcomes for the children by improving their self-management skills and reducing challenging behaviour, their teachers by increasing their confidence and use of behaviour management strategies, and their parents by increasing appropriate parenting practices. Therefore, conjoint behavioural consultation is effective for child, teacher, and parent improvement (Upshur et al., 2009; Wilkinson, 2009; Williford & Shelton, 2008).

Behavioural Consultation Model for Children's Individual Improvement

Another way of improving individual children's behaviour is to adapt the behavioural consultation model to focus on the teacher-child relationship. In a study conducted by McGoey et al., (2013), the researchers investigated the effectiveness of preschool behavioural consultation on diminishing the challenging behaviours of children aged 2-to-5 years, while increasing their initiative, self-control, and attachment. Over the course of a year, seventy-five preschool educators received weekly consultation services with a masters-level consultant. During these meetings, the consultant would help the educators identify the problem behaviours of children with behavioural difficulties and provide educators with appropriate strategies for managing the exhibited behaviours. At the end of the intervention, the researchers observed a decrease in children's challenging behaviours and an increase in their prosocial behaviour, self-control, and initiative. In a similar study, Perry et al. (2008) examined if consultation with teachers would reduce the risk of expulsion for preschool children with behavioural challenges between the ages of 10 months and 7 years. This study was relevant seeing as an increasing number of preschool children in Massachusetts, where the study took place, are being expelled from early childhood care settings because of their problem behaviour. Master's level behaviour specialists acted as consultants and went into the classrooms of one-hundred and ninety-two children who were at risk for expulsion due to their challenging behaviours. Challenging behaviours included aggressive behaviours, disruptive behaviours, and hyperactivity within the classroom. Teachers were offered suggestions and examples by the consultants through the modeling of effective strategies meant to reduce problem behaviours and increase prosociality in children. Additionally, they were also provided with training courses targeted at how to cope with antisocial behaviour. Each child was followed by the consultant for one month in the case that modifications were necessary to their individualized intervention plan. In their post-intervention evaluation, children exhibited fewer challenging behaviours and more prosocial skills compared to their pre-intervention evaluation (teacher-rated scales and observations); therefore, a decrease in challenging behaviours also decreased the risk for expulsion in these children. In both these

studies, the researchers observed the benefits of behavioural consultation on children with challenging behaviours, even with as little as one consultation with the teacher(s) (McGoey et al., 2013; Perry et al., 2008).

The focus and benefits of the behavioural consultation model can include educators as well. Such an intervention works to expand teachers' knowledge, understanding of behavioural difficulties in children, and equips them with behaviour management skills (Alkon et al., 2003). Therefore, the additional support helps reduce educators' frustration with children who exhibit challenging behaviours (Alkon et al., 2003). Alkon et al. (2003) evaluated the outcomes of behavioural consultation in twenty-five early childcare centers with the goal of assessing the effects of behavioural consultation on teachers' self-efficacy in managing challenging behaviours. The daycare centers had received consultation services which included individual meetings with teachers and families, as well as group meetings with the childcare center staff. The meetings were focused around improving the teachers', parents', and staffs' understanding of children's difficult behaviours and overall socio-emotional development. The researchers discovered that in center's who received consultation for over one year, teachers' self-efficacy and competence improved compared to their pre-consultation levels, as rated by questionnaires, observations, and focus groups; additionally, teachers reported that the consultation services they had received played a valuable role in improving their behaviour management practices. Further demonstrating the positive effects of the behavioural consultation model on teachers, a case study by Brock and Beaman-Diglia (2018) investigated the effects of coaching on two educators' abilities to manage a 5-year-old child with behavioural difficulties. A consultant coached both educators on appropriate strategies for managing difficult behaviours (behaviours that disrupt the child's ability to learn and interact with others in the classroom), for example, in the case of the child studied, throwing objects in the classroom, screaming, and refusing to comply to teacher directions. The consultant, who was a researcher in special education, did this through modeling these strategies and providing feedback on the educators' performances, assessed before and after the intervention by observers. Following the intervention, the strategies provided during the coaching sessions were observed (by the consultant) being utilized by both educators during their interactions with the child with behavioural difficulties. In both these studies, behavioural consultation with teachers improves educators' self-efficacy and use of appropriate strategies for managing challenging behaviours (Alkon et al., 2003; Brock & Beaman-Diglia, 2018).

Another area of focus for behavioural consultation is the joint effects/benefits of the model on children with behavioural difficulties *and* their teachers. A study conducted by Hanisch et al. (2020) examined the effects of teacher training on children's externalizing behaviours and teachers' self-efficacy related to managing these behaviours. Fifty elementary school teachers participated by receiving twelve modules of training given by a child psychotherapist. These modules consisted of introducing general information about children with behavioural difficulties, establishing achievable goals for these children, optimizing the classroom environment for behaviour management, building teacher-student relationships, reducing teacher stress through stress management strategies, utilizing appropriate strategies for supporting goal behaviour in children, developing self-regulation skills in teachers, and providing methods of cooperating with parents. Before and after the training, teachers were asked to evaluate sixty 8-year-old children's challenging behaviours, which included aggressive behaviours, non-compliance behaviours, impulsivity, hyperactivity, and attention problems. Teachers were also asked to evaluate their own feelings of self-efficacy in managing these behaviours. After the training was complete, researchers discovered an increase in teachers' confidence for managing

difficult behaviours and an increase in their use of positive strategies with target children. Additionally, there was also a notable decrease in the target children's problem behaviours. In a similar study, Gilliam (2007) examined the effects of consultation on the externalizing behaviours (oppositional behaviour and hyperactivity) of preschool children aged 0-to-5 years and their classroom environment. An additional focus was to record any changes in teachers' beliefs and stress in response to behavioural consultation. Forty-eight preschool teachers were separated into control and experimental groups. The educators in the experimental group were offered an 8-week long intervention that included 4-6 hours of consultation per week. Consultant, who were master's level students, provided educators with an action plan aiming to improve their use of strategies for managing the challenging behaviours of children with behavioural difficulties, improve their classroom management skills, create strong teacher-child relationships, and create partnerships with parents. The children's behaviour, the classroom environment, and the teachers' stress and beliefs were evaluated prior to the study and at the study's completion. Although there were no significant effects on the educators' beliefs, stress or the classroom environment, there was noticeable improvement in the target children's problem behaviours.

These studies demonstrate behavioural consultation has positive effects on children, such as decreasing their challenging behaviours and on teachers, such as increasing their self-efficacy and use of appropriate behaviour management strategies. Therefore, behavioural consultation can be used to improve teacher's knowledge and self-efficacy related to managing individual children's challenging behaviours, which may in turn contribute to decreases in such behaviours (Alkon et al., 2003; Brock & Beaman-Diglia, 2018; Gilliam, 2007; Hanisch et al., 2020; McGoey et al., 2013; Perry et al., 2008).

Overall, the occurrence of preschool children with behavioural and social-emotional challenges is significant (10-20%) (Campbell, 1995; Earls, 1980). The reality remains that many educators will face a child with such challenges in their classrooms. However, many educators do not feel confident in their knowledge and skills to appropriately support children with challenging behaviours (Moore et al., 2017). Some barriers to educators' self-efficacy include the lack of resources and training to improve upon their skills and a heightening pressure to adhere to a RTI framework (Center for Evidence-Based Practices, 2005; Reinke et al., 2013). Behavioural consultation can prove a promising avenue in providing preschool teachers with additional support and guidance to manage difficult behaviours in children, along with providing early intervention to reduce future risks (Raver & Knitzer, 2002; Webster-Stratton & Taylor, 2001). By focusing on the collaborative relationship between the consultant and consultee, behavioural consultation allows teachers to play an active role in the intervention process (Kratochwill et al., 1995). Behavioural consultation can be implemented in the school setting for different purposes: for providing the teacher with the knowledge and resources to address their behaviour concerns for the *entire* classroom, thus promoting a positive classroom climate; for joining *together* the teacher and parents to improve on individual children's difficult behaviours across settings; and for providing the teacher with the *knowledge and resources* to address individual children's difficult behaviours, thus avoiding further disruption to the class and improving children's outcomes (Carter & Van Norman, 2010; Fabiano et al., 2018; Gilliam, 2007; Hanisch et al., 2020; McGoey et al., 2013; Perry et al., 2008; Raver et al., 2008; Raver et al., 2009; Upshur et al., 2009; Wilkinson, 2009; Williford & Shelton, 2008). While these outcomes are child-centered, behavioural consultation has also shown positive teacher-centered outcomes wherein the consultation process works towards improving a teacher's confidence in

their ability to manage challenging behaviours (Alkon et al., 2003; Brock & Beaman-Diglia, 2018; Gilliam, 2007; Hanish et al., 2020).

The Present Study

Classroom-based interventions in the preschool setting that specifically involve teacher training, such as behavioural consultation, are uncommon in the literature and practice (Webster-Stratton, 2001). However, the research that does exist shows that having a teacher trained in appropriate behaviour management strategies with high self-efficacy in managing challenging behaviours leads to positive outcomes for children with challenging behaviours along with a positive classroom environment (Carter & Van Norman, 2010; Fabiano et al., 2018; Gilliam, 2007; Hanisch et al., 2020; McGoey et al., 2013; Perry et al., 2008; Raver et al., 2008; Raver et al., 2009; Upshur et al., 2009; Wilkinson, 2009; Williford & Shelton, 2008). Therefore, it is important to study a behavioural consultation-like intervention in action to gain the perspective of the educators and work towards supporting their needs for managing children with behavioural difficulties. By investigating the use of behavioural consultation with preschool teachers as an indirect method of early intervention to improve the outcomes of children with behavioural difficulties, we can begin to bridge the gap between research and practice. Studying behavioural consultation in the preschool setting can reveal the direction of the relationship between teachers' self-efficacy related to managing challenging behaviours and outcomes of the children *with* challenging behaviours. In this way, a model of change can be proposed. Therefore, through using the behavioural consultation model, the purpose of this type of study would be two-fold: (1) to assess changes in preschool educators' knowledge and confidence in dealing with children with behavioural difficulties and (2) assess changes in children's challenging behaviours.

Methodology

As a special educator working with preschool children with behavioural and language difficulties, I came to notice a dismal disconnect between the expectations of an educator's ability to manage children with behavioural difficulties and the support provided by the institution, in the form of training and guidance, to achieve these expectations. From my informal observations and inquiries, most educators seemed overwhelmed when it came to managing the challenging behaviours of children with behavioural difficulties, often citing a lack of training or guidance that seems to spur their feelings of frustration; in turn, this ongoing frustration seemed to affect their overall confidence in dealing with these challenging behaviours. Another overwhelming factor was the constant emphasis on "controlling the classroom," which increased the pressure on the educators to maintain a harmonious classroom. It seemed common for educators to want to control the challenging behaviours of children with behavioural difficulties before they spread to the whole classroom, initiating class-wide mayhem. However, without the adequate support resources to advise them otherwise, I had seen educators resort to "fear" strategies, such as punishment or yelling, to capture the attention of the child and force compliance and good behaviour. I had experienced first-hand the lack of support for educators who were struggling to manage children's challenging behaviours on their own. Whether it is through comments such as "I can't handle this anymore" or looks of exhaustion and defeat, educators seemed to be expressing their need for help. Therefore, it is extremely important to provide educators with support and guidance in order to heighten their confidence, avoid such negative feelings, and align their management abilities with the expectations of the role.

Most studies on the effects of behavioural consultation in preschool focus on either the educators (program-focused) or on the children with behavioural difficulties (child-focused) (Cohen & Kaufmann, 2005). Through a qualitative research approach, this research study aimed to examine the effects of behavioural consultation on both the children with behavioural difficulties and their educators, what is essentially a combined focus approach, by conducting in-depth case studies.

Participants

The population of interest was daycare children with behavioural difficulties and their educators. The participants were recruited through convenience sampling, meaning the participants were chosen through the researcher's access and familiarity with the population of study. The participants recruited were two children, one who was 3 years old and the other who was 4 years old. Both children were followed by the researcher, who works in their daycare settings as their special educator. Each child had been flagged to have behavioural difficulties by a behavioural technician working for a developmental clinic. Furthermore, each child had an intervention plan in place comprised of achievable objectives devised by the behavioural technician and the researcher (special educator). Each child's educator was also recruited to participate in the research study.

Role of the Consultant

In this research study, it is important to consider that I held multiple roles: researcher, observer, and interventionist. I carried out the proposed intervention, observed the participants of the study, and analyzed the outcomes. I worked as a special educator with the children in the study once per week for an hour and half to address various behaviour goals communicated by the behavioural technician. For example, goals to help with self-regulation difficulties or impulsivity. I also worked with the children's educators as colleagues. However, I did not have systematic discussions with educators about the children with behavioural difficulties on a formal or regular basis. My main focus as a special educator was to offer services to the children (child-focused). This did not include extensive conversation or consultation with the educators. Therefore, my role as a special educator did not overlap with my role as the researcher and consultant during the behavioural consultation process.

Experimental Design and Procedures

A qualitative case study approach was used to observe and understand the impact of a behavioural consultation-like model on children's challenging behaviours and on preschool educators' knowledge and confidence in managing children with behavioural difficulties. The model for behavioural consultation of the current study was largely influenced by Kratochwill and Bergan's 1990 model. It followed the same 4-stage problem-solving approach as proposed by Kratochwill and Bergan (1990), including problem identification, problem analysis, treatment plan and implementation, and treatment evaluation. The overall goal of behavioural consultation is to solve, within the current environment, a set of social problems a child is experiencing alongside their educator (Kratochwill & Bergan, 1990). Through this approach educators and consultants are individuals with their own level of expertise, who work collaboratively to alter a set of problem circumstances through equipping the educator with behaviour management skills (Kratochwill & Bergan, 1990). In this way, the consultation process directly benefits the educators and indirectly benefits the children (Kratochwill & Bergan, 1990).

Pre-Intervention

Before beginning the intervention process, I gained access to the daycare settings in which I worked to conduct the study. I first contacted my employer to seek approval to conduct a

study outside my work role. My employer signed a consent form to allow me to conduct my study (See Appendix A). Following this, the directors of the daycares (two directors) were contacted to seek approval to conduct this study in their early childhood establishment. They each signed a consent form to allow me to conduct my study (See Appendix B). Once this permission was granted, the daycare administrator (the same administrator for both daycares) approached the two educators about participating in the study to avoid coercion by the researcher considering that I had a pre-existing relationship with both educators. The administrator provided a brief overview of the study to the educators. The administrator let me know that she believed the educators showed interest in participating. At this time, I met with them to provide them with more detailed information about the study such as a brief overview of the purpose of the study, its procedure, and their roles in the intervention process. Once the educators accepted to participate, they signed a consent form, further explaining the nature of the study and assuring confidentiality throughout the entire process (See Appendices C & D). After the educators provided their consent, the daycare administrator (the same administrator for both daycares) approached the two sets of parents about their children participating in the study to avoid coercion by the researcher considering that I had a pre-existing relationship with both sets of parents. The administrator provided a brief overview of the study to both sets of parents. The administrator let me know that she believed both sets of parents were interested in their child participating. At this time, I met with them to provide them with more detailed information about the study such as a brief overview of the purpose of the study, its procedure, and the roles of their children within it. Once they accepted, they signed a consent form for the participation of their children, further explaining the study and assuring confidentiality throughout the entire process (See Appendices E & F). The parents' consent also covered access to their children's evaluation reports and current intervention plan with me, their special educator. Upon consent, both parents and educators were assured that they may withdraw their consent from the study at any time for any reason. Additionally, at the time of consent, the educators were asked to fill out a Demographic questionnaire with information pertaining their age, sex, ethnicity, education level, and years of experience working with children (See Appendices G & H). Parents of the children with behavioural difficulties were also asked to fill out a Demographic questionnaire, at the time of consent, with information pertaining their child's sex, age, ethnicity, and family composition (See Appendices I & J). All consent forms and Demographic questionnaires included an English and French version to accommodate for the preferred language of the participants.

Prior to the beginning of the intervention, once the educators provided consent for participation, they were asked to provide their preferred availabilities for weekly meetings. Based on this information, a recurring day and time was set. Meetings were held on Fridays between 12:30pm and 2:30pm, specifically during the educators' lunch breaks. The day set for meetings was not a day that the researcher was at the daycares working in their role as a special educator. I also provided a visual aid of the schedule for the educators in the form of a printed calendar dated with every meeting in the intervention (See Appendix K). There was also a brief overview of the content of each meeting noted on the visual schedule (See Appendix L). Furthermore, on the eve of each meeting, the researcher sent a reminder text message to the educators.

Intervention Process

The intervention was set to last a total of ten weeks, including twelve consultation sessions with each educator. Five of the sessions were planned to be one-on-one with the

educators and seven of the sessions were planned to be in class with the educators. However, given each educators' unique schedules, their timelines differed from what was planned. For example, due to personal reasons and holiday breaks, Educator A had to reschedule three meetings to later dates. Therefore, the behavioural consultation with Educator A lasted thirteen weeks instead of 10 weeks, though it followed the same structure (i.e., meetings in the same order). For Educator N, after the behavioural consultation had begun, she decided to leave the daycare to pursue another teaching opportunity. Due to this, two meetings were removed to allow her to finish the intervention, specifically, Intervention Meetings 8 & 9. Therefore, the behavioural consultation with Educator N lasted 8 weeks instead of 10 weeks. To account for Educator N's departure, her replacement was given a briefing meeting with the consultant. During this meeting, I discussed the strategies Educator N was using to help Child D's target challenging behaviours.

All sessions were conducted in the educators' places of work (daycares) at the scheduled times (Fridays between 12:30pm-2:30pm). Educator N identified that she preferred the meetings be held in French, therefore, each session was conducted in French to accommodate to her language preference. It is important to note that if at any point during the intervention process, the researcher observed behaviours that caused imminent threat or harm to the educators or children or the educators revealed information that caused imminent threat or harm to themselves or others, the proper authorities would be contacted, such as the Department of Youth Protection.

Meeting 1: Problem Identification

Problem identification involved specifying the problems to be solved during the intervention process (Kratochwill & Bergan, 1990). This was achieved through a problem identification interview, largely influenced by a set of guided questions by Kratochwill and Bergan (1990) (See Appendix M). To begin the interview, I explained to the educators the collaborative nature of the intervention to set clear expectations for future interactions. I specifically mentioned the intention for open and honest communication throughout the intervention process. Thereafter, the educators were asked to provide two main target challenging behaviours that they had difficulty controlling and may be disruptive to the classroom as a whole. Educator A discussed Child Z's lack of concentration during circle time (Target Behaviour #1) and his difficulty with emotional self-regulation (Target Behaviour #2). Educator N discussed Child D's control of friends during times of free play (Target Behaviour #1) and his lack of motivation to finish structured activities (Target Behaviour #2). Once the educators identified two main target challenging behaviours, I helped them develop an observable definition of these behaviours. For example, for Child Z, "Has a hard time concentrating during circle time" was given "He wanders and/or fidgets while singing songs during circle time" as an observable definition. Transforming each target behaviour into an observable definition facilitated measuring any changes in these behaviours from the beginning to the end of the intervention. For each challenging behaviour selected, the educators and I discussed general antecedents and consequences. The educators were given a "recording sheet" which included the two challenging behaviours they identified (See Appendix N). The consultant tasked the educators to fill the recording sheet with each observable instance of the challenging behaviours during the following week. Based on Kratochwill and Bergan (1990) model, this recording included the date and time the behaviours occurred within the given time frame (one week), the fact that the behaviour occurred, and the antecedents and consequences of the behaviour (See Appendix N). Therefore, observations were naturalistic and included a mix of event sampling and time sampling methods. To assess the antecedents and consequences of each

behaviour, educators were asked to employ an ABC (antecedent, behaviour, consequence) method of observation, including the antecedents of the behaviours, i.e., the situation that elicited such behaviours, and the consequences of the behaviours, i.e., the ramifications (emotional & physical) of the behaviours (See Appendix N). The consultant provided the educator with an example of the ABC method to ensure they understood the observation technique (Appendix O). To conclude the meeting, the educators were asked to use their prior experience with the child to roughly identify when the challenging behaviours of interest occur over the course of the day. This information helped guide a time in the next meeting for the consultant to enter the classroom for an observation of the difficult behaviours identified for each child. Both educators identified the period of time between 9:00am-11:00am.

Meeting 2 and 3: Pre-intervention Baseline Measures

In accordance with the times the educators provided for the occurrence of the children's target challenging behaviours (9:00am-11:00am), on different days, I went into the class to conduct event samples for a duration of two hours each. This was considered Meeting 2. Prior to commencing the observation, I received oral consent from the children to observe them within their classroom setting. During this observation, any time that I viewed a target challenging behaviour previously discussed with the educator, I marked down this occurrence with the time in which it occurred. The occurrence was followed up with short context notes, including the event that elicited the challenging behaviour and the consequences of the behaviour (See Appendix N). In this way, an ABC (antecedent, behaviour, consequence) model of observation was employed for each occurrence. Thus, the children's behaviours were teacher-rated and consultant-rated, both through observations. By assessing children's challenging behaviours through triangulation, i.e., through multiple sources, this allowed for a comprehensive understanding of the children's behaviours.

