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>> Randi Turner: All right. It's 10:00. So we're going to go ahead and get started. My name is Randi Turner. I'm with the governor's office, the committee on people with disabilities. We have with us today Dr. Ross Greene who is going to talk about moving forward power and control to collaboration and problem solving, about kids that may have behavior challenges and ways to approach that.

>> Randi Turner: The governor's committee on people with disabilities is composed of five staff that work in the office and we do things that are assigned to us by the committee members that are appointed by the governor. There are 12 individuals appointed. Seven of those individuals must be people with disabilities. We currently don't have any vacancies but are always taking applications. So if you go to gov.texas.gov you can click on the appointments page and apply if you are interested. We also have a position vacant that is an

outreach coordinator. So if you are interested in that position we can send you the link to the information at gcpd@gov.texas.gov. I'm going to turn this over to Dr. Greene, but now I cannot see my record button.

>> Recording in progress.

>> Randi Turner: So good morning, everyone. And welcome to the accessibility and disability rights policy series. Today we have with us Dr. Greene with livesinthebalance.org and I'm on the governor's committee with people with disabilities. So I'm going to go ahead and turn it over to Dr. Greene. He's got control of the mouse now. And we'll get started. Thank you for joining us today.

>> Ross Greene: Good morning, everybody. I'm glad I have control of the mouse, as you're hearing I do not have control of the dog. I'm doing this from my home office, so there's a chance that you will hear some barking. She's a barker.

What you're going to be hearing about from me for the next 75 minutes, because we want to leave 15 minutes for questions, is the model of care that I developed called Collaborative and Proactive Solutions. You may have read about it previously in my books, "The Explosive Child" or "Lost at School" or "Lost and Found." The subtitle is moving from power and control to collaboration and problem solving. Why would we want to do that? Because power in control methodologies have not been working well at all for the kids to whom they are most frequently applied. Those with social and emotional

behavioral challenges, so we really don't have a lot to lose by moving away from power and control methodologies toward an approach that is more collaborative and more aimed at solving the problems that affect their lives.

Now, I am going to give you an intro here but the place you want to go after I'm done is that website up there on the lower left-hand corner of the slide, livesinthebalance.org. That is the website of the nonprofit that I founded, Lives in the Balance. Lots and lots of free resources on that website, podcasts, streaming video, you name it, to take you beyond what I will be describing to you this morning. But 75 minutes is great for an intro.

If we are going to move from power and control to collaboration and problem solving, we're going to need to make some paradigm shifts. There are five of them. And they are the most important thing I'm going to be covering during this presentation. I don't put them in rank order. They're just in the order that it's easiest for me to talk about them. Although number one is a big one. While many of us, me included, were trained to primarily focus on the concerning behaviors of kids and we were trained in strategies for modifying those behaviors, that's not what you're doing in this model. In this model you are, instead, focused on the problems that are causing those behaviors and solving them. This is the problem solving model, not a behavior modification model. The minute I say that a very common and very important question pops up, if we're not busy modifying the kid's behavior, how will the behavior improve? Well, what the accumulated research on the model tells us, and there's fair amount of it at this point, evidence-based model, is that when you are busy solving the problems that are causing those behaviors, in the ways that you are

about to hear me describe, the behaviors improve every bit as much as they would have if all you were busy doing was modifying the behaviors. But, if all you're busy doing, yes, at the age of 63 my voice still cracks, not that often, if all we're busy doing is modifying the behaviors, the problems that are causing those behaviors don't get solved. You might be wondering what kind of problems are we talking about here? Well, at home we're talking about seemingly mundane problems like difficulty brushing teeth before going to bed at night, difficulty getting off the Xbox to come in for dinner, difficulty coming in on time for curfew. Those are some home-based problems.

At school it might be things like difficulty coming back into the classroom after recess, difficulty completing the double-digit division problems on the worksheet in math, difficulty coming to school, difficulty staying awake during science class. Those are some of the problems that are causing concerning behaviors at school. In this model, that's what you're focused on. The problems and solving them. You are not focused on the concerning behaviors that are being caused by those problems and modifying them.

