

**Supporting the Inclusion of Individuals with Disabilities in Informal Learning
Through an Informative Audition Process**

by

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The number of children with disabilities in traditional education environments and out-of-school learning environments is increasing. It is estimated that about 17% of children between of 3 and 17 years of age have one or more disability in the United States (Centers for Disease Control and Prevention, 2019). A formal process for identifying the needs of participants within out-of-school learning contexts has yet to be discovered. In this article, I present an improvement science study within a community theater group. I created an informed audition process to explore the effect of supports and adaptations, grounded in evidence-based practices, on social, emotional, and behavioral outcomes as well as self-confidence and engagement in theater participants. Results suggest that an informed process for including individuals with disabilities can positively affect the outcomes for these participants. Implications for further practice and inquiry are discussed.

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Preface

Dedication

This dissertation is dedicated to my partner, not only in life, but in our little community theater group, Dustin Norris, who up until his death, was always a constant source of creativity, love, encouragement, and support.

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To the Pitt EdD Cohort of 2018, thank you for all of your support, love, and understanding. We are tasked in this life finding people that help us grow. Your friendship has been a blessing.

Thank you, Lord, for continuing to order my steps. I know this stride marks the first part of my journey.

1.0 Naming & Framing the Problem of Practice

1.1 Broader Problem Area

Disabilities are conditions that impair an individual's mind or body making it difficult to perform activities or interact with people around them (Centers for Disease Control and Prevention, 2019). These impairments can be in the areas of mental health, learning, language, behavior, acquiring and maintaining social relationships, mobility, vision, or hearing (Centers for Disease Control and Prevention, 2019). They impact an individual's daily living and functioning, are present during the developmental years, and often exist for the duration of the lifespan (Rubin & Crocker, 1989). It is estimated that about 17% of children between 3 and 17 years of age have one or more disability in the United States (Centers for Disease Control and Prevention, 2019) and all races, ethnicities, and socioeconomic classes are affected by the presence of disabilities within their communities and groups.

Students with disabilities are identified and protected by government mandates for inclusive and equitable learning environments and civil opportunities such as the Individuals with Disabilities Education Act, the No Child Left Behind Act, and the Americans with Disabilities Act, (IDEA, NCLB, ADA), and every year, the special education population continues to grow. These growing numbers and the costs of the special education needs industry combined with the push for inclusive learning environments make it certain that almost every type of learning environment in America is faced with the problem of adequately supporting and including individuals with disabilities (Allan, 2014).

Typically, in traditional school settings, identifying children with disabilities can be done using one of two approaches: developmental monitoring and screening/testing. Developmental monitoring and screening happen through medical and educational professionals. A child with a disability is qualified for special education when, through this evaluation process, it is determined that disability directly affects the child's ability to learn (U.S. Department of Education, 1998). Roughly, 14% of the student population receives special education services in the United States (National Center of Educational Statistics, 2019).

In addition to schools, learning experiences can also occur outside of the classroom through public entities like the museums, sport centers, and zoos and through structured activities and groups. In contrast to traditional school environments, children with disabilities are not identified and provided supports through any kind of systematic process. Yet, out-of-school learning environments can enlarge the capacity in which students acquire and generalize skills. Research shows that those who attend out of school activities can have positive cognitive and affective domain effects (Dewitt & Storksdieck, 2008). In school environments, any school-sponsored after-school activity is mandated accessible for any student with an Individual Education (IEP) or 504 Plan (IDEA, 2019). While many efforts have been made to include those with disabilities, many organizations that are designed for competition such as dance, theater, and sports, inadvertently exclude those who cannot meet competitive expectations. In addition, parents of those with disabilities can feel discouraged due to the competitive nature of the activity and look for comparative activities that include only those with disabilities.

1.2 The System

Acting UP began in the Fall 2011 with an audition for the Christmas play: The Best Christmas Pageant Ever by Barbara Robinson. The organization was founded and continues to be funded and directed by me. Initially, it was a place for a young boy with Asperger's Syndrome to use his ability to memorize scripts in a social, appropriate, and inclusive manner with the mission to include everyone. At the time, there were no groups in the community willing to take on such a task. That young boy has since graduated and is actively pursuing a career in the performing arts, but our mission has not changed. We continued to create inclusive performance arts spaces that promote and value diversity. More importantly, we are focused on creating a place where everyone, from any background or disability category, can be their best and have a chance to shine. We started producing one Christmas play per year, and now, we are running four programs with four performances a year. Our organization, now a limited liability company, continues to grow and create spaces for individuals across all abilities who wish to perform from ages 5 to adult.

With this mission comes the challenging task of incorporating everyone who auditions. This task often produces abnormally large cast sizes (compared with the chosen script). Twenty-five to thirty percent of the participating population is affected by cognitive and developmental delays, emotional disturbances, physical disabilities, or hearing, visual, and speech impairments. The participants in the group are mostly children, and I try to provide opportunities for participation in the creative process. Participants help direct and come up with creative ideas. The group is strength-based and participant-centered, and the children there just want to have fun. Some have aspirations to do things other than theater while others aspire to be actors, but for the most part, this group is a fun time for them.

Typically, when auditioning for a theater production, auditions are judged by the objective and/or subjective expectations of the casting director and are either cast in the production or not cast with little explanation as to what reason. It is often a competitive and stressful experience. Over the last nine years, Acting UP's policy of including everyone who auditions has allowed for all children and adults to participate in theater regardless of ability. Every person who auditions is part of the cast and has at least one line or featured role/activity.

Within Acting Up, the audition process is much like that of traditional theater. The audition is required of all participants. It is designed to prepare them for the expectations of more competitive theater programs. In addition, participants become more comfortable with the process the more times it is completed. All participants complete the audition form. This form has the participant's contact information and clothing sizes. It also asks about the participant's prior performance history. Participants come to the call for auditions prepared with the designated requisites: monologue or joke and a song. During this process, the participants are given positive feedback and reassured that the audition is a "formality," and all individuals present have secured a part. The audition merely determines which part. Typically, after auditioning with what they have prepared, actors will, then, perform a cold read of the intended script, if able. This reading allows me to assess their reading ability and the amount of support that they may need to learn lines. It is not a perfect process, but it serves its purpose.

Since the start of the program, the number of students and the number of activities to participate within the program have increased. It has found celebrity within the community. Four years ago, the group was awarded by the Mayor with the Volunteer Organization of the Year Award for the inclusive opportunities that we have created in the community. However, although we are able to create inclusive opportunities, include individuals with disabilities, and they have

successful runs in the “company,” we are not truly able to include everyone. Without other supports, it is inadequate in that it is failing to successfully include all students. There are students who are insufficiently or awkwardly included. Essentially, inclusion practices are not optimal. Some of these challenges are related to including individuals who have limited functional communication, emotional regulation, and cognitive functioning, which sometimes makes it difficult to create an accessible environment and for the individual with limitations to make friends within their peer group.

The expected outcome is that the organization will be able to provide a safe, enriched, and inclusive experience to all students by including individuals with disabilities. Yet, this policy does come with unintended consequences. One of those incidental outcomes is increased rates of neurotypical participant attrition. This outcome can be described as participants leaving the group to pursue a more “serious” or a more “challenging” competitive experience. At times, the group can be perceived by those attending and by the public as less prestigious than typical competitive performance troupes. We lose about 3-4 neurotypical participants per year to that sort of attrition.

Another inadvertent result can be the disruption of the learning process due to challenging behaviors of participants who are identified with disabilities and children who may have disabilities that have yet to be formally identified. These behaviors can be aggressive such as hitting, kicking, throwing objects, or tantrums. Disruptive behaviors can also include touching/disturbing others and yelling.

Because group policy mandates that we include all students, the performance may have modification based on participants. These modifications could include a smaller number of performances, creating intermissions for actors to take breaks, and having a prompter on the stage. These adaptations or modifications are usually made reactively in response to something negative

that has happened. However, it would be optimal to know what was necessary to support participants in advance to proactively prevent any negative interaction that may impede the individual's performance or social acceptance within the group.

Generally, the actors who participate arrive with an entourage of parents, siblings, and close friends. Although a peer buddy is provided to any actor that needs one, I am adamant that this peer buddy is not a sibling participant. Often older or neurotypical siblings are asked to or feel the need to assist or care for their younger siblings or siblings with disabilities in the absence of their parents. Too often older or neurotypical siblings are caretakers in the absence of adults. During the activities, it has been observed that siblings tend to anticipate the needs of their sibling with a disability or younger sibling and may present as over-functioning and controlling. They often anticipate the needs of the sibling with a disability by completing tasks for them. They restrain or keep the sibling with a disability from free movement within the space and use excessive physical guidance or prompts. In doing so, they interfere with ability of the actor with needs participating. The other reason for not encouraging a sibling as a peer buddy is that I desire each actor to have their own experience of older or neurotypical siblings not be taking care of or anticipating the needs of their siblings. I want them not only to find themselves in our space, but to see their siblings in a different, more capable, and independent way. The participants in the group usually range in ages, and older participants, as well as those who participate in the program frequently, often rise to the occasion to support any actor in need of extra help.

Our focus is promoting those with disabilities by providing a space for them grow within the performing arts. It is customary that participants with disabilities gradually take on more challenging roles until ultimately, they are ready to take on a lead role. Although we never know who will audition, shows are deliberately chosen with a little of bit of pre-casting with certain

actors in mind. Pre-casting decisions are not known to anyone but me and are not without flexibility for adjustment. Often, by the time of auditions, actors, especially those with disabilities, have made a considerate amount of growth resulting in a disruption of preconceived casting. Fortunately, this type of disruption is welcomed and has happened often.

Using a diagram to identify and visualize contributing factors to a problem called a fishbone (See *Fishbone Diagram* Appendix A), it is apparent that there are many factors within the organization that impact the manner and extent to which individuals with disabilities are included and the level of satisfaction with that experience for the participants, caregivers, and director. Some of those factors include the participants, manpower, group structure, funding, and hierarchy. There is a lack of manpower as there are no volunteers and the hierarchy includes only one person who coordinates, produces, and directs all of the productions. The group is funded by this person who has happened to be me for almost ten years.

The participants are drivers because it is their needs that may impact their adequate inclusion. Since the organization does not always know what those needs are, supports may not be given or provided until after an obvious need is displayed, such as disruptive behaviors, inability to participate in the group, or tantrums. These factors can impact the group members' perception of the participant in need of supports and also impacts the participant's self-confidence and efficacy (Dewitt & Storksdieck, 2008) thus affecting the overall social climate. During practices and productions, we globally use many antecedent, support, and consequence strategies such as schedules, visual supports, frequent scheduled breaks, adaptive materials, and specific praise and reinforcement. In this way, the structure of the group employs a universal design model. However, this model does not sufficiently account for individual differences and needs that may require additional supports that are often not apparent until after the fact.

The audition process is usually a time when most directors gain information about an actor in order to cast them in a role that is beneficial for the overall production. However, in the audition process of typical theaters, they weed out any person that does not fit in the production by not casting them. We are different in that we cast everyone, and we believe that there is some place for everyone to fit in the production. In order to do that adequately, we must have more information about the individual. In considering the needs of the organization and the problem of adequately including individuals with disabilities, it becomes apparent that the audition process is a driver that could be manipulated to provide the information needed to impact the organization overall. If we could gain the information needed to provide much needed supports and then, provide them, essentially, the impact on the inclusion of individuals with disabilities could be great.

1.3 Stakeholders

When considering stakeholders, I consulted the empathy interviews and semi-structured interviews, as well as, my fishbone diagram (See *Fishbone Diagram* Appendix A), and conversations that I have had within the organization and in the community where our program is located. The stakeholders for Acting Up are the participants, families, staff, benefactors/funders, and the community.

The participants are stakeholders within the group. We acquire different participants for every theatrical presentation. Some of the participants join season to season, year to year while others partake based on their interest in the current play. We never know who may be interested until the audition process begins. A lot of people do not disclose disabilities unless they are obvious. We have also had considerable participation by children who are homeschooled, and

these individuals sometimes bring many of their friends along for the experience. They are motivated by the experience, the opportunity to take on more challenging roles, and the social aspects of involvement

Parents and family members are stakeholders in our organization. Their motivations are concentrated on the performances of their children. The parents enjoy watching their children and their children's experiences in the group and often want to be involved. From a previous parent interview assessing the needs of the organization, opportunities to help were something that stood out while we were talking. I am still thinking about how to incorporate the parents better. Parent involvement might be the key to alleviating some of the organizational hassles within the group. However, parental motivations and biases may impede the objectivity of determining progress of this problem of practice. According to the satisfaction survey issued by the organization in December 2019, 77% of the survey participants, which incidentally are all parents of children with disabilities, gave our program a satisfaction rating of 5 out of 5. Even so, the participants of the survey highlighted some needs of the program including a need for funding and volunteers at the rate of 44.4% each.

Other than the director, there really is no other staff. Occasionally, I will solicit support or alternative project directors. According to the organizational surveys, the program outcomes could be influenced by soliciting volunteers and training these individuals to provide supports, direct, or provide services within the program. Using the community, as they are an additional stakeholder, may prove to engage the stakeholder in the transformative mission of our group.

I have fostered relationships with other groups within the community such as local churches, advocacy groups, and similar organizations. These groups have served as benefactors or funders, but the relationships are often complicated or strained by competing organizational

missions. For instance, in a meeting last year, the pastor of the Presbyterian church asked to assume our identity such that we would not exist anymore but would function as part of their church because they do not have a children's ministry. In doing so, we would only do church plays, so their offer was declined. Similarly, the advocacy group wanted to claim our group as part of their mission to create inclusive opportunities in the community and increase the funding that they get to their organization for their own endeavors. The motivations of promoting their own organizations may impact the success of the improvement science project if they are not engaged in a way that is mutually beneficial.