During Meeting 3, I gathered baseline data from the educators regarding their teaching practices and feelings of self-efficacy. The educators' teaching behaviours were assessed via a semi-structured interview. The interview was guided by questions from The Teacher Strategies Questionnaire created by Webster-Stratton (2002). The questions selected were geared towards understanding the strategies employed by the educators to manage children's challenging behaviours (See Appendices P & Q). The interview was recorded to allow for pertinent information such as context and content to be accurately transcribed for further analysis. The audio-recording was saved on a password-protected device to ensure its safety. Eighteen months after the completion of the study, the audio recording will be erased. The teachers' self-efficacy was also assessed through a questionnaire including open-ended and likert-style questions (See Appendices R & S). The purpose of this measure was to get a better sense of the educators' feelings of confidence in managing children's difficult behaviours. It is important to note that meeting 2 and meeting 3 occurred in the same week, though on different days. Additionally, the questionnaires and interview questions used were translated into French to accommodate for one of the educator's language preferences (Appendices Q & S).

Meeting 4: Problem Analysis

Problem analysis involved creating a plan to solve previously identified target challenging behaviours (Kratowill & Bergan, 1990). This was achieved through a problem analysis interview, based on guided questions recommended by Kratowill and Bergan (1990) where the consultant and educator set "SMART" goals for the children's challenging behaviours; antecedents and consequences of the challenging behaviours were discussed; appropriate strategies for the teachers to employ were selected; and a contingency plan was created (See

Appendix T). The acronym “SMART” stands for Specific, Measurable, Achievable, Realistic, and Timely goals. Therefore, I discussed each part of the acronym with the educators to create a goal-oriented plan and set appropriate expectations for the children’s behaviours over the course of the intervention process.

Furthermore, based on the observations completed by the educators and consultant, the consultant presented hypothesized patterns of antecedents and consequences uncovered for each child’s target challenging behaviours. In this way, the educators gained a new perspective of the children’s challenging behaviours, which worked towards achieving meaningful insight on the children’s behavioural patterns. For example, Educator A identified concentration during circle time (Behaviour #1) and lack of emotional self-regulation (Behaviour #2) as Child Z’s target behaviours. Through the ABC method of observation, for Behaviour #1, it was uncovered that Child Z tended to lose concentration during circle time, specifically when he was asked to combine singing with another action and consequently, he stopped singing and began to engage in physical stimulation. To regain his attention, Educator A had to stop circle time for the whole class and redirect Child Z back to singing. For Behaviour #2, it was uncovered that Child Z lacked emotional self-regulation during times when he was reprimanded for a challenging behaviour or was asked to do something he did not want to. In consequence, he reacted to his “big emotions” through physical means such as shouting, crying, and jumping and required assistance from Educator A to calm him down from his state of high emotional arousal. Furthermore, Educator N identified control of friends during free play (Behaviour #1) and lack of motivation to finish structured activities (Behaviour #2) as Child D’s target behaviours. Through the ABC method of observation, for Behaviour #1, it was uncovered that Child D tended to direct his friends on how to play their games during times of parallel and joint play, specifically he would impose his ideas and opinions on their play. Consequently, his friends would either comply or push back, which would start a disagreement. For Behaviour #2, it was uncovered that Child D tended to not complete structured activities when they were repetitive in nature and did not engage his creativity. Consequently, he would become easily distracted by more engaging toys around him and refused to complete his activity.

Based on the knowledge of each child’s behaviour patterns, the consultant provided the educators with a list of evidence-based practices that helped target each challenging behaviour, specifically strategies that helped target antecedent behaviours. The evidence-based strategies were adapted from the Incredible Years Classroom Management Teacher Training Program by Webster-Stratton et al. (2002). The educators selected two possible strategies for each behaviour that would be feasible for them to implement (plan strategy) (Appendix U). For example, for Child Z, Educator A selected large body movements (Strategy #1) and incentives (Strategy #2) to address his lack of concentration during circle time. She also selected rewording (Strategy #1) and diffusing technique (Strategy #2) to address his lack of emotional self-regulation. For Child D, Educator N selected pairs of three friends during free play (Strategy #1) and presenting negotiation strategies to ease conflict (Strategy #2) to address his control of friends during times of play. She also selected using a timer (Strategy #1) and modifying the activity creatively (Strategy #2) to address his lack of motivation to finish a structured activity. In past studies, providing educators with the choice of strategies has demonstrated to increase their intrinsic motivation and implementation fidelity related to implementing each strategy the way it was intended (Johnson et al., 2014; Rush & Sheldon, 2011). A printed copy of a list with the educators’ chosen strategies was provided to them during the next meeting (See Appendix V). The list included a step-by-step procedure for each chosen strategy (plan tactics). The purpose of

the list was to provide the educators with implementation instructions in the case that they are unsure.

Lastly, the educators and consultant discussed contingency plans. These plans went as follows: “If Strategy 1 does not work, then I will move on to Strategy 2.” Contingency plans ensured that the educators had a clear “action plan” for times when the children were exhibiting challenging behaviours. In this way, the educators knew which strategies to use and when to use them. The goal was to eliminate any uncertainty they may have in the moment of attempting to manage a challenging behaviour. A printed copy of the contingency plans were provided to the educators during the next meeting (See Appendix V). I also explained to each educator that in the case the chosen strategies were not working for them, they could consult with me during the next meeting to alter the contingency plan.

Meeting 5: Treatment Implementation

During treatment implementation, I assisted and supervised the educators as they implemented the plan designed during the previous meeting (Kratochwill & Bergan, 1990). To do this, I entered the classroom to model the strategies selected by the educator. Due to the fact that I had an ongoing relationship with the children participating in the study, the children responded well to my presence in the classroom and to any interactions that I had with them while modelling the selected evidence-based strategies. I modelled one strategy at a time, followed by responding to any questions the educators had about the strategy. Modelling is a common practice during teacher-training initiatives. For example, a meta-analysis study by Snyder et al. (2012) found that over 30% of the 159 studies that were analyzed used modelling as an effective strategy to train teachers to implement new strategies into their classrooms. After I had finished fielding questions about the modelled strategies, the educators attempted to implement each strategy in my presence. I provided performance feedback to the educators as needed. The goal was to ensure the educators understood each strategy and were comfortable implementing them with the children on their own.

Meeting 6, 7, 8, 9: Intervention Procedures

Educator A implemented the agreed upon strategies for a 4-week period and Educator N implemented the agreed upon strategies for a 2-week period (due to timeline constraints). During this time, I entered the classroom every week and observed the educator through a short hour-long event sample (See Appendix W). I noted each time the educator used one of the agreed upon strategies along with the outcome of the strategy on the child’s behaviour. The goal of this informal observation was for me to ensure the educators were using the agreed upon strategies and also provide real-time performance feedback to the educators. I observed how well the educators were adhering to the intervention plan. This included the educators’ use of the different strategies they selected and the contingency plans they created (See Appendix X). At times, I had to remind educators of their contingency plans to assist them in addressing a target challenging behaviour. I also answered any questions the educators had related to implementation of the intervention plan. Additionally, the educators were asked about the effectiveness of the strategies (in their opinions) and if any modifications needed to be made to the intervention plan, such as selecting alternative strategies if the current ones were proving ineffective. The goal was to address any concerns and/or roadblocks the educators may have been facing to help overcome them. For both educators, a third strategy was added to their contingency plans to address some of the target challenging behaviours. These meetings functioned as informal “progress reports” or “check-ins” with the educators each week while they are implementing the intervention plan (4 weeks).

During meeting 9, the last week of implementing the intervention plan, I asked the educators to conduct another observation of their paired children and their selected target challenging behaviours. They were asked to fill a recording sheet with each instance of the challenging behaviours over the course of the next week. This allowed for the comparison of the children's behaviours prior to and following the intervention.

Meeting 10 and 11: Post-Intervention Measures

Meeting 10 consisted of the consultant conducting an event sample observation on the children to assess their challenging behaviours, such as was done during the baseline procedures. This event sample observation was the exact same length as the observation that was conducted before the intervention (2 hours) and was also done at the same times (9:00am-11:00am). Once again, prior to commencing the observation, I received oral consent from the children to observe them within their classroom setting. Meeting 11 included the same Teaching Strategies Interview with the educators as during the baseline procedures, as well as filling out the same Self-Efficacy questionnaire, in order to assess any changes in the educators' teaching behaviours and feelings of self-efficacy from the beginning of the intervention to the end of the intervention. Once again, the interview was recorded to allow for pertinent information such as context and content to be accurately transcribed for further analysis. The audio-recording was saved on a password-protected device to ensure its safety. Upon completion of the study, the audio recording will be erased. In the same week as Meeting 10, but on a different day, Meeting 11 took place.

Meeting 12: Plans for Sustainability

As a final meeting, I met with each educator to discuss the outcome of the intervention. Based on guided questions recommended by Kratochwill and Bergan (1990), I met with the educators to debrief them, specifically focusing on any changes they observed about their teaching behaviours and/or changes in the children's behaviours from the beginning of the intervention to the end (See Appendix Y). Furthermore, the educators and I discussed future plans for sustainability of the strategies they implemented over the course of the intervention; specifically, the discussion included how they plan to continue implementing these strategies to achieve future goals. In this way, the educators began to think about how they plan to continue practicing evidence-based strategies in their classrooms to benefit the children with behavioural difficulties and their classmates. I also asked the educators about their experience and thoughts on the intervention process. This topic of conversation uncovered the educators' level of satisfaction with the intervention, beliefs about the benefits and/or downfalls of the behavioural consultation intervention, and any newfound knowledge they acquired. At the end of the meeting, I thanked the educators for their participation.

The parents of the children studied also receive a debriefing session on any changes that occurred to their children's behaviour over the course of the intervention. I thanked them for allowing their children to participate in the intervention.

Throughout the intervention process, after each meeting, the researcher took field notes. These field notes included an overview of the content of each of the meetings. Any notable discussions, comments, or impressions were written down (See Appendix Z).

Treatment Evaluation (Data Analysis)

Following each session, observation notes, field notes, questionnaires, and interview question responses were transcribed onto WORD documents on a password-protected laptop for further analysis. These documents will be deleted eighteen months after the study's completion.

To determine the extent of the effectiveness of the intervention on the children's behaviour, measurement of the children's challenging behaviours occurred through the teachers'

informal event sample observations and the consultant's formal event sample observations. By assessing children's challenging behaviours through triangulation, i.e., through multiple sources, this heightens the validity of the findings and leads to a comprehensive understanding of the children's behaviours. These measures were assessed prior to the intervention and after the intervention. The educator and consultant recorded the children's challenging behaviours on paper through noting the target behaviours, the antecedents of the behaviours, and the consequence of the behaviours (See Appendix N). Following the intervention, the level of the children's identified target challenging behaviours within both time frames (one week for educators and two hours for consultant) was compared. The frequency of the challenging behaviours was taken from both the educators' informal event sample observations over the course of a week and the consultant's formal event sample observations over the course of two hours. These frequencies were compared by using a table and a line-graph, to assess whether there were any changes in the children's frequency of challenging behaviours from the beginning of the intervention to the end of the intervention. Any changes in children's behaviour were also be confirmed by their educators during Plans for Sustainability Meeting 12. In doing so, the changes are significant if they are confirmed through observations and through educator's accounts. Thus, increasing the reliability of these results.

To determine the extent of the effectiveness of the intervention on the educators' teaching strategies and self-efficacy, measurement of the educators' teaching strategies occurred through a semi-structured interview, where the educators were asked questions inspired by The Teacher Strategies Questionnaire created by Webster-Stratton (See Appendices P & Q). These interviews were recorded. The pertinent information collected through these interviews was then transcribed and analyzed through a series of coding. Three levels of coding were applied to each transcript, uncovering relevant themes (See Appendices AA & BB). Their responses to these questions were compared before and after the intervention to assess any thematic changes in the teaching strategies they employ in their classrooms. Also, informal observations of the teachers' strategies taken during meetings 6,7,8, and 9 were assessed to confirm any changes in their teaching practices through the consultation process. Furthermore, the teachers completed a Self-Efficacy questionnaire prior to and after the intervention. Their scores were compared through a table to assess any changes in their self-efficacy. The general efficacy of the consultation process was also informed by the consultant's field notes throughout the consultation process. Furthermore, educators' accounts of their experience throughout the consultation process, as discussed during Plans for Sustainability Meeting 12, was considered.

Reliability, Validity, and Researcher Bias

In this study, trustworthiness was established through the use of various qualitative research methods. First, following the interview with the educators, in the beginning and end of the consultation process, member checking was used to ensure the participants felt well represented. The participants (both educators) were sent their own responses for review. They were able to modify and/or erase any content they believed did not capture their teaching strategies appropriately. Furthermore, they were sent the interpretations made based on their responses to assure they represented them appropriately. Second, triangulation was used, as the educators and consultant observed the target behaviours of the children, thus, these target behaviours were assessed by two sources. Third, multiple measures (questionnaires, interviews, and observations) were used in the hopes of capturing the true perspectives of the educators. This ensured the information gathered on the educators was representative of their experience.

In the case of this research, the researcher had an already existing professional and personal relationship with the possible participants of the study (both educators). Thus, I had some prior knowledge of the teachers' personal experiences and classroom experiences (including the behaviours of the children in their class and the behaviours of the educators themselves). This knowledge had been previously disclosed by the educators or observed by me in the context of the classroom. Due to this multi-tiered relationship, to avoid researcher bias, I had to ensure that I did not influence the educators' participation in the study. I had to remain neutral and avoid imposing any pre-existing knowledge on the educators. Furthermore, I had to work to avoid any bias that may come from personal history with the educators. This could have been an easy error to make considering I knew the participants beyond the information collected in this study. Over the course of the meetings with the educators, I had to maintain a professional relationship with the educators within the context of the study, meaning that any professional or personal anecdotes had to be limited to the scope of the study. To avoid bias stemming from this dual role (observer, interventionist, data collector) throughout the study, I kept a reflexivity journal throughout the length of the study, including the data collection and analysis process (Appendix CC). This allowed me to confront my assumptions, recognizing the extent to which my knowledge, thoughts, emotions, and proximity to the participants influenced my objectivity. To avoid sounding elitist and unapproachable, I limited jargon in order to maintain the collaborative relationship necessary to conduct the study. This created a comfortable environment for the educators to share their experiences, whereas an overly authoritarian and jargon-filled interview may have intimidated and negatively influenced their feelings of self-efficacy. Seeing as I continued to work alongside the educators and children outside the context of this research study, this information was considered when analyzing the data.

Findings

The main goal of this qualitative study was to observe and understand the impact of implementing the Behavioural Consultation Model, as developed by Kratochwill and Bergan (1990), on preschool educators' knowledge of children's behavioural needs, knowledge of appropriate behaviour strategies, and self-efficacy, as well as on children's display of challenging behaviours within the classroom. Data retrieved from the Teaching Strategies Interview transcripts, Self-Efficacy questionnaires, and Educator and Consultant observations were analysed and compared pre- and post- intervention to achieve this goal.

Demographic Information

The Demographic questionnaires revealed information about the different backgrounds of the two educators. In addition, information on the children's backgrounds and behaviour concerns was also collected.

Educator A was a 30-year-old middle-class female born in Canada and of Italian descent. She had a total of eight years of experience working at the Daycare where the study took place, and had a Bachelor's in Child Studies from Concordia University. Educator A was the educator working with Child Z, a 3-year-old boy from a French-Canadian middle-class household. Child Z was living with his parents who were separated and sharing custody of both him and his younger sister. He had been attending the daycare since he was 12 months old. Child Z was experiencing behaviour difficulties and was being followed by a special education program for the last year.

Educator N was a 53-year-old middle-class Canadian citizen born in Lebanon and had a total of 29 years of experience, including one year working at the Daycare where the study took

place. Educator N had an Attestation in Early Childhood Education. Educator N was the educator working with Child D, a 4-year-old boy from a Romanian Canadian middle-class household. He was an only child with married parents. He had been attending the daycare since he was three years old. Child D was experiencing behaviour and language difficulties and was being followed by a special education program for the last year.

Assessment of Changes in Educators' Knowledge of and Perceptions of Children's Behaviour Difficulties

As a result of the behavioural consultation process, the educators seemed to show a deeper understanding of the children in different ways, including their behavioural needs, environment, and responses to strategies. These changes in deeper understanding were gathered from different sources of data, including, the Teacher Strategies Interviews, during Consultation meetings, and when I conducted classroom observations and consultations.

Educator A's knowledge and perceptions of Child Z changed over the course of the consultation process. When comparing her responses in the Teacher Strategies Interview from interview #1 (pre-consultation) to interview #2 (post-consultation), she showed an awareness of both "*what*" strategies worked for Child Z as well as "*why*" these strategies worked for him by giving reasons for the strategies she used to intervene with Child Z. For example, in interview #2, she explained why she reminded Child Z about how his parents would feel about his misbehaviour.

"He wants to tell his parents that he did— that he does good, or he wants his parents to be proud of him. So, if I say, 'listen... if you hurt your friend, mommy won't be happy with you— or Daddy won't be happy with you because he doesn't want you to hurt'. Then he'll be like, 'okay, no, I want my dad to be happy.'"

Educator A supported the use of this strategy because she felt that it worked for Child Z, that when he wanted to make his parents feel proud of him, he was better able to self-regulate. Furthermore, throughout the consultation meetings (specifically the Intervention Meeting 6, 7, 8, and 9), Educator A commented on certain strategies that work better for Child Z than others by explaining her reasoning. For example, during Intervention Meeting 6, Educator A mentioned to me that she found large body movements (movements of the whole body) during circle time tended to be more distracting to Child Z and did not improve his concentration. Instead, she said she tried using seated large body movements (movements of the upper body), which helped Child Z control his energy levels more effectively. She also mentioned that she tried holding circle time in a location with less distractions for Child Z; for example, holding part of circle time on the table instead of the floor where there were toys displayed and available as possible distractors to Child Z. These examples demonstrated that Educator A was able to tailor strategies according to her understanding of Child Z's behaviour triggers. In another instance, during Intervention Meeting 9, Educator A informed me that she took the opportunity to provide an overview of the strategies to Child Z's parents; specifically, strategies she found helpful for emotional self-regulation in class. She explained that she told his parents that Child Z tended to internalize his inappropriate behaviours and equate them to being a "bad child". Due to this sensitivity and bias, she explained that rewording the scenario to shield blame off Child Z helped him understand his inappropriate behaviour rather than internalize it and blame himself. In this example, Educator A showed that she understood Child Z's thoughts and feelings enough to communicate them with his parents and use them as a segway to inform them of an appropriate strategy. During the Plans for Sustainability Meeting 12, when asked about the benefits of behavioural consultation, Educator A mentioned that, following consultation, she felt that she

understood Child Z better, including his personality, environment, and behaviour triggers. Consequently, this deeper understanding leads her to view him in a more positive light. Taken together, these examples demonstrate that Educator A's perception of Child Z has evolved over the consultation process, viewing a more complete picture of his needs and how the environment can support his emotional and behavioral skills.

Educator N also showed changes in her perceptions from interview #1 (pre-consultation) to interview #2 (post-consultation). Instead of solely focusing on outlining Child D's challenging behaviours, Educator N described the strategies she used for specific challenging behaviours. For example, when speaking about using "ignoring" to handle inappropriate behaviours, N explained how she used this strategy with Child D so that she did not have to give him attention for every inappropriate behaviour as there were many in a day .

“D par exemple, il a fait plusieurs crises et si je comme– je m'arrête à chaque chose qu'il fait, on va passer le temps. C'est pourquoi, si c'est vraiment pas quelque chose de grave, je peux l'ignorer, mais sans lui faire sentir comme je l'ai ignoré et comme je n'ai pas fait attention.”

Furthermore, during the Problem Analysis Meeting 4, while discussing Child D's observed pattern of behaviour, Educator N mentioned that she never thought of Child D's challenging behaviour as having specific triggers. For example, when the I mentioned triggers that I had observed, such as Child D having trouble completing activities that were repetitive in nature, like continuously gluing string to a paper, compared to non-repetitive in nature, like gluing a variety of objects to a paper, Educator N commented that she had never thought of the nature of the activity as a factor that could influence Child D's participation. Though, she admitted that she believed his motivation to participate was solely linked to his interest in the activity. This example demonstrated that the consultation process may have changed how Educator N viewed Child D's behaviours, by helping her develop a better understanding of the triggers for his challenging behaviours. During the Plans for Sustainability Meeting 12, when asked about the benefits of behavioural consultation, Educator N explained that, prior to consultation, she did not think about the reasons behind Child D's behaviours. She also mentioned that she now understood that modification of repetitive activities helped Child D remain more engaged. Taken together, these examples demonstrate that Educator N developed a deeper understanding of the reasons behind Child D's challenging behaviours (triggers), i.e., his pattern of behaviour and his response to different strategies.