Now, next question. What behaviors? Well, we could slice the pie of concerning behaviors as researchers sometimes do into the categories of internalizing and externalizing. We could slice the pie as the trauma-informed care folks do into fight versus flight. We could slice the pie as many mental health professionals do by psychiatric diagnosis. Of course psychiatric disorders are just long lists of concerning behaviors that are thought to cluster together. I'm actually not a big category guy but if I was going to categorize concerning behaviors I would use two categories. Lucky and unlucky. Which,

by the way, is an artificial distinction except for one very important part. How we treat them. What are lucky ways of communicating? Oh, by the way, before I tell you about lucky and unlucky, what is behavior? What are concerning behaviors in this model? We've all heard the expression behavior is communication. Now let's be more specific about that. In this model, concerning behavior is simply the signal, the fever, the means by which the kid is communicating that there is an expectation the kid is having difficulty meeting. That's all concerning behavior is. Whether it's lucky or unlucky.

What are lucky ways of communicating that you're having difficulty meeting certain expectations, not going to be exhaustive here but a sampling. Whining, pouting, sulking, withdrawing, crying. Why are those ways of communicating that you're having difficulty meeting certain expectations lucky? Well, those ways are not going to get you popped into time-out. Not going to get you held in from recess, held after school, detention, suspension, expulsion, hit, as in on the butt, which is very popular in households throughout North America. But as I'm sure many of you know also still popular in the public schools of Texas where corporal punishment is still legal and practiced. One of only 19 states where that's still true. Not going to get you pinned to the ground by two to four big adults in what is known as a restraint. Not going to get you thrown into a locked door, blocked padded room, known as a seclusion. Not going to get you arrested at school. But best of all, those lucky ways of communicating that you're having difficulty meeting certain expectations are highly likely to elicit empathy, nurturance, support from your caregivers. Now, that's a lucky kid. It's also not the kind of kid I've been working with for my entire career. I've been

working with the unlucky variety.

What are unlucky ways of communicating that you're having difficulty meeting certain expectations? Once again, not going to be exhaustive here, but here we go. Screaming, swearing, hitting, spitting, kicking, biting, throwing, destroying, running, there's worse. Why are those ways of communicating that you're having difficulty meeting certain expectations unlucky? Well, those ways at the mild end are likely going to get you popped into time-out, held from recess, after school, now we're getting a little less mild. Detention, suspension, expulsion, hit, pinned, thrown, arrested, but worst of all, those unlucky ways of communicating that you're having difficulty meeting certain expectations are far less likely to elicit empathy, nurturance, support from your caregivers, even though the field of developmental psychopathology has been telling us for a very long time that whether you are lucky or unlucky, your concerning behavior is communicating the exact same thing, there's an expectation you're having difficulty meeting. Once again, in this model you are focused on those expectations, not the concerning behaviors that are being caused by those expectations.

You might be wondering why have we been so focused on behavior for so long? Because a very long time B.F. Skinner told us over-behavior is the only thing that's observable, only thing that's objective, the only thing that's quantifiable and B.F. Skinner did say that, but we often forget that B.F. Skinner also talked every bit as much about the conditions in which those concerning behaviors occur. By the way, are just as observable, just as objective, just as quantifiable. In this model you're focused on those conditions, except we don't

call them conditions in this model, not allergic to the term, just not what we call them. We also don't call them antecedents, which is a synonym. What are the two terms we use to refer to what B.F. Skinner referred to as conditions or antecedents, unmet expectations, great synonym because what are the conditions in which all human beings exhibit concerning behaviors? Conditions in which we are having difficulty meeting certain expectations. So one expectations is great synonym but the preferred term and the term I'll be using for the next hour and a quarter is unsolved problems. Unsolved problems. Also known, by the way, as problems that have yet to be solved. Also known, by the way, as problems that are waiting to be solved. That's what you're focused on in this model.

