

# Using Behavioral Intervention and Threat Assessment Teams to Enhance School Safety, Equity, and Wellness

AASA Conference 2023

# Imagine a scale of behavior



1s representing **low level behavior** (sad mood) and  
10s representing **high level behavior** (pulls a gun out at school)

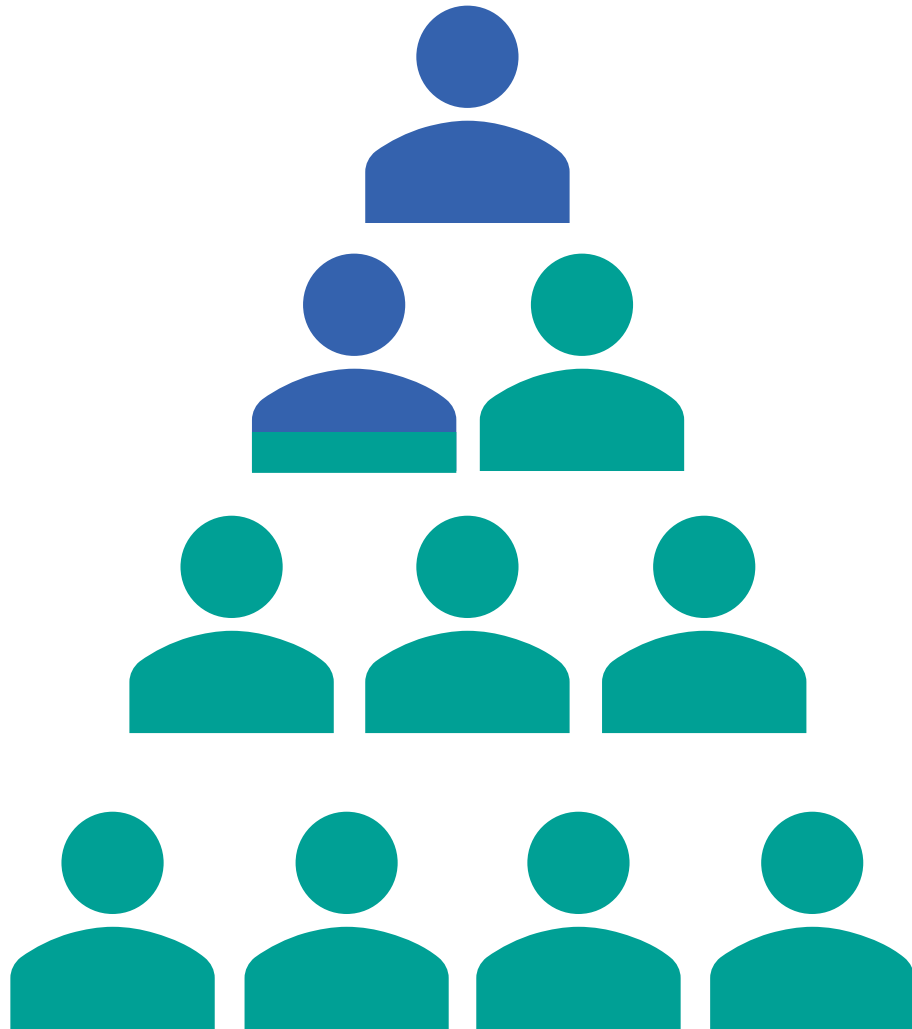


We all understand the importance of reporting higher end behaviors...

It's the lower end behaviors that tend to get brushed off, excused away, referred to an isolated resource, etc.