Overall, both educators seemed to experience a greater awareness in their understanding and perception of the children's behavioural needs. This growth could have been related to the intensive overview of each child's pattern of behaviour put forth and discussed by me during the consultation process following the educators' and consultant's observations of the antecedents and consequences of each challenging behaviour (Problem Analysis Meeting 4). A deeper understanding of each child allowed the educators to foster a more inclusive classroom environment for the children in the study.

The Impact of the Consultation on Educators' Knowledge of Appropriate Strategies

Educators' knowledge of appropriate strategies may have been positively affected by the behavioural consultation process. Notably, there was a change in their use of positive behaviour support strategies. In addition, the educators modified their use of negative feedback strategies, and used a varied repertoire of strategies. By the end of the consultation process they needed less guidance in using appropriate strategies as compared to earlier sessions. These changes in knowledge of appropriate strategies were demonstrated by both educators across their responses

in the Teacher Strategies Interviews, their comments during the consultation meetings, and consultant-observed behaviours during the consultation meetings.

Changes in Positive Behaviour Support Strategies

Within the context of this study, positive behaviour support strategies were coded as strategies that supported behaviour modification through inclusive practices. The main purpose of these strategies was to provide children with the tools and knowledge to modify their behaviours rather than resort to punishment. Examples included providing alternative solutions for negative behaviour, guided assistance in problem-solving conflicts, redirection, praise, modelling, etc.

For Educator A, when comparing her responses in the Teaching Strategies Interview from interview #1 (pre-consultation) to interview #2 (post-consultation), she showed a greater awareness in praising a larger variety of positive behaviours and being specific in giving positive feedback; in other words, she acknowledged children for engaging and putting effort into positive behaviours.

“If they could sit through circle time without disruption. They complete an activity regardless whether it's like perfect or whatever. As long as they did something and they tried. Um, washing their hands by themselves. Every little thing. I praise my kids... because those kids in my class, like certain type of group dynamic, I find it works for everybody. So once I see that behaviour, even if it's the smallest thing, I'll praise them because they need it.”

Educator A explained that she praised even the smallest behaviours to acknowledge positive behaviours for the children in her class. In interview #2, Educator A catered her incentives to the interests of the children in her class and focused on making the rewards immediate.

“I don't do to everybody. I do it to certain children, the ones that need it. The ones that need incentive. Other kids, I could just say ‘Okay, on fait le cahier et ensuite on va jouer’. They know they have to finish it and then they'll go play. But some kids, because they're distracted or they lack concentration then, I'll do the incentive.”

Educator A showed how she implemented incentives that were tailored to her children's immediate needs. This change in Educator A's use of incentives could be directly associated with the consultation process, seeing as she used one of the strategies with Child Z to support his lack of concentration during circle time. Modifying the environment was also a strategy Educator A elaborated on during interview #2 as compared to interview #1 when this was not being used. During interview #2, Educator A gave a clear example of one of the ways in which she modified her classroom environment to support positive behaviours.

“I'll try to block, depending on like the activity, like I'll put something to block so he, the child, could just focus on one thing instead of looking around, because I know the environment could be, some kids are stimulated a lot, so I'll try to just block so he could focus on that task.”

In this example, Educator A explained how she modified the classroom environment by using objects to block children's view during structured activities to help them better concentrate and focus on the task at hand. Once again, this new strategy used by Educator A could be related to the consultation process, considering it was one of the strategies suggested, but not initially chosen to address Child Z's lack of concentration during circle time. It is possible that hearing this strategy as an option inspired Educator A to attempt to use it within her classroom. Taken together, these examples demonstrate that Educator A began to use more positive support

strategies over the course of the behavioural consultation process that were tailored to children's needs.

For Educator N, when comparing her responses in the Teacher Strategies Interview from interview #1 (pre-consultation) to interview #2 (post-consultation), she described that she began using rewards as a method of praise.

“Il a bien fait X je lui donne des collants et j'ai aussi le bonhomme sourire charte de récompense.”

Along with the verbal praise mentioned in interview #1, Educator N introduced reward-based praise in interview #2. Moreover, in interview #2, Educator N seemed to have expanded her use of modelling. Like interview #1, she continued to act as the model for certain types of positive behaviour; however, in interview #2, she began to use other children's behaviour as models.

“J'ai des enfants comme exemplaire chez moi, je peux dire: Wow, bravo regardez X, regardez comment X fait ça...”

By using other children's behaviour as models, Educator N discovered another avenue of modeling to promote positive behaviour in her classroom. Modification of the environment was another strategy Educator N discussed during interview #2 that was not mentioned in interview #1. During interview #2, Educator N mentioned an example in which she modified her classroom to be more conducive to certain positive behaviours.

“Je prends un exemple d'aujourd'hui pour ne pas aller très loin. D voulait, par exemple, le crayon, le même crayon que son ami et il criait parce qu'il voulait. Son ami était en train de colorier. D voulait le rouge. Il voulait comme arracher le crayon des mains de son ami. Mais finalement, je lui dis: "attends que ça finit et tu n'as pas besoin de ni de le pousser ni de prendre le crayon de sa main. Attend, il a presque fini son coloriage. L'autre enfant avait un petit spot à colorier.” Dès qu'il a terminé, il a donné son crayon à D. Et finalement, comme j'ai vu que dans la boîte, il y a un crayon de chaque couleur. J'ai ajouté pour éviter les conflits, j'ai ajouté alors il y avait un double crayon de chaque couleur.”

In this example, Educator N decided to modify the environment by adding an extra colouring pencil of each color to avoid future conflict like the one she witnessed between Child D and another child. This new strategy used by Educator N evolved as she reflected during the consultation process and she considered how she could modify the environment to motivate Child D to finish structured activities. Taken together, these examples demonstrate that Educator N began to use more positive support strategies over the course of the behavioural consultation process.

Educator A and Educator N both experienced improvements in their use of positive behaviour strategies. For both educators, these changes evolved as a result of the discussions with the consultant during the consultation meetings.

Changes in Negative Feedback Strategies

Within the context of this study, negative feedback strategies were coded as strategies that promoted behaviour modification through punishment methods. Some of these exclusive methods included consequences, discipline plans, ignoring, etc.

For educator A, when comparing her responses in the Teaching Strategies Interview from interview #1 (pre-consultation) to interview #2 (post-consultation), the discipline plan she employed was tailored to individual children rather than being a widespread plan for the whole class. For example, when asked about the discipline plan used in her class during interview #2, she mentioned:

“I have to modify it, obviously sometimes, depending on like the behavior and the child. Some things work for some kids. Some kids, some things really don't for others.”

Rather than using a widespread discipline plan, Educator A tailored her discipline methods to each child and, thus, avoided the possibility of using a method that was not well suited for a specific child; for example, she became aware that using a harsh discipline plan on a sensitive child would be unlikely to yield positive behaviour outcomes. Another negative feedback strategy, ignoring, was used as a strategy that was contingent on children's needs in interview #2, whereas it was not so in interview #1.

“Depending on the child, if I know some children are very active and need to move, and I will ignore it because that's what they need. If a child is doing that because they're mimicking other children, but I know how they are, then I will address it.”

In this example, Educator A observed the children's pattern of behaviour and took it into account when deciding whether to use ignoring as an appropriate strategy. In doing so, she avoided using the strategy for children who may not need it. Educator A's use of privileges was also different between interview #1 and interview #2. In interview #1, Educator A explained she did not like to use privileges, believing that by giving one child a special privilege ostracizes the others, making them sad. However, in interview #2, Educator A explained she used privileges with her whole class to avoid ostracizing certain children.

“And if they clean up, like I usually give them a récompense. I'll give all my kids a récompense, but they know: I'm gonna go clean up I'm gonna get my sticker or I'm gonna go clean up, I'm gonna go and, I don't know, pick the blue cup.”

Although Educator A began to use privileges after the consultation process, she still seemed cautious and did not want to exclude some students. Taken together, these examples demonstrate that Educator A had modified her use of negative feedback strategies to be more tailored to individual children's needs in the hopes of avoiding misuse.

Educator N did not seem to report experiencing any changes in her use of negative feedback strategies during the consultation process. However, Educator A discussed changes in this area. Educator N continued to use negative feedback strategies in the same ways, pre- and post-intervention, compared to Educator A who modified her approach completely.

Changes in Strategy Implementation

Over the course of the consultation process both educators seemed to experience changes in using a greater repertoire of strategies. They not only began utilizing more appropriate strategies for target behaviours than before the consultation, but also were observed modifying and generalizing these strategies to support positive behaviour outcomes beyond the scope of the intervention.

During the Plans for Sustainability Meeting 12, Educator A confessed she felt that she had been using the wrong strategies before the consultation process to address her students' challenging behaviours, specifically Child Z's challenging behaviours. She also added that she would continue using the strategies she learned throughout the consultation process after its completion. She also disclosed that she felt more capable in not only applying the new strategies learned from the consultation process to help Child Z, but that these strategies also helped the other students in her class, thus demonstrating her ability to generalize the strategies acquired to her classroom in general. In addition, throughout the Intervention Meetings (6, 7, 8, and 9), Educator A demonstrated her ability to apply the strategies she had learned during consultation on a variety of behaviours (non-target behaviours) for Child Z. For example, during a structured craft activity (Meeting 6), I observed Educator A using an incentive to help Child Z remain

focused. She told Child Z that he could play with his favorite toy after he was finished the craft activity, and she followed through with this incentive immediately after Child Z had completed the craft. She also used body movements as a strategy to help Child Z remain focused (Meeting 6), offering him a “movement break” in the form of in-place jumping jacks. These two strategies were selected to help Child Z better focus during circle time in a different context. Furthermore, Educator A also demonstrated her ability to generalize by applying different strategies to target behaviours. For example, to help Child Z concentrate during circle time, the consultant observed Educator A moving the group from being seated on the ground to seated on the table, hoping that this change of scenery would help Child Z re-focus his attention (Meeting 6). In another instance, she attempted to regain Child Z’s focus by calling attention to him and asking him specific questions (redirection) during circle time (Meeting 10). These instances demonstrated Educator A’s ability to use strategies learned from the consultation process to fit different children and behaviours. Educator A was also well-versed and confident enough with strategies to communicate them to Child Z’s parents during their parent-teacher meeting on week 8. She explained the different strategies she was using with Child Z to his parents, for example, incentives, body movements, and rewording for self-regulation strategies, that she learned through the consultation process. Educator A’s ability to communicate strategies to others demonstrated that she internalized them. Along with actively applying, generalizing, and modifying newly learned strategies, Educator A was actively seeking new strategies. For example, during Intervention Meeting 7, Educator A asked the consultant for additional strategies to help Child Z with sharing, to which the consultant suggested using “modeling” as a strategy. Educator A seemed to be seeking out additional strategies from the consultant to add to her repertoire. These examples demonstrate that Educator A experienced a growth in her use of numerous and more appropriate strategies to target various challenging behaviours influenced by strategies discussed during the consultation process.

In the case of Educator N, during Problem Analysis Meeting 4, when the consultant mentioned lists of possible strategies to address Child D’s target challenging behaviours, Educator N said that the “wheels were turning in her head”. By this, she explained that she was contemplating ways that new strategies could be applied. During the Plans for Sustainability Meeting 12, Educator N mentioned to the consultant that the consultation process had given her ideas about how to use and apply strategies more creatively than before the consultation. In addition, it encouraged her to try new strategies, not only with Child D, but also with all her students. For example, she always believed that pairing children in groups of two during free play would avoid conflict; however, she never thought that groups of three would work more efficiently to balance out conflict due to an additional opinion. Following the consultation process, Educator N planned to continue using the new strategies she learned to help Child D as well as her other students. Throughout the Intervention Meetings (6&7), Educator N demonstrated her ability to generalize, learning to target a variety of different behaviours. For example, during a structured tracing activity, when Child D was seen colouring instead of tracing letters, Educator N attempted to motivate him to continue tracing by modeling the behaviour to him (Meeting 6). In a similar instance, I observed Educator N modeling the instructions of a craft (sticking pieces of paper to a picture of a Christmas tree) to Child D once she noticed he was not as motivated to finish the activity. In both cases, Educator N deviated from the strategies selected for the targeted behaviour, using a different strategy for the lack of motivation with Child D. These examples demonstrated that Educator N experienced a change in her use of strategies and

in applying appropriate strategies to target challenging behaviours inspired and motivated by the consultation process.

Overall, both Educator A and Educator N seemed to leave the consultation process with a larger repertoire of strategies. Both educators expressed that they would continue to use their newly acquired strategies with Child Z and Child D, as well as with all their students. Both were seen using new strategies for target behaviours; however, Educator A was seen using the same strategies with different behaviours, exhibiting a larger range of use than Educator N. Educator A seemed to be actively seeking new strategies for non-target behaviours by turning to the consultant for additional assistance. Educator N did not display this motivation to seek out new strategies with the consultant. This difference could possibly be related to the difference in years of experience between Educator A and N. Specifically, Educator N's 29 years of experience, compared to Educator A's 8 years of experience, meant she had greater experience that led to a well-established repertoire of strategies than Educator A.

Changes in Strategy Implementation Autonomy

Throughout the consultation process, the educators became more independent in their use of strategies, requiring less guidance and feedback from me. During the Intervention Meetings (6, 7, 8, and 9), I would go into each educator's classroom and observe their implementation of strategies. If the consultant had to intervene by suggesting the use of a specific strategy or providing feedback, then this was noted. I observed that I did not have to intervene and provide advice or feedback as often over the course of the intervention meetings (6, 7, 8, and 9).

For Educator A, in the first two Intervention Meetings (6 & 7), I had to intervene once for each meeting. For example, while singing the alphabet song during circle time, Educator A attempted to add seated body movements (strategy #1) to keep Child Z engaged; however, when this strategy did not work to keep Child Z engaged, I suggested that Educator A try incentives (strategy #2) as stated in her contingency plan ("if strategy #1 fails, then use strategy #2"). Educator A used an incentive, telling Child Z that he could select his favorite toy to play with after singing the alphabet, and the strategy worked. In this instance, the consultant intervened in a minimal capacity, merely suggesting the use of a second strategy without modeling, and Educator A creatively devised her own incentive that she believed would suit Child Z. In the last two Intervention Meetings (8 and 9), I did not have to intervene. Educator A took initiative to utilize strategies selected during instances of challenging behaviours. Without prompting by the consultant, she was able to cycle through strategies by using her contingency plan. Educator A also began using a third strategy (environment change) to address Child Z's lack of focus during circle time, and she did so without the consultant suggesting it during moments of the challenging behaviour. Although this strategy was a strategy mentioned by me as an option during Problem Analysis Meeting 4, Educator A began to employ it as an additional strategy in her contingency plan by her own volition. Furthermore, throughout the Intervention Meetings (6, 7, 8, and 9), Educator A rarely questioned the strategies she had selected, showing she supported their use. However, in moments where she did question the strategies, she was easily consoled by the consultant. For example, during Intervention Meeting 7, Educator A told the consultant that she found that Child Z was having a hard week and that none of the strategies were working for him. She stated that she did not understand the reason he was having a hard week and that she felt defeated. To reassure her, the consultant mentioned that Educator A was doing everything she could to help Child Z and the most important factor was consistency in the use of strategies. The consultant explained that growth in a child's behaviour is not linear because there are many

factors at play outside Educator A's control, like Child Z's home life. This reassurance seemed to ease Educator A's self-doubt. In the following Intervention Meeting (8), Educator A seemed more positive and explained that Child Z had a better week and was responding to the strategies. These examples demonstrated that although Educator A needed assistance from the consultant early in the intervention, this early support seemed to help her become more independent in her use of appropriate strategies and in her ability to overcome self-doubt as the intervention progressed.

For Educator N, in the first Intervention Meeting (6), the consultant intervened four times. For example, during a structured tracing activity, Educator N attempted to use a timer (strategy #1) to motivate Child D to finish tracing the letter K's on his sheet. When Child D refused the timer by throwing it, the consultant suggested to Educator N that she try to modify the activity for Child D (strategy #2) to make the activity more engaging as stated in her contingency plan. Educator N, attempted to modify the activity by asking Child D to only trace 3 lines out of 6. When the consultant noticed that this modification was unsuccessful because it was not creatively engaging enough for Child D, the consultant suggested that Educator N try drawing bubbles around the letters so that Child D could colour them instead of tracing them. In this instance, Educator N voiced her concerns regarding modifying the activity for Child D, explaining that she believed he would not get the "full learning experience." To ease her questioning, the consultant mentioned that progress in Child D's motivation to finish activities was likely going to be a step-by-step process and the approach taken with Child D needed to be tailored to his exact interests (he enjoys coloring). Educator N accepted and allowed Child D to color instead of tracing the letters. This strategy worked and Child D completed his sheet by coloring the letters. In this instance, Educator N needed assistance and guidance to modify an activity to better suit Child D's needs. However, in the second Intervention Meeting (7), when Educator N tried to use a timer (strategy #1) and even incentives (strategy #3) and was unsuccessful in motivating Child D to finish his letter tracing activity, she independently modified the activity (strategy #2) by drawing bubbles around each letter. This example demonstrated that Educator N took more initiative in implementing strategies in a creative way and without consultation as the intervention process progressed.

Altogether, Educator A and Educator N seemed to require less assistance throughout the consultation process in actively applying appropriate strategies to their students' challenging behaviours. However, Educator N openly questioned and doubted certain strategies, seeming less independent and more reluctant to utilize strategies without the consultant's support, compared to Educator A, who did not question strategies but instead questioned her own abilities to apply the strategies effectively. In both cases, the educators required additional guidance from the consultant to overcome their doubt. This difference could have possibly been related to the difference in beliefs about classroom goals. For example, Educator N put a greater emphasis on learning outcomes whereas Educator A put a greater emphasis on behaviour outcomes; also, Educator N could have possibly felt additional pressure to focus on learning outcomes considering her students were headed to kindergarten at the end of the school year.

When analysing the overall data gathered, through interviews and consultant-observed behaviours, the educators seemed to have: 1) developed a deeper understanding of their paired children, specifically their needs, personalities, environment, thoughts, behaviour patterns, and responses to strategies; and 2) increased their knowledge of appropriate strategies, specifically their development of positive behaviour support strategies, modified use of negative feedback strategies, growth of repertoire of strategies, and reduced need for guidance in using appropriate

strategies during the intervention process. It is possible that their deeper understanding of each child contributed to their growth in strategies. In other words, understanding a child's needs allowed for use of strategies that were in line with these needs, promoting an inclusive classroom setting. Also, the guidance offered by the consultant, in the form of modeling, advice, and reassurance could have positively affected both educators' knowledge of strategies and of their paired children's behaviours. Put differently, the consultant acted as a coach, prompting educators to see the children's behaviours in a different light and providing support with additional ideas for strategies.

The Impact of Consultation on Educators' Self-Efficacy

Within the scope of this study, a teacher's self-efficacy was defined as their beliefs in their ability for appropriately implementing strategies to manage their classrooms. The consultation process seemed to have a positive effect on educators' self-efficacy, as rated through the Self-Efficacy questionnaire and consultant-observed behaviours. Therefore, educators left the intervention feeling more confident in their abilities to manage child-specific and classroom-specific challenging behaviours than prior to the intervention.

For Educator A, when considering the Self-Efficacy questionnaire, she experienced a two-point increase pre- and post-intervention. When first measured, her self-efficacy score was 36/50. This increased to 38/50 following the intervention process (See table 1). Educator A experienced a 1-point increase in three statements, meaning she rated them as "Agree" (4 points) post-intervention compared to "Neither Agree nor Disagree" (3 points) pre-intervention. These statements were: "I believe I have the ability to address a child's difficult behaviour to lessen its occurrence", "I believe I am able to apply appropriate strategies to help a child lessen their difficult behaviours in the classroom", "I believe I have the knowledge and resources necessary to handle a child's difficult behaviours". It seems, for all three statements, she shifted from having a neutral opinion to a positive opinion. However, Educator A also experienced a 1-point decrease in one statement, meaning she rated it as "Neither Agree nor Disagree" (3 points) post-intervention compared to "Agree" (4 points) pre-intervention. This statement was: "If a child exhibited a challenging behaviour during an inappropriate time, I am confident I would be able to redirect their challenging behaviour". Overall, from her responses on the Self-Efficacy questionnaire, it seemed as though Educator A felt more capable of implementing appropriate strategies and believed she had the knowledge to do so.

Furthermore, evidence of a positive change in self-efficacy was also seen through Educator A's behaviours and responses across the consultation process. For example, during Intervention Meeting 9, Educator A mentioned to the consultant that she felt "good" that she was able to communicate Child Z's pattern of behaviour to his parents and follow-up with appropriate strategies they can try to implement in the home. In other words, it seemed as if her newfound knowledge of Child Z and efficient strategies gave her the confidence to share feedback to his parents. Additionally, during Plans for Sustainability Meeting 12, when asked about perceived benefits of the consultation process, Educator A admitted that, before the consultation, she did not believe that she could affect Child Z's behaviour, meaning that his behaviour was "bigger" than the help she could provide. After the consultation process, she stated that she viewed Child Z in a more positive light and, although it was not "easier" to handle his challenging behaviours, she felt better equipped to handle them due to her deeper understanding of him. Therefore, it seems Educator A felt more confident in her ability to affect Child Z's challenging behaviours through her greater understanding of his needs. Educator A also brought up that the consultation process had made her feel less overwhelmed. Taken

together, these examples show that Educator A’s confidence grew throughout the consultation process.