1.4 Statement of Problem

Students with disabilities can be challenging to include within our theater context. While we are very capable of providing supports to those who need them, it is often not a very efficient or effective process. Generally, many participants do not self-disclose or indicate a specific need at registration. For instance, there once was a young man who needed a script with larger print. Eventually, it was noticed that he was not utilizing or reading his script and then, adjustments were made. He received a large print script a week or so later. However, if these adjustments were made four weeks earlier, his experience would have been more positive.

When considering supporting those with disabilities, the first thing that comes to mind is the implementation of support strategies. While support strategies are an integral part of including those with disabilities, any group leader or director would first need to be informed of the individual needs of the participants. As necessary and beneficial as support strategies are, to

arbitrarily introduce any one of the strategies presented in the literature review would not be optimal for all participants.

Globally, there are many other reasons students with disability are difficult to include in inclusive learning settings. To complete the fishbone diagram for my organization, ideas of causes were derived from interviews and my own discoveries investigating this issue. There, of course, was some overlap. In this case, the “drivers” happen to be behaviors of those embedded within the system which enables this problem of practice to continue (See *Fishbone Diagram* Appendix A). The fishbone diagram helped identify six drivers. These drivers included: students, the audition process, manpower, structure, funding, and hierarchy.

1.5 Review of Supporting Knowledge

The goal of the literature review was to determine themes and draw conclusions for my specific context and problem of practice: including those with complex needs within informal learning. As the problem is multi-layered, it is important that all facets of exclusion of students with disabilities be acknowledged and addressed to provide a framework of support to successfully include students with significant needs.

In my review, I eliminated from the research yield anything prior to 2000. In doing so, I was hoping to secure a body of research that would embody the changes and challenges related to education since the implementation of the No Child Left Behind Act (2001) as these challenges to inclusion are similar in informal learning contexts. It is important that the most current peer-reviewed research and studies in the field of special education or out of school learning environments be included in the literature review in order to best answer the question of what

supports have been successful for including those in out of school learning environments. I had discovered 25 studies related to inclusion in school settings and a few scattered studies of out of school settings. I narrowed the studies included in this review to thirteen and uncovered promising approaches for the prospect of inclusion in other types of learning environments such as: peer mediation, positive behavior support and classroom management strategies, growth mindsets, and promoting self-mediated interventions. In what follows, I present my conclusions based on my review.

There have not been many studies that explore supporting and including students with disabilities in out-of-school learning environments. Inclusion, and the body of research attached to it, appears to be very skewed towards academic and school communities. For this reason, the literature review includes studies from all learning environments. The literature review has exposed identifiable features for designing inclusive learning environments that improve social, emotional, or behavioral outcomes of those with disabilities.

1.5.1 Strategy 1: Peer mediation

One of the most recurring and promising approaches is that of peer-mediated/peer-assisted learning, especially in creative learning spaces. It is also evident in general education inclusive settings. Peer-mediated learning is an approach in which a peer is assigned/trained to model appropriate behavior, provide tutoring, and address social concerns.

In a study conducted by Kern and Aldridge (2006), peer-mediated strategies were considered effective in increasing meaningful engagement for students with autism-spectrum disorder within an inclusive community daycare. In the study, peer-mediation was one of five interventions researchers used with four boys with autism in the hopes of building peer interactions

and meaningful play in an inclusive daycare setting. The results were that peer mediated strategies were effective in improving peer interactions. The researchers cautioned others in using their data to conclude causal links between interventions and social/behavioral outcomes as it was a single-case experimental design with a very small number of participants.

In a similarly small study for a very specific program, Smart et al. (2018) sought to explore a set of strategies to use for inclusion in an outdoor arts summer program. The program had been developing over 26 years, and the research was guided by an interpretive qualitative approach. The interviews were conducted with 14 service providers, 9 of which had been with the program for a number of years. The study produced 8 strategies including spontaneous free play, individualized structured support, and meaningful social participation. The study found that peer mediated strategies were effective in improving peer interactions necessary for successful inclusion.

In a study of a community arts program, Levy, Robb, and Jindal-Snape (2017) explored the impact of the community arts program “Play On” on the well-being, confidence, and identity of those who have disabilities and what role “personalization” had on that impact. Personalization is making “services more responsive to individual needs.” It is the process of making links to capabilities versus disabilities approach. Play On had a multiple disability platform and collected data from staff (n=7), parents of all participants (n=11), and participants with disabilities (n=8). The authors noted that having a culture of inclusion as well as peer supports had an impact on the inclusion process. Some strategies that they highlighted were personalization, creating a safe space to participate and take risks, and building safe and supportive peer relationships that can aid in the inclusion of those with disabilities in community arts spaces.

In addition to the studies exploring peer mediation, two literature reviews also noted it as an effective inclusive strategy. In the literature review based on the research and theory of social

learning conducted by Jellison, Brown, and Draper, (2015), the purpose of the study was to explain the benefits of peer learning in music education and to explore the theory behind peer assisted learning. The study, based on the research of Bandura and Vygotsky, focused on the premise that students need to be taught how to interact with students who may be different than them. The article cites research that promoting successful peer-mediated learning and interactions is necessary for successful inclusion. Similarly, in a literature review conducted by Ryan, Pierce, and Mooney (2008), the authors explored 66 quasi-experimental and experimental studies reviewing forty peer, teacher, and self- mediated interventions with the purpose of providing evidenced-based teaching strategies to teachers in educating students with emotional and behavioral disturbances (EBD). The authors' findings covered 3 decades of literature, and student participants had to be qualified under the EBD or a similar verified psychological disorder. One of the evidenced-based strategies included peer mediated interventions.

1.5.2 Strategy 2: Positive support & classroom management strategies

The next most frequent and encouraging approach is that of positive behavior supports and effective classroom management strategies. Positive behavior support is a behavior management strategy based in Applied Behavior Analysis. Positive behavior supports can be school-wide, classroom-wide or designed for a specific individual. Positive behavior supports, typically used to deter disruptive behavior, are used as an antecedent before the undesired behavior occurs by serving its function in a positive way.

Lukiowiak (2010) conducted a multiple case study to explore behavior strategies implemented with elementary school students with EBD. The study sought to find positive behavioral strategies that brought about the most improvements and to identify additional supports

needed by staff. The implications for inclusion of these students was that special educators need to be more collaborative for the greater success of their students and the environment has to be accepting. Like Levy, Robb, and Jindal-Snape (2017), Lukioiwak noted that having a culture of inclusion is necessary for a successful learning space. Lukiowiak also cautioned teachers about treating students with EBD as guests in the classroom or other students may treat them in the same way. Additionally, general education teachers need to be active participants in behavioral strategies. The study explored a variety of positive support strategies which found the token economy to be significantly effective. The study also noted that teachers would benefit from additional training, support structures, and assistance from highly trained individuals.

Comparably, Maggin, Chafouleas, Goddard, and Johnson (2011) also explored the token economy effectiveness as a positive behavior support strategy in a two-part systematic review. The goal was to determine circumstances where treatment effects were maximized. Twenty-four studies were included in the review. The review concluded that there is a need for further research and exploration of token economies. However, unlike Levy, Robb, and Jindal-Snape (2017), the researchers clarified that there is insufficient evidence to support token economies as evidence-based. Yet, students do respond to this strategy. The study explained that schools should be aware of its use and provide specific instructions, rules, procedures, and expectations in order for it to be a successful strategy in the classroom.

Correspondingly, Niesyn (2009) conducted a review of evidence-based instructional practices and strategies, in addition to the token economy, for teachers to use when working with students with emotional and behavior disturbances in grades K-3. The purpose of the study was to provide teachers with an inventory of practices to use that would increase time on task and reducing reduce disruptive classroom behavior. The only interventions that were included in the

study were those that were easy to implement within the general education classroom such as consistent classroom rules and procedure, teacher directives, self-instructions, peer tutoring, and specific praise. The study cited that the easiest and most effective positive support strategy to implement is increased, immediate and labeled praise. It also suggested manipulated or shorter assignments as a great modification with verbal interaction for independent work. Furthermore, it is important ensure that students can work with 80% accuracy before requiring them to complete a task independently. Peer tutoring was also noted as having a powerful impact on academic motivation and achievement. Providing choice of instructional materials, using a direct instruction mode, and a token economy system with tangible rewards can be helpful when asking students to complete nonpreferred tasks. The review clarified that teacher requests should include the reward and the consequence. For example, inappropriate behavior should be discussed, and guided practice provided in order for these students to have the most success in inclusive environments.

1.5.3 Strategy 3: Encouraging growth mindset

In addition to peer mediation and positive behavior support and classroom management strategies, growth mindset theory was mentioned as an effective approach to inclusion. Levy, Robb, and Jindal-Snape (2017) and Lukoiwak (2010), in a multiple case study, noted that having a successful inclusive learning space starts with the teachers' attitudes and expectations of those with disabilities. Non-disabled peers understand how to interact with others based on the teacher's attitude. General education teachers should cognizant of how their own biases impact the culture of inclusion.

Likewise, a small study by Unianu (2012) was conducted with the purpose of identifying reasons inclusion practices were not successful. The author interviewed 126 teachers from four

Romanian towns. The author analyzed the teachers' attitudes and inclusion. The study determined that teachers' training influences their attitude toward inclusion, and that teachers' attitudes inform the success of those included.

Heflin and Bullock (1999) surveyed general education and special teachers to gain insight on teacher's perceptions of inclusion. Eighteen teachers (one general education and one special education) from three schools in each of the three participating districts. Nine open-ended questions were asked. In the study, both general education and special education teachers' negative attitude in reference to inclusion were fueled by dumping, insufficient support and training, nonproportional ratios, the inability to meet the needs of included students, behavior management, and finding time to make accommodations and collaborate with team members. The study suggested that successful inclusion practices should incorporate training school personal, careful planning, instructional support, reflecting on the inclusion process, and natural proportions.

Additionally, Garwood and Ampuja, (2018) reviewed past studies that used growth mindset practice. Their review showed positive potential with consideration to helping students cope with threats their identity that impair motivation. Their study included a basic guide to implementing growth mindset within the classroom. Garwood and Ampuja (2018) presented tips to create a culture that fosters growth mindset, model growth mindset thinking, allow room to grow, and helping these students generalize these skills beyond the classroom.

1.5.4 Strategy 4: Self-mediated interventions

Lastly, when including those with disabilities, self-mediated interventions is also an option to consider. Self-mediated interventions are interventions where the student takes responsibility

for their behavior and their academic performance. This is a multiple step intervention that requires instruction before it can be implemented successfully (Niesyn, 2009).

The prior mentioned literature reviews by Ryan, Pierce, and Mooney (2017) and Niesyn (2009) also explored self-mediated interventions for including students with disruptive behaviors. Both literature reviews noted that self-mediated interventions were highly effective. However, Niesyn (2009) suggested that in order for these types of interventions to work self-instructions for students must be explicit with no more than six steps.

The literature on inclusion practices suggests that there is a disproportion between research on inclusion in traditional school setting versus those of out of school learning. Although the literature fails to provide many inclusionary practices in out of school learning contexts, the literature does identify features for designing inclusive learning environments that may be applicable in other contexts.

1.5.5 Context review

Unlike the research presented on peer mediation, peers have never been “trained” to assist, and it has never been thought about. Most of the actors are familiar with the behaviors of those around them because they live with someone affected with a disability. The participants in the group usually range in ages, and older participants, as well as those who participate in the program frequently, often rise to the occasion to support any actor in need. “Training” peer supports is definitely something to consider. However, I also wonder how “training” these peers will impact the beautiful dynamic that is naturally occurring.

Like in the study by Smart et al. (2018), the group often gets to take 10 or 15 minutes for a “break” or free unstructured time. This time allows for relationship building outside of what we

are working on. Students often build friendships and arrange play dates during this time. This practice does not happen consistently especially if we are running behind in rehearsal. However, the actors do find ways to have fun and fellowship during downtimes.

Neisyn (2009) suggested that the easiest evidence-based practice to implement is increasing specific praise. Positive reinforcement is something that we do. As in any setting, I am sure we could do more of it. Typically, I make sure to praise all of the actors during rehearsals. I always thank them for their hard work. In addition, I award every actor with a certificate for specific contribution to the show during the final bows.

Ryan, Pierce, and Mooney (2008) also listed peer praise as a form a positive reinforcement. This kind of praise is something else that we also practice. Largely, evidence of this happens during our cast party. During the cast party, each actor draws another actor's name from a hat. The actor makes a certificate of accomplishment for the actor drawn. We have an awards ceremony, and each person presents the created award. I have noticed that it is a confidence booster. Building in more positive reinforcement will serve as an excellent antecedent strategy for curbing disruptive behavior although we do not have many behavior problems.

Similar to Levy, Robb, and Jindal-Snape (2017) and Lukoiwak (2010), I believe that successful inclusion starts with the teacher. For the most part, I am the only instructor/director. I direct three of the four shows a year. I hire a director for the adult program. I spend a lot of time teaching my actors and the directors that I hire about growth mindset. I have witnessed this idea can be hard for some directors, siblings and parents to grasp. They do not understand that "perfection" is not the goal. For me, completion is the goal. It may or may not be "perfect", but when an actor gives it his/her best shot, especially when it is difficult to do, they should be proud

of that. I know I am. Additionally, Garwood and Ampuja, (2018) suggested that teachers provide more examples and model this behavior. Perhaps, this model could be the “trained” peer mentors.