Now, as you might imagine, if we're going to be focused on unsolved problems, I've already given you a sampling of what those could be, of course the list is endless for what it could be, they're just expectations that kids are having difficulty reliably leading. If we're going to be focused on expectations, instead of the concerning behaviors that are being caused by those unmet expectation, unsolved problems, we are going to need different assessment practices. I think that one of the biggest cracks in our approach to helping kids with concerning behaviors is what it is that we're focused on. And the assessment methodologies that point us toward focusing on concerns behavior. What do we tend to do in the assessment department when we're dealing with a kid who has concerning behaviors? We assess the kid's concerning behaviors. We do behavior checklist, behavior observations, we do a functional behavior assessment, all so that we can come up with something known as a behavior

plan, all focus and the signal, all focused merely on the means by which the kid is communicating that they are having difficulty meeting certain expectations, but not focused on the expectations the kid is having difficulty meeting.

In this model we use an instrument called the assessment of lagging skills and unsolved problems to give us the information that's been missing. I'll be introducing you to the assessment of lagging skills and unsolved problems before we're done. That's paradigm shifting component number one. As you can tell, it's a big one.

Here's paradigm shifting component number two. Now that we are in the problem solving business, we need to think about what kind of problem solvers we want to be. We adults tend to be real keen on problem solving of the unilateral kind. That's where the adult decides what the solution is and imposes it on the kid. It's also not what you're doing in this model. In this model we operate on a very important principle. You want to solve a problem with a kid, you're going to need a teammate. You're going to need a partner. Who is your partner? The kid. And by the way, generally speaking, that kid is going to be delighted to help you out. That kid has been wondering for a very long time, how come we adults keep trying to make things better without the kid's input, without the kid's involvement, without the kid's ideas, without the kid's sign-off. This is problem solving of the collaborative kind. It's something you're doing with the kid, not to the kid.

Now the minute I say that, some other very good questions tend to pop up. What if the kid won't talk? Oh, we solve problems collaboratively with reluctant talkers all the time. We find reluctant talkers will participate so long as we're not

trying to talk with them about their concerning behavior and instead are trying to talk with them about the problems that are causing their behavior. Generally speaking, they'll participate. What about kids who are non-speaking? Solve problems collaborative with non-speaking kids all the time. It's not that they're not communicating. It's that they are communicating in ways that are not the same as our preferred modality, the spoken word. But if they're communicating, they can certainly communicate about unsolved problems and potential solutions. There's paradigm shifting component number two. Not only are you a problem solver in this model, you are a collaborative problem solver.

Paradigm -- oops. Clicked twice because it didn't look like it was going. Paradigm shifting component number three is a big one. Now that we are solving problems and now that we are solving problems collaborative we've got to think about our timing. As you all know, a great deal of the intervention that takes place for kids with concerning behaviors takes place in the heat of the moment. Emergently, reactively, after a behavior has occurred a concerning behavior, which occurs way after the unsolved problem that caused that concerning behavior. If you're intervening after the behavior, you're late. You'll see what I mean by late on the next slide. 99.9% of what you're doing in this model is planned, proactive. Some other questions are going to pop up the minute I say that, like how can we be planned and proactive when we never know when the kid is going to get upset? When we never know when the kid is going to struggle? When the kid is so unpredictable? Here are the answers. The kid is not unpredictable. You know exactly when the kid is going to get upset. You know exactly when the kid is going to struggle if you answer two

questions right up front. The very two questions that are answered by the assessment of lagging skills and unsolved problems, and those two questions are, why and when. As in, why do some kids respond so poorly to problems and frustrations? Why is this kid responding so poorly to the problems and frustrations? When do kids exhibit concerning behaviors? When is this kid exhibiting concerning behaviors? All right. Let's start answering questions.

The answer to the question why has been provided to us by the research that has accumulated on kids with concerning behaviors over the last 40 to 50 years. Believe it or not, 40 to 50 years of research can be summarized in one sentence. Here it goes. Why do some kids respond so poorly to problems and frustrations? Because they're lacking the skills to respond more adaptively. Keyword "skills." Missing word "motivation ." There isn't a single study, not one, telling us that kids with concerning behaviors are responding poorly to problems and frustrations because they're poorly motivated. Which should cause us to ponder, then why have we been so busy applying motivational strategies to kids with concerning behaviors? If unmotivated is not what they are.