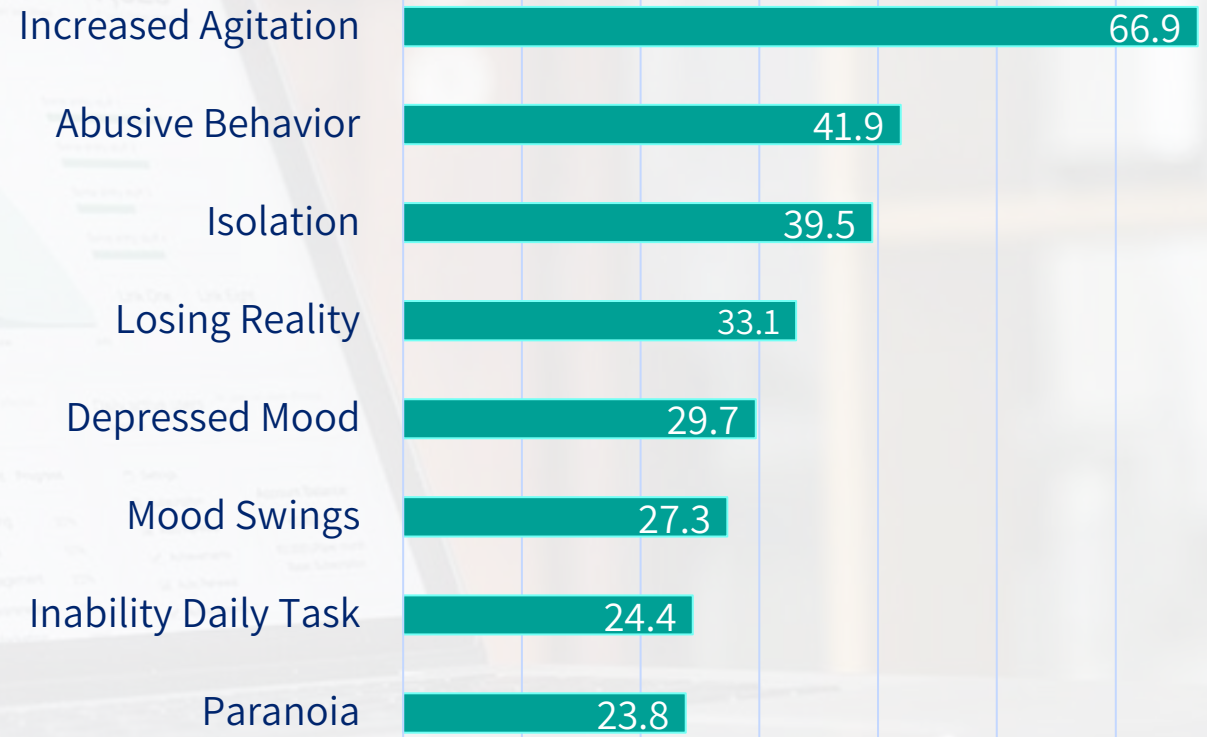
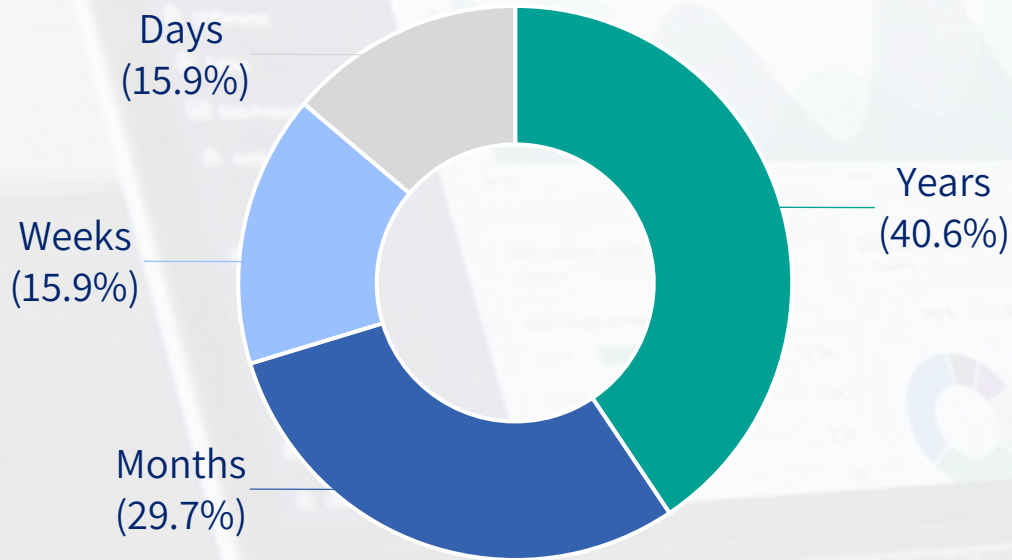
But these are the behaviors that help us prevent harm or violence before it ever occurs.