As far as self-mediated strategies, I am not convinced that this practice is something that I could implement within my context. The process of creating self-mediated strategies is quite long. I usually do not have the time to spend with actors prior to rehearsal to teach, create, and rehearse these self-mediated plans. It appears to be outside of the realm of a director’s professional jurisdiction, and it is not something that I could expect hired directors to do – especially, if they do not have special education or therapeutic art experience.

My literature review presented a few promising inclusive learning design ideas. In my role as the founder, the program director, and the most consistent component of the organization, I often use many of these practices in my operation of the organization and direction of our theater productions such as positive reinforcement, free and structured breaks, the use of peer “buddies”, and promoting the idea we are all growing in this process together.

Supports are a significant issue. We can get participants what supports they need during practices and, usually, after they have had some kind of minor or major issue at practice. In my role as the founder, the program director, and the most consistent component of the organization, I use many of the presented practices in my operation of the organization and direction of our theater productions, but less formal in the structure and most often, as a reactive measure. However, if we alter the audition process in a proactive way that informs us of the needs of the participants, we could streamline these supports efficiently and effectively in order to prevent frustration and disruptive behavior and to increase the engagement and the overall social climate.

2.0 Theory of Improvement & Implementation Plan

2.1 Theory of Improvement

The theory of action for improving the engagement of those with disabilities is embedded within an informative audition process that informally presents directors with the knowledge of the individual needs of the participants has the potential to improve multiple areas within the organization.

In defining my theory of action, I outlined the thinking related to the improvement of inclusion within the organization. If we implement an informative audition model that identifies the needs of each participant in order to use the knowledge to provide adequate and timely supports to assist those with disabilities to engage in a collaborative and supportive learning space, then we will increase supportive relationships, strength-based participation, and the capacity of participants to engage socially and competently within the learning space while also, reducing challenging behaviors and ultimately, improve the experiences for persons with disabilities, and all other participants, within the program through an improved climate and culture (See *Driver Diagram*: Appendix B).

With the theory of action for improving the engagement of those with disabilities that is embedded within an informative audition process that informally presents directors with the knowledge of the individual needs of the participants in mind, the plan for study poses these questions:

1. How does participating in the new audition process inform the organization's understanding of the needs of the individuals in the program?

2. How does this process affect the individuals' perceived self-competence/confidence?
3. What impact does this process have on overall social climate in terms of emotional and behavior outcomes?

It was predicted that the study would have favorable outcomes, although was unclear of the breadth or significance of those favorable outcomes. It was the hope that these changes would produce better social, emotional, and behavioral outcomes within the group. With the interest in favorable outcomes, there also came concerns how the change may negatively affect the program. It could be possible that the process impacts the actors in ways unintended. It was also a concern that the report of needs by the individuals would be too overwhelming to be provided by the organization.

2.2 AIM Statement

By May 2021, Acting UP will create and implement a sustainable strategy to identify necessary supports for participants such that participants who wish to identify a need will have access to additional preferred supports within the program and be able describe the production process positively. Generally, the group was perceived as favorable by the limited feedback that the organization had received from previous informal surveys. Previous surveys had not been objective enough and had inadvertently solicited positive feedback only. It was the hope of the organization that it would obtain constructive feedback through the checks and balances within the survey that would indicate that the perceptions were valid and would show an improvement or suggest further organization need.

After reviewing the history of the organization, the driver diagram, and the findings in the literature review, it was determined that altering the audition process could be a feasible first step. If we altered the audition process in a proactive way that informs the organization of the needs of the participants, we could streamline supports efficiently and effectively in order to increase the overall social climate. The universal design approach that has been used does not account for individual differences or needs until after an issue occurs. The strategies presented in the literature review: peer mediated supports, positive behavior supports, growth mindset strategies, and self-mediated interventions are promising. However, it would prove foolhardy to implement any arbitrary, global strategy within our performing arts space as every group is different and presents distinctive needs each performance run.

In summary, in order to better serve the participants within our group, we should change the way we do things in order that we can be better informed to adequately anticipate needs. In some cases, we could provide more specific supports. The best, least invasive, and efficient way to do this is through the audition process.

2.3 Methods and Measures

2.3.1 Participants

Participants in this improvement project were 15 children ages 4 to 16 years old with a mean age of 8.6 years. The group consisted of 8 girls and 7 boys. Of these participants, fourteen children (94%) identified as white/Caucasian and one child identified Asian (6%). From this

sample, four children with disabilities were selected for the supports study. All rehearsals took place at a local church in either inside the sanctuary or outside.

Participant A was a Caucasian boy of 10 years old who was diagnosed with autism spectrum disorder. Participant A, according to his father, demonstrated behaviors that include non-compliance (ignoring, not following, or arguing against directives), fidgeting, and picking behaviors (picking lint or picking apart objects). Participant B was a Caucasian boy of 9 years old who was diagnosed with autism spectrum disorder. According to Participant B was also a first-time participant, and according to his parents, his behaviors included non-compliance (ignoring, not following, or arguing against directives), fidgeting, and disruptive behaviors. Participants A and B were referred by the parents of Participant C. They were in the same homeschool co-op.

Participants C and D were previous participants. Participant C was a Caucasian boy of 14 years old who was diagnosed with autism spectrum disorder who had a long history with the group. He has participated since the age of 9. His behaviors presented as non-compliance (ignoring, not following, or following through with the opposite of directives), fidgeting, disruptive/aggressive behaviors (hitting, kicking, and roughhousing with his siblings. According to his mother, he was in the homeschool co-op, but recently, he had moved to public school due to academic and behavioral needs. Participant D was a Caucasian boy of 16 years old who was diagnosed with a rare genetic disorder that includes multiple disabilities such as cortical vision impairment, intellectual and developmental disability, and autism spectrum disorder. Participant D had participated since the age of 14 and did not present any problem behaviors other than being inattentive during any of his time with the group, but he did miss a considerable amount of practice. He required many supports in order to attend and participate due to his disabilities and his attendance.

Table 1 Participants with Disabilities

Participant	Age	Diagnosis	Known Behaviors
A	10	Autism	non-compliance, fidgeting, and picking behaviors
B	9	Autism	non-compliance, fidgeting, and disruptive behaviors
C	14	Autism	non-compliance, fidgeting, disruptive/aggressive behaviors
D	16	Multiple Disabilities/Autism	inattentive

2.3.2 Recruitment

Following confirmation of non-human study status from the IRB of the University of Pittsburgh, all participants were recruited at the end of February. Previous participants were sent an invitation to audition, and an ad was published in the local paper. Previous participants, also, had forwarded their invitation to friends and family. Before auditioning, all parents and participants were informed verbally of the purpose of the new audition process, any risks and potential benefits, and the quality assurance survey (*see Survey A*). It was understood that participation in the quality assurance survey following auditions was voluntary and not a requirement to participate in the program.

2.3.3 Dependent variable

The dependent variable in this study was the impact the informative audition process had on overall social climate in terms of emotional and behavior outcomes. These outcomes were measured by collecting observational data regarding the behaviors, social climate, and engagement. The dependent variable was measured by the frequency of behaviors and ratio of behaviors versus time on task.

2.3.4 Independent variable

The independent variable in this study was the informative audition process. The informative audition included the audition form and the informed audition protocol. These tools were used to create a supportive environment that included participant selected supports to aid in the inclusion of those with disabilities.

2.3.5 Method

The three-day audition process followed on March 26, 2020 including one audition time via Zoom and two in-person audition times. However, the audition for process for the Spring show was a little different.

All audition participants submitted registration forms via email when they registered for their audition time, and if applicable, the participant received a Zoom link. This year, all participants completed a new audition form via Survey Monkey. This form contained contact information, demographic information, clothing sizes, an environmental supports and adaptations

assessment, and perceptions about participant self-confidence/competence (See *Audition Form*: Appendix C). The parents filled out this form and there was a separate paper form for releases and consents. However, the participants themselves completed the self-confidence survey.

Typically, participants come to the call for auditions prepared with the designated requisites: monologue or joke and a song. After they perform what they have prepared, actors will, then, perform the cold read of the intended script, if able. This part of the process was unchanged. The reason for this is this type of audition is what they will be expected to do almost anywhere else they would go. One of the tenets of organization is to prepare our actors for a more competitive type experience, and many of our actors have grown and moved on to other companies. While this type of audition is standard almost everywhere, it really only gives the director an idea of where an actor fits in the show. It informs the director of what part would be best for the actor and the performance as a whole. However, it does not inform the director of any needs that are specific to the actor.

When contemplating how to create an informative audition process, I thought it best to study theater activity as a behavior and what activity as a behavior looked like. In order to do this process, I considered an applied behavioral analysis concept called Verbal Behavior. In 1957, B.F Skinner wrote about the concept of verbal behavior to explain behaviorally how humans acquire language through verbal operants such as mands, tacts, intraverbals, echoics/imitation, and listener response (Skinner, 1957). All of these verbal operants are present and a necessary part of theater behavior.

After the cold read, actors carried out a series of listener response directives (one step, two-step, and multiple step). During theater activities, actors are typically asked to walk right or left, nod yes or no, or do any other action that their character may need to do. The actors were, then,

asked to complete the intraverbal activity, imitate actions, and emotive simulations. The operant prompts were typical of what one would be required to do while participating within the group and were designed to inform the audition coordinator of the participant's needs in communication, following directions, limited mobility or imitative skills (See *Informed Audition Protocol: Appendix E*). The audition coordinator made anecdotal notes on this process and results in order to implement proper supports during the practice sessions. It was believed that the information will help better support those with needs within the organization.

A survey of all participants and their parents was conducted directly following the audition with role assignments (See *Survey A: Appendix D*) via Survey Monkey. This survey obtain demographics, ideas about their thoughts on the new audition process and preconceived ideas about the program. To ensure inclusivity, the survey was made accessible to all who participated. Alternate versions of the survey were available for those who wished to participate but needed additional supports. These adaptations included electronic administration and survey questions being read aloud.

Practices were in-person as well as via Zoom. Participants were required to wear a mask. This year, we were doing Rainbow Fish and used colored yoga mats to direct movement as well as to promote social distancing due to COVID-19. We practiced outside as much as possible.

During the first practice, the table read, no interventions or supports were implemented in order to obtain group baseline data. Before the start of practice, we had an ice breaker activity. Each participant told something about themselves, something they liked, and something they disliked about the audition process. These positive and negative statements were recorded. Students demonstrated their ability to mand during this practice as I purposely self-sabotaged such as forgetting to give certain materials to see if the participants were able to ask for help if needed.

At the second practice, supports indicated on the survey were implemented for four students who presented with disabilities. Data was collected at each rehearsal for each support and the student using it for four weeks. The support was rated on effectiveness, and effectiveness was based on how well it supported the participants' engagement. This observational data was collected on a data collection form (See *Data Collection Form: Appendix G*). This data was collected in vivo or while the process was happening. Additional reflections were documented after the participants left for the day.

Before the first performance, the final survey of all participants was conducted (See *Audition Form: Appendix C*) via Survey Monkey. This survey assessed the perceptions about their own self confidence/competence. These process measures determined how the change is working.

After all surveys were coded, an analysis of longitudinal changes pre and post for the group overall, gender, age, and ability was conducted. This longitudinal analysis helped determine the amount of change or lack thereof. The plan was to acquire information that informs the next cycle and the organization overall. These measures could lead to further iterations of the PDSA (Plan/Study/Do/Act) cycle. The data was reviewed, and a determination was made about what had been learned from this process. This measure was the lagging outcome measure and determined if we achieved the projected outcome and change has occurred.

2.3.6 Analysis of data

The analysis of the data was a multiple step process. The data analysis design was as follows. Survey data was collected from the participants and their parents. In referencing those with disabilities, no reference will be made to specific disabilities. This lack of reference ensured that data collection methods are inclusive.

After all data was collected, the data was reduced. All survey data was referred back to the research questions. All data from surveys was coded. This process of reducing and coding took place immediately following any data collection process. After all of the data was coded, a content analysis was conducted to determine any patterns present in the data and any deviations from those patterns. The data was also analyzed to interpret the meaning of the presented content in relation to the research questions. Then, a thematic analysis of the data was conducted. This process involved grouping the data into themes. These themes were directly related to the research questions. Record and data keeping was thorough and interpretations of all data demonstrated a well-defined, coherent, and understandable procedure.

After all of the analyses have been completed, the data was assembled and organized, and then, displayed in graphs and tables. These tables described the relationships and patterns of the data collected. It described any significant findings or interpretations.

The last step was to interpret the findings and determine how and if they answered the research questions. Then, conclusions were drawn from the data and interpret further implications for the field of study. The data was referenced to verify the conclusions. In addition, any biases in the sampling were accounted for and examined, as well as an analysis of the methods and their contribution to the relevance of the study.

3.0 PDSA Results

3.1 Results

3.1.1 Understanding of the needs of individuals

Before auditioning in person or via Zoom, participants/parents completed the audition form (See *Audition Form*: Appendix C). The first opportunity to express an interest in supports was given in the “Supports Preferred” section. It was predicted that the needs would be too overwhelming for the organization to accommodate. When given the opportunity to express an interest for supports within the program, there was a 100% response rate. Every individual had indicated at least one support. The most important supports for the overall group were frequent breaks, timers/schedules, and praise and reward systems. Most of these supports were able to be addressed and implemented as part of the universal design of the program. The complete results are presented in the following graphs.