For Educator N, when considering the Self-Efficacy questionnaire, she experienced a two-point increase pre- and post-intervention. When first measured, her self-efficacy score was 38/50. This increased to 40/50 following the intervention process (See table 1). Educator N experience a 1-point increase in two statements. The statement “I believe I am equipped with the knowledge to handle a child with difficult behaviour” increased from “Neither Agree Nor Disagree” (3 points) pre-intervention to “Agree” (4 points) post-intervention and the statement “I am confident in my ability to remain calm and in control while a child is exhibiting a challenging behaviour increased from “Agree” (4 points) pre-intervention to “Strongly Agree” (5 points) post-intervention. Overall, from her responses on the Self-Efficacy questionnaire, it seems as though Educator N felt better in her knowledge to address challenging behaviours and her ability to do so in a calm manner.

Table 1.
Educators’ Pre- and Post-Intervention Self-Efficacy Scores

	<i>Self-Efficacy Score</i>	
	<i>Pre-Intervention</i>	<i>Post-Intervention</i>
Educator A	36/50	38/50
Educator N	38/50	40/50

Furthermore, evidence of a positive change in self-efficacy was observed through Educator N’s behaviours and responses across the consultation process. For example, during Plans for Sustainability Meeting 12, Educator N admitted that she felt that the consultation process supported her as a teacher and lead her to have a better relationship with Child D. She explained that she felt confident in the small changes she has noticed in Child D. Additionally, she mentioned that she felt more confident using new strategies that she wouldn’t have known about if it weren’t for the consultation. Therefore, it seems as though Educator N felt more confident in her ability to affect Child D’s challenging behaviours through a larger repertoire of strategies. Taken together, these examples show that Educator N’s confidence grew throughout the consultation process.

Although both educators seemed to experience greater confidence following the consultation process, Educator A had lower pre-and post-intervention scores on her Self-Efficacy questionnaire than Educator N, specifically a 2-point difference. This difference could possibly be related to a difference in experience between Educator A and Educator N. On Educator N’s pre-intervention questionnaire, she left a comment explaining her extensive experience with handling challenging behaviour: “Au fil des années, j’ai vécu trop d’expériences avec des enfants qui éprouvent un trouble de comportement et des enfants autistes... j’étais toujours entourée d’éducatrices spécialisées, ce qui m’a aide à créer des strategies nécessaires pour chaque type de problème et à trouver les moyens pour guider l’enfant à dépasser des moments difficiles dans sa journée.” This could account for her greater score. There also seemed to be a difference in the reason behind each educators’ growth in confidence. For example, Educator A’s growth seemed to be linked to her perception of the effect she had on Child Z’s behaviour and her greater

understanding of his needs, whereas Educator N's growth seemed to be linked to her greater knowledge of appropriate strategies.

Altogether, both educators experienced heightened self-efficacy following the consultation process. These changes in confidence could be related to multiple factors, including a deeper understanding of the children, learning appropriate strategies, and feelings of support from the consultant.

The Impact of Consultation on Children's Challenging Behaviours

Over the course of the consultation process, when applying appropriate strategies to targeted challenging behaviours, these behaviours became more manageable; specifically, they became less frequent, shorter in duration, and easier to overcome. These findings were demonstrated through the educators' accounts during the consultation meetings as well as educator and consultant event sample observations.

For Child Z, during Plans for Sustainability Meeting 12, Educator A mentioned that she found that Child Z was still easily distracted during circles time, however, this occurred only during songs of low engagement (low physical movement). She explained that when she applied strategies to include movements during circle time, she noticed that Child Z became more engaged and had longer periods of sustained attention. Furthermore, regarding Child Z's tantrums, Educator A mentioned that she observed that he still experienced "big emotions", however, he was more easily calmed by her and was more aware of his emotions while he was feeling them. Therefore, through Educator A's accounts, it seemed as though Child Z's behaviours improved through using appropriate strategies in line with his needs. Additionally, Child Z exhibited fewer instances of challenging behaviour post-intervention. This change was noted through event sample observations completed by Educator A and the consultant during Meeting 2 (Baseline Measures) and Meeting 10 (Post-Intervention Measures) of the consultation process. Specifically, Educator A observed Child Z's target challenging behaviours over the course of one week pre-and post-intervention and I observed Child Z's target challenging behaviours over the course of 2 hours pre-and post-intervention. For behaviour 1, Child Z's lack of concentration during circle time, Educator A noted 2 events during her pre-intervention week-long observation (Meeting 2) and 2 events during her post-intervention week long-observation, showing no change (See table 2). However, I noted 6 events during my pre-intervention 2-hour observation (Meeting 2) and 2 events during my post-intervention 2-hour observation (Meeting 10), showing a decrease in frequency of the behaviour (See table 2). For behaviour 2, Child Z's lack of emotional regulation, Educator A noted 3 events during her pre-intervention week-long observation (Meeting 2) and 1 event during her post-intervention week long-observation, showing a decrease in frequency of the behaviour (See table 2). However, I noted 0 events during my pre-intervention 2-hour observation (Meeting 2) and 1 event during my post-intervention 2-hour observation (Meeting 10), showing no change (See table 2). Therefore, overall, there seemed to be a slight decrease in occurrence of both Child Z's behaviours from before and after the consultation process (See Figures 1 & 2).

Table 2.

Pre- and Post-Intervention Frequency of Child Z's Observed Target Challenging Behaviours

	<i>Behaviour 1</i>		<i>Behaviour 2</i>	
	<i>Pre-Intervention</i>	<i>Post-Intervention</i>	<i>Pre-Intervention</i>	<i>Post-Intervention</i>
Educator A	2	2	3	1
Consultant	6	2	0	1

Figure 1.

Changes in Pre- and Post-Intervention Frequency of Child Z's Target Challenging Behaviour 1

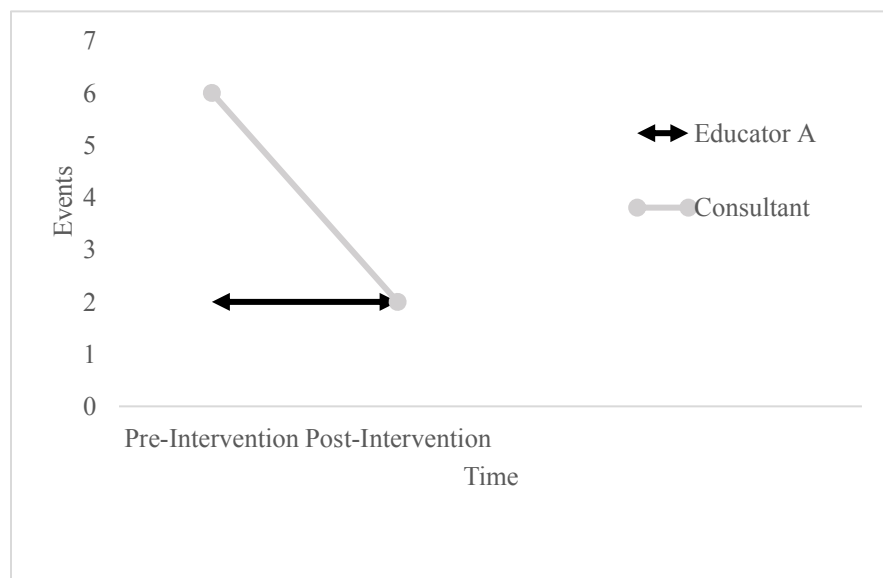
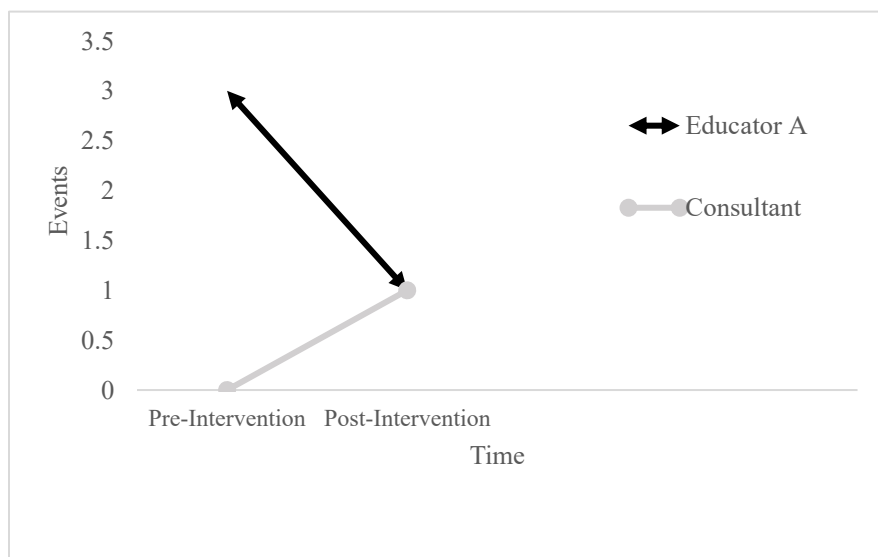


Figure 2.

Changes in Pre- and Post-Intervention Frequency of Child Z's Target Challenging Behaviour 2



Along with lessened occurrence of each challenging behaviour for Child Z, the consultant also observed during Intervention Meetings (6, 7, 8, and 9) that, in instances where Educator A applied the appropriate strategies selected to address Child Z's challenging behaviours, Child Z's behaviours improved almost instantaneously. For example, during Intervention Meeting 9, during the first song of circle time, Child Z was seen moving his feet in a kicking motion instead of singing. When Educator A noticed this behaviour, she offered Child Z an incentive (strategy #2), explaining that if he sings along with the songs, once they are finished circle time, they will head to the gym to run and play with balls. In response, Child Z began singing the first song along with his classmates. Taken together, these examples demonstrate that Child Z experienced improvements in his challenging behaviours, especially in cases where his educator was applying appropriate strategies to support his behaviour change.

For Child D, during Plans for Sustainability Meeting 12, Educator N mentioned that she found that Child D was having fewer conflicts with friends during free play, especially when she used the strategy to pair him with two friends rather than just one. She believed pairing him with two friends lead to less conflict because it changed the social dynamic of the small group play. Furthermore, Educator N explained that, in general, she found the consultation process helped change Child D's behaviour; specifically, he displayed fewer challenging behaviours throughout the day. Additionally, Child D exhibited fewer instances of challenging behaviour post-intervention. This change was noted through event sample observations completed by Educator N and the consultant during Meeting 2 (Baseline Measures) and Meeting 10 (Post-Intervention Measures) of the consultation process. Specifically, Educator N observed Child D's target challenging behaviours over the course of one week pre-and post-intervention and I observed Child D's challenging behaviours over the course of 2 hours pre-and post-intervention. For behaviour 1, Child D's control of friends during free play, Educator N noted 4 events during her pre-intervention week-long observation (Meeting 2) and 2 events during her post-intervention week long-observation, showing a decreased frequency of the behaviour (See table 3). However, I noted 2 events during my pre-intervention 2-hour observation (Meeting 2) and 0 events during

my post-intervention 2-hour observation (Meeting 10), also indicating a decrease (See table 3). For behaviour 2, Child D'S lack of motivation to finish structured activities, Educator N noted 5 events during her pre-intervention week-long observation (Meeting 2) and 1 event during her post-intervention week long-observation, showing a decrease in frequency of the behaviour (See table 3). However, I noted 5 events during my pre-intervention 2-hour observation (Meeting 2) and 2 event during my post-intervention 2-hour observation (Meeting 10), also showing a decrease (See table 3). Therefore, overall, there seemed to be a decrease in occurrence of both Child D's target behaviours from before to after the consultation process (See Figures 3 & 4).

Table 3.

Pre- and Post-Intervention Frequency of Child D's Observed Challenging Behaviours

	<i>Behaviour 1</i>		<i>Behaviour 2</i>	
	<i>Pre-Intervention</i>	<i>Post-Intervention</i>	<i>Pre-Intervention</i>	<i>Post-Intervention</i>
Educator N	4	2	5	1
Consultant	2	0	5	2

Figure 3.

Changes in Pre- and Post-Intervention Frequency of Child D's Target Challenging Behaviour 1

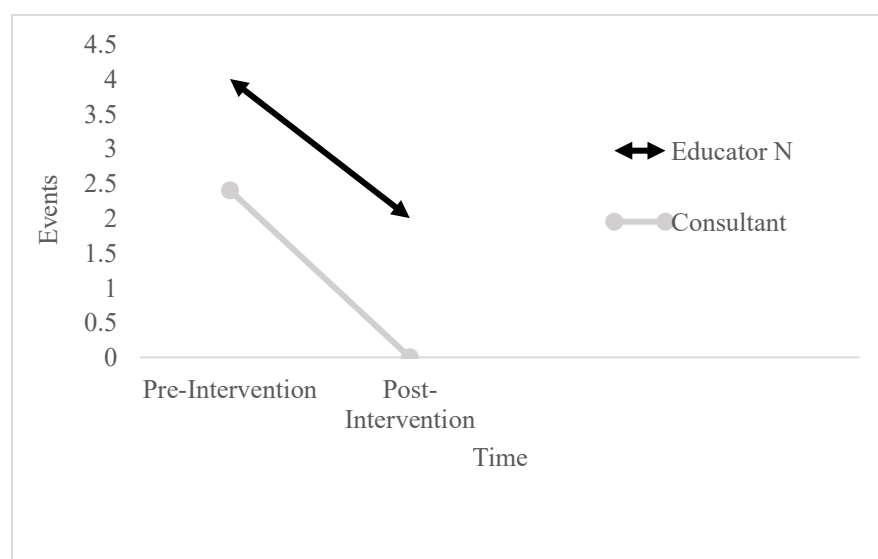
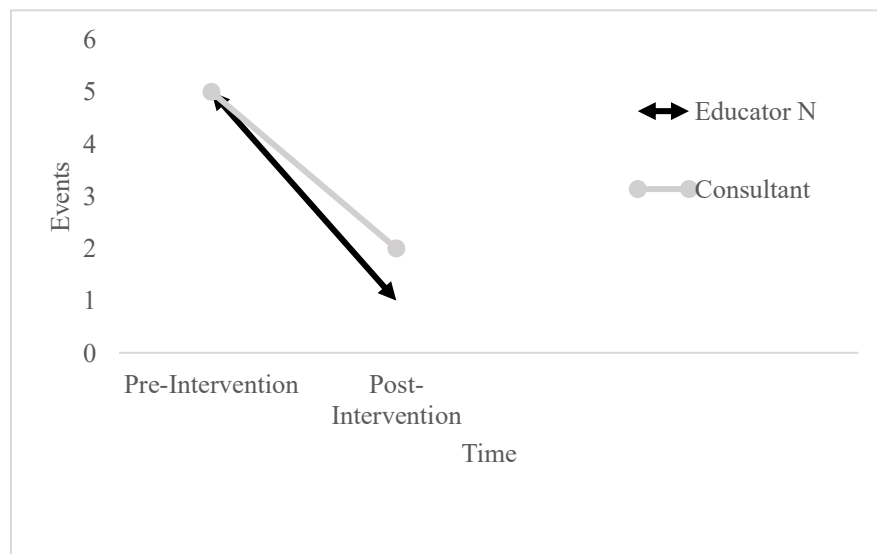


Figure 4.

Changes in Pre- and Post-Intervention Frequency of Child D's Target Challenging Behaviour 2



Along with a lessened occurrence of each challenging behaviour for Child D, the consultant also observed during Intervention Meetings (6 & 7) that, in instances where Educator N would apply the appropriate strategies selected to address Child D's challenging behaviours, his behaviours would improve rapidly. For example, during a structured letter tracing activity in Intervention Meeting 7, Child D stopped tracing the letter M on the page and expressed "Je veux pas". To address this, Educator N used modification as a strategy (strategy #2) and drew bubbles around the letters remaining on Child D's page so that he could colour in the letters rather than trace them. In response, Child D colored all the bubbled letters left on the page. Taken together, these examples demonstrate that Child D experienced improvements in his challenging behaviours, especially in cases where his educator was applying appropriate strategies to support his behaviour change.

Overall, both Child Z and Child D seemed to experience improvements in their challenging behaviours over the course of the intervention process, especially when appropriate strategies were employed by their educators. This change could be related to the educators' growing repertoire of appropriate strategies, greater confidence in dealing with challenging behaviours, and deeper knowledge of the children's behaviour patterns, thoughts, and needs.

Discussion

Approximately 10-20% of preschool-aged children exhibit significant challenging behaviours, stemming from underlying behavioural or emotional difficulties (Campbell, 1995; Charach et al., 2020). Therefore, early childhood settings, such as preschools, represent an important avenue for early intervention. However, most early childhood educators do not feel supported or equipped to handle challenging behaviours within their classroom due to lack of training and resources, low confidence, and a growing pressure to perform (Arnold et al., 2006; Moore et al., 2017). Behavioural consultation is often used as a method to remediate children's challenging behaviours by providing teachers with support in the form of collaborative consultation sessions (Kratowill & Bergan, 1990). It is used by Canadian mental health

professionals as a first recourse early intervention method (Sladeczek et al., 2006). Behavioural consultation can be either child-centered (i.e., the goal is to address children's individual behaviours), program-centered (i.e., the goal to improve teachers' and/or parents' understanding of children's challenging behaviours), or a combination (Cohen & Kaufmann, 2005). The present study was a combination (child-centered and program-centered), with the aim of investigating the use of behavioural consultation as a method to improve preschool teacher's teaching outcomes and children's behaviour outcomes. To add to the literature, the specific purpose of this study was two-fold: (1) to assess changes in preschool educators' knowledge (of children and appropriate strategies) and confidence (self-efficacy) in dealing with children with behavioural difficulties; and to (2) assess any changes in children's challenging behaviours.

Key Findings

Triangulation methods were used including interviews, observations, and questionnaires to answer the research questions. These multiple sources of information were necessary to provide more valid and credible findings. Overall, the educators seemed to benefit from the behavioural consultation intervention; specifically, the intervention improved their knowledge of children, knowledge of strategies, and self-efficacy. The educators expressed a deeper understanding of their focal children's needs, behaviour patterns, and responses to strategies. Their perceptions of the children after the consultation were also more positive than before the consultation, viewing them for their strengths rather than their difficulties. This shift allowed the educators to consider the children's strengths when attempting to help them overcome their challenging behaviours and demonstrating more inclusive classroom practices than before the consultation. These findings are consistent with previous literature that has shown teachers' greater consideration of children's needs following behavioural consultation-like interventions, specifically interventions that included coaching, modeling, and feedback by a consultant (Raver et al., 2008; Raver et al., 2009). For example, Raver et al. (2008) studied the effects of consultation on classroom emotional climate, which partly encompassed teachers' sensitivity to children's needs, and found that providing teachers with feedback and modeling lead them to be more receptive to their student's needs and subsequently use appropriate strategies for classroom behaviour management. In the current study, part of the consultation process included observing the behaviour patterns (antecedents and consequences of target challenging behaviours) of each child with the consultant. Although previous studies did not directly analyze specific behaviour patterns alongside educators to foster better understanding of children with behavioural difficulties, some did include teaching the general socio-emotional development and functioning of children with behavioural difficulties to foster better understanding of the behavioural challenges (Alkon et al., 2003; Hanisch et al., 2020; Upshur et al., 2009). A detailed analysis of each child's behaviours likely contributed to the educators in the current study developing a deeper understanding of the roots of the challenging behaviours. Consequently, this assisted them in applying appropriate targeted strategies. In other words, having a complete picture of children's needs allowed for more effective selection of appropriate strategies.

Changes in educators' knowledge of appropriate strategies were evident when both educators grew a larger repertoire of strategies and began to modify and apply appropriate strategies across a variety of challenging behaviours. In this way, they experimented with strategies suggested by the consultant to suit themselves and the child in their classroom. This finding is in line with previous research, as several other studies that applied behavioural consultation interventions with teachers discovered greater use of behaviour management strategies with increased autonomy (Alkon et al. 2003; Fabiano et al., 2018; Hanisch et al., 2020;

Raver et al., 2008; Raver et al., 2009; Williford & Shelton, 2008). For example, Brock and Beaman-Diglia (2018) investigated the effects of coaching on two educators' abilities to manage a 5-year-old child with behavioural difficulties. A consultant coached both educators on appropriate strategies for managing difficult behaviours and following the consultation, the strategies provided during the coaching sessions were observed being utilized by both educators to handle children's challenging behaviours. This is similar to the findings from the consultant observations of the educators in the current study; specifically, both educators were seen using strategies taught to them by the consultant to manage challenging behaviours. The creation of a goal-oriented plan with specific strategies likely provided the educators with a structure by which to approach challenging behaviours. Their deeper understanding of children's needs could have also contributed to this greater repertoire of strategies. Specifically, understanding a child's needs may have allowed for implementation strategies that are in line with these needs, promoting an inclusive classroom setting. Furthermore, it was discovered in the current study that educators became more independent in their use of appropriate strategies over the course of the consultation process, needing less guidance from the consultant as they became more comfortable and confident in their abilities. They took initiative in implementing appropriate strategies and following a contingency plan; for example, "if strategy #1 is unsuccessful, then I will use strategy #2." This shift could have been related to the consultant's consistent support throughout the early stages of the consultation process in the form of advice, modeling, and reassurance, which followed the collaborative nature of the behavioural consultation model.