87% of school shooters  
were in a *noticeable crisis*  
prior to the shooting

# SIGNS OF A CRISIS IN A MASS SHOOTER

When were they in crisis before the shooting?



“Most shooters who were in crisis exhibited 1-4 symptoms. However, over a third of shooters showed 5 or more signs of a crisis”

- The Violence Project



**0 Signs**  
**18%**



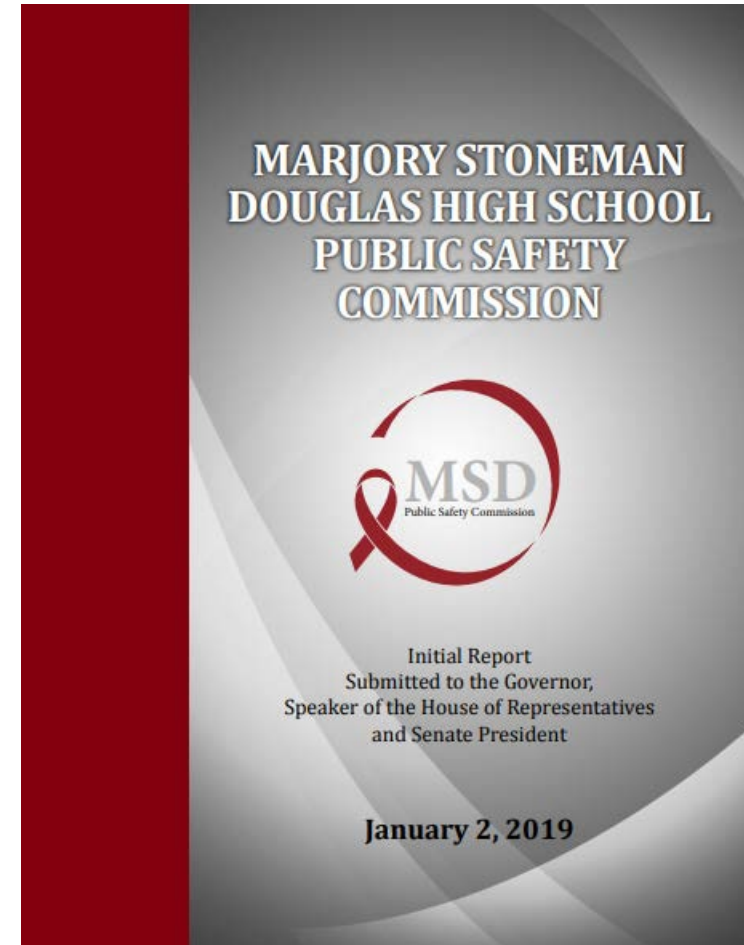
**1-4 Signs**  
**43.15%**



**5+ Signs**  
**37.7%**

# MARJORY STONEMAN DOUGLAS HIGH SCHOOL SHOOTING

“At least 30 people had knowledge of Cruz’s troubling behavior before the shooting that they did not report or they had information that they reported but it was not acted on by people to whom they reported their concerns”





# WHAT TEAMS EXIST FOR SUPPORT

## PBIS/MTSS

Responsible for addressing behavioral concerns and other issues for a positive school climate.

## Suicide Response Team

School and district administrators who come together in response to student suicidal ideation.

## Behavioral Health Team

Typically a team for the departmental unit overseeing clinical care.

## Student Intervention Team

Like PBIS teams, SITs address behavioral, academic, or social concerns to get students the support they need.