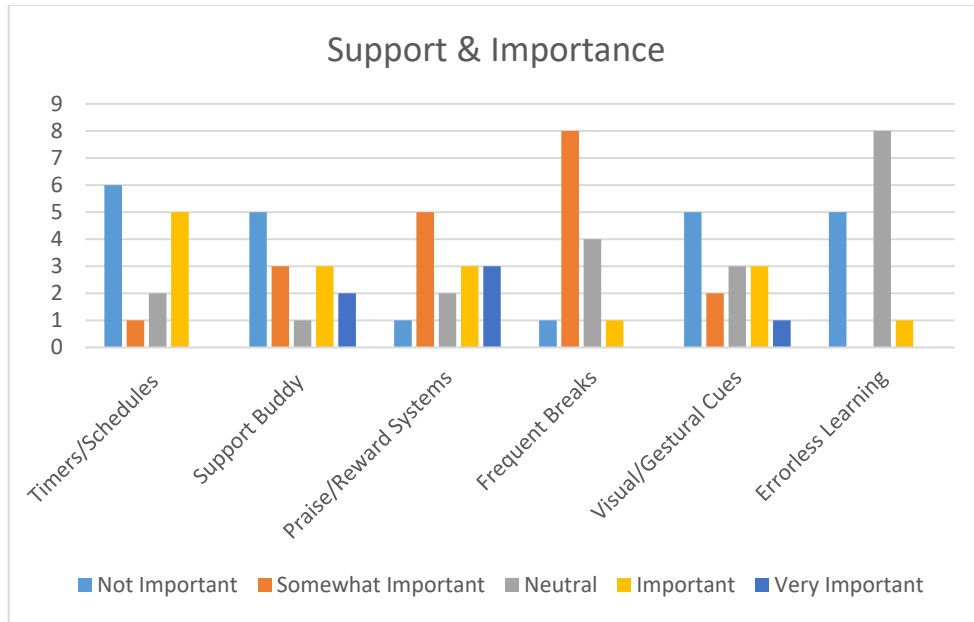


Figure 1: Supports & Importance

In considering the needs of those with disabilities, the most important supports indicated by those with disabilities were frequent breaks, timers/schedules, and support persons totaling 69% of preferences.

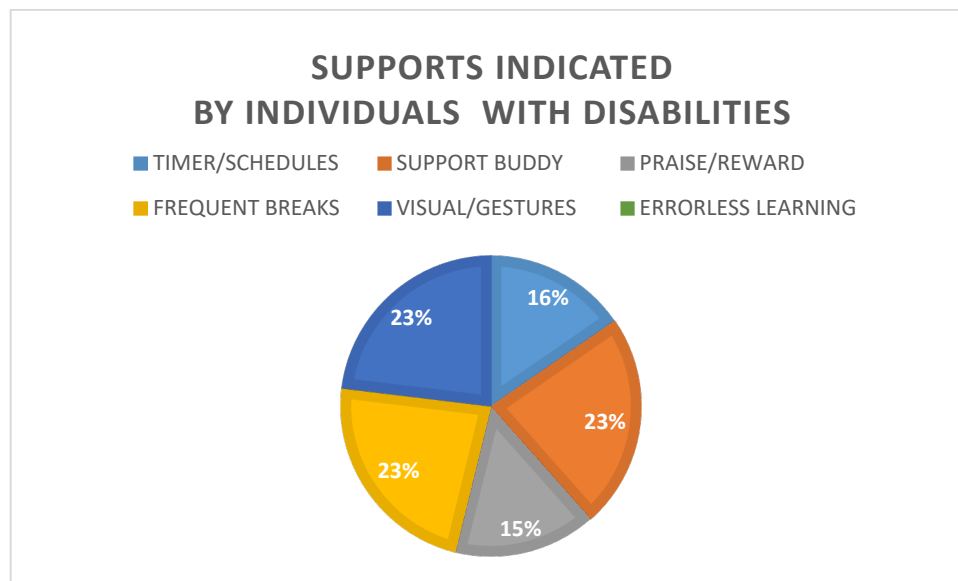


Figure 2 Supports Indicated by Individuals with Disabilities

The second opportunity to indicate a need was in the “Adaptations” section of the audition form (See *Audition Form: Appendix C*). Overall, the group suggested minimal needs with regards to adaptations. The most significant needs presented were reading abilities with only 57% of the group having the ability to read fluently, and only 57% of the group having the ability to follow multiple step directives. The full results are in the following graphs.

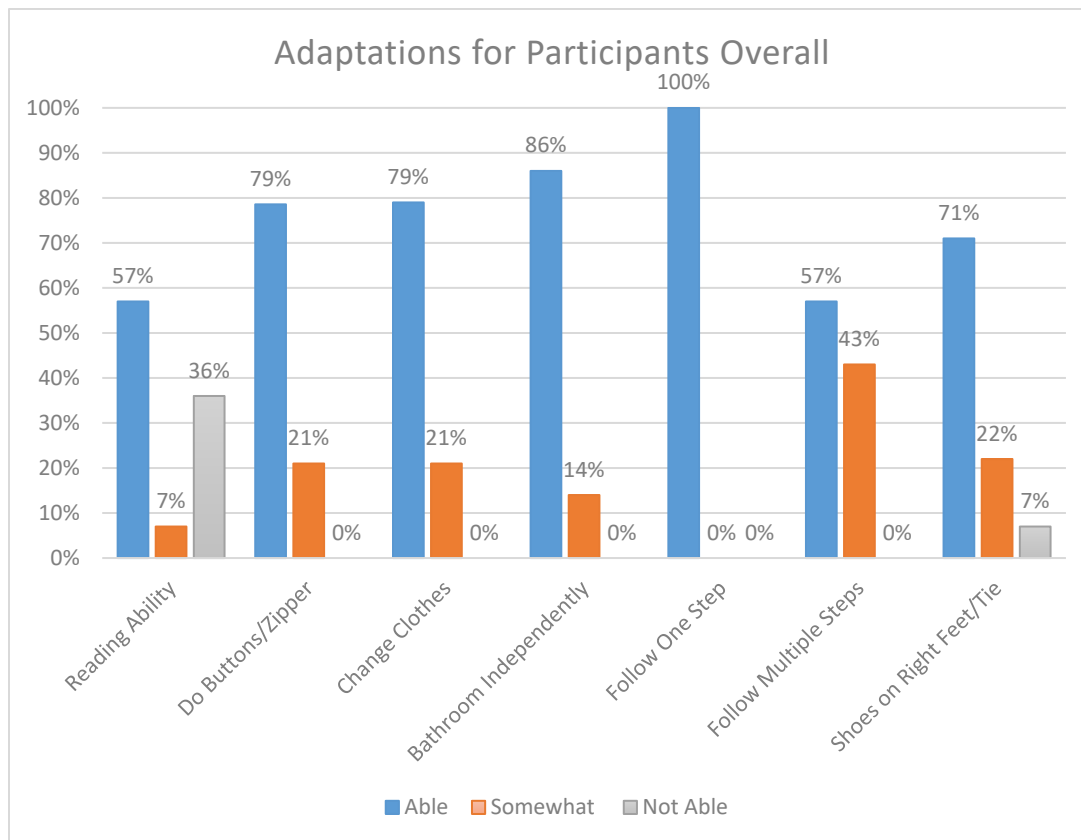


Figure 3 Adaptations for Participants Overall

Comparably, the participants with disabilities also showed minimal needs with regards to adaptations. The most significant discrepancy was in reading abilities with only 50% of the group having the ability to read fluently. Only participants A and B were able to read fluently. The full results are encapsulated in the following graph.

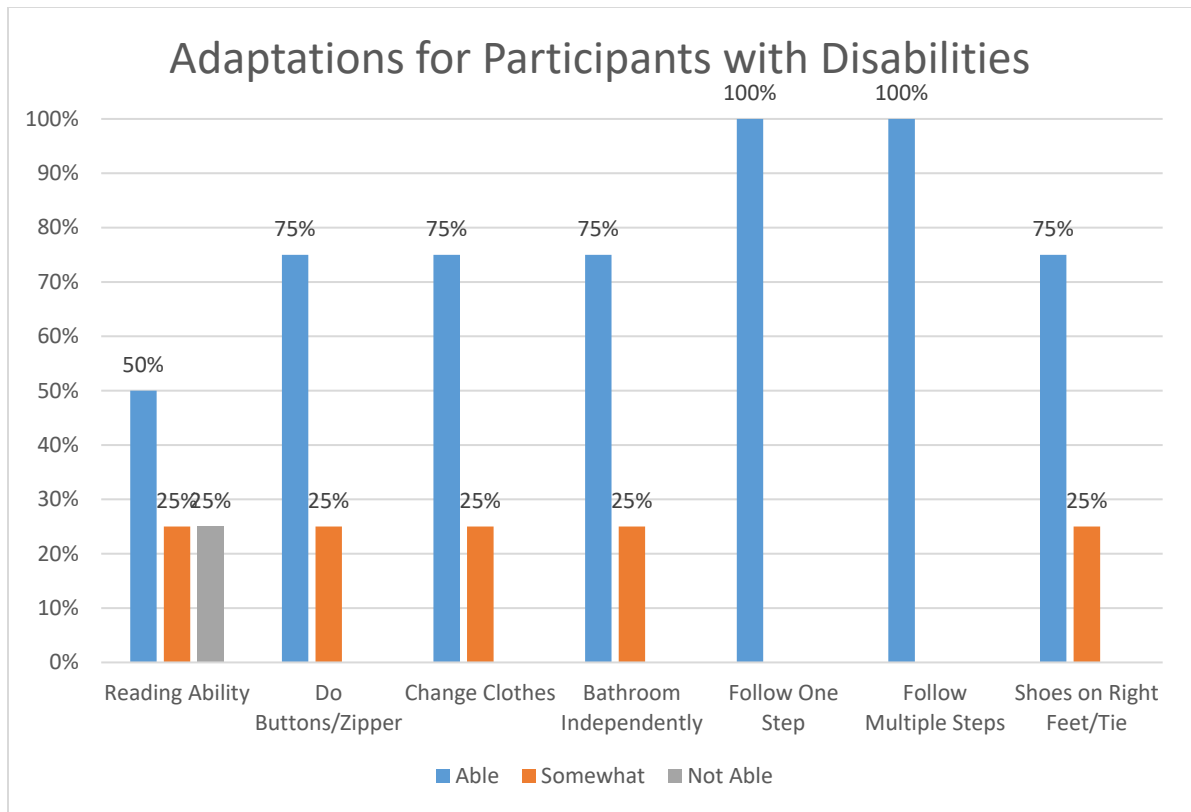


Figure 4 Adaptations for Participants with Disabilities

During auditions on March 26, 2021, participants completed the informed audition protocol (See *Informed Audition Protocol: Appendix E*). During this protocol, actors performed a series of listener response directives (one step, two-step, and multiple step). The actors were, then, asked to complete the intraverbal activity, imitate actions, and emotive simulations. Overall, the group did well during the audition protocol. The group showed mastery in all categories except the echoic/imitation category (90% considered mastery) in which they showed a minimal need overall. The results are presented in the following graphs.

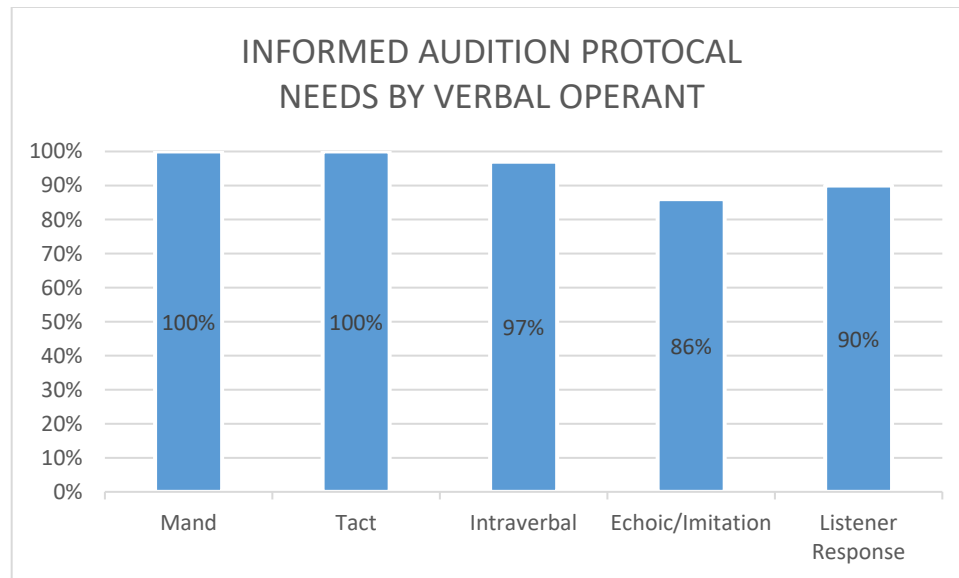


Figure 5 Informed Audition Protocol for All Participants by Verbal Operant

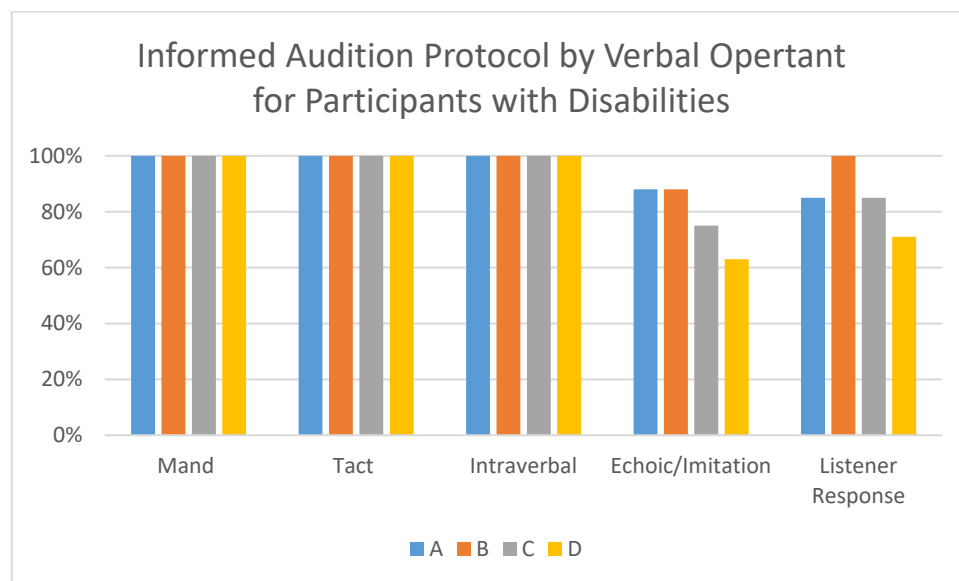


Figure 6 Informed Audition Protocol by Verbal Operant for Participants with Disabilities

During the informed audition protocol, participant A showed slight needs in the echoic/imitation (88%) and listener response (85%) categories. Participant B showed a slight need only in the echoic/imitation (88%) category within the protocol. Participant C also showed slight

needs in the echoic/imitation (75%) and listener response (85%) categories. Participant D scored the lowest overall in echoic/imitation (63%) and listener response (71%).