A few possibilities to the answers for those questions. Number one, we didn't know they weren't unmotivated. We didn't know they were lacking skills, not motivation. And we weren't sure what else to do. Thank goodness the assessment of lagging skills and unsolved problems is going to help you figure out what this kid's lagging skills are and when we engage caregivers in the process of figuring out what a kid's lagging skills are, their lenses change. Lagging skills change lenses.

When do kids exhibit concerning behaviors? We've already answered that question. On to the same conditions the rest of us exhibit concerning behaviors, when do our expectations they're having difficulty meeting. When there is an unsolved problem. Thank goodness. The assessment of lagging skills and unsolved problems is going to figure out what this kid's unsolved problems are, then we'll know the problems that need to be solved. The problems we probably could have been busy solving for the last 2 to 15 years. Once we identify a kid's lagging skills and unsolved problems, that's the information that's been missing. This kid is highly predictable and intervention can be almost exclusively proactive.

What's one of my favorite mantras with staff that I work with in schools and treatment facilities? I'm going to get you out of the heat of the moment, nothing good happens in the heat of the moment. As nicely illustrated by this graphic. This is the sequence of restraint and seclusion. Some of you may know that at the Federal level there is a Bill pending called the Keeping All Students Safe Act that would eliminate the use of seclusion and greatly restrict the use of restraint in American public schools. It's come up before. It has not fared well previously. It might have a fighting chance this time. But it's not just the sequence of restraint and seclusion being depicted here, it's the sequence of all punitive, exclusionary, disciplinary procedures. It's the sequence of detention, suspension, expulsion, corporal punishment, arrests, by the way there's another bill pending Federally of the Protecting Our Students in Schools Act that would ban corporal punishment in American public schools.

Let's get to the slide. Before I forget because I will forget, the nonprofit I

founded Lives in the Balance does an annual children's mental health conference. It's in October. You can find information on the Lives in the Balance website, livesinthebalance.org and this year it's exclusively focused on those two bills, Keeping All Students Act and Protecting Our Students in Schools Act. If you're interested, it's free. Sign up for the children's mental health conference on the Lives in the Balance website and we're not charging for it this year because we feel so strongly about the importance of these issues and those bills.

All right. Now back to the slide. Five bubbling on the slide. One in blue, the others in red. The colors are actually meaningful. In blue everything that's early. Crisis prevention. In red, everything that's late, crisis management. You don't want to be late. You want to be early. You don't want to be in crisis management mode. You want to be in crisis prevention mode. So what's crisis prevention? What's early? The only blue bubble. Figuring out what expectations a student is having difficulty reliably meeting, or a kid, and solving those problems collaboratively and proactively so that we never find ourselves in the red. And if that's what we were mostly doing in most schools and treatment facilities and homes, we wouldn't be using punitive, exclusionary, disciplinary procedures anymore. The problem is that in way too many schools and treatment facilities and homes, that is not what we're mostly doing. What are we mostly doing? When we have a kid who is having difficulty meeting a particular expectation, red bubble number one. We insist harder, we push harder. Founded on the belief that pushing kids harder to meet expectations we already know they cannot reliably meet elicits better performance and we all

want maximum performance out of every kid. Just one problem with that, it has not been my observation that pushing kids harder to meet expectations that we already know cannot reliably meet elicits better performance. What does it reliably elicit, red bubble number two, behavior, concerning behavior that communicates to us something we already knew this kid is having difficulty reliably meeting that expectation. I want you to notice something very important here. The behavior is late. The behavior is late. And interventions that are focused on behavior are interventions that are focused on what's late.

If the behavior is of the unlucky kind, what are we adults going to conclude? We're going to conclude the kid is becoming escalated and what are we going to do next? What our crisis prevention -- crisis prevention? Training taught us to do next, we are either going to give the kid a break, a very popular intervention, or de-escalate the kid. How can that be crisis prevention? You're now very late. If you're very late, it must be crisis management. Under the guise of crisis prevention if our de-escalation efforts don't get the job done, what are we going to do next? We're going to put the kid in a restraint or a seclusion, red bubble number four, founded on the belief that restraint and seclusion keep us and the kid safer. I'm aware of no research whatsoever -- and I've searched far and wide -- telling us that restraint and seclusion keep us safer. In fact, research actually points us in the exact opposite direction, restraint and seclusion is where kids and caregivers get hurt. And you are now very, very late. If you are very, very late, you are not in crisis prevention mode, you are in serious crisis management mode. 99.9% of what you're doing in this model is planned and proactive. It will get you out of the heat of the moment but there's

another mantra that I use with the schools and facilities that we work with, I hate seeing kids get restrained and secluded over expectations we already know they cannot reliably meet. But what I also hate seeing kids get detentions, suspensions, expulsions, hit, arrested, over expectations we already know they cannot reliably meet. An important slide.