Educators experienced heightened self-efficacy over the course of the behavioural consultation process. In other words, at the end of the consultation process, educators felt more confident in their abilities to handle challenging behaviours by using appropriate strategies. Alkon et al. (2003) reported similar findings after discovering an increase in teachers' self-efficacy (as rated by questionnaires, observations, and focus groups) following a year-long individualized consultation service. Along with a focus on improving teachers' self-efficacy, the researcher focused on improving teachers' understanding of children's difficult behaviours and overall socio-emotional development. Both areas improved following the consultation services, demonstrating a possible connection. This also occurred in the current study as the educators experienced a deeper understanding of children's needs as well as a heightened sense of self-efficacy following the consultation process, hinting at a possible relationship between interventions that improve the children's challenging behaviours and teacher self-efficacy. One of the aims of behavioural consultation is to build stronger teacher-student relationships. The literature shows that many studies have aimed to improve the teacher-child relationship (Gilliam, 2007; Hanisch et al. 2020; Williford & Shelton, 2008). Hanisch et al.'s (2020) study kept child-teacher relationships at the forefront and discovered that teachers' self-efficacy for managing challenging behaviours improved following training modules given by a consultant. Similarly, in the current study, following the consultation process, educators expressed that they felt they had developed stronger relationships with their paired child. They also explained that they felt more confident in their ability to affect positive change in their paired child. Both these changes could have been related to their improved self-efficacy following the consultation process. Furthermore, considering the collaborative nature of the consultant-consultee relationship, educators felt comfortable enough with the consultant to ask for help and express their concerns and doubts. Through this, the consultant offered much support in the form of positive advice and reassurance, which could have contributed to the educator's heightened confidence in their

abilities. In other words, having a support system that motivates you, reassures your performance, and eases your doubts could positively affect your confidence.

The behavioural consultation intervention had positive effects on the children's challenging behaviours by making them more manageable. Specifically, when educators would apply appropriate strategies, challenging behaviours became less frequent, shorter in duration, and easier to overcome. Over the course of the consultation process, the children were exhibiting fewer challenging behaviours. These findings are consistent with previous literature, as several studies have shown positive behaviour outcomes for children who exhibit challenging behaviours following a behavioural consultation-like intervention (Gilliam, 2007; McGoey et al., 2013; Raver et al., 2008; Raver et al., 2009; Upshur et al., 2009; Wilkinson, 2005; Williford & Shelton, 2008). The studies done by Upshur et al. (2009) and Williford and Shelton (2008) revealed changes in children's challenging behaviours following consultation as compared to a control group, however, the current study revealed changes in children's challenging behaviours as compared to themselves pre- and post-intervention. In Wilkinson (2005)'s study, behavioural consultation was used to improve teacher and parents' behaviour management skills and children's target challenging behaviours. Individualized intervention plans were collaboratively created for two 9-year-old children to address target challenging behaviours. Following the consultation, these children's target challenging behaviours noticeably improved (as rated by consultant observations). Similarly, the current study utilized the same approach by focusing teachers' efforts on target challenging behaviours, which yielded improvements in these behaviours. Furthermore, during instances of challenging behaviours in the current study, each child was seen responding more positively to appropriate strategies, meaning they engaged in more appropriate behaviours over time and needed fewer interventions from teachers as well as showed less resistance post-intervention compared to pre-intervention. This overall improvement in behaviour could have been related to educators' deeper understanding of children's needs, educators' increased knowledge of appropriate strategies, or educators' greater confidence in their abilities. In similar previous studies, improvements in children's challenging behaviours were related to teacher's understanding of children and implementation of appropriate behavioural strategies (Raver et al., 2008; Raver et al., 2009; Williford & Shelton, 2008).

Implications for Practice

Preschool educators require support for effective interventions to address challenging behaviours in their classroom as the likelihood of having preschoolers with behaviour difficulties increases (Campbell, 1995; Charach et al., 2020). The current study demonstrated that the use of behavioural consultation, which included individualized sessions with preschool educators, improved educators' understanding of children's challenging behaviours, knowledge of appropriate strategies to apply to these challenging behaviours, and overall confidence in handling these challenging behaviours. Given the fact that educators feel overwhelmed with the demands of behaviour challenges in their classrooms, the behavioural consultation model utilized in this study has implications for alleviating stress and decreasing self-doubt in educators by providing support and guidance through collaborative coaching (Arnold et al., 2006; Moore et al., 2017). In the current study, the behavioural consultation model allowed preschool educators to play an active role in the consultation process, while providing them with extra support. The consultant worked alongside the educators to assist in teaching them the needs and behaviour patterns of their children and the appropriate strategies to handle challenging behaviours. Furthermore, the model demonstrated it could improve children's challenging behaviours by reducing their occurrence and severity. This is especially important considering early childhood

settings provide an important avenue for early intervention for children exhibiting behavioural difficulties (Raver & Knitzer, 2002; Webster-Stratton & Taylor, 2001). Through the current study, behavioural consultation that focuses on teacher training and support was proven to be an indirect method of improving the outcomes of children with behavioural difficulties. A classroom-based intervention in the preschool setting that specifically involves teacher consultation, such as the model of behavioural consultation used in the current study, is uncommon in the literature and practice (Webster-Stratton, 2001). Therefore, the positive outcomes demonstrated have implications for future and can be used to support educators and children exhibiting challenging behaviours in the early childhood classroom.

Limitations and Direction for Future Research

There are some limitations that impact the conclusions of this study, specifically that there was not a follow-up of observations and interventions to assess whether any changes in the educators' teaching strategies and children's challenging behaviours were maintained in the long term. Such an assessment would have uncovered whether the consultation allowed for long-term change in educators' implementation of appropriate strategies, feelings of self-efficacy, and children's frequency of challenging behaviours. The findings of this study are only transferable to the present context and the in-depth qualitative case study design can invite educators in the preschool system to make connections between their own experiences and that of the educators in the present study. Furthermore, the convenience sample of educators and children also contributed to the study's limited transferability to other contexts and settings. The nature of the findings yielded qualitative and not empirically analysed statistical findings. The data and findings were presented descriptively using two case studies and the research methods used were qualitative semi-structured interviews, questionnaires, and observations. Moreover, there was not a control condition or a random sample to test for differences. Therefore, there is no way to be certain that positive changes in children's behaviour, educators' teaching strategies, and educators' self-efficacy were a direct result of the behavioural consultation intervention or outside factors (i.e., maturation, changes in home environment, changes in school environment, etc.). Also, the variability in the timeline of the sessions could have affected the findings, specifically the fact that one educator only participated in two intervention sessions (meetings 6 & 7) while the other educator participated in four intervention sessions (meetings 6, 7, 8, & 9). The data pulled from the educator with the shorter timeline may not have been as complete as the educator with the longer timeline. The behavioural consultation model used in the current study was over a 10-week period. Limited resources and time in the early childcare setting could stifle the application of such a model in practice. Therefore, if the intervention were to be shortened to fit the demands of early childcare centers, it is important to consider the intended outcomes of each coaching session when choosing which session to keep as part of a shortened consultation process. Furthermore, the previous relationship between the consultant and educators should be considered when interpreting the findings of the current study. Although the previous relationship may have contributed to positive outcomes due to educators feeling more comfortable to disclose information throughout the consultation process and more willing to follow guidance, this also may have presented an avenue for bias. No previous literature mentions the status of the relationship between the consultant and consultee at the start of each study. Stress, a factor that could influence educator's performance, was also not included in the current study, unlike the previous literature (Gilliam, 2007; Hanisch et al., 2020; Raver et al., 2009). Measuring educator's pre- and post-intervention stress and providing educators with stress management resources over the course of the consultation process would have been a way

to include this factor into the current research study. This is especially important considering educators with low self-efficacy are more likely to experience stress and burnout during periods of heightened classroom disturbance (Dicke et al., 2014; Tschannen-Moran & Hoy, 2001).

Future research should focus on a larger and more diverse sample size to build on this study's current findings. This would allow for greater confidence that the results are representative of a larger population. It would also be important to include a random sample and a control group design to test whether any change in outcomes is directly linked to the behavioural consultation intervention. Furthermore, a follow-up assessment with the educators and children would allow researchers to assess whether any positive outcomes are maintained over a long period of time and educators are following the plans for sustainability discussed in the final meeting. This type of follow-up assessment could include the educators filling out the Self-Efficacy questionnaire once more, another event sample of the educators' teaching strategies in class, and another event sample of the children's challenging behaviours in class. Future research could also include event sample observations to assess educators' teaching strategies prior to and after the consultation process. This triangulation of data would complement the data collected during pre-and post-intervention Teaching Strategies Interviews. Furthermore, the effects of the relationship between consultant and consultee at the start of the research (whether there is an existing relationship) should be considered in future studies. A comparative study could be an option to explore the effects of the consultant having a prior relationship with the consultee and one without a prior relationship. It would also be beneficial to add a measure to account for and aim to reduce educator stress as part of the behavioural consultation model. This factor could play a role in educator's levels of self-efficacy (Dicke et al., 2014; Tschannen-Moran & Hoy, 2001).

Conclusion

Through the use of qualitative methods, such as observations and interviews, this study aimed to understand the possible impact of behavioural consultation in the preschool setting on educators' knowledge and use of strategies and child outcomes. By providing educators with an observational analysis of children's behaviour patterns and individualized coaching sessions, both participants experienced growth in their understanding and perceptions of children's challenging behaviours; this may have directly resulted in the implementation of appropriate strategies to address these challenging behaviours. They also seemed more confident in their abilities to handle challenging behaviours. These changes in educators' perceptions and practices were also related to a reduction in children's challenging behaviours. Thus, this study demonstrated that the behavioural consultation model can be successfully implemented in early childhood classrooms to benefit both educators and children with behavioural difficulties. These findings complement the already existing literature on the efficacy of behavioural consultation as an early intervention method to address challenging behaviours. The behavioural consultation process can be used by special education consultants to provide extra support to preschool teachers struggling to handle children with behavioural difficulties within their classrooms, specifically as part of an ongoing professional development program.

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Appendices

Appendix A

Researcher's Employer's Consent Form

Within the context of my Master's Thesis project at Concordia University, I, Irene Pastras, will be conducting a study in the daycare establishment I work at. This study will involve the participation of two educators and one child with behavioural difficulties in each of their classrooms. The goal of this study is to test the effects of Behavioural Consultation (a model created by Kratochwill & Bergan, 1990) on educators' knowledge of strategies to manage difficult behaviours and on their self-efficacy (confidence) in their abilities to manage these behaviours. Additionally, the study will observe whether any changes in these values (educator's teaching practices & self-efficacy) for the educators will lead to changes in the children's difficult behaviours. The educators will engage in 10 weeks of consultation services with me, which will include 5 one-on-one sessions (1 hour each), at a time of their convenience, and 5 in-class sessions (1-2 hours each). Also, the children will be observed by me, within the context of their classrooms. I, as the researcher, will interact with both the educators and the children on a weekly basis. However, these meetings will be separate from the days that I work as a special educator; furthermore, my role as a researcher will remain separate from my role as a special educator.

I have read and understood this form. I have had the chance to ask questions and any questions have been answered. I _____ consent for Irene Pastras to conduct her Master's Thesis project at the daycare I employ her to work at.

Appendix B

Daycare Administration Consent Form

Within the context of my Master's Thesis project at Concordia University, I, Irene Pastras, would like to undertake a study within your daycare establishment. This study will involve the participation of two of your educators and one child with behavioural difficulties in each of their classrooms. The goal of this study is to test the effects of Behavioural Consultation (a model created by Kratochwill & Bergan, 1990) on educators' knowledge of strategies to manage difficult behaviours and on their self-efficacy (confidence) in their abilities to manage these behaviours. Additionally, the study will observe whether any changes in these values for the educators will lead to changes in the children's difficult behaviours. The educators will engage in 10 weeks of consultation services, which will include 5 one-on-one sessions (1 hour each), at a time of their convenience, and 5 in-class sessions (1-2 hours each). Also, the children will be observed by me, within the context of their classrooms. I, as the researcher, will interact with both the educators and the children on a weekly basis. However, these meetings will be separate from the days that I work as a special educator; furthermore, my role as a researcher will remain separate from my role as a special educator. After consulting with the educators on their availabilities, I will provide you with a schedule of each meeting. Within the study, both the educators and children will be identified with a number to maintain anonymity; additionally, the preschool will not be mentioned by name within the study, instead referred to as "X". If at any moment during the research study, there is information revealed that causes imminent threat or harm to the educators and/or children, the proper authorities will be contacted, for example, the Department for Youth Protection.

I have read and understood this form. I have had the chance to ask questions and any questions have been answered. I _____ consent for Irene Pastras to conduct her Master's Thesis project within my preschool establishment.

Appendix C

Educator Consent Form (English)



INFORMATION AND CONSENT FORM

Study Title: Two Case Studies: Using Behavioural Consultation to Guide Preschool Teachers Supporting Children with Behavioural Difficulties

Researcher: Irene Pastras

Researcher's Contact Information: irenepastras@gmail.com or (514)802-9589

Faculty Supervisor: Dr. Harriet Petrakos

Faculty Supervisor's Contact Information: hariclia.petrakos@concordia.ca

You are being invited to participate in the research study mentioned above. This form provides information about what participating would mean. Please read it carefully before deciding if you want to participate or not. If there is anything you do not understand, or if you want more information, please ask the researcher.

A. PURPOSE

The purpose of the research is to explore changes in preschool educators' teaching strategies and self-efficacy (confidence) in dealing with children with behavioural difficulties through providing them with additional support, specifically using collaborative consultation meetings (following the Behavioural Consultation Model by Kratochwill & Bergan, 1990). Furthermore, if changes are seen in educators' teaching strategies and self-efficacy, the purpose of the research is to explore whether these changes affect children's display of challenging behaviours.

B. PROCEDURES

If you participate, you will be asked to provide some background information regarding your age, gender, ethnicity, level of education, and years of experience. You will also take part in 10 weeks of consultation services with the researcher, including 5 one-on-one meetings and 5 in-class meetings at a time convenient for you. Each meeting will last approximately 1 hour. During the 5 one-on-one meetings, you will be asked to identify a child's challenging behaviours, complete an in-class observation of the child's challenging behaviours, select strategies to address the challenging behaviours (from a set presented to you), complete a self-efficacy questionnaire and answer interview questions regarding your teaching practices (that will be audio-recorded). During the 5 in-class meetings, you will observe the strategies you selected being used and you will attempt to implement them with feedback.

C. RISKS AND BENEFITS

You might face certain risks by participating in this research. These risks include feelings of being overwhelmed to carry out specific teaching strategies aimed at decreasing children's challenging behaviours. To minimize these risks, you will select strategies you feel comfortable with, and you may modify the selected strategies at any time. Furthermore, the researcher will model these strategies and provide feedback to you. If at any time throughout the consultation process you reveal or the researcher observes behaviours or obtains information that causes imminent threat or harm to you or the children with behaviour difficulties, the proper authorities will be contacted, for example, the Department of Youth Protection.

After this study, you may experience increases in your knowledge of appropriate teaching strategies to handle children's challenging behaviours and an increase in your confidence in your ability to handle children with challenging behaviours (self-efficacy).

D. CONFIDENTIALITY

Some of the information you provide during the consultation meetings (teaching strategies interview) will be audio recorded as part of this research.

I will not allow anyone to access any of the information provided during the consultation meetings, except people directly involved in conducting the research. I will only use the information for the purposes of the research described in this form.

The information gathered will be confidential and you will only be identified by number. That means that it will not be possible to make a link between you and the information you provide.

I will protect all the information gathered during the consultation meetings by storing it on password protected devices and in a locked safe box. Also, I will destroy the information 18 months after the end of the study by deleting the electronic versions from the devices and shredding the paper versions.

I intend to submit the results of this research as part of my Master's Thesis at Concordia University. However, it will not be possible to identify you in this project.

F. CONDITIONS OF PARTICIPATION

You do not have to participate in this research. It is purely your decision. If you do participate, you can stop at any time. You can also ask that the information you provided not be used or modified, and your choice will be respected. If you decide that you don't want your information to be used, you must tell the researcher before November 21st 2022.

There are no negative consequences for not participating, stopping in the middle, or asking that your information not be used.

G. PARTICIPANT'S DECLARATION

I have read and understood this form. I have had the chance to ask questions and any questions have been answered. I agree to participate in this research under the conditions described.

NAME

SIGNATURE

DATE

If you have questions about the scientific or scholarly aspects of this research, please contact the researcher. Their contact information is on page I. You may also contact their faculty supervisor. If you have concerns about ethical issues in this research, please contact the Manager, Research Ethics, Concordia University, 514.848.2424 ex. 7481 or oor.ethics@concordia.ca.

Appendix D

Educator Consent Form (French)



FORMULAIRE D'INFORMATION ET DE CONSENTEMENT DE PARTICIPATION À UNE ÉTUDE

Remarque : L'emploi du genre masculin a pour but d'alléger le texte et d'en faciliter la lecture

Titre de l'étude : Deux Études de Cas : Utilisation de la Consultation Comportementale pour Guider les Éducatrices du Préscolaire à Soutenir les Enfants Ayant des Difficultés de Comportement

Chercheur : Irene Pastras

Coordonnées du chercheur : irenepastras@gmail.com ou (514)-802-9589

Professeur-superviseur : Dr. Harriet Petrakos

Coordonnées du professeur-superviseur : hariclia.petrakos@concordia.ca

Nous vous invitons à prendre part au projet de recherche susmentionné. Le présent document vous renseigne sur les conditions de participation à l'étude; veuillez le lire attentivement. Au besoin, n'hésitez pas à communiquer avec le chercheur pour obtenir des précisions.

A. OBJECTIF DE LA RECHERCHE

Cette étude a pour but d'explorer l'effet de la consultation comportementale, un programme qui offre du soutien supplémentaire aux éducatrices du préscolaire à l'aide de réunions de consultation collaboratives (suivant le modèle de Consultation Comportementale de Kratochwill & Bergan, 1990, sur les stratégies d'enseignement des éducatrices et leurs auto-efficacité (confiance) à travailler avec les enfants ayant des difficultés de comportement. De plus, si des changements sont observés dans les stratégies d'enseignement et l'auto-efficacité des éducatrices, le but de la recherche est d'explorer si ces changements affectent les comportements problématiques des enfants.

B. PROCÉDURES DE RECHERCHE

Si vous participez à l'étude, il vous sera demandé de fournir des informations générales concernant votre âge, votre sexe, votre appartenance ethnique, votre niveau d'éducation et vos années d'expérience. De plus, vous prendrez part à 10 semaines de consultation avec le chercheur, dont 5 rencontres individuelles (un-à-un) et 5 rencontres en classe à un temps qui vous convient. Chaque réunion durera environ 1 heure. Au cours des 5 rencontres individuelles,

on vous demandera d'identifier les comportements difficiles d'un enfant, de faire une observation en classe des comportements difficiles de l'enfant, de sélectionner des stratégies pour aborder les comportements difficiles (à partir d'un ensemble qui vous sera présenté), de compléter un questionnaire d'auto-efficacité et de répondre à des questions d'entrevue concernant vos pratiques d'enseignement (qui seront enregistrées en audio). Au cours des 5 rencontres en classe, vous observerez l'utilisation des stratégies que vous avez sélectionnées et vous tenterez de les mettre en œuvre avec des reinseignements

C. RISQUES ET AVANTAGES

En participant à cette étude, vous pourriez être exposé à certains risques, y compris : comme le sentiment d'être dépassé par la mise en œuvre de stratégies d'enseignement spécifiques visant à réduire les comportements problématiques des enfants. Pour minimiser ces risques, vous sélectionnerez les stratégies d'enseignement avec lesquelles vous vous sentez à l'aise et vous pourrez modifier les stratégies sélectionnées à tout moment. De plus, le chercheur va modeler ces stratégies pour vous et va vous fournir des commentaires. Si, au cours du processus de consultation, vous révélez des informations ou le chercheur observe des comportements ou obtient des informations qui causent une menace ou un préjudice imminent pour vous ou les enfants ayant des troubles du comportement, les autorités appropriées seront contactées, par exemple, le Département de la protection de la jeunesse.

Votre participation à cette étude pourrait vous être bénéfique. Les avantages éventuels seraient notamment les suivants :vous pourrez constater une augmentation de vos connaissances sur les stratégies d'enseignement appropriées pour gérer les comportements difficiles des enfants et une augmentation de votre confiance par rapport à vos capacités de gérer les enfants ayant des comportements difficiles (auto-efficacité).