3.1.2 The effect on the perceived self-competence/confidence

It was unclear how the audition process and the supports provided would impact perceived self-competence and confidence. Every participant took the Self Confidence Rating Scale (*See Audition Form: Appendix C*). The scale consisted of 10 self-confidence questions where the participants rated themselves on a scale of 1 to 5. The maximum score possible was 50. On March 26, 2021, the participants took the scale for the first time. The scores ranged from 23-45. The mean was 36.2 with a standard deviation of 4.23.

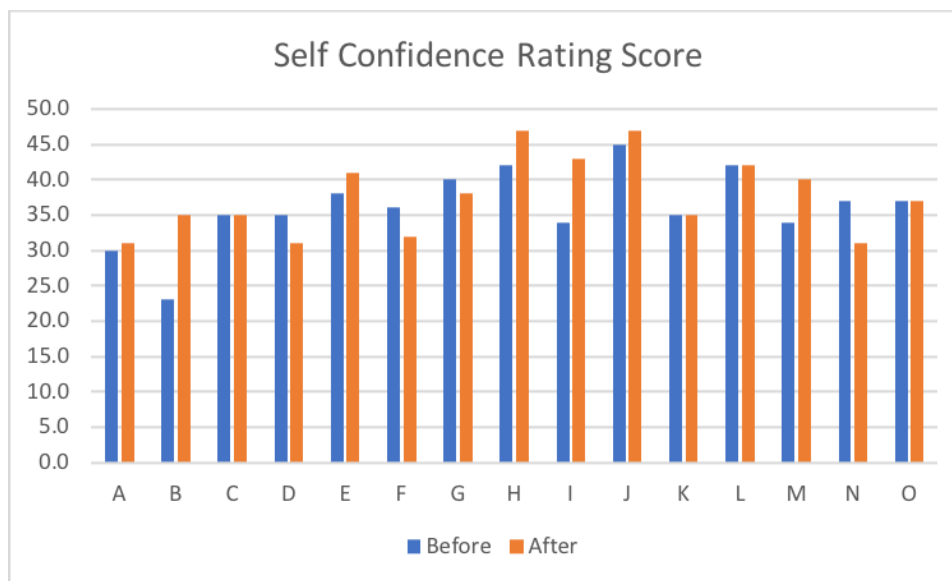


Figure 7 Self Confidence Rating Score for All Participants

All participants with disabilities rated themselves below the mean. Participant B rated himself the lowest overall at 23. Participant A rated himself at 30, and Participant C and D both rated themselves at 35.

On May 22, 2021, the participants took the scale for the final time. The scores ranged from 31-47. The mean was 37.6 with a standard deviation of 5.27. Of the fifteen participants 54% showed an increase in their self-confidence rating. 36% of those who had an increase showed growth of 5 points or more (10-24% increase). Of the fifteen participants, 20% of the group showed a decrease in their self-confidence rating while 26% showed no change at all. The average difference between pre- and post-scores was 3.6 points. Of all of the participants, 80% of the group experienced an increase or maintenance of rated self-confidence which suggests that is more likely that self-confidence will increase as a result of supports and adaptations.

As with the first rating scale, all participants with disabilities rated themselves below the mean. Participant A and B saw an increase while participant C showed no change and participant D showed a regression of 4 points. Participant B saw the most significant jump in perceived self-confidence. Previously, he rated himself the lowest overall at 23 – eleven points below the mean, but by the last rating scale, he rated himself at 35 and two points below the mean. While large scale correlations cannot be made given the variability of the data, the results suggest self-confidence is more likely to increase as a result of supports and adaptations.

3.1.3 Social climate in terms of emotional and behavior outcomes

During the baseline condition, the table read on April 10, 2021, all participants were called to attend. Everyone joined except for Participant D, and Participant B arrived late due to a prior engagement. During the baseline condition, there was a lot of off-task behavior in the group. Not all participants could read so, it was a long and boring process for some of them. Many of them had indicated during the exit ticket that it was long and boring. Many of them looked disinterested, and there was a task refusal from one of younger members of the group.

The first rehearsal, after the table read, was April 17, 2021. Supports for participant with disabilities were implemented by using the information provided from the audition form and informed audition protocol. For participant A, specific praise and frequent breaks were implemented. For participant B, a predictable schedule with timers and visual/gestural cues were implemented. The form for participant C indicated a predictable schedule with timers, frequent breaks, visual/gestural cueing, and specific praise. Because of COVID-19 restrictions, participant C received a peer buddy who happened to be a participant and member of his own household. For participant D, visual and gestural cues and specific praise were implemented. Because of COVID-19 social distancing restrictions, participant D did not have a requested peer support. Instead, he received additional prompting from the director as well as support cues to avoid constant prompting from an adult.

Table 2 Participants with Disabilities and their Supports

Participant	Age	Diagnosis	Reported Behaviors	Supports Used
A	10	Autism	non-compliance, fidgeting, and picking behaviors	specific praise and frequent breaks
B	9	Autism	non-compliance, fidgeting, and disruptive behaviors	predictable schedule with timers and visual/gestural cues
C	14	Autism	non-compliance, fidgeting, disruptive/aggressive behaviors	predictable schedule with timers, peer buddy frequent breaks, visual/gestural cueing, and specific praise
D	16	Multiple Disabilities/Autism	inattentive	visual and gestural cues and specific praise

Supports were selected from responses by the participants in the audition form which were a selection from those supports suggested by the literature review. Specific praise, frequent breaks, teacher directives (visual, gesture, and sound), rehearsal procedures (timer and predictable routine), and peer modeling were implemented at the start of the first rehearsal on April 17, 2021. The following table indicates how support strategies were executed.

Table 3 Supports and Descriptions

<u>Support</u>	<u>Description</u>
Specific praise (Niesyn, 2009)	Labeled praise was given any time the student was caught doing the right thing. Non-contingent praise to all participants was given every 5 minutes.
Frequent Breaks (Sheffe, et al., 2018)	In small group, participants worked 30 minutes on task and 10 minutes off. In whole group, participants worked 45 minutes on task and 10 minutes off. During larger group activities, not everyone is onstage at the same time so, there is a lot of sitting and waiting. During breaks, participants chose their own activities. Most of them chose to utilize the nearby playground or the basketball court. A few chose to use their electronic devices.
Visual Cues/Gestures (Niesyn, 2009)	Color yoga mats were used to mark and label the parts of the stage. Gray was used for up center and down center. Yellow was used for stage right and left. Light Blue was used to mark upstage left and upstage right. Center stage and down stage right and left were visible empty spots on the stage. The apron was marked with dark blue mats for left, center, and right. These mats also helped with keeping participants socially distant and in their assigned areas. Participants were taught gestures to go with lines of dialogue to help with memorization and minimize the need for reading. Gestures were also paired with any directive given.
Predictable Schedule (Niesyn, 2009)	The director prepared a predictable schedule for each practice: an opening activity, worktime with 2/3 breaks, and closing activity. Participants were alerted to how long they would work on the play before a

	break would be given and how many breaks that they would have during that day's session before the start of practice. The opening activity consisted of a mindfulness exercise or movement exercise involving learning the stage directions and names of the parts of stage. The closing activity consisted of the exit ticket. During the exit ticket, participants gave two words describing/evaluating the day's process.
Timer (Niesyn, 2009)	A visual timer was used to indicate when the worktime was complete. It allowed the participants to see the movement of time and know when the break or next activity was occurring. It was place where everyone in the group could see it. It helped provide a definite beginning and end to each activity.
Support Cues (Niesyn, 2009)	Support cues were specific, teacher directed verbal, sound, or visual cues taught to specific actors to aide in placement on stage, entrances/exits, and listener response.
Peer Modeling (Levy, Robb, and Jindal-Snape, 2017)	A peer was seated next to a student to model appropriate behavior and to provide additional cueing, if necessary.

During the baseline condition (phase 1), the participants without disabilities overall were engaged for a total of 120 minutes requiring three prompts for off-task or negative behaviors. No breaks were given. The behaviors included discussions or comments unrelated to the task and task refusal. The rate of these behaviors was .75 every 30-minute period. During the support phases, the participants overall were engaged for a total of 6 hours requiring a range of 0 -5 prompts per session with an average of 1.75 behaviors per session and a rate of 0 – 1.75 behaviors every 30 minutes. The behaviors only included discussions or comments unrelated to the task. Overall, the participants without disabilities demonstrated a decreasing trend in behaviors in support phases.

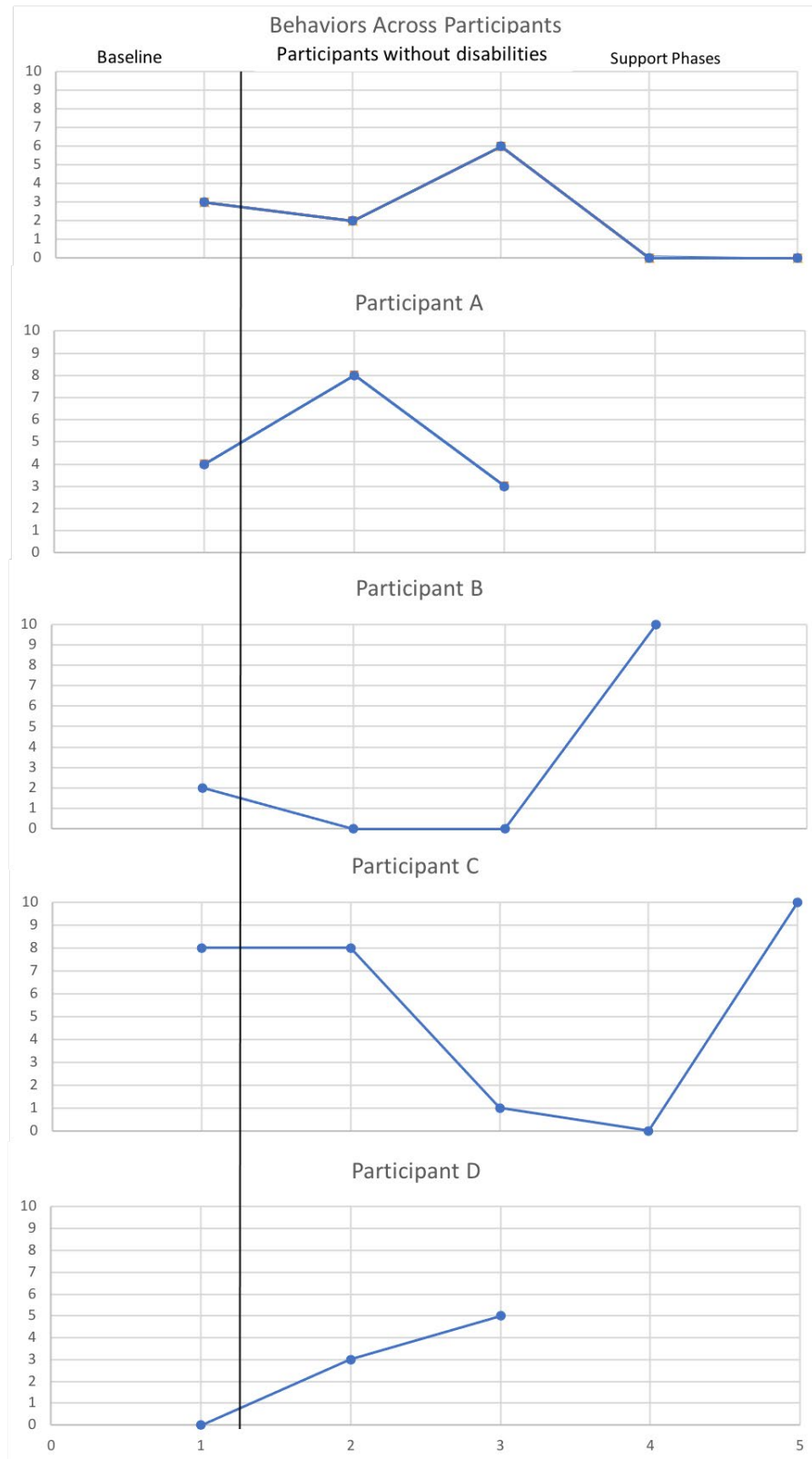


Figure 8 Behaviors Across Participants

During the baseline condition (phase 1), participant A was engaged for a total of 120 minutes requiring four prompts for off-task behaviors. The behaviors included leaving assigned area and comments unrelated to the task. The rate of these behaviors was one every 30 minute period. Participant A attended two consecutive support phase conditions out of four (phase 2 & 3). During the support phases, participant A was engaged for a total of three hours requiring a range of 3 - 8 prompts per session with an average of 5.5 behaviors and a rate of 1 - 2.6 behaviors every 30 minutes. The behaviors included climbing the walls, picking apart the yoga mats, and task refusal. Participant A demonstrated a decreasing trend in behaviors between consecutive support phases.