I should mention because I often forget this, too, lives in the balance has created a website exclusively devoted to providing free resources to schools and treatment facilities to end their use of restraint and seclusion. It's truecrisisprevention.org. It comes up on the last slide.

Truecrisisprevention.org. We really got to stop doing this stuff.

Paradigm shifting component number four is the mentality of the model. Kids do well if they can. I'm just looking at the chat to see if there's anything I want to respond to now and the answer is no. But don't hesitate to put questions in there as we go along just so you don't forget. The mentality of the model is kids do well if they can. The belief that if this kid could do well the kid would do well. And that if the kid isn't doing well something must be getting in the kid's way. What's getting in the kid's way? What the research tells us is getting in the kid's way, lagging skills, unsolved problems. The problem of course is that kids do well if they can is not what we've been thinking for most of human evolution, of course that's because we didn't have the research that's accumulated over the last 40 to 50 years for the last of human evolution. We have it now. What have we been thinking for most of human evolution and in way too many places still do think? Kids do well if they want to. Do well if they can. And kids do well if they want to are two completely different mentalities.

And they have completely different implications for what you're thinking about this kid and what you're doing with or to the kid to try to help the kid. Let's think about kids do well if they want to for a few minutes because, number one, it's popular. And because, number two, a lot of the things we say about kids with concerns behaviors flow from a kids do well if we want mentality. Some of them are up on the screen right now. If you have a kids do well if they want to mentality and you're working with a kid that's not doing well, then the reason you think the kid isn't doing well by virtue of mentality is because the kid doesn't want to do well. And that's how I was trained to think. Until I started asking the question, why would a kid not want to do well? Well, the kids do well if they want to mentality has those questions covered with some very popular concepts like secondary gain, competing contingencies. Now just in case that's unfamiliar terminology for you, let me put those into my own words. Here's what those mean. The kid has the skills to be doing just fine but doing poorly is working out better for the kid than doing well would.

What? Doing poorly is working out better for the kid than doing well would, how? Well, now it is time for us to cover some very popular characterizations of kids with concerning behaviors, none of them are true, but they're very popular. All of them flow from the belief that somehow doing poorly is working out better for the kid than doing well would. The kid is seeking attention by doing poorly. Very popular. The kid is manipulating us. Popular. The kid is coercing us into capitulating to their wishes, extraordinarily popular. The kid is unmotivated. Incredibly popular. The kid is testing limits, also very popular. None of them are true.

Let me just pluck two of them to show you what I mean. The kid is seeking attention by doing poorly. You mean the kid has the skills to seek attention the right way but the kid is choosing to seek attention the wrong way because that's making the kid's life go better? I got to tell you, I've never seen it. I'm 2,000 kids with concerning behaviors in at this point in my career, a lot of them were in prison, I'm open to it but I've yet to come across a single kid to seek the skills attention adaptively but chose it to seek it maladaptively because that made the kid's life go better. It's not true. Plus, if you think a kid is seeking attention through their concerning behavior, then what intervention is going to make perfect sense? Ignore the kid, ignore the kid, very popular recommendation. Ignore the concerning behavior so as to pull all of the re-enforcement out of the concerning behavior. What if that's wrong? What if the kid's concerning behavior is not for the purpose of seeking attention but is, instead, simply the means by which the kid is communicating that there are expectations the kid is having difficulty meeting. You can't ignore that.