# REDUCING THE NUMBER OF TEAMS

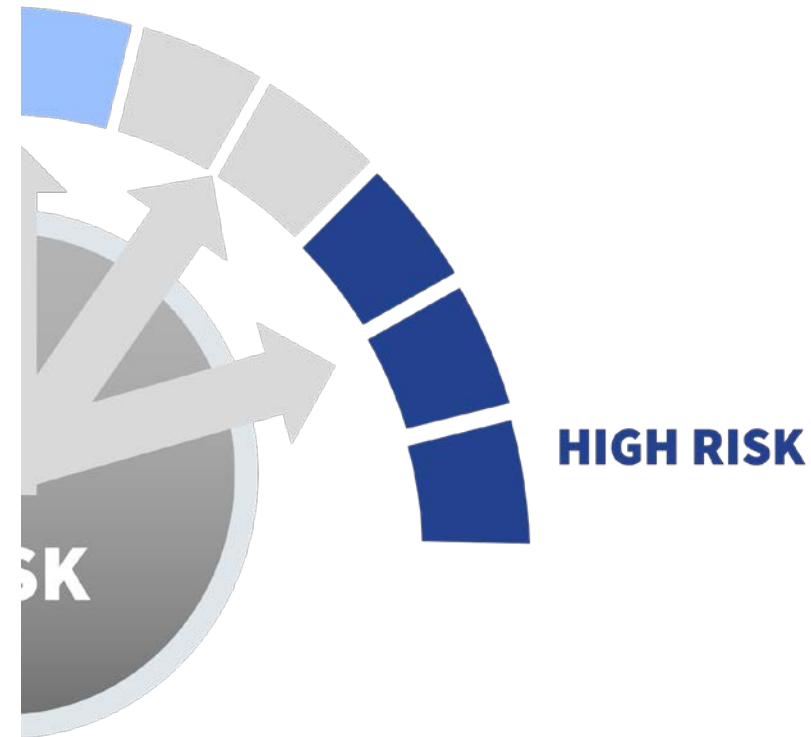


# REDUCING THE NUMBER OF TEAMS



PBIS/MTSS and SITs tend to focus on early intervention, low threat/risk concerns.