During the baseline condition, participant B was engaged for a total of 70 minutes requiring two prompts for off-task behaviors. The behaviors included discussions or comments unrelated to the task. The rate of these behaviors was one behavior every 35 minute period. Participant B attended one of the four support phase conditions. He was only called to one rehearsal, phase 4. During the support phase, participant B was engaged for a total of two hours requiring prompts ten prompts for off task-behaviors. The behaviors included discussions or comments unrelated to the task, impulsive behaviors (such as swinging a wallet on a string in the faces of participants), and task refusal. The rate of these behaviors was 2.5 behaviors every 30 minutes.

During the baseline condition, participant C was engaged for a total of 120 minutes requiring 8 prompts for off-task behaviors. The behaviors included leaving assigned areas or not paying attention. The rate of these behaviors were two behaviors every 30 minute period. Participant C attended three of the four support phase conditions (2, 3, & 4). He was only required for three of them, two of which were consecutive. During the support phases, participant C was engaged for a total of 4.5 hours requiring a range of 1 - 10 prompts per session with an average of

6.33 behaviors and a rate of 0 – 2.22 behaviors every 30 minutes. The behaviors included not paying attention, hitting and kicking his sisters, and rough housing with his little brother. Participant C demonstrated a decreasing trend in behaviors between consecutive support phases.

Participant D did not attend the baseline condition. Participant D attended two of the four support phase conditions (2 & 3). Participant D was absent for two practices. During the support phases, participant D was engaged for a total of three hours requiring a range of 3 to 5 prompts per session with an average of 4 off-task behaviors and a rate of 0 – 1 behaviors every 30 minutes. The behaviors included not following directives and not paying attention. Participant D demonstrated an increasing trend in these behaviors between consecutive support phases.

3.1.4 AIM statement results

It was predicted that in addition to the creation and implementation of a sustainable strategy to identify necessary supports for participants, participants, who identified and had access to additional preferred supports within the program, would be able describe the production process positively. At the end of every rehearsal session, participants were asked to evaluate their experience for the day with one to three adjectives to describe their experience.

Generally, this rehearsal process was perceived favorably with a range of positive comments from 8 to 15 positive comments per session and a rate of negative comments 1 to 3 per session. The percent of positive comments per session ranged from 75% to 100% with a mean of 87% with an increasing trend.

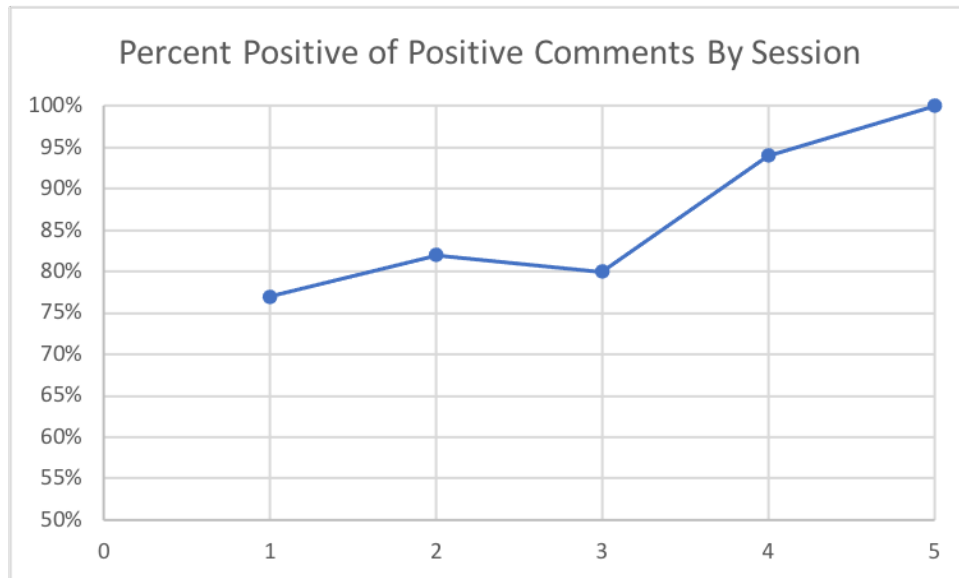


Figure 9 Percent Positive Comments by Session

The most commonly reported positive descriptions by participants were “fun” (19%), “good” (19%), and “funny” (13%). The most commonly reported negative description by participants was “long” (4%). Other negative descriptions included boring and repetitive.

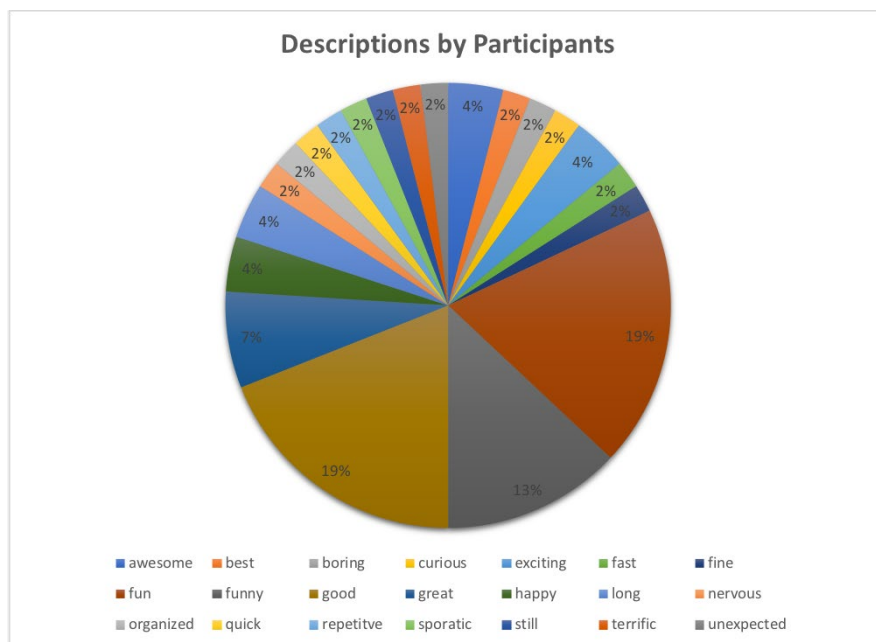


Figure 10 Descriptions by Participants

The ratio of positive comments versus negative comments were 88% to 12% respectively. These results suggest that the process was favorable and rated as positive experience by most of the participants.

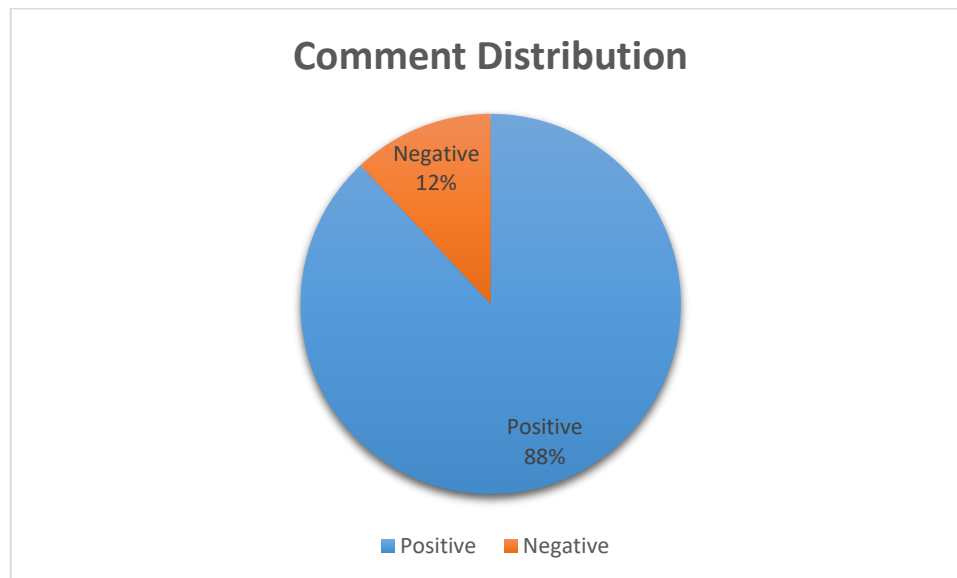


Figure 11 Comment Distribution

Finally, the informed audition process was evaluated with a survey (*See Survey A: Appendix D*). The survey consisted of seven questions regarding the audition process. In addition, there were questions related to demographics and two open-ended questions regarding ways to improve and additional comments. Of the 25 possible survey responses, sixteen were received, nine from participants (60% response rate) and seven from parents (70% response rate).

Of the 10 parents that participated in the audition process, seven of them completed Survey A. This group was Caucasian (71%) and Asian (29%). One man and 6 women participated in the survey. The age range of the participants was 32 to 54 with a mean of 43.7 years of age. Three (43%) of the seven parents had children with IEPs or 504 plans within the school setting participating in the program.

The parents rated the experience positively. Most notably was the rating of the length of the audition. Although the process took longer than usual, all those that took the survey rated the time reasonable. Overall, perceptions of the “new” audition process were favorable. Full description of survey results are displayed below.

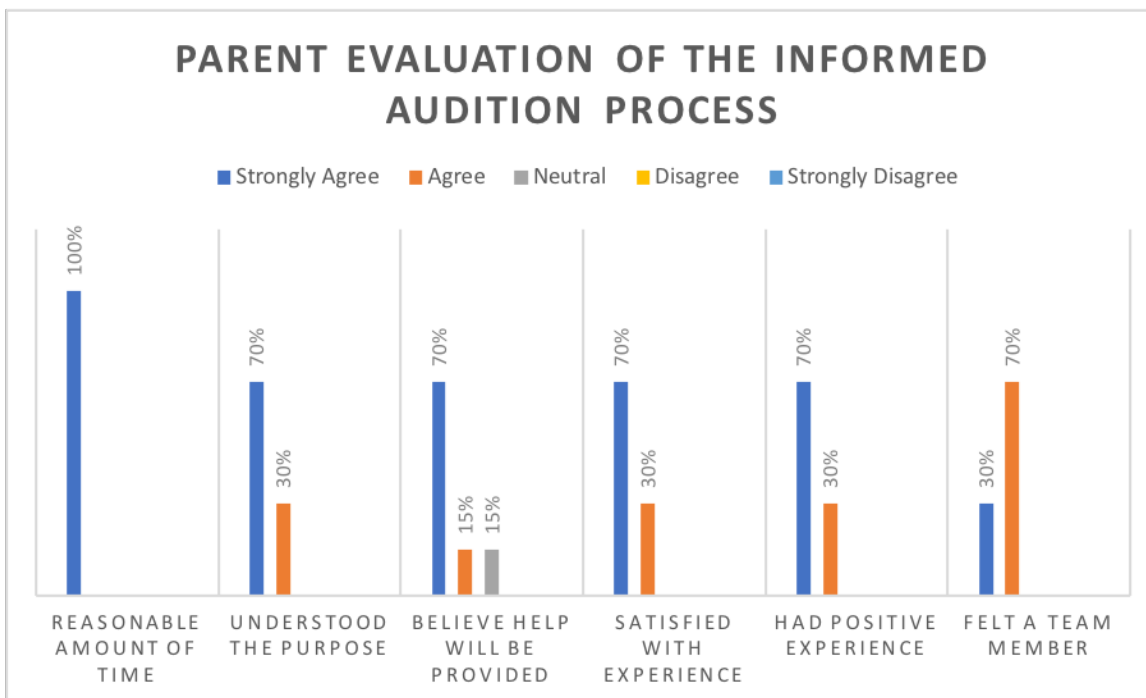


Figure 12 Parent Evaluation of the Informed Audition Process

Of the fifteen children that participated in the audition process, nine of them completed Survey A. This group was Caucasian (89%) and Asian (11%). Four boys and 5 girls participated in the survey. The age range of the participants was 4 to 14 with a mean of 7.2 years of age. Only one of the nine children had an IEP or 504 plan within the school setting.

The participants rated the experience positively, but had mixed reviews. Most notable were the ratings of satisfaction and having a positive experience. It can be assumed from the data that most participants had a positive experience, but the time the audition took and understanding the

purpose of the activities had variable response. Some participants felt challenged by the audition. Overall, perceptions of the “new” audition process were favorable among participants. Full description of survey results are displayed below.