D. CONFIDENTIALITÉ

Certaines des informations que vous fournirez lors des réunions de consultation seront enregistrées sur bande audio dans le cadre de cette recherche.

Le chercheur ne permettra à personne d'accéder aux informations fournies lors des réunions de consultation, à l'exception des personnes directement impliquées dans la réalisation de la recherche. Le chercheur utilisera seulement ces informations dans le cadre de la recherche décrite dans ce formulaire.

Les informations recueillies seront confidentielles et non nominatives. Vous ne serez identifié que par un numéro. Cela signifie qu'il ne sera pas possible d'établir un lien entre vous et les informations que vous fournissez.

Le chercheur protégera toutes les informations recueillies lors des réunions de consultation en les sauvegardant sur des appareils protégés par mot de passe et dans un coffre-fort verrouillé. De plus, le chercheur détruira les informations 18 mois après la fin de l'étude en supprimant les versions électroniques des appareils et en déchiquetant les versions papier.

Le chercheur a l'intention de soumettre les résultats de cette recherche dans le cadre de son projet de maîtrise à l'Université Concordia. Cependant, il ne sera pas possible de vous identifier dans ce projet.

F. CONDITIONS DE PARTICIPATION

Vous pouvez refuser de participer à la recherche ou vous en retirer à n'importe quel moment. Vous pouvez aussi demander que l'information que vous avez fournie ne soit pas utilisée; le cas échéant, votre choix sera respecté. Si vous prenez une décision en ce sens, vous devrez en avvertir le chercheur avant le 21 novembre 2022.

Il n'y aura pas de conséquences si vous décidez de ne pas participer à l'étude, d'interrompre votre participation à celle-ci ou de nous demander de ne pas utiliser vos informations.

G. CONSENTEMENT DU PARTICIPANT

Je reconnais par la présente avoir lu et compris le présent document. J'ai eu l'occasion de poser des questions et d'obtenir des réponses. Je consens à participer à l'étude dans les conditions décrites ci-dessus.

NOM

SIGNATURE

DATE

Si vous avez des questions sur l'aspect scientifique ou savant de cette étude, communiquez avec le chercheur. Vous trouverez ses coordonnées sur la première page. Vous pouvez aussi communiquer avec son professeur-superviseur.

Pour toute préoccupation d'ordre éthique relative à ce projet de recherche, veuillez communiquer avec le responsable de l'éthique de la recherche de l'Université Concordia au 514-848-2424, poste 7481, ou à oor.ethics@concordia.ca.

Appendix E

Parent Consent Form (English)



INFORMATION AND CONSENT FORM

Study Title: Two Case Studies: Using Behavioural Consultation to Guide Preschool Teachers Supporting Children with Behavioural Difficulties

Researcher: Irene Pastras

Researcher's Contact Information: irenepastras@ gmail.com or (514)802-9589

Faculty Supervisor: Dr. Harriet Petrakos

Faculty Supervisor's Contact Information: hariclia.petrakos@concordia.ca

Your child is being invited to participate in the research study mentioned above. This form provides information about what participating would mean for your child. Please read it carefully before deciding if you want your child to participate or not. If there is anything you do not understand, or if you want more information, please ask the researcher.

A. PURPOSE

The purpose of the research is to explore changes in preschool educators' teaching strategies and self-efficacy (confidence) in dealing with children with behavioural difficulties through providing them with additional support, specifically using collaborative consultation meetings (following the Behavioural Consultation Model by Kratochwill & Bergan, 1990). Furthermore, if changes are seen in educators' teaching strategies and self-efficacy, the purpose of the research is to explore whether these changes affect children's display of challenging behaviours.

B. PROCEDURES

If your child participates, you will be asked to provide background information regarding your child's age, gender, ethnicity, schooling and regarding your family composition. Also, their challenging behaviours will be observed and subsequently discussed by their educators and the researcher. Furthermore, appropriate behaviour management strategies will be employed in the context of the classroom by the educator and researcher to address your child's challenging behaviours.

C. RISKS AND BENEFITS

Your child might face certain risks by participating in this research. These risks include your child's behaviour changing if behaviour management strategies are not employed properly. To minimize these risks, the researcher will provide the educator with live feedback on the behaviour

management strategies to ensure they are being used appropriately. Furthermore, the researcher will monitor your child's behaviour to prevent any difficulties. If at any time through the consultation process the researcher observes behaviour that causes imminent threat or harm to your child or their educator, the proper authorities will be contacted, for example, the Department of Youth Protection.

After this study, your child may experience a decrease in challenging behaviours within the context of the classroom due to appropriate intervention by their educators.

D. CONFIDENTIALITY

Information regarding your child's behaviour within the classroom will be collected.

I will not allow anyone to access any of the information collected, except people directly involved in conducting the research. I will only use the information for the purposes of the research described in this form.

The information gathered will be confidential and your child will only be identified by number. That means that it will not be possible to make a link between your child and the information collected on them.

I will protect all the information gathered during the research study by saving it on password protected devices and in a locked safe box. Also, I will destroy the information 18 months after the end of the study by deleting the electronic versions from the devices and shredding the paper versions.

I intend to submit the results of this research as part of my Master's Thesis at Concordia University. However, it will not be possible to identify your child in this project.

F. CONDITIONS OF PARTICIPATION

Your child does not have to participate in this research. It is purely your decision. If your child does participate, you can withdraw their participation at any time. If you decide that you don't want the information gathered on your child to be used, you must tell the researcher before November 21st 2022.

There are no negative consequences for your child not participating, stopping in the middle, or asking that the information on your child not be used.

G. PARTICIPANT'S DECLARATION

I have read and understood this form. I have had the chance to ask questions and any questions have been answered. I agree to allow my child to participate in this research under the conditions described.

CHILD'S NAME

PARENT'S NAME

PARENT'S SIGNATURE

DATE

If you have questions about the scientific or scholarly aspects of this research, please contact the researcher. Their contact information is on page 1. You may also contact their faculty supervisor. If you have concerns about ethical issues in this research, please contact the Manager, Research Ethics, Concordia University, 514.848.2424 ex. 7481 or oor.ethics@concordia.ca.

Appendix F

Parent Consent Form (French)



FORMULAIRE D'INFORMATION ET DE CONSENTEMENT DE PARTICIPATION À UNE ÉTUDE

Remarque : L'emploi du genre masculin a pour but d'alléger le texte et d'en faciliter la lecture

Titre de l'étude : Deux Études de Cas : Utilisation de la Consultation Comportementale pour Guider les Éducatrices du Préscolaire à Soutenir les Enfants Ayant des Difficultés de Comportement

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Coordonnées du professeur-superviseur : hariclia.petrakos@concordia.ca

Nous invitons votre enfant à prendre part au projet de recherche susmentionné. Le présent document vous renseigne sur les conditions de participation pour votre enfant à l'étude; veuillez le lire attentivement. Au besoin, n'hésitez pas à communiquer avec le chercheur pour obtenir des précisions.

A. OBJECTIF DE LA RECHERCHE

Cette étude a pour but d'explorer l'effet de la consultation comportementale, un programme qui offre du soutien supplémentaire aux éducatrices du préscolaire à l'aide de réunions de consultation collaboratives (suivant le modèle de Consultation Comportementale de Kratochwill & Bergan, 1990, sur les stratégies d'enseignement des éducatrices et leurs auto-efficacité (confiance) à travailler avec les enfants ayant des difficultés de comportement. De plus, si des changements sont observés dans les stratégies d'enseignement et l'auto-efficacité des éducatrices, le but de la recherche est d'explorer si ces changements affectent les comportements problématiques des enfants.

B. PROCÉDURES DE RECHERCHE

Si votre enfant participe, il vous sera demandé de fournir des informations générales concernant l'âge, le sexe, l'origine ethnique, la scolarité de votre enfant et la composition de votre famille. De plus, ses comportements problématiques seront observés et ensuite discutés par son éducatrice et le chercheur. De plus, des stratégies appropriées de gestion du comportement seront utilisées dans le contexte de la classe par l'éducatrice et le chercheur pour aborder les comportements difficiles de votre enfant.

C. RISQUES ET AVANTAGES

En participant à cette étude, votre enfant pourrait être exposé à certains risques, y compris : comme un changement dans le comportement de votre enfant si les stratégies de gestion du comportement ne sont pas utilisées correctement par l'éducatrice et le chercheur. Pour minimiser ces risques, le chercheur fournira à l'éducatrice des commentaires en direct sur les stratégies de gestion du comportement pour s'assurer qu'elles sont utilisées de manière appropriée. De plus, le chercheur surveillera le comportement de votre enfant pour prévenir toute difficulté. Si, au cours processus de consultation, le chercheur observe un comportement qui cause une menace ou un préjudice imminent à votre enfant ou à son éducatrice, les autorités appropriées seront contactées, par exemple, le Département de la protection de la jeunesse.

Votre participation à cette étude pourrait être bénéfique pour vous et votre enfant. À la suite de l'étude, il pourrait y'avoir une diminution des comportements problématiques dans un contexte de classe dû aux stratégies mises en place par l'éducatrice et le chercheur

D. CONFIDENTIALITÉ

Des informations concernant le comportement de votre enfant en classe seront recueillies.

Le chercheur ne permettra à personne d'accéder aux informations fournies lors des réunions de consultation, à l'exception des personnes directement impliquées dans la réalisation de la recherche. Le chercheur utilisera seulement ces informations dans le cadre de la recherche décrite dans ce formulaire.

Les informations recueillies seront confidentielles et votre enfant ne sera identifié que par un numéro. Cela signifie qu'il ne sera pas possible d'établir un lien entre votre enfant et les informations collectées à son sujet.

Le chercheur protégera toutes les informations recueillies par rapport aux comportements de votre enfant en les sauvegardant sur des appareils protégés par mot de passe et dans un coffre-fort verrouillé. De plus, le chercheur détruira les informations 18 mois après la fin de l'étude en supprimant les versions électroniques des appareils et en déchiquetant les versions papier.

Le chercheur a l'intention de soumettre les résultats de cette recherche dans le cadre de son projet de maîtrise à l'Université Concordia. Cependant, il ne sera pas possible d'identifier votre enfant dans ce projet.

F. CONDITIONS DE PARTICIPATION

Vous pouvez refuser la participation de votre enfant à la recherche ou les interrompre la participation à l'étude à n'importe quel moment. Vous pouvez aussi demander que l'information recueilli sur votre enfant ne soit pas utilisée; le cas échéant, votre choix sera respecté. Si vous prenez une décision en ce sens, vous devrez en avertir le chercheur avant le 21 novembre 2022.

Vous ne subirez aucune conséquence négative si vous décidez de ne pas autoriser votre enfant à participer à l'étude, d'interrompre leur participation à celle-ci ou de nous demander de ne pas utiliser l'information recueilli.

G. CONSENTEMENT DU PARTICIPANT

Je reconnais par la présente avoir lu et compris le présent document. J'ai eu l'occasion de poser des questions et d'obtenir des réponses. Je consens à la participation de mon enfant à l'étude dans les conditions décrites ci-dessus.

NOM DE L'ENFANT

NOM DU PARENT

SIGNATURE DU PARENT

DATE _____

Si vous avez des questions sur l'aspect scientifique ou savant de cette étude, communiquez avec le chercheur. Vous trouverez ses coordonnées sur la première page. Vous pouvez aussi communiquer avec son professeur-superviseur.

Pour toute préoccupation d'ordre éthique relative à ce projet de recherche, veuillez communiquer avec le responsable de l'éthique de la recherche de l'Université Concordia au 514-848-2424, poste 7481, ou à oor.ethics@concordia.ca.

Appendix G**Educator Demographic Questionnaire (English)**

1. What is your gender?
 - a) Male
 - b) Female
 - c) Other: _____
2. How old are you? _____
3. What is your ethnicity/culture? _____
4. What is your socio-economic status?
 - a) High
 - b) Middle
 - c) Low
5. How long have you been working in childcare? _____
6. How long have you been working in the childcare center you are currently employed at?

7. Do you have a degree in a related field? Yes or No
8. If yes, then what degree do you hold and when did you receive it? _____

Appendix H**Educator Demographic Questionnaire (French)**

1. Quel est votre sexe ?
 - a) Mâle
 - b) Femelle
 - c) Autre : _____
2. Quel âge avez-vous? _____
3. Quelle est votre origine ethnique/culture ? _____
4. Quel est votre statut socio-économique ?
 - a) Haut
 - b) Moyen
 - c) Bas
5. Depuis combien de temps travaillez-vous dans le domaine de la petite enfance? _____
6. Depuis combien de temps travaillez-vous dans la garderie où vous travaillez actuellement ?

7. Avez-vous un diplôme dans un domaine connexe à la petite enfance? Oui ou non
8. Si oui, quel diplôme détenez-vous et quand l'avez-vous obtenu ? _____

Appendix I**Child Demographic Questionnaire (English)**

1. What is the child's gender?
 - d) Male
 - e) Female
 - f) Other: _____
2. How old is the child? _____
3. What is the child's ethnicity/culture? _____
4. What is your family's socio-economic status?
 - d) High
 - e) Middle
 - f) Low
5. How many siblings does the child have?
 - a) None
 - b) 1
 - c) 2
 - d) 3
 - e) Other: _____
6. Child's position in their family?
 - a) Only child
 - b) Eldest Child
 - c) Middle Child
 - d) Youngest Child
7. What is the marital status of the child's parents?
 - a) Married
 - b) Common law
 - c) Separated
 - d) Widow
 - e) Divorce
8. If divorced, the child lives with?
 - a) Only his mother
 - b) Only his father
 - c) Both his mother and father (joint custody)
9. How long has the child been enrolled in the childcare center? _____
10. How long has the child been on the daycare's special education program? _____

Appendix J**Child Demographic Questionnaire (French)**

1. Quel est le sexe de l'enfant ?
 - a) Mâle
 - b) Femelle
 - c) Autre : _____
2. Quel âge a votre enfant ? _____
3. Quelle est l'origine ethnique/culture de votre enfant ? _____
4. Quel est le statut socio-économique de votre famille ?
 - a) Haut
 - b) Moyen
 - c) Bas
5. Combien de frères et sœurs votre enfant a-t-il ?
 - a) Aucun
 - b) 1
 - c) 2
 - d) 3
 - e) Autre : _____
6. Place de votre enfant dans sa famille ?
 - a) Enfant unique
 - b) Enfant aîné
 - c) Enfant du milieu
 - d) Enfant le plus jeune
7. Quel est l'état matrimonial des parents de l'enfant ?
 - a) Marié
 - b) Mariage de fait
 - c) Séparé
 - d) Veuve
 - e) Divorcé
8. Si divorcé, votre enfant vit avec ?
 - a) Seulement sa mère
 - b) Seulement son père
 - c) Sa mère et son père (garde partagée)
9. Depuis combien de temps votre enfant est-il inscrit à la garderie ? _____
10. Depuis combien de temps votre enfant est-il inscrit au programme d'éducation spécialisée de la garderie? _____

					Meeting 4 (one-on-one) -Identifying: Goals + Patterns of behaviour -Selection of strategies + Contingency plan	
30	31	1	2	3	4	5

Octobre

Novembre 2022

D	L	M	M	J	V	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

Dimanche	Lundi	Mardi	Mercredi	Jeudi	Vendredi	Samedi
25	26	27	28	29	30	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22

Réunion 1 (un-à-un)
-Identifier 2 comportements de l'enfant
- Introduction à la fiche d'enregistrement des observations

					Réunion 3 (un-à-un) -Entrevue sur les stratégies d'enseignement -Questionnaire d'auto-efficacité	
23	24	25	26	27	28	29
30	31	1	2	3	Réunion 4 (un-à-un) -Identifier : Objectifs + Modèles de comportement -Sélection des stratégies + Plan de contingence	4
						5

November

December 2022

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
30	31	1	2	3	4	5
					Meeting 5 (in class) -Modeling strategies	
6	7	8	9	10	11	12

13	14	15	16	17	18	19
					Meeting 6 (in class) -Feedback on strategies -Modification of strategies	
20	21	22	23	24	25	26
					Meeting 7 (in class) -Feedback on strategies -Modification of strategies	
27	28	29	30	1	2	3

Novembre

Decembre 2022

D	L	M	M	J	V	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Dimanche	Lundi	Mardi	Mercredi	Jeudi	Vendredi	Samedi
30	31	1	2	3	4	5
					Réunion 5 (en classe) -Stratégies sont modelées	
6	7	8	9	10	11	12

						Réunion 6 (en classe) -Commentaires sur les stratégies - Modification des stratégies	
13	14	15	16	17		18	19
					Réunion 7 (en classe) -Commentaires sur les stratégies - Modification des stratégies		
20	21	22	23	24		25	26
					Réunion 8 (en classe) -Commentaires sur les stratégies - Modification des stratégies		
27	28	29	30	1		2	3

December

January 2023

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	1	2	3

					Meeting 8 (in class) -Feedback on strategies -Modification of strategies	
4	5	6	7	8	9	10
					Meeting 9 (in class) -Feedback on strategies -Modification of strategies	
11	12	13	14	15	16	17
					Meeting 11 (one-on-one) -Teaching Strategies Interview -Self-efficacy Questionnaire	
18	19	20	21	22	23	24
					Meeting 12 (one-on-one) -Results of study -Plans for sustainability	
25	26	27	28	29	30	31

Décembre

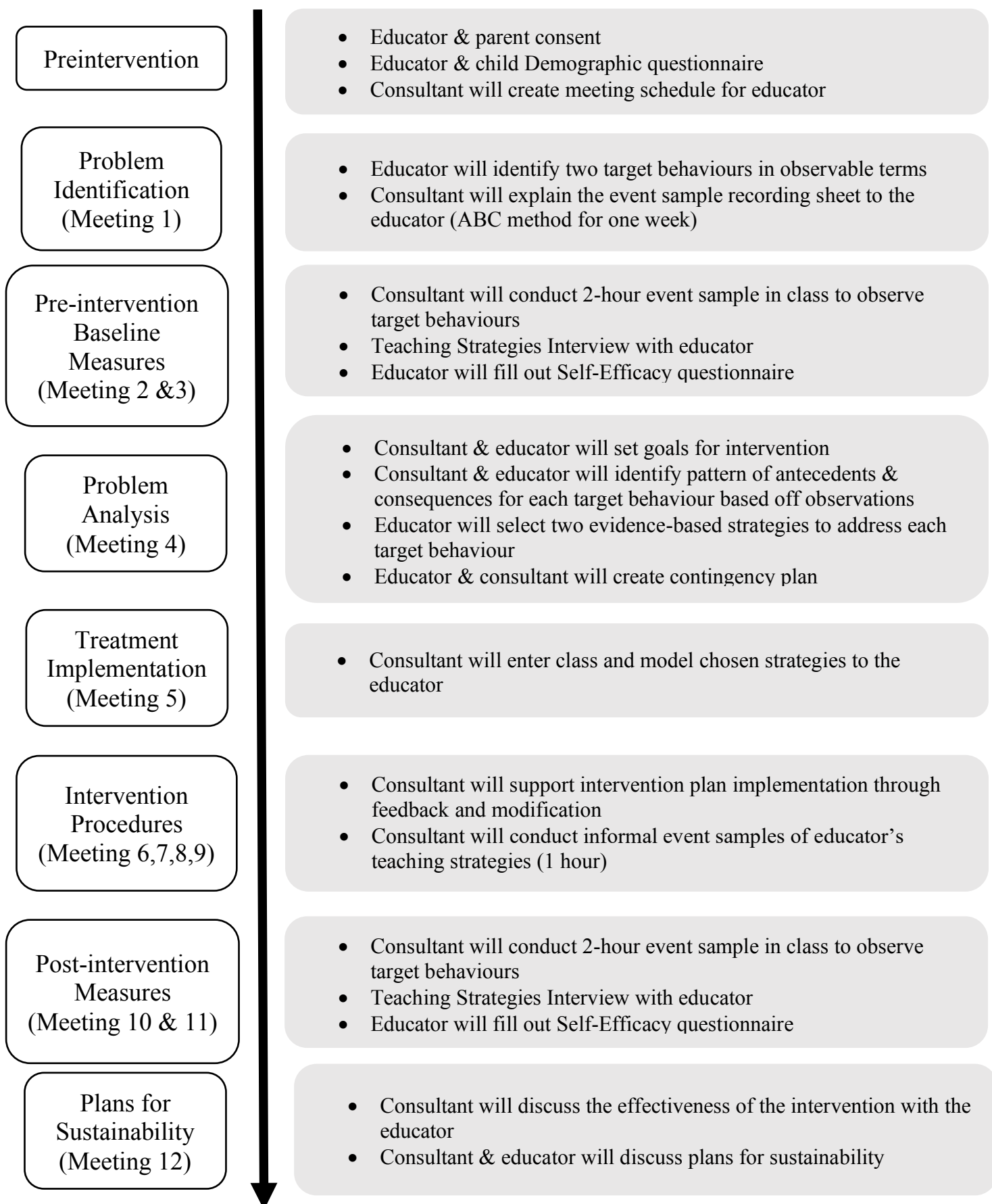
Janvier 2023						
D	L	M	M	J	V	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Dimanche	Lundi	Mardi	Mercredi	Jeudi	Vendredi	Samedi
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27	28	29	30	1	2	3
					Réunion 9 (en classe) -Commentaires sur les stratégies - Modification des stratégies	
4	5	6	7	8	9	10
					Réunion 11 (un-à-un) -Entrevue sur les stratégies d'enseignement -Questionnaire d'auto-efficacité	
11	12	13	14	15	16	17
					Réunion 12 (un-à-un) -Résultats de l'étude -Plan pour le future	
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Appendix L

Timeline of Intervention for Educators



Appendix M

Guided Questions for Problem Identification Meeting

Adapted from Kratochwill & Bergan (1990)

The purposes of the **Problem Identification stage** are:

- Define the problem(s) in behavioural terms (observable terms)
- Provide a tentative identification of behaviour (antecedent, situation, and consequent conditions)
- Provide a tentative strength of the behaviour (e.g., how often (when), how severe...)
- Establish a procedure for the collection of baseline data in terms of the sampling plan and what behaviour is to be recorded, and how it is to be recorded.