# REDUCING THE NUMBER OF TEAMS

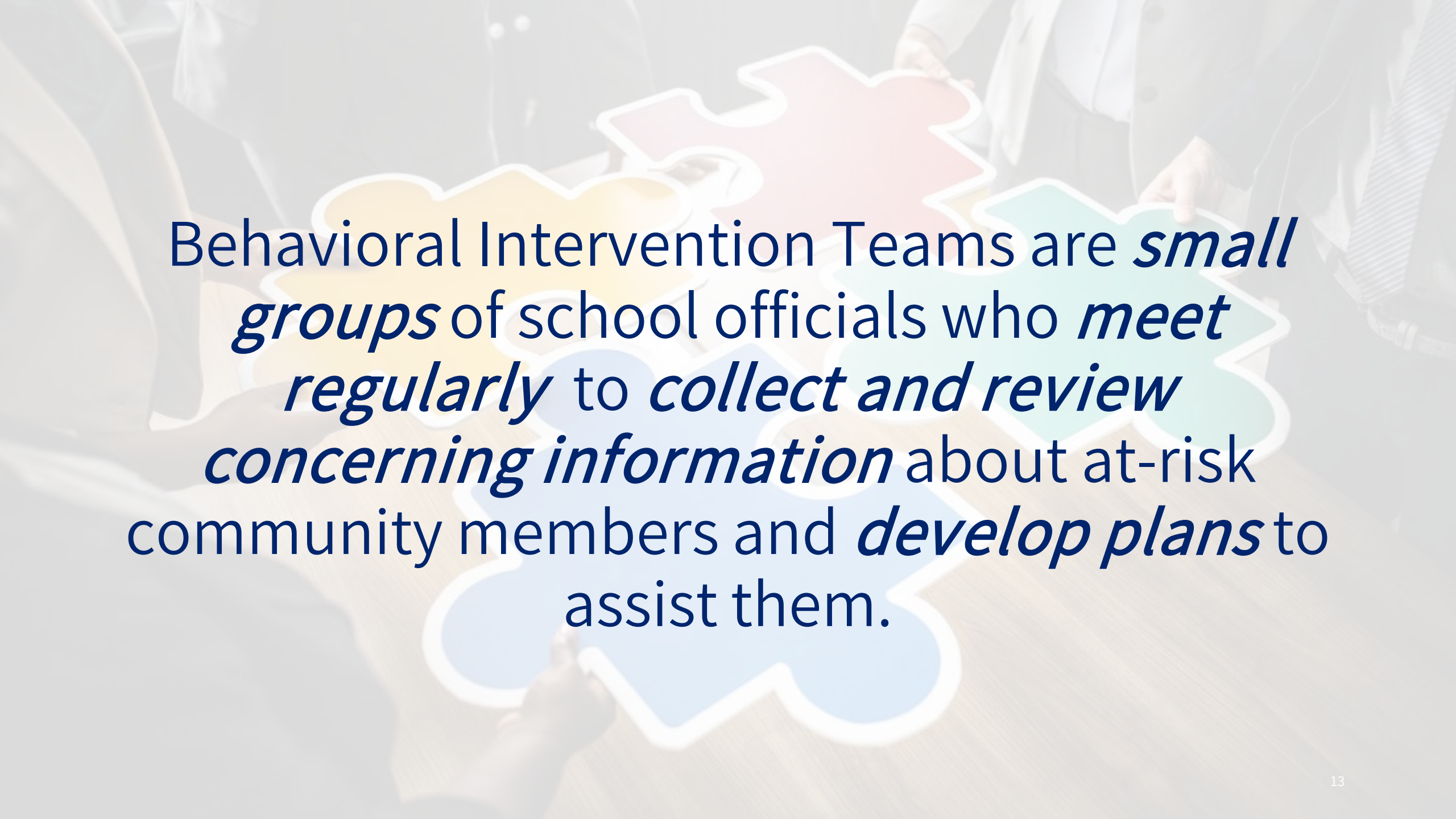


SRTs and TATs tend to focus on responding to high risk behaviors including threats of harm to self or others.

# REDUCING THE NUMBER OF TEAMS



One integrated team that responds across the spectrum of risk including early intervention concerns and threats to self or others.



Behavioral Intervention Teams are *small groups* of school officials who *meet regularly* to *collect and review concerning information* about at-risk community members and *develop plans* to assist them.





# Behavioral Intervention Team

## Interventions



- Implementation of SEL supports
- Multi-Tiered System of Supports (MTSS)
- Suicide Assessment Team
- Social Service Resources
- Positive Behavioral Interventions and Supports (PBIS)
- Case Management Services or other 1:1 Supports



# WHO IS ON A BIT?

BITs don't require additional staff!