The kid is unmotivated. Do you know I would never say that about anybody, ever. Why not? Because here's what I found. The minute we take a much closer look, whatever this kid's lagging skills, what are this kid's unsolved problems, we find it unmotivated doesn't even come close to capturing what's really going on with this kid. The trick of course is to take a closer look because you say these things about a kid they're going to stick. And what are you going to take a closer look using? The assessment of lagging skills and unsolved problems and why would we not want these incorrect characterizations to stick? Because if you think a kid isn't doing well because the kid doesn't want to do

well? I can only think of one thing for you to do, only one role for us caregivers to play in the life of a kid who is struggling, make the kid want to do well. How do you do that? The tools of that trade are familiar to all of us. I was trained in them formally. You reward the signals you like so as to see more of them. You punish the signals you don't like to see less of them. And you are now in the position -- you are now simply trying to make the kid want to do well founded on the belief the kid didn't want to do well in the first place if, by the way, those characterizations and those strategies are founded on any beliefs whatsoever, I find that those strategies are often founded on no beliefs whatsoever. I and my colleagues at Live in the Balance, we work with a lot of school, a lot of treatment facilities, a lot of families, when we ask them, why are you still doing what you're telling us isn't working? The number one response is, well, because it's the way we've always done it. Here's my attitude. If the way we've always done it hasn't been working for the kids we've always done it to we probably ought to stop doing it and do something else.

What you're hearing about in this presentation is evidence-based something else. Now in schools a frequent question that we get about this is, well, if we -- I'm going word this to suit my own purposes -- if we stop doing what isn't working for the kids we're mostly doing it to, aren't the kids we're not doing it to, the well-behaved ones, going to start misbehaving? No. The kids who are behaving themselves aren't behaving themselves because of your school discipline program. They're behaving themselves because they can in every school it's the same 10, 20, 30 kids who are accounting for 70% to 80% of the disciplinary referrals and everything that happens after those disciplinary

referrals after that school prove that what we're doing to those kids isn't working. Those are the kids we are in the midst of losing. Speaking of which, Lives in the Balance has produced a feature-length documentary film called "The Kids We Lose." You can access it at no cost in the advocacy section on the Lives in the Balance website. I should forewarn you it's a brutal 90 minutes. It is hard to watch. But it sure does, in a very poignant way, help heighten awareness of the things we're still doing to kids here in the year 2021 simply because they are communicate that they're having difficulty meeting certain expectations in ways that are unlucky. The kids we lose on the Lives in the Balance web scythe site in the advocacy section. Don't say I didn't warn you.

Finally, paradigm shifting component number five, doing well is preferable. For me that's a statement of obvious. Of course doing well is preferable. A preference for doing well explains why most of us do well most of the time. We prefer it. So do kids with concerns behaviors. Kids with concerning behaviors prefer doing well, too. The difference between a well behaved kid and kid with concerning behaviors is not the well behaved kid prefers doing well and the kid with concerning behaviors doesn't, that's incorrect. It's the well-behaved kid has skills that the kid with concerning behaviors is lacking. What skills? Well, you're about to come face-to-face with 18 of them but the global skills we're talking about here are skills like flexibility, adaptability, frustration tolerance, emotion regulation, problem solving, picture two kids sitting at a desk struggling with the exact same math task. It is conceivable that both of them are lacking skills in math but one of them -- those aren't the skills we're talking about in this model -- in this model we talk about the skills that make it hard for kids to

respond to problems and frustrations adaptively. One of them is very commonly raising their hand and saying, can I get some help over here? The other is losing their mind. What is the difference between those two kids? They're both struggling with the same math task, they might both be lacking the same math skills but one of them is lacking the skills of flexibility, adaptability, frustration tolerance, the emotion regulation, and problem solving. And I'm betting you know which kid that is.

Those are our five big paradigm shifting themes. I will say that -- I will say that a lot of people give me the feedback that when they listen to those five big components, their back sometimes gets stiffened up a little bit, because yes, for a lot of people this is different from the way they've been trained and been thinking for a long time. Fortunately almost all of them tell me I'm glad I kept listening. Don't stop listening.

Just to -- just to cement the point. I'm not allergic to rewarding and punishing kids. I haven't rewarded or punished anybody in 30 or 40 years but that doesn't mean I'm allergic to those strategies. It means that I just don't see the point in them anymore. Why would I'm not see the point in them anymore? Because rewards and punishments solve no problems and enhance no skills.