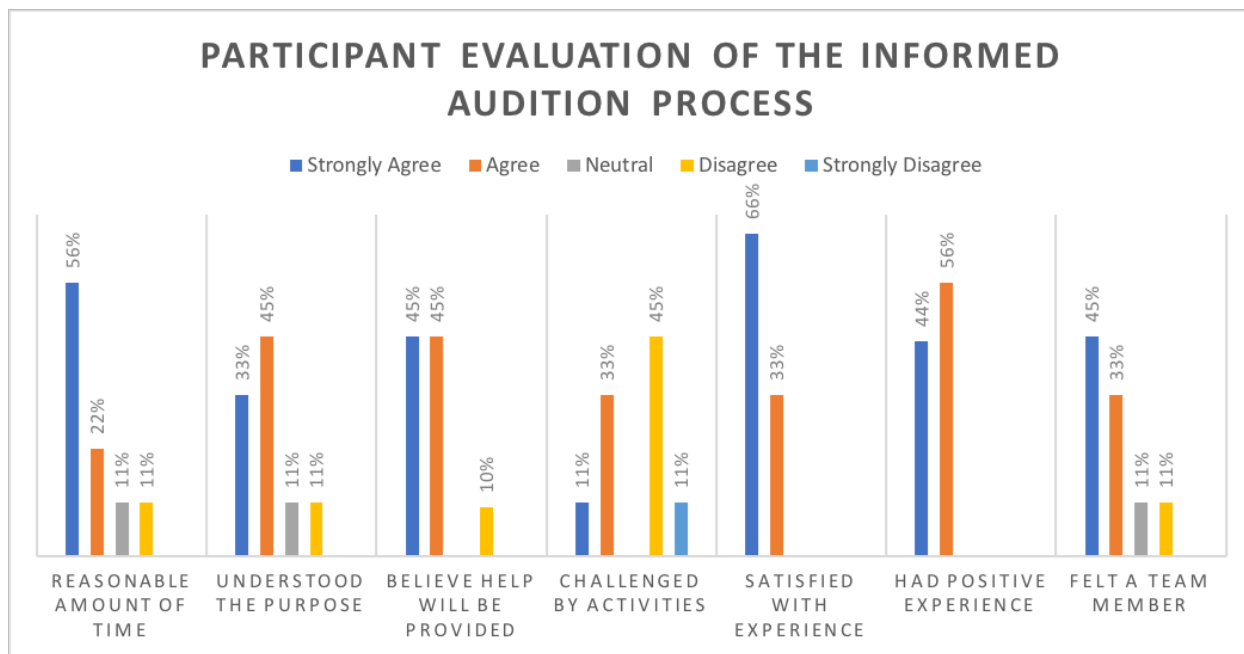


Figure 13 Participant Evaluation of the Informed Audition Process

Lastly, there were two open ended questions in Survey A. These responses were coded and analyzed for patterns. First, participants and parents were asked how the audition process could be improved. There were 13 responses to this question. Ten of the responses (77%) were that nothing need to be improved. The other three responses (23%) were related to the participants’ critique of their audition such as wishing that they had picked a different song to sing or wanting to perform something else. This information was helpful in that it can be assumed that most people were happy with their experience, but also, lends itself that maybe the question should be explained a little more on the survey. This way, more constructive criticism of the process may occur.

The second open ended question asked the parents and participants to use three words to describe this process. There were 16 responses to this question, all of which were positive. The most common three words that were expressed were “fun” (31%), “good” (31%), and “nice” (19%). Three words stood out from the data set were given by one of the 14 year old participants. Those words were “I was brave.” These words were important in understanding how intimidating the audition process was even when the participant had joined the group in previous productions and all that auditioned were cast.

Finally, at the first practice, the participants were asked to provide a like and a dislike about the audition process. When given the opportunity to express likes and dislikes, responses were variable. The most common like was “getting to sing” (33%), “the cold read” (33%) , and “doing it” (22%). The most common dislikes were “location” (33%), “nothing” (33%), and “informed audition protocol” (22%). In regard to location, a few participants did not enjoy having to do the audition online (parent preference) or that they were done outside instead the in the church or on stage. This information was valuable in evaluating the changes that were made. The participants, generally, were positive about their experience.

4.0 Learning Actions

4.1 Discussion

This improvement study evaluated the effects of using an informed audition process to implement support strategies in order to increase the engagement and inclusive practices for individuals with disabilities. In comparing the results of the participants with disabilities to the results of individuals without disabilities, there is a definitive decreasing trend in off-task behaviors for all participants. These findings suggest that being informed of needs and supports prior to the start of auditions and applying those preferences can have a positive impact on the social and instructional environment.

The results of this study can be explained by the behavioral phenomenon of extinction burst. According to Cooper, Heron, & Heward (2019), when a procedure to increase desired behavior is executed, there is an increase in negative behavior. In an extinction procedure, only desired behaviors are being reinforced. In extinction burst, a person will engage in the problematic behavior more frequently to try to obtain previous reinforcers. After this extinction burst, a decrease or elimination of problematic behavior can be observed. This phenomenon helps to explain the observations and results of individuals without disabilities as well as those of participant A. Both exhibited an increase in behaviors from the baseline condition, and then, an immediate decrease in those behaviors. Mostly likely, with further data collection, the results of participant B will also mirror this phenomenon as it is exhibiting the same trend. The results of participant C also greatly align with this phenomenon. After consecutively attending sessions, his

behaviors were decreasing, but after a break from rehearsal (phase 4), an increase in behaviors was observed in the last support phase.

This improvement study predicted that the informed audition process would change the rehearsal environment, and this new environment would be viewed as favorable by its participants. In comparing the results of the participants, there is a definitive increasing trend of positive descriptions. These findings also suggest that being informed of needs and supports prior to the start of auditions and applying those preferences to the rehearsal process can have a positive impact on the social and instructional environment.

In addition to the favorable results of the study, these findings have a relevant impact of change on the organization. For instance, the informed audition process fills in the gaps in the understanding of the participants as an organization. The process eliminates the guessing game and streamlines supports effectively and efficiently within the organization. Going forward, through this process, a determination of what components and supports are needed to better aide our participants can be made.

When comparing this research study with results of studies within the literature, there were similar effects. This study incorporated many evidence-based practices explored by Niesyn (2009) such as specific praise, teacher directives, and predictable routines. When considering the effects of a predicable routine on the participants, these were found to be profoundly effective. Also, specific praise is the easiest intervention to implement, and its effects are long lasting (Niesyn, 2009). For instance, acknowledging Participant C for doing what he was supposed to be doing and not engaging in negative off-task behaviors such as rough housing increased the likelihood of Participant C doing what was expected.

Like Smart et al. (2018) and Levy, Robb, and Jindal-Snape (2017), this improvement study found that peer mediated strategies were effective in improving peer interactions necessary for successful inclusion. Often during break times, the participants would play together on the adjacent playground or spend time walking together. It was observed that these interactions allowed for all participants to foster friendships within the group. Observations of the rehearsal process also showed that they looked to each other for help before seeking the assistance of adult. They learned to also rely on and help each other like a team. At one point, participant A sought to help a kindergarten participant read his script.

When comparing this research study with Horner, Carr, Halle, Odom, and Wolery's (2005) quality indicators for single subject studies, the study presented some strengths. One strength was the description of the participants. The description of the participants and setting was thorough such that the study can be replicated with similar participants and within a comparable setting. One strength is the number of replications of experimental effect. While Horner et al. (2005) suggested three replications, in this design, four replications were completed. The replications within this study suggesting that use of an informed audition process to implement support strategies in order to increase the engagement and inclusive practices for individuals with disabilities.

While there were some strengths in the study, there were also weaknesses and limitations. One weakness was the sample size. The small sample size does not allow for generalization over broader populations. Another weakness was within the baseline condition. Although the study included a baseline condition, it failed to have multiple iterations of the baseline condition in order to establish a pattern of responding (Horner et al., 2005) from which to make predictions.

In addition to weaknesses, the study also presented some limitations. The biggest limitation was a result of the COVID-19 pandemic and social distancing protocols. Due to these restrictions,

the group had to go against its peer buddy policy of no siblings as peer supports to their brother or sisters.

Documenting participant voice presented its own trials and limitations. When working with students with varying verbal abilities, collecting opinions or any other response that may require the participant to reflect on, create, or choose something that is not already defined by a set of choices is difficult. Often younger participants and participants with disabilities struggled with producing one to three words to describe the rehearsal process. Frequently, the words that were chosen by these participants did not fit with the context of the work, and they could not define, explain, or elaborate on why they had chosen these words. Going forward, further consideration should be given to individuals that may present these deficits in verbal ability.

Lastly, the directing and collecting the data in vivo or in the moment presented its own challenges and limitations. It is likely that things were missed, not documented, or forgotten while other rehearsal processes were taking place. Perhaps, it would be beneficial to have an additional observer to collect data as well. This process would provide for interobserver agreement data (IOA) and would confirm that changes in behavior were more likely due to the interventions provided and not how the data was collected.

4.2 Next Steps and Implications

Based on the data collected from this improvement study, I have further questions about the process that may influence further iterations of the PDSA cycle. The data suggests that regular attendance may influence engagement in appropriate behaviors rather than an increase in negative/off task behaviors. Within the current improvement cycle, participant A and participant

C showed a definitive decrease in behaviors with repeated, consecutive attendance that would lend itself to the hypothesis that including those with disabilities in more rehearsals early on may decrease behaviors and increased engagement long term. This alteration would require an adjustment in how rehearsals are scheduled and conducted.

Another change going forward might include adding additional questions to the audition form. The first question that should added is one that I inadvertently excluded. There is usually a question that asks the participant what part in which they are interested. This information allows me to ensure that the participant gets the part they want to have (if qualified) or a comparable part. It has been noted, in previous productions, that having a part the one desire's or a comparable part increases the participants personal investment in the production.

The omission of the question actually posed a slight inconvenience this PDSA cycle. When participant A auditioned, he had wanted the part of Rainbow Fish. His mother let me know of his disappointment he had in his role. When I had responded to his mother, as I have had this discussion many times, I explained all of the reasons that factor into the parts participants get such as experience, size, and age. Participant A was a first timer, pretty small for ten years old, and the Rainbow Fish was supposed to be an older child (as per the script) and had 180 lines. Typically, the part would go to an older, taller child – in this case, a fourteen year old who had prior experience with the group. However, after my explanation, his mother informed me that his disappointment was because he wanted to be colorful. Unfortunately, he was cast as the sardine – the least colorful fish in the whole ocean. If I had known this prior, I could have made sure he had a part that was colorful enough.

Other questions to add to the audition form could be questions about behaviors such as known antecedents to behaviors and the typical behaviors displayed. These questions were not

included in this iteration. If the next PDSA cycle were to include these questions then, the director would know what types of behaviors to expect and implement antecedent strategies to reduce problematic behaviors such as aggression, anxiety, and transition resistance for specific participants. This issue presented itself during rehearsal when participant A consistently had an anxiety attack any time that we had to redo a section of the script. For instance, one antecedent strategy for this particular behavior would be to prepare him for this redo (verbally as well as visually) via a social story in advance so, he knew prior that we would be repeating some sections.

This study had many implications. The intent of this study was to influence one arm of the fishbone diagram: the audition process, but this one small change actually triggered a chain reaction of changes within the system. An unexpected result of this process was the creation of a definitive team of parents and participants. This process established parents as a critical team member, as well, as created a line of communication between staff, parents, and participants about the creative process, what was/was not working, and what to do going forward. This line of communication allowed parents to make suggestions and provide more information regarding supports and behaviors in unguarded and effective ways leading to a more supportive team approach within the system.

Another unanticipated result of the study was ritual habits and the empowerment of the participants. In establishing a consistent routine within the program, it allowed for participants to move along the production process without the influence of supervising adults. Older participants could help the younger participants get started if the director was in conference with a parent or delayed with a participant or with another production issue. Peers were also able to enact the immediate actions or next steps within the production process because they had already known what to expect. This empowerment of the participants allowed for them to continue the routine

even if it was stopped, interrupted, or absent such as starting the opening activity, finishing the opening activity, or getting together for the closing activity.

Further research should be done in the area of inclusion of individuals with disabilities within informal or out-of-school learning contexts. One of area of focus that would be beneficial would be evidence-based practices.

5.0 Reflections

As a leader and improver, I have learned many things about the change process. One thing that I learned and that has interested me about this study is the chain reaction of change. For some reason, I thought that in changing one thing that I would change that one thing and that would be it. However, change does not work like that. The intent of this study was to influence one arm of the fishbone diagram: the audition process, but this one small change actually had a ripple effect like that of a pebble in the stream. Each ripple moving one arm of the fishbone in a different direction causing small chain reactions of changes within the system.

These chain reactions have taught me to be mindful that change does not happen in silo or in a vacuum. While these changes are unexpected, I have learned that it is important to be prepared for and embrace these little gifts of change as they come. From this ripple effect, a parent team was created, participants were empowered, and as the director, I did not have to have my hand in every part of the production process. Through this improvement project and soliciting input from parents, communication lines were opened. Parents felt more comfortable with volunteering and much more was accomplished.

As a leader, this lesson has been a valuable one as far too often feel the need to control the outcome of everything, and that others are able to and willing to help and their input is not only valuable, but imperative.

As an improver, I also have learned that change is not a number. At the beginning of this study, I remember being so obsessive, to the point of inflexibility, about having a number assigned to my improvement goal. The nature of my job as special educator and what I know about goals, I had this idea that everything had to be quantified and assigned a number because that is the most

reliable and valuable way to measure change. Somethings cannot be summarized and quantified. This fact does not make the information acquired from these variables invaluable.