Principal



Mental Health  
Representative



SRO/LEO



Discipline  
Representative

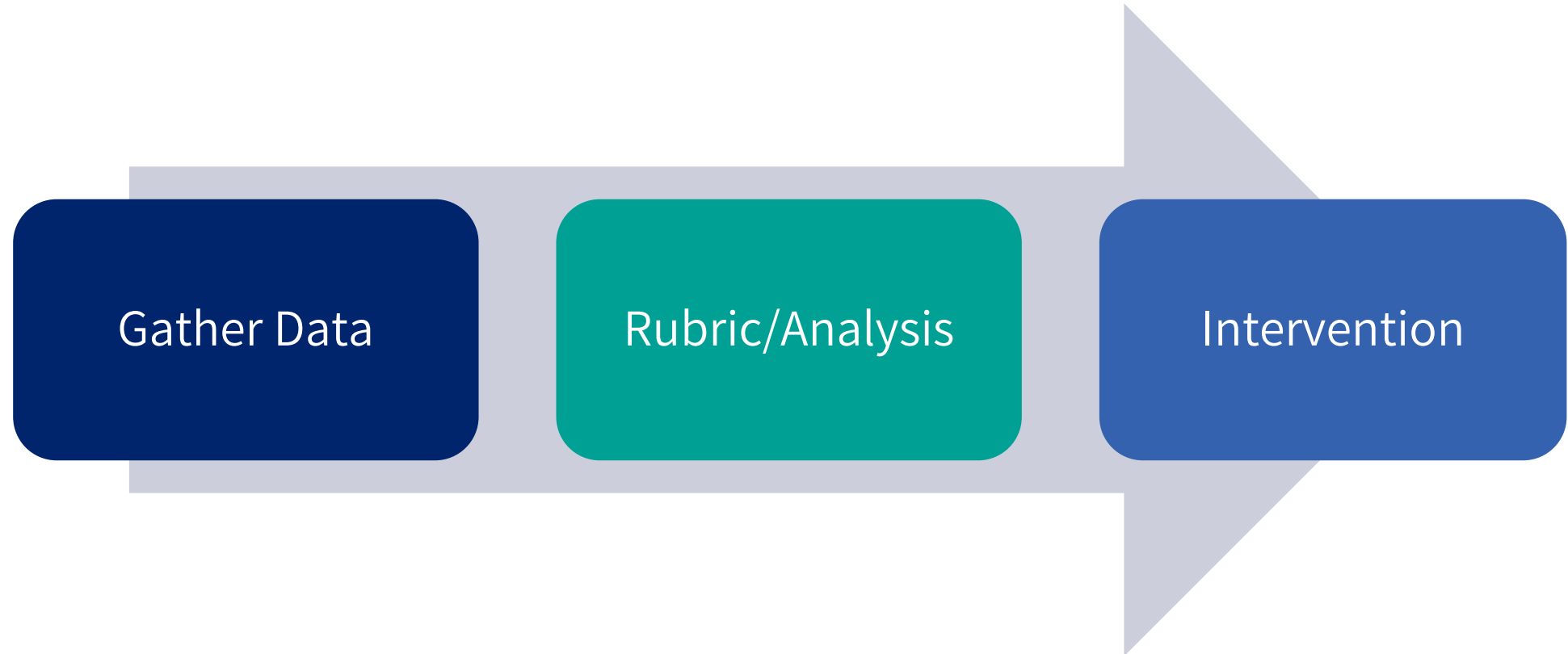


Special Education  
Representative



Social Worker/SEL  
Coordinator

# WHAT DOES A BIT DO?



## Gather Data

- Train on our communities on indicators of distress, crisis, and threat.
- Establish a team who meets regularly to gather data.
- Share information at the team meetings to reduce silos.

## Rubric/Analysis

- Train the team to use an objective rubric to triage referrals and determine level of risk.
- In cases of higher risk or threatening behavior, conduct a violence risk assessment.

## Intervention

- Interventions respond to risk level.
- Connect to existing resources or interventions within the MTSS or PBIS framework: SEL, counseling, check in/check out, etc.
- Leverages relationships and engages skill building.

# STANDARD 11: OBJECTIVE RISK RUBRIC

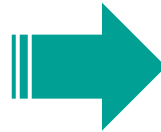


- **10x** NABITA Risk Rubric
- **25x** Violence Risk Assessment of the Written Word (VRAWW)
- **50x** Structured Interview for Violence Risk Assessment (SIVRA-35) and Non-Clinical Assessment of Suicide (NAS)

# OBJECTIVE RISK TOOLS

## RISK RUBRIC

NABITA Assessment Tool 



- **10x** NABITA Risk Rubric
- **25x** Looking Glass
- **50x** Structured Interview for Violence Risk Assessment (SIVRA-35) and Non-Clinical Assessment of Suicide (NAS)



**D-SCALE**

Life Stress and Emotional Health

**DECOMPENSATING**

- ▲ Behavior is severely disruptive, directly impacts others, and is actively dangerous. This may include life-threatening, self-injurious behaviors such as:
  - ▲ Suicidal ideations or attempts, an expressed lethal plan, and/or hospitalization
  - ▲ Extreme self-injury, life-threatening disordered eating, or other life-threatening risky behavior
  - ▲ Profoundly disturbed, detached view of reality and at risk of grievous injury or death. Lack of ability to regulate emotion, cognition, self, behavior, and relationships
  - ▲ Actual affective impulsive violence or serious threats of violence such as:
    - ▲ Repeated severe attacks on others or an attack with weapon such as a pencil
    - ▲ Extreme aggression such as beating or non-consensual choking
    - ▲ Making threats that are concrete, consistent, and plausible
    - ▲ Impulsive stalking behaviors that present a physical danger