The consultant should question and/or comment on the following areas:

1. **Opening Salutation**

- Mention the collaborative nature of the consultation process and the roles of the consultant and educator.

2. **Identifying the behaviours of interest →**

- “Can you name behaviours that you have noticed in X that are challenging? For example, behaviours which you have difficulty controlling and/or disturb the child’s functioning or functioning of the classroom”

3. **Beginning to clarify the behaviours of interest**

- “Let’s see, you referred to X’s poor self-concept, lack of progress, and rebellious behaviour. Which of these do you want to start with? Describe X’s rebellion”

4. **Behaviour specification** (precise description of the behaviour of concern with examples i.e., setting observable terms)

- “What exactly does X do when they are rebellious? How do you observe this rebellion?”

5. **Specifying priority** (After eliciting all the examples that the educator can give, ask which behaviour is causing the most difficulty)

- "On a scale of 0 to 10, where 0= no problem and 10= severe problem, how severe is the problem for you?"
- “Which of these behaviours is the most difficult for you to control ?

6. **Roughly identifying antecedents & consequences**

- “Based on your knowledge of X, what happens right before the problem behaviour occurs?”
- “Based on your knowledge of X, What happens after the problem behaviour has occurred?”

7. **Roughly identifying the sequential conditions (this will inform times for observation)**

- Time: “When during the day does the behaviour occur”, “When does the behaviour not occur?”
- Frequency: How often a behaviour occurs ?

8. **Summarize and validate antecedent, consequent, and sequential conditions**

- “You’ve said that you and X argue after you have asked him to do his work, and he has refused. The argument continues as long as you try to talk to him. Is that correct?”

- “This type of conflict with X occurs at least once a day during the time where he is required to do work in his book, is that correct ?”

9. **Questions about approach to teaching or existing procedures**

- “What do you do in the cases that X refuses to do something you have asked ?”

10. **Assets question:** Determine what the student is good at

- “Is there something that X does well?, positive attitude, persistence, social skills, sports, etc.”

11. **Explaining Data collection procedures**

- “For the next week, I would like you to observe X’s behaviour and on this sheet, identify any instance that he refuses to the work you have asked him to do in his book. I would like you to include the date and time of this behaviour. Also, the events that occurred before the behaviour, which is the antecedent and the events that occurred after the behaviour, which is the consequence. I have an example for you here. Do you have any questions?”

12. **Summarizing and validating recording procedures**

- “So we have agreed that you will record the amount of time that X refuses to do work in his book on this recording sheet. You will do this starting next Monday to Friday. You will also record what happens before the behaviour occurs and what happens after the behaviour occurs. Is this clear ?”

13. **Establishing date of next appointment.**

- “I will see you in two weeks to discuss your observations and come up with a plan that includes different strategies to help with these behaviours”

Appendix N**Event Sample Coding Sheet of Children's Behaviours**

Behaviour	Date & Time of occurrence	Occurrence of Behaviour	Antecedent	Consequence
1				

Behaviour	Date & Time of occurrence	Occurrence of Behaviour	Antecedent	Consequence
2				

Appendix O

Sample Event Sample Sheet of Children's Behaviours

Behaviour 1 X hits his peers	Date & Time of occurrence	Occurrence of Behaviour	Antecedent	Consequence
	Monday, 10:45 am	X leaned over and hit his peer on the arm while they were playing with toy cars together.	X's peer took the red toy car he was playing with.	X's peer begins to cry and drops the toy car he took from X. X tries to offer it back to his peer, but his peer refuses.
	Tuesday 12:00pm	X hit his peer on the foot with his foot while they were lying down on their mattresses for nap next to each other.	X's peer touched X's mattress with his foot.	X's peer says "Hey, that hurt" and moves their mattress away from X's mattress. When X asks "Where are you going", X's peer responds "Away from you".

Appendix P

Teaching Strategies Interview Questions (English)

Handling Challenging Behaviours

1. Do you comment on difficult behaviour? For example, a child becoming aggressive, a child not listening to instructions, a child not sharing or turn-taking... If so, can you give an example of a comment you would use for each of these behaviours?
2. Do you use Time Out (or time away to calm down) for difficult behaviours? If so, what does that usually look like and why do you find it effective? If not, what do you do instead?
3. Do you reprimand a challenging behaviour by using a loud tone? If so, why do you think this works?
4. Do you warn or threaten to tell a child's parent if they are exhibiting a challenging behaviour? If so, does the severity or rate of occurrence (how many times a child has engaged in this behaviour) of the behaviour affect your decision to let the child's parents know? Do you believe threatening to tell the child's parents works in deterring the child from engaging in these difficult behaviours?
5. Do you ignore misbehaviour that is non-disruptive to the class? If so, can you name a few behaviours you would ignore? Can you explain why you engage in this ignoring behaviour?
6. Do you use verbal redirection for a child who is disengaged/distracted? Why do you believe redirection works or does not work? If you do use redirection, can you give an example of a redirection you would use?
7. In the moment of a difficult behaviour, for example, the child is in a conflict with their peer, do you use problem-solving strategies to help the child (e.g., define problem, brainstorm solutions)? If so, can you give an example. If not, can you explain what you use instead of problem-solving?
8. In the moment of a difficult behaviour, do you use anger management strategies to help the child regain control of themselves (e.g. identifying difficult emotion, deep breaths, relaxation time, stress ball, etc.)? Do you believe such a strategy helps the child with their anger? If not, what do you use instead?

Preventing Challenging Behaviours

1. Do you teach children about emotions in the class (e.g. through emotional coaching)? Do you find this important (why or why not)? If so, can you give an example of how you teach emotions ?
2. Do you teach children in your class self-regulation/anger management strategies to children who exhibit challenging behaviours? For example, providing children with a list of strategies they can employ to help calm their anger? Do you find this important (why or why not)? If so, can you give some examples of strategies you teach.
3. Do you teach children in your class problem solving to children to promote prosocial solutions to conflicts (e.g. through stories, scenarios etc.)? Do you find this important (why or why not) ? If so, can you give some examples of strategies you teach.

4. Do you prepare children in your class for transitions within their routine? If so how and why do you do this ? If not, why not and what do you do instead ?
5. Do you warn children in your class of the consequences for misbehaviour prior to any misbehaviour (e.g., loss of privileges, time out, etc.)? Do you find this important (why or why not)? If so, can you give me some examples of this.
6. Do you explain to children in your class the behaviour that is expected of them in the classroom ? Do you find this important (why or why not)? If so, can you give me some examples of this.
7. Do you use a clear and predictable discipline plan for children who are misbehaving? For example, always explain the behaviour you expect and the consequences if this expectation is not met ? If not, what is the discipline plan you use for children who are misbehaving?

Promoting Positive behaviour

1. Do you Coach/Model positive social behaviours (helping, sharing, waiting)? Do you find this important (why or why not)? If so, how do you coach/model these behaviours, provide examples. If not, what do you do instead ?
2. How do you reward targeted positive behaviours? Do you find this important (why or why not)? If so, can you give some examples of behaviours you reward and ways in which you reward. If not, what do you do instead?
3. Do you praise positive behaviour? Do you find this important (why or why not)? If so, can you give some examples of praise you would give. If not, what do you do instead?
4. Do you use special privileges (e.g., special helper, extra play time, stickers, prizes, etc.) or incentives (e.g., “If you do this, then you will get this.”) to motivate children and reward positive behaviour? Do you find this important ? If so, can you provide some examples, if not, what do you do instead ?

Appendix Q

Teaching Strategies Interview Questions (French)

Gérer les comportements difficiles

1. Faites-vous des commentaires sur les comportements difficiles ? Par exemple, un enfant qui devient agressif, un enfant qui n'écoute pas les consignes, un enfant qui ne partage pas ou qui ne respecte pas le tour de rôle ... Si oui, pouvez-vous donner un exemple de commentaire que vous utiliseriez pour chacun de ces comportements ?
2. Utilisez-vous le « time out » (ou un temps d'absence pour se calmer) pour les comportements difficiles ? Si oui, à quoi cela ressemble-t-il habituellement et pourquoi trouvez-vous ce type de stratégie si efficace ? Si non, que faites-vous à la place ?
3. Réprimandez-vous un comportement difficile en utilisant un ton fort ? Si oui, pourquoi pensez-vous que cela fonctionne ?
4. Avertissez-vous ou menacez-vous de dire aux parents d'un enfant s'il présente un comportement difficile ? Si oui, est ce que la gravité ou le taux d'occurrence (combien de fois un enfant montre ce comportement) du comportement affecte-t-il votre décision d'informer les parents de l'enfant ? Croyez-vous que menacer d'en parler aux parents de l'enfant a pour effet de dissuader l'enfant d'adopter ces comportements difficiles ?
5. Ignorez-vous les comportements inappropriés qui ne dérangent pas la classe ? Si oui, pouvez-vous nommer quelques comportements que vous ignorerez ? Pouvez-vous expliquer pourquoi vous ignorez les comportements inappropriés qui ne dérangent pas la classe
6. Utilisez-vous la redirection verbale pour un enfant distrait ? Pourquoi pensez-vous que la redirection fonctionne ou ne fonctionne pas ? Si vous utilisez la redirection, pouvez-vous donner un exemple de redirection que vous utiliseriez ?
7. Au moment d'un comportement difficile, par exemple, l'enfant est en conflit avec son pair, utilisez-vous des stratégies de résolution de conflit pour aider l'enfant (par exemple, définir le problème, réfléchir à des solutions) ? Si oui, pouvez-vous donner un exemple. Si non, pouvez-vous expliquer ce que vous utilisez à la place de la résolution de conflits ?
8. Au moment d'un comportement difficile, utilisez-vous des stratégies de gestion de la colère pour aider l'enfant à reprendre le contrôle de lui-même (par exemple, identifier l'émotion difficile, respirations profondes, temps de relaxation, balle anti-stress, etc.) ? Croyez-vous qu'une telle stratégie aide l'enfant à gérer sa colère ? Si non, qu'utilisez-vous à la place ?

Prévention des comportements difficiles

1. Enseignez-vous aux enfants les émotions dans la classe (par exemple avec l'utilisation d'un coaching émotionnel) ? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, pouvez-vous donner un exemple de la façon dont vous enseignez les émotions ?
2. Enseignez-vous stratégies d'autorégulation/de gestion de la colère aux enfants qui présentent des comportements difficiles ? Par exemple, fournir aux enfants une liste de stratégies qu'ils peuvent utiliser pour leur aider à se calmer? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, pouvez-vous donner quelques exemples de stratégies que vous enseignez.

3. Enseignez-vous aux enfants de votre classe des stratégies de résolution de conflit afin de promouvoir des solutions prosociales aux conflits (par exemple, à travers des histoires, des scénarios, etc.) ? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, pouvez-vous donner quelques exemples de stratégies que vous enseignez.
4. Préparez-vous les enfants de votre classe pour les transitions dans leur routine ? Si oui, comment et pourquoi faites-vous cela ? Si non, pourquoi pas et que faites-vous à la place ?
5. Prévenez-vous les enfants de votre classe des conséquences de comportements inappropriés avant toute mauvaise conduite (par exemple, perte de privilèges, time out, etc.) ? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, pouvez-vous me donner quelques exemples de cela
6. Expliquez-vous aux enfants de votre classe le comportement que vous attendez d'eux en classe ? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, pouvez-vous me donner quelques exemples de cela.
7. Utilisez-vous un plan de discipline clair et prévisible pour les enfants qui se conduisent mal ? Par exemple, expliquez toujours le comportement que vous attendez et les conséquences si cette attente n'est pas satisfaite ? Si non, quel est le plan de discipline que vous utilisez pour les enfants qui se conduisent mal ?

Promouvoir un comportement positif

1. Coachez-vous/modélez-vous des comportements sociaux positifs (aider, partager, attendre son tour) ? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, comment coachez-vous/modélez-vous ces comportements, donnez des exemples. Sinon, que faites-vous à la place ?
2. Comment récompensez-vous les comportements positifs ciblés ? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, pouvez-vous donner des exemples de comportements que vous récompensez et des façons dont vous récompensez. Si non, que faites-vous à la place ?
3. Donnez-vous du renforcement positif (éloges) pour les comportements positifs ? Trouvez-vous cela important (pourquoi ou pourquoi pas) ? Si oui, pouvez-vous donner quelques exemples de renforcement positif que vous donnez. Si non, que faites-vous à la place ?
4. Utilisez-vous des privilèges spéciaux (par exemple, une aide spéciale, du temps de jeu supplémentaire, des autocollants, des prix, etc.) ou des incitations (par exemple, "Si vous faites ceci, vous obtiendrez ceci") pour motiver les enfants et récompenser les comportements positifs ? Trouvez-vous cela important ? Si oui, pouvez-vous donner des exemples, sinon, que faites-vous à la place ?

Appendix R

Self-Efficacy Questionnaire (English)

1. I believe I am equipped with the knowledge to handle a child with difficult behaviour.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

2. I believe I have the ability to address a child's difficult behaviour to lessen its occurrence.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

3. In the moment of a child's difficult behaviour, I feel confident in my ability to de-escalate the behaviour.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

4. I am capable of addressing a child's difficult behaviour in the moment they are occurring.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

5. I believe I am able to apply appropriate strategies to help a child lessen their difficult behaviours in the classroom.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

6. I feel I can control a child's difficult behaviour to avoid the behaviour affecting other children in the class.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

7. I am confident in my ability to remain calm and in control while a child is exhibiting a challenging behaviour.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

8. If a child exhibited a challenging behaviour during an inappropriate time, I am confident I would be able to redirect their challenging behaviour.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

9. If a child exhibited a challenging behaviour during a period of class transition, I am confident I would be able to redirect their challenging behaviour and execute a successful transition.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

10. I believe I have all the knowledge and resources necessary to handle a child's difficult behaviours.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

Additional Comments:

Appendix S

Self-Efficacy Questionnaire (French)

1. Je crois que j'ai les connaissances nécessaires pour gérer un enfant ayant un comportement difficile.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

2. Je crois que j'ai la capacité de gérer un comportement difficile d'un enfant pour atténuer son occurrence.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

3. Au moment d'un comportement difficile d'un enfant, j'ai confiance en ma capacité à désamorcer le comportement.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

4. Je suis capable de gérer un comportement difficile d'un enfant au moment où il se produit.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

5. Je crois être capable d'appliquer des stratégies appropriées pour aider un enfant à atténuer ses comportements difficiles en classe.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

6. Je sens que je peux contrôler le comportement difficile d'un enfant pour éviter que le comportement affectant les autres enfants de la classe.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

7. J'ai confiance en ma capacité à rester calme et à garder le contrôle pendant qu'un enfant présente un comportement difficile.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

8. Si un enfant présentait un comportement difficile à un moment inapproprié, je suis convaincu que je serais en mesure de rediriger son comportement difficile.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

9. Si un enfant présentait un comportement difficile pendant une période de transition en classe, je suis convaincu que je serais capable de rediriger son comportement difficile et de réussir la transition.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

10. Je crois que j'ai toutes les connaissances et les ressources nécessaires pour gérer les comportements difficiles d'un enfant.

1	2	3	4	5
Fortement en désaccord	En désaccord	Ni en accord ni en désaccord	En accord	Fortement en accord

Commentaires supplémentaires :

Appendix T

Guided Questions for Problem Analysis Meeting

Adapted from Kratochwill & Bergan (1990)

The purposes of the **Problem Analysis** stage are:

- Evaluate and obtain agreement on the baseline data
- Discuss the antecedent, consequent, and sequential conditions of the chosen behaviours
- Discuss SMART goals for the chosen behaviours
- Design an intervention plan in collaboration with the educator
- Discuss a contingency plan

The consultant should question and/or comment on the following areas:

1. Opening salutation

2. General statement about the data and the problem

- “Let's look at the record on X's hitting”

3. Questions about conditions of behaviour (antecedents and consequences)

- “Did you notice anything in particular that happened just *before* . . . ?”
- “What happened *after* X. . . ?”
- “Did you notice a pattern ?”

4. Statement interpreting the behaviour

- “Why do you think X acts 'disrespectfully’”

5. Statement specifying target behaviour, conditions, and strength

- “Let's see, X was “disrespectful” by talking back on 3 days last week. This behaviour seemed to be related to comments made by other students. We would like to eliminate this behaviour and help X produce more positive comments. Is this right?”

6. Choice of intervention strategies (with explanation of each strategy)

- “We need to try something different, that targets X before they act ‘disrespectfully’. What are your suggestions? I believe these strategies could be useful, which one do you feel most comfortable with implementing into your classroom?”

7. Summarizing strategies and creating contingency plan

- “So we agreed that if X acts ‘disrespectfully, you will implement this specific strategy. If you see that strategy is not producing the results you want, then which strategy would you like as a backup?”

- “If strategy A doesn't work, then you will try strategy B”

8. Establishing date of next appointment.

- “I will see you next week in class. I will come and model the strategies to you so you can get started with them”

Appendix U

Examples of Evidence-based Teaching Strategies

Adapted from the Incredible Years Classroom Management Teacher Training Program by
Webster-Stratton, Reinke, Herman, & Newcomer (2002)

Strategy	Behaviour this strategy targets	Procedure	Outcome	Example
1. Positive Reinforcement (praise)	All behaviour opposite to challenging behaviour	Giving a positive stimulus after a positive behaviour	Reinforces and increases frequency of positive behaviour	“Wow, great job sharing !”
2. Negative punishment	All challenging behaviour (e.g., hitting, pushing, cursing)	Removing a positive stimulus after a negative behaviour	Decreases frequency of difficult behaviour	Taking away the toy the child does not want to share
3. Movement breaks	Hyperactive and inattentive behaviour	If child is getting hyperactive or inattentive during a stretch of concentration, have them take a movement break where they chose to do an active activity	Child will remain concentrated for longer periods of time	During an arts and crafts activity, you notice the child beginning to fidget and become distracted. Take the child aside and ask them to do 10 jumping jacks.
4. Child standing up during activities	Hyperactive and inattentive behaviour	If child is getting hyperactive or inattentive during a stretch of concentration, have them stand up to complete their task.	Child will remain concentrated for longer periods of time	During an arts and crafts activity, you notice the child beginning to fidget and become distracted. Have the child stand up to complete the activity
5. Sensory fidget toy	Hyperactive and inattentive behaviour	If child is getting hyperactive or inattentive during a stretch of concentration, offer them a sensory fidget toy.	Child will remain concentrated for longer periods of time	During an arts and crafts activity, you notice the child beginning to fidget and become distracted. Offer them a sensory fidget toy.
6. Visual Schedule	Difficulty with transitions	Creating a visual schedule with the child that is accessible to them.	Child will be aware of transitions, adds predictability and routine.	Each morning, set a schedule for the day with the child. Refer back to the schedule before transitions

<p>7. Visual Timer</p>	<p>1. Difficulty with transitions 2. a) Lack of motivation for work/activities b) Lack of concentration for work/activities</p>	<p>Set a visual timer with the child.</p>	<p>1. Child will be aware of the end of an activity (ease transitions) 2. a & b) Child will maintain motivation for the duration of the timer</p>	<p>1. Before each activity set a timer for the duration of the activity, remind child that the activity is finished when the timer rings. 2. a&b) Before each activity that requires motivation and or/concentration, set a timer for the child. Explain that the child will be able to take a “brain break” after the timer.</p>
<p>8. Modifying environment</p>	<p>Behaviour that has a modifiable antecedent</p>	<p>Modify environment to avoid difficult behaviour</p>	<p>Conditions that spur behaviour will not be present, thus decreasing difficult behaviour</p>	<p>If child X tends to hit their friend child Y when they are sitting next to each other during circle time, make sure X is not seated close to Y.</p>
<p>9. Ignoring behaviour & redirecting</p>	<p>Any low-level inappropriate behaviours (whining, eye rolling, sticking out tongue, pouting)</p>	<p>Ignore these behaviours and redirect the child’s attention elsewhere</p>	<p>Decrease in frequency of low-level inappropriate behaviours</p>	<p>If a child is pouting because they do not want to engage in free play, ignore the pouting and redirect the child to a game they may want to play. “How does playing with these blocs during free play sound? I can help you build a big castle!”</p>
<p>10. Explicit norms of behaviour & consequences (consistent disciplinary plan)</p>	<p>All difficult behaviours</p>	<p>Prior to any activity, explain the behaviour that is expected of the child and the consequence that will occur if the child does not comply with expected behaviour</p>	<p>Decrease in frequency of difficult behaviours</p>	<p>“While playing with these blocs, I would like you to play with the blocs on the table, without throwing them. If you throw the blocs, I will take them away from you”</p>

11. Natural consequences (firm and consistent)	All difficult behaviours	Give natural consequences to difficult behaviours i.e., consequences are inherently connected to misbehaviour	Decrease in frequency of difficult behaviours	“You threw your food onto the table, this shows me you are done with your snack, I’m going to take it away now”
12. Capturing child’s attention and having them repeat instructions	Difficulty following instructions	Make sure child is engaging in eye contact before giving instruction. Have child repeat instructions after they are given to ensure they understand.	Increase in frequency of following instructions	When asking the child to clean up their toys, ensure eye contact and have them repeat the instruction.
13. Cool down time out	Behaviours related to physical aggression or destruction	Bring child to “cool down area” when they are engaging in physical behaviours. Help them calm down and explain expectations for future behaviour.	Decrease frequency of physical aggression or destructive behaviours	“You are not allowed to hit your friends. Let’s go to the cool down area so we can calm down and talk” “Let’s take some deep breaths together to calm down” “Now that you are feeling calmer, next time, instead of hitting your friend because he took your toy, you can come and let me know”
14. Nonverbal cues (including modeling)	Difficulty following instructions	Rather than repeating instructions many times, use nonverbal cues to remind the child of the instructions given	Increase in frequency of following instructions	If a child got sidetracked and instead of cleaning up their toys, they keep playing with them, go to the child and place a toy in the bin next to them
15. Incentives	All behaviour opposite to challenging behaviour	Tangible rewards (that are motivating as incentives for behaviour	Increase in frequency of positive behaviour	“If I see you sharing your toys with your friends during play time, you’ll get extra time to play with sand later !”