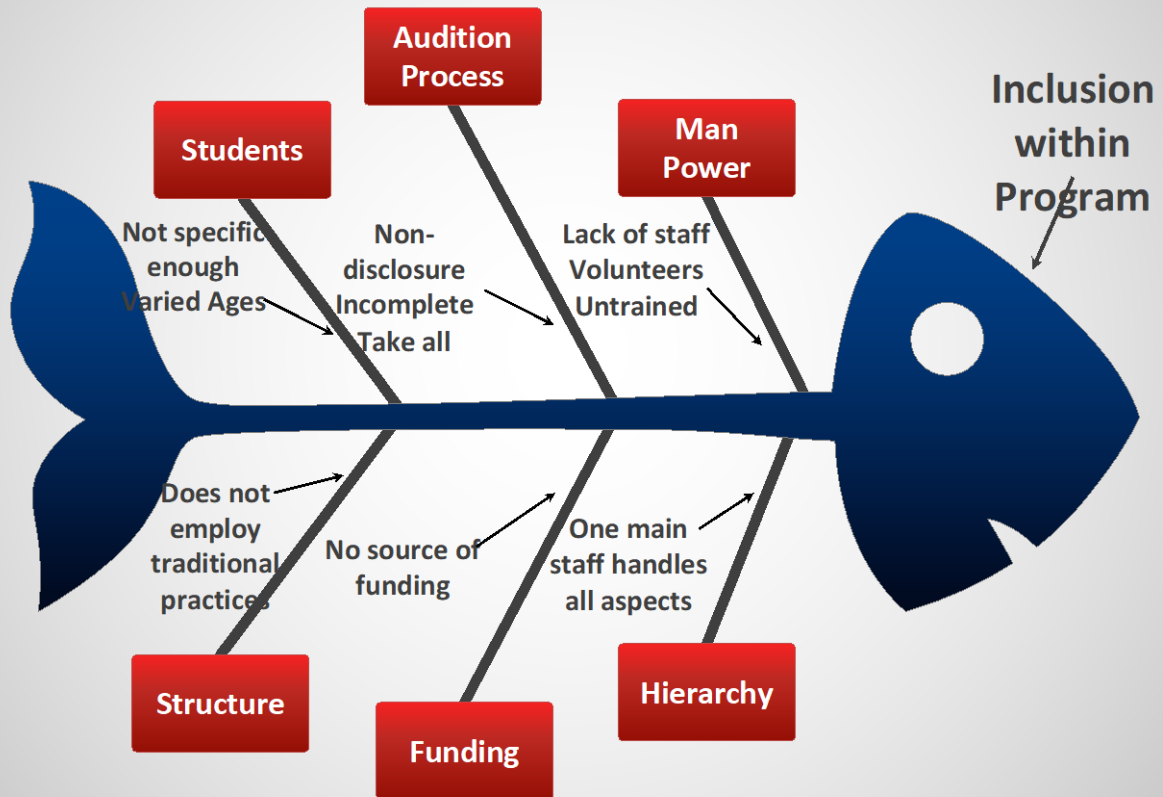
This lesson is an important one. Some of the most valuable information is what you can observe or what people can tell you about a process. You cannot assign a number to somebody helping another with reading his script or another person finding a process not particularly stimulating. Yet, this qualitative data is just as important as the quantitative, and in that respect, this process has been eye-opening. I plan to carry that knowledge with me going forward.

While improvement science probably would not have been my first choice as a research study, as a school practitioner, I have also learned a lot from this improvement process. For instance, there is something to be said about one, small, informed change. Ever since my first class on improvement science, “One Small Change” has kind of been my mantra such that I have implemented it in my classroom for the last two years. Although not as an improvement science study, I have used “one small change” and its principals to help staff change habits, students change emotional responses, and myself, navigate my grief experience. After we know our problem intimately, one, small, informed change is where we start. It is a building block.

I equate it to taking small bites out of a big problem. What one small bite can you take out of a problem that you can keep nibbling at in order to make larger, rippled changes in the future? It is much like the applied behavioral analysis (ABA) process, and it reminds me of a quote by Fred S. Keller, behavior analyst, about change. Maybe, he was right. Perhaps, as leaders, improvers, and scholarly practitioners, “if we all just keep nibbling, maybe we can change education” (Heyward & Dunne, 1993, p. 343).

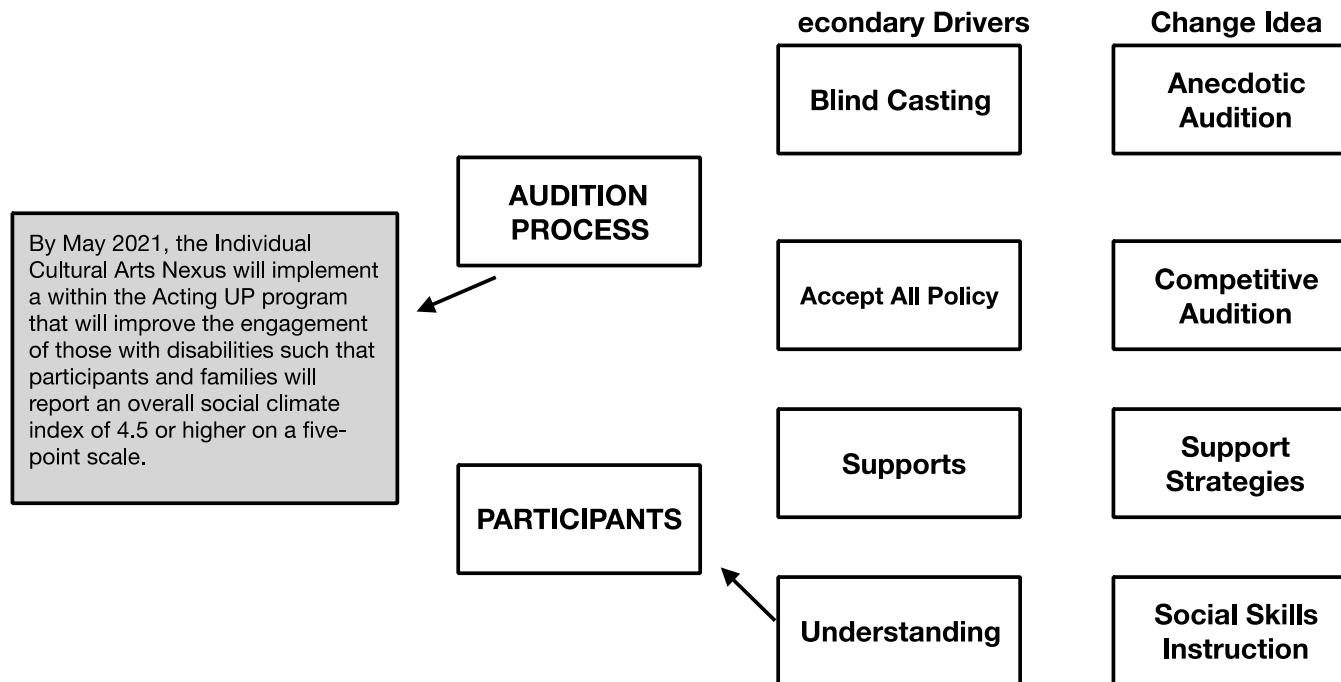
Appendix A Fishbone Diagram

Fishbone Diagram



Appendix B Driver Diagram

DRIVER DIAGRAM



Appendix C Audition Form

Appendix C.1.1 Audition Form Page 1

Audition Registration Sheet

Page 1 of 2

1. PERSONAL INFORMATION:

Name: _____ Grade: _____ Age: _____ Gender: _____

Parent's Name: _____

Address: _____ City: _____ Zipcode: _____

Phone Number: _____ Email: _____

2. EMERGENCY CONTACT:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

3. COSTUME SIZES:

TSHIRT SIZE: _____ DRESS SIZE: _____ PANT SIZE _____ SHOE SIZE: _____

4. ETHNIC ORIGIN: (Please specify your ethnicity - check all that apply)

_____ White _____ Hispanic or Latino _____ Black or African American

_____ Native American or American Indian. _____ Asian / Pacific Islander _____ Other

5. EDUCATIONAL SUPPORTS:

Does participant benefit from a 504 Plan or IEP during the school year? _____ Yes _____ No

6. PROGRAM SUPPORTS:

(Please place an X in the correct column to rate the following in terms of necessity)

<i>The participant requires or is used to</i>	NOT IMPORTANT	SOMEWHAT IMPORTANT	NEUTRAL	IMPORTANT	VERY IMPORTANT
An environment with timers and schedules					
An adult, peer, or sibling helping with prompts or directions					
Positive praise and reward systems					
Frequent breaks					
Visual or gestural cues for directions					
An environment of errorless learning.					

Appendix C.1.2 Audition Form Page 2

Audition Registration Sheet

Page 2 of 2

7. ADAPTATIONS:

(Please place an X in the correct column to rate the following in terms of ability - these are not requirements to participate)

<i>The participant.....</i>	NOT ABLE	SLIGHTLY ABLE	ABLE	COMMENTS
Can fasten buttons & zippers				
Can change clothes independently				
Can place shoes on correct feet and tie shoes				
Is able to read				
Can follow one step directives				
Can follow multistep directives				
Is able to use the bathroom independently				

8. SELF COMPETENCE/SELF CONFIDENCE SURVEY:

(Please have the participant answer the questions below)

	NOT TRUE FOR ME	SOMEWHAT TRUE FOR ME	NOT SURE	TRUE FOR ME	VERY TRUE FOR ME
I get along well with others.					
I can keep calm in stressful situations.					
I like to talk in front of groups of people.					
I get upset when things do not go my way.					
I like to try new things.					
I am as good as anybody else.					
I fail a lot.					
There are a lot of good things about me.					
I always try my best.					
I can do things as well as most people					

Allergies:

Appendix D Survey A

SURVEY A

PERSONAL INFORMATION:

Role: Parent _____ Participant _____
Age: _____ Gender: _____ Grade:(participant only) _____

Do you or (your child) benefit from a 504 Plan/IEP during the school year? ____ Yes ____ No

ETHNIC ORIGIN: (Please specify your ethnicity - check all that apply)

____ White ____ Hispanic or Latino ____ Black or African American
____ Native American or American Indian. ____ Asian / Pacific Islander ____ Other

AUDITION PROCESS QUESTIONS: (Please rate the following questions by putting an X in the column that best applies)

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The time it took to audition was reasonable.					
The experience made me feel confident and an important part of the team					
I understood the purpose of the audition activities.					
Based on the audition process, I believe I help will be provided if any one needs it.					
Overall, my experience was a positive one.					
I felt challenged by the audition changes.					
Overall, I was satisfied with my experience.					
How can we improve the audition process?					

ORGANIZATIONAL QUESTIONS:

What three words would you use to describe this group?

Is this your first experience with the group? ____ Yes ____ No

If no, how many performance have you participated in with this group?
____ Once ____ 2 or 3 times ____ 4 or 5 times ____ More than 5 times

Comments on your experience:

Appendix E Informed Audition Protocol

Informed Audition Protocol

Participant's Name					
Intraverbals					
1, 2, ____					
A, B, _____					
Ready, Set, ____					
A dog says ____					
You sing a ____					
What do you read?					
Where are the clouds?					
Echo "Say this....."					
Apple					
Hello, how are you?					
Where do I catch the bus?					
1- Step Directives					
Shake head "yes"					
Shake head "no"					
Hop like a bunny					
Multi-step directives					
Stomp your feet, Clap your hands					
Step right, step left					
Step forward, step back , jump					
Hands up, jump, clap hands					
Imitation " Do this"					
Touch head					
Arms Up					
Clap hands, touch head					
Clap hands, knock table, touch nose,					
Knock table, touch nose, clap hands, arms up					

Appendix F PDSA Cycle Form

Tester:	Megan D. Nelson	Date:	7/19/20
Change Idea:	To develop & implement anecdotic audition process		
Goal of the Test	To improve knowledge of needed supports/increase engagement and overall social climate index		

1. PLAN	
Questions:	Predictions:
How does participating in the new audition process affect the understanding of the needs of the individuals in the program?	This process may provide valuable information even if it does not change anything in the group.
How does this process affect the individuals' perceived self-competence/confidence?	This is something I am concerned about especially when focusing on needs or deficits. I am worried that the actor may feel less capable.
What impact does this process have on overall social, emotional and behavior outcomes?	I am unsure how this process will affect outcomes if at all.
How many participants will indicate need for supports if given the opportunity?	The amount of reporting may be overwhelming.
Details:	
Participants of all ages will participate in the new audition design at the beginning of the Fall Season 2020. The audition will inform director of supports needed by participants. The director will add additional supports before the first practice. Participants/parent will be surveyed about audition experience after the audition process at the first week of rehearsal. Participants will take part in interviews as well as a post survey.	

2. DO:
<p>Pre-Post Model: Survey: Beginning and End/Interview: Beginning and (2) Interim</p> <ul style="list-style-type: none"> Collect information on demographics Perceptions of self-confidence/competence Perceptions of the audition process Perceptions of the overall program and satisfaction <p>Observe and Reflect (at least 1 Per month)</p> <ul style="list-style-type: none"> Practice will be recorded Observe group rehearsals (usually one or two per month) Take data on: <ul style="list-style-type: none"> group cohesiveness, their ability to help each other, other changes

3. STUDY
What were the results:
Analysis: Longitudinal Changes pre and post: overall, gender, age, and ability. Uses longitudinal changes in observations/reflections or lack thereof.
What did you learn?
I am hoping to acquire information that informs the next cycle and the organization overall.

4. ACT
<p>For next cycle, review the data and tweak the process using what is learned.</p> <p>The protocol change will be restudied.</p>

Appendix G Data Collection Form

DATE: _____ TIME: _____

REQUIRED ATTENDANCE: (WHO WAS CALLED)

ALL	A	B	C	D	E	F	G	H	I
J	K	L	M	N	O	NOTES:			

IN ATTENDANCE (WHO SHOWED UP)

ALL	A	B	C	D	E	F	G	H	I
J	K	L	M	N	O	NOTES:			

1. SUPPORTS STUDY:

	SUPPORTS	PROMPTS TO TASK	TASK TIME	PROMPTS DURING UNSTRUCTURED TIME
A				
B				
C				
D				

OVERALL GROUP BEHAVIORS

Avoidance Behaviors	
Negative Behaviors	

2. OPEN ENDED QUESTION RESPONSE

QUESTION: ONE THING THEY LIKE/DIDN'T LIKE ABOUT _____ RESPONSES:

QUESTION: TWO WORDS TO DESCRIBE THE PROCESS RESPONSES:

3. GENERAL OBSERVATIONS:

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