**DETERIORATING**

- Destructive actions, screaming or aggressive/harassing communications, rapid/odd speech, extreme isolation
  - Responding to voices, extremely odd behavior, engagement in high risk behavior (ex: alcohol, drug, sex); troubling thoughts with paranoid/delusional themes; increasingly medically dangerous bingeing/purging
- Suicidal thoughts that are not lethal/imminent or non-life-threatening self-injury
- Engaging in, or victim of, repetitive verbal aggression, social aggression, cyberaggression, or bullying behaviors such as public humiliation or embarrassment, spreading rumors/lies to cause harm, demeaning words or actions, etc.
- New aggressive behavior against others not seen before, escalation in behaviors, harming animals outside of hunting or survival
- Threats of affective, impulsive, poorly-planned, and/or emotionally-driven violence
  - Vague but direct threats or specific but indirect threats; explosive language
  - Stalking behaviors that do not harm, but are disruptive and concerning
  - Minor damage to property of school or others, theft of property
  - Threatening to fight others
  - Limited physical aggression (pinching, slapping, shoving, or kicking)

**DISTRESSED**

- Behavior that concerns others or an impaired ability to manage emotions and actions. Possible presence of stressors such as:
  - Managing mental illness, disordered eating, bed wetting, poor parental supervision, poor attendance or involvement at school, etc.
  - Engaging in, or victim of, limited bullying behaviors, verbal aggression, social aggression, or cyberaggression such as purposeful exclusion, teasing, or name-calling. Student has difficulty making friends or interacting socially or difficulty defending self
  - Difficulty coping/adapting to situational stressors, parental conflict, housing/food instability, death in the family. Behavior may subside when stressor is removed, or trauma is addressed/processed
- If a threat is present, the threat is vague, indirect, implausible, and lacks detail or focus

**DEVELOPING**

- ◆ Experiencing situational stressors but demonstrating appropriate coping skills
- ◆ Often first contact or referral to the BIT/CARE team
- ◆ Behavior is appropriate given the student's age, circumstances, and context
- ◆ No threat made or present

**OVERALL SUMMARY****CRITICAL**

4

In this stage, there is a serious risk of suicide, life-threatening self-injury, life-threatening risk-taking (ex. pressing on another student's chest until they pass out, jumping from dangerous height on playground, playing pinfinger or bishop knife game). They may display racing thoughts, life-threatening substance use or dependence, intense anger, and/or perceived unfair treatment or grievance that has a major impact on the student's academic, social, and peer interactions. The individual has clear target for their threats and ultimatums, access to lethal means, and an attack plan to punish those they see as responsible for perceived wrongs. Without immediate intervention (such as an SRO, law enforcement, or psychiatric hospitalization), it is likely violence will occur. There may be leakage about the attack plan (social media posts that say, "I'm going to be the next school shooter," or telling a friend to avoid coming to campus on a particular day). There may be stalking behavior and escalating predatory actions prior to violence such as intimidation, telegraphing, and "test-runs" such as causing a disruption to better understand reaction time of emergency response.

**ELEVATED**

3

Behavior at the elevated stage is increasingly disruptive (with multiple incidents) and involves multiple units such as student discipline, SRO/law enforcement, and counseling. The student may engage in suicidal talk, self-injury, and/or substance use or abuse. There may be acts of affective violence, often emerging as the first time an individual engages in such violence. Threats of violence and ultimatums may be vague but direct, or specific but indirect. A fixation and focus on a target often emerge (person, place, or system) and the individual continues to attack the target's self-esteem, public image, and/or access to safety and support. This may be towards a teacher, coach, or other authority figures. Others may feel threatened around this individual, but any threat lacks depth, follow-through, or a narrowing against an individual, office, or community. More serious social, mental health, academic, and adjustment concerns occur, and the individual is in need of more timely support and resources to avoid further escalation. Conditional ultimatums such as "do this or else" may be made to teachers, peers, coaches, and staff.

**MODERATE**

2

Prior to this stage, conflict with others has been fairly limited. The hallmark of moderate is an increase in conflict with others through aggressive speech, actions, and mannerisms. They may become frustrated and engage in non-verbal behaviors or begin to post things on social media, put up posters around school, or storm away from conversations. Stress, illness, lack of friends, and support are now becoming an increasing concern. The individual may be tearful, sad, hopeless, anxious, or frustrated. This may be caused by difficulty adjusting, dating stress, failure in class assignments, and/or increasing social isolation. This is beyond the developmentally appropriate fluctuation in emotion.