Appendix V

Contingency Plan for Educators

Educator A (Child Z)	
Behaviour #1 : Concentration during Circle time	Behaviour #2 : Emotional Self-Regulation
GOAL	GOAL
<p>During moments of circle time, be more engaged and present. Less distraction & interruption.</p>	<p>During moments of high emotional arousal, more vocal, less physical, better self-esteem.</p>
SELECTED STRATEGIES	SELECTED STRATEGIES
<p>#1. Modification of circle time to include more large body movements/breaks of large body movements.</p> <p>#2. Incentives that line up with interests</p>	<p>#1. Rewording to focus on behaviour rather than self (pre-tantrum)</p> <p>#2. Diffusing technique : IDENTIFYING, VALIDATING, ALTERNATIVE SOLUTION.</p>
CONTINGENCY PLAN	CONTINGENCY PLAN
<p>If incorporating more large body movements does not work (#1), then move on to giving incentives (#2).</p>	<p>If rewording does not work (#1), then move on to diffusing technique (#2).</p>

Educator N (Child D)	
Comportement #1 : Contrôle des amis lors de jeux partagés	Comportement #2 : Manque de motivation à terminer les activités
BUT	BUT
<p>Durant des moments de jeux libres parallèles, plus de coopération. Prendre la perspective des amis.</p>	<p>Durant des moments d'activités structurées, plus de participation (moins distrait) et moins de refus de finir le travail.</p>
STRATÉGIES SÉLECTIONNÉES	STRATÉGIES SÉLECTIONNÉES
<p>#1. Jouer en groupe de 3 au lieu de 2</p> <p>#2. Stratégies de négociation</p>	<p>#1. Couper l'activité en morceaux avec des pauses de stimulation entre les parties. Peut utiliser le timer.</p> <p>#2. Modification de l'activité (moins répétitif, plus créatif)</p>
PLAN DE CONTINGENCE	PLAN DE CONTINGENCE
<p>Si jouer en groupe de 3 au lieu de 2 (#1) créer des conflits, alors essayer de montrer le visuel de stratégies de négociation (#2).</p>	<p>Si couper l'activité en morceaux (#1) ne fonctionne pas, alors essayer de modifier l'activité (#2).</p>

Appendix W

Event Sample Sheet of Teacher's Strategies

Strategies for Behaviour 1

	Strategies used	Child's behaviour	Occurrence of strategy	Outcome of strategy
Event 1	Strategy 1:			
	Strategy 2:			
Event 2	Strategy 1:			
	Strategy 2:			

Strategies for Behaviour 2

	Strategies used	Child's behaviour	Occurrence of strategy	Outcome of strategy
Event 1	Strategy 1:			
	Strategy 2:			
Event 2	Strategy 1:			
	Strategy 2:			

Appendix X

Sample Event Sample Sheet of Teacher's Strategies (Educator A & Child Z)

Strategies for Behaviour 1: Concentration during Circle Time

	Strategies used	Child's behaviour	Occurrence of strategy	Outcome of strategy
Event 1	Strategy 1: Large Body Movements			
	Strategy 2: Incentives		Before circle time, A tells Z that is he sits down & sings during circle time, they'll go outside after	Z gets excited to go outside
Event 2	Strategy 1: Large Body Movements		Song #1 of circle time involved large upper body movements e.g., moving arms left to right, moving head...	Z was following body movements and singing at same time
	Strategy 2: Incentives			
Event 3	Strategy 1: Large Body Movements		Before singing song #2, A has the children do large upper body movements "maintenant on va..." e.g., moving head to say yes, moving head to say no, moving arm up and down...	Z copies A and completes all the body movements. Afterwards, he sings all of song #2
	Strategy 2: Incentives			
Event 4	Strategy 1: Large Body Movements			
	Strategy 2: Incentives			
	Strategy 3: Environment with less distraction		After song #2, A moves the children to the table to sing the alphabet and numbers	Z sings the whole alphabet and numbers while sitting at table

Appendix Y

Guided Questions for Plans for Sustainability Meeting

Adapted from Kratochwill & Bergan (1990)

The purposes of the Plans for Sustainability stage are to:

- Determine if the goals of consultation have been obtained i.e., evaluate the effectiveness of the intervention on the children's behaviours and educator's teaching strategies and self-efficacy
- Discuss strategies and tactics regarding the continuation, modification, or termination of the treatment plan.

The consultant should question and/or comment in the following areas:

1. Opening salutation

2. Evaluation of goal attainment

- "How do you believe things went?"
- "Can we say that the goal of increasing X's work completion has been attained now?"

3. Evaluation of the intervention's effectiveness (internal & external validity)

- "Would you say that the procedure you undertook was responsible for reducing X's target behaviour?"
- "Do you think this plan would have worked with another student?"

4. Conducting postimplementation planning (continuation, modification, termination)

- "Do you want to leave the point system in effect to see if X's progress continues?"
- "Based on what you saw with strategy A & B, do you think strategy C would help X more? If so, will you try this strategy?"
- "Maybe you could try another reinforcer to make strategy A more efficient moving forward"
- "What procedures can be implemented to be sure that X continues to show reductions in the target behaviours?"

5. Summarizing educator's experience

- "What was your overall experience of this intervention process?"
- "What are your thoughts about the intervention process, pros and cons?"
- **Closing salutation** (Giving thanks)

Appendix Z

Sample of Researcher Field Notes for Educator A

WEEK 2

Meeting 3: Baseline Measures (October 21 st 2022)	
General Proceedings/ Recap of Meeting	<ol style="list-style-type: none"> 1. Educators filled out self-efficacy questionnaire 2. Teaching Strategies Interview with educators <p>Additional comments: While filling out the self-efficacy questionnaires, both educators mentioned that there are some statements they feel confident with only in certain situations ex: sometimes yes/sometimes no. They specified that their confidence is contingent on the situation and the child (child & situation dependent).</p>
Teacher A (12:30-1:30pm)	<p>Self-efficacy questionnaire: 36/50 Average score: 3.6</p> <p>Comments: Depending on the child's day/mood. I believe I need more strategies to help child in their concentration & emotional regulation.</p>

WEEK 3

Meeting 4: Problem Analysis (Oct 28 ^t 2022)	
General Proceedings/ Recap of Meeting	<ul style="list-style-type: none"> - SMART goals for behaviours (specific, measurable, achievable, realistic, timely) - ABC discussed (educator opinion & consultant opinion) - Select two appropriate strategies for each behaviour from a list of possibilities (4-5 strategies) - Contingency plan (if... then) - It was explained to the educators they they are to use these two strategies for the purpose of the study, and if they feel they are not working, to wait to consult with me before changing the strategies. <p>Additional comments:</p> <ul style="list-style-type: none"> • While presenting the educators with the list of possible strategies, it seemed that speaking about the pattern of behaviour based on the observations provided the educators with a different perspective of the children's behaviours. • Seemed difficult for them to select just two strategies since they seemed to like all of them. Even though they selected two, it seemed that providing them with the others has expended the possibilities and provided them with new ideas. Providing them with the strategies seemed to inspire them to think of ways in which they could implement them.

	<p>Both educators mentioned that they liked the strategies because they could also help the class as a whole. This could show that just having this discussion could have made a difference in terms of them opening their horizons of the different strategies that could be used.</p>
<p>Teacher A (1:25-2:15pm)</p>	<p><u>Behaviour 1: Concentration during circle time</u></p> <ol style="list-style-type: none"> 1. Her opinion on pattern of behaviour: <ul style="list-style-type: none"> • He gets distracted easily, specifically by other friends. He will do something after friend did it. She usually brings him next to her to help him be less distracted. 2. SMART goal: <ul style="list-style-type: none"> • She wants him to be more “present” during circle time. This doesn’t necessarily include following along, just being less distracted. She wants him to be more involved in circle time. She would like to have to bring him back less to avoid distractions to the whole class during circle time. 3. Strategies offered: <ul style="list-style-type: none"> • Modifying circle time for more larger body stimulation during singing or breaks of larger body stimulation • Larger body movement stimulation “heavy load” exercises before circle time to satisfy the need and prepare focus • Set a timer for each “activity” during circle time. Explain he needs to focus until the timer runs out. • Verbal praise during moments of focus • Less distraction during circle time by changing environment • Incentives to focus (lined up with interests) 4. Strategies chosen + contingency plan <ul style="list-style-type: none"> • #1 more large body movements during circle time • If this does not work, then will use #2 incentives that line up with interests

Appendix AA

Sample Coding Sheet for Educator A (Teaching Strategies Interview #1)

	Coding #1	Coding #2	Coding #3
<p>Consultant: Okay, so the first part is on handling challenging behaviors. So, do you comment on difficult behavior? So, for example, if a child is being aggressive, or not listening to instructions, not sharing. Do you comment on that?</p> <p>Educator A: Yes.</p>	<p>Yes, commenting on challenging behaviour</p>	<p>Commenting on negative behaviour</p>	<p>Positive Behaviour Support Strategies</p>
<p>Consultant: Can you give an example of how you would comment these types of behaviours. So, let's say if a child wasn't turn taking or sharing. How would you comment on that?</p> <p>Educator A: Well, I would tell him you have to, um, wait your turn. You have to share with your friends or else your friend's gonna be upset or sad. So I constantly remind them, but I don't, I don't like point it out to him. I try to put it in the group like, look, we're all sharing together. We have to share our toys.</p>	<p>You have to share with your friends or else your friend's gonna be sad Remind them We have to share our toys</p>	<p>Commenting on negative behaviour: explanation Child aware of appropriate behaviour: Reminders Child aware of appropriate behaviour: sharing</p>	<p>Positive Behaviour Support Strategies Positive Behaviour Support Strategies</p>
<p>Consultant: So, you reference the group setting rather than pinpointing one child? So do you use time out or time away to cool down.</p> <p>Educator A: Time Away to cool. Time away to cool down.</p>	<p>Time away to cool down</p>	<p>Consequences</p>	<p>Negative Feedback Strategies</p>
<p>Consultant: Okay. Uh, what does that usually look like?</p> <p>Educator A: So, let's say a child we're doing free play and the child is, um, let's say playing with the, the cars and he's taking the other child's toy, or he's running around. I'll say, "okay, come sit with me. Calm down. Go pick a puzzle or pick a toy that's for the table. We'll sit five minutes, we'll do an activity until he's calm. And then once we finish that activity, so example, if</p>	<p>okay come sit with me. Calm down. Go pick a puzzle. We'll sit for 5 mins. Complete puzzle and then child will go back</p>	<p>Consequences: Table to calm Consequences: 5 mins away Conditions of Consequences: complete activity before going back</p>	<p>Negative Feedback Strategies Negative Feedback Strategies</p>

we did a puzzle together, we'll complete the puzzle and then the child will go back.

Consultant: And do you find this effective?

Educator A: I find it effective, yes. So the child can just calm down. And then at the same time, after he's done, I'll say, now you can go back and play, but I do not want you to, I want you to share with your friends. You don't throw the toys.

Consultant: So you'll remind them what the instruction is moving forward.

Educator A: Yeah.

Consultant: Okay. Um, do you reprimand a challenging behavior by using a loud tone?

Educator A: No, I don't yell at the child. But if I have to repeat myself more than once, or if it's loud in the classroom, yes, I'll be a bit louder sometimes. They just lately just disregard what I have to say cause I'll talk to them and they know that I'm speaking with them and they just won't look at me. And then I'll have to repeat myself and repeat myself. And then I'll get a bit louder so they can look at me or they'll understand.

Consultant: So to grab their attention ?

Educator A: Yeah.

Consultant: And so you think this works when you try and grab their attention?

Educator A: Yeah.

Consultant: Do you warn or threaten, the children that you're gonna tell their parents if they're exhibiting any challenging behaviors?

I find it effective, yes

I want you to share with your friends. You don't throw toys

Remind of instruction

I don't yell at the child
If I have to repeat myself or it's loud in the class

I'll have to repeat myself...then I'll get a bit louder to they can look at me

For attention

Yeah

Opinion/Knowledge of child dev practices: time away to cool effective
Child aware of appropriate behaviour: sharing

Child aware of appropriate behaviour: Reminder

Consequences: does not yell

Conditions of Consequences: loud tone (repetition, class loud)

Conditions of Consequences: loud tone (repetition)

Conditions of Consequences: loud tone (attention)

Opinion/Knowledge of child dev practices: loud tone works for attention

Opinion

Positive Behaviour Support Strategies

Positive Behaviour Support Strategies

Negative Feedback Strategies

Negative Feedback Strategies

Negative Feedback Strategies

Opinion

Appendix BB
Coding Theme Clusters

Larger Themes	Codes Included in Themes
Positive Behaviour Support (inclusive)	<p>Commenting on negative behaviour (descriptive language) Providing alternative solutions for negative behaviour Child aware of appropriate behaviour (cleaning, sharing...) Problem-solving solutions for conflict (guided assistance) Self-regulation strategy (distance + discussion) Redirection Perspective-taking/emotions Routine transitions (preparation) Praise Modelling Incentives</p>
Negative Feedback Strategies (exclusive)	<p>Consequences Conditions of Consequences Ignore Predictable discipline plan Privileges</p>
Individual needs	<p>Understanding of Z & D Understanding of class</p>
Opinion	<p>Opinion/knowledge of child dev practices Lack of knowledge/practices not yet implemented</p>

Appendix CC

Sample Researcher Reflexivity Journal

Reflexivity journal

October 14th 2022 (Meeting 1: Problem Identification with Educators N&A)

- During the first meeting with the educators, I found myself wanting to finish the educators' sentences or add my own opinion when discussing the children's challenging behaviours. I believe this is based on my knowledge of the children's challenging behaviours from my experience working with them in my work role. It seems I had an urge to join into the conversation with them and add my observations and/or opinions on the matter as we sometimes do while I am working with the children each week. To avoid doing this, I tried to take a step back and display active listening strategies. I made sure to listen to the educators until they were finished speaking, re-iterate what they were saying before moving on to assure I was capturing their perceptions accurately, and ask questions based on statements they previously made. In this way, I avoided altering their perceptions of the challenging behaviours with my view or swaying their choice of challenging behaviours.
- It felt different to take on the role of the consultant with the educators considering we are on a close basis.

October 20th & 21st (Meeting 2: Observations with children)

- During observations of children, I felt compelled to intervene while seeing the children exhibiting difficult behaviours considering this is what I do as part of my work role with the children. However, I had to stop myself and remember that during these moments I was taking on a different role, specifically that of a consultant/researcher. Also, the observations were meant to be naturalistic and outside intervention would compromise the quality of the observations.

October 21st (Meeting 3: Baseline Measures with Educators N&A)

- Educator A's daughter was sick, so she had to leave work at 11:00am. I made the decision to move our meeting for the day over facetime, to make it more convenient for her. I believe that the meeting could be just as effective by facetime. This decision to me made more sense than cancelling the meeting and delaying the schedule by one week.
- While conducting the interviews, I had to actively stop myself from finishing the educators sentences when they were explaining the strategies they use in class. This is because I have seen them use these strategies in class on other occasions. I had to remind myself that in order to get genuine responses from the educators that represent their true experiences, I had to let them answer in the way that they saw fit without outsider input.

October 27th (Coding ABC event sample observations)

- While coding the observations and comparing my observations with the educators' observations, it was interesting to see a pattern emerge in the children's behaviours. Although I work with the children regularly and see some of these behaviours occur, I have never realized how complex their pattern of behaviour is. It makes even me feel ask if I know the children better.

Nov 4th (Meeting 5: Modeling Strategies with Educators N&A)

- When approaching the educators with feedback, I felt myself having to remind myself to be sensitive while doing this. For example, making sure I was using the proper words to not put down/shame the educators in any way. Instead of saying: “You did not do this properly”, I was saying “ Next time, you could try...”.

Nov 11th (Meeting 6: 1^s Intervention Meeting with Educators N&A)

- Educator A’s daughter was sick, so Educator A could not make the meeting. We decided to move it back 1 week.
- For Educator N:
 - I felt that I had to add a third strategy to the list for one of the behaviours because I saw the educator going through the 2 we had selected and starting to get anxiety when they weren’t working so to ease her anxiety I added a 3rd strategy.
 - While writing down the event sample of the teacher implementing strategies, I noticed that there were sometimes she implemented the strategies on her own and other times she needed my assistance. I wrote down both these instances down and identified whether they were prompted by the educator or prompted by the consultant.
 - When Educator N was being resistant to the modification, I had to think on my feet to explain to her in a sensitive way that she needed to be more open to different strategies to help D.

Nov 17th (Educator N leaving)

- When I found out about Educator N leaving, I was upset and anxious about how that would affect my study.
- After finding out Educator N is leaving the daycare 3 weeks before the end of the study, there were 2 options, first was to throw away the data collected for Educator N and restart with another educator, second was to shorten the study to keep N’s data. After weighing both options, Harriet and I decided it would be best to keep N in the study and shorten the study by 2 weeks by removing 2 weeks on intervention process. Since the real goal of the study is to see the results on the educators rather than the children, we felt we may still be able to see a change in the educator even with less consultation.

Nov 25th (Meeting 7: 2nd Intervention Meeting with Educator A)

- Educator A also asked me about which strategies to use for sharing... I found even though this behaviour is not being studied in the context of this research, her asking is a sign that she needs help and wants to help Child Z in other domains. She may have been asking because she sees the other strategies are working for the behaviours chosen and she also wants help with sharing behaviour. I decided to provide her with strategies. I suggested promoting prosocial solutions (by having Child Z problem solve) & also modelling the behaviour during off times.

Dec 2nd (Meeting 8: 3rd Intervention Meeting with Educator A)

- Educator A seemed overwhelmed by the difficult week she had had with Z. I took the time to reassure her that she was doing her best, which was enough. That she also had to consider his turbulent family situation which could be contributing to his behaviour now. I felt sorry that she was doubting herself and feeling this way.

Appendix DD
Certificate of Ethical Acceptability



CERTIFICATION OF ETHICAL ACCEPTABILITY
FOR RESEARCH INVOLVING HUMAN SUBJECTS

Name of Applicant: Irene Pastras
Department: Faculty of Arts and Science\Education
Agency: N/A
Title of Project: Two Case Studies: Using Behavioural Consultation to Guide Preschool Teachers Supporting Children with Behavioural Difficulties
Certification Number: 30016504

Valid From: July 12, 2023 To: July 11, 2024

The members of the University Human Research Ethics Committee have examined the application for a grant to support the above-named project, and consider the experimental procedures, as outlined by the applicant, to be acceptable on ethical grounds for research involving human subjects.

A handwritten signature in black ink, appearing to be "David Waddington", followed by a horizontal line extending to the right.

Dr. David Waddington, Chair, University Human