**MILD**

0/1

The student here may be struggling and not doing well. The impact of their difficulty is limited around others, with the occasional report being made to the BIT/CARE team out of an abundance of caution and concern rather than any direct behavior or threats. They may be having trouble fitting in, adjusting to classes, making friends, or may rub people the wrong way. They alienate others through their thoughts or mannerisms, and there may be minor bullying and conflict. With support and resources, it is likely the student will be successful adapting and overcoming obstacles. Without support, it is possible they will continue to escalate on the rubric.

4

**E-SCALE**

Hostility and Violence to Others

**EMERGENCE OF VIOLENCE**

- ▲ Behavior is moving towards a plan of targeted violence, sense of hopelessness, and/or desperation in the attack plan; locked into an all-or-nothing mentality
- ▲ Increasing use of military and tactical language; acquisition of costume for attack
- ▲ Clear fixation and focus on an individual target or group; feels justified in actions
- ▲ Attack plan is credible, repeated, and specific; may be shared, may be hidden
- ▲ Increased research on target and attack plan, possibly developing schematics or detailed floorplans, employing counter-surveillance measures, access to lethal means; there is a sense of imminence to the plan
- ▲ Leakage of attack plan on social media or telling friends and others to avoid locations
- ▲ Killing of animals outside of hunting, displaying kills, practicing skills to cause lethal harm

**ELABORATION OF THREAT**

- Fixation and focus on a singular individual, group, or department; depersonalization of target, intimidating target to lessen their ability to advocate for safety
- Seeking others to support and empower future threatening action; extremist peers or adults may exploit vulnerability and move them toward action; encouraging violence; further isolation and/or group forming
- Use of graffiti or other artistic, divisive writings or projects that can be seen as approach behaviors (with narrowing focusing to real life people or place they have connection)
- Harming or intimidating animals or those seen as "less than" as practice
- Threats and ultimatums may be vague or direct, but are motivated by a definitely hardened viewpoint; potential leakage around what should happen to fix grievances and injustices
- There is rarely physical violence here, but rather an escalation in the dangerousness and lethality in the threats; they are more specific, targeted, and repeated.

**ESCALATING BEHAVIORS**

- Driven by hardened thoughts or a grievance concerning past wrongs or perceived past wrongs; increasingly adopts a singular, limited perspective
- Increased isolation from others; or joining a group with shared marginalization within the community (outsiders)
- Writing in class assignments that highlights violence or negative themes that is incongruent with the assignments
- When frustrated, storms off, disengages, may create signs or troll on social media
- Frequent interruptions during class as they are vocal about their point of view
- Argues with others with intent to embarrass, shame, or shut-down
- Drawing or doodling violent themes or scenes that are shared more directly with others for a reaction
- Physical violence, if present, is impulsive, non-lethal, and brief; may seem similar to affective violence, but driven here by a hardened perspective rather than mental health and/or environmental stress (ex: throwing cell phone on ground or slamming lockers while storming off)
- Engages in and/or is victim of verbal, social, or cyber aggression such as exclusion,

**EMPOWERING THOUGHTS**

- ◆ Passionate and hardened thoughts; typically related to religion, politics, academic progress, money/power, social justice, sports involvement, or relationships; may echo parents' beliefs
- ◆ Expression of differences with others outside of normal, developmental thoughts and behaviors
- ◆ Drawing or doodling violent themes or scenes without specific reference to someone or someone in their life
- ◆ Rejection of: alternative perspectives, critical thinking, empathy, or perspective-taking
- ◆ Narrowing on consumption of news, social media, or friendships; seeking only those who share the same perspective
- ◆ No threats of violence

TRAJECTORY?

BASELINE

TRAJECTORY? National Association for Behavioral Intervention and Threat Assessment

# VRA TOOLS

## VIOLENCE RISK ASSESSMENT OF THE WRITTEN WORD (VRAWW)

NABITA Assessment Tool



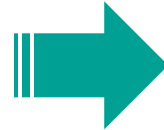
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# VRA TOOLS

## SIVRA-35

NABITA Assessment Tool 

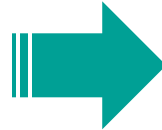


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# VRA TOOLS

## NAS

NABITA Assessment Tool



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