And in fact, rewards and punishments can be distracting. They cause us to focus on signals rather than on the problems that are causing those signals. Some people wonder at this point is he aware of all the research that's accumulated telling us that rewards and punishments are effective at modifying behavior? Oh, he's aware. That was my training. He's very aware that those strategies have been shown to be effective at modifying behavior. We can no

longer be content with simply modifying behavior if the problems that are causing those behaviors are still unsolved. There can be no satisfaction in that. The good news is that when you're solving problems collaboratively and proactively, you're not only solving the problem, the kid's behavior is improving at least on a par with what behavior modification strategies would have done, which means we have nothing to lose.

Plus, as I'm sure you are all very well aware, there is significant disproportionality in the ways in which rewards and punishments, especially punishments, are administered in schools. Black and Brown students are received punitive exclusionary discipline greatly out of proportion to their numbers. And of course although that's been doing on for an extremely long time, the recognition of that has given rise to racial equity programs, social justice, cultural competence programs, which are all great, but not enough.

All that stuff is wonderful and necessary, but all that stuff still doesn't help us focus on problems instead of behaviors and still doesn't help people solve those problems collaboratively and proactively. And here's what I find. We can help a school get rid of punitive, exclusionary disciplinary practices in under two years. Good. Whether we can get rid of somebody's biases fully in this lifetime is another story. But can we help them change what they're perceiving when it comes to behavior, what they're seeing and what they're doing, that we can change fairly quickly, at a very practical level. If we're not using punitive exclusionary disciplinary practices, not good for anybody, we will not be proportional in using those practices and if we're going to be disproportional, better to be disproportional in solving problems with kids than in administering

detentions, suspensions, expulsions, paddling, restraint, seclusion, arrests.

All right. Clicked twice again. In our last 20 -- 26 minutes, let's get a little more technical, then questions. What are the two most important roles a potential helper can play in the life of a kid who is struggling? Role number one. Figure out what the kid's lagging skills and unsolved problems are. Pretty sure-fire bet if the kid is still struggling, nobody has figured that out yet. Why would we want to do that? Because it makes concerning behaviors and the unsolved problems that are causing them highly predictable and that makes intervention highly proactive and now we're not going to hear caregivers saying that they are in perpetual survivor mode. What is perpetual survive mode mean? They've got so many concerning behaviors being thrown at them that they are barely keeping their head above water. Well, let's organize the effort. Those concerning behaviors are predictable. Those behaviors are being caused by unsolved problems which are also predictable. Let's figure out what those unsolved problems are and start systematically and incrementally solving those problems and then we will no longer feel like we are in perpetual survival mode. People stop saying they're walking on eggshells when they're implementing this model. What does walking on eggshells mean? We are treading very carefully because we never know when the kid is going to get upset. In this model, thanks to the assessment of lagging skills and unsolved problems, you know exactly when the kid is going to get upset, you know exactly what unsolved problems are getting the kid upset, and you are busy solving those problems. So the kid doesn't get upset. That's not walking on eggshells.

Component number two of the model. We're going to talk about both in the next 24 minutes. Start solving those problems. But do it collaboratively and proactively because when you're solving problems collaboratively and proactively, you've got yourself a partner, a teammate, the kid. This is not adversarial. This is not enemies and it never needed to be. When we're solving problems collaboratively and proactively we are engaging kids and solving the problems that affect their lives. I'm always asking the question, why would you want to leave the kid out of the loop on that? When we're solving problems collaboratively and proactively the adult and kid are coming up with solutions together that are a whole lot more effective and a whole lot more durable because you're not flying solo. And perhaps best of all, when you're solving the problems collaboratively and proactively, you're not just getting the problem solved, that's great all by itself, you're not just eliminating the behaviors associated with the unsolved problems, that's great, too. You're not just improving communication with the kid, not just improving your relationship with the kid, all good, you are also simultaneously enhancing the very skills the kid was lacking. That's right. When you're solving problems collaboratively and proactively you are also enhancing skills. So when people ask the question, how do you teach the skills? Generally speaking, the answer is, by engaging the kid in the process of solving problems collaboratively and proactively.

All right. Let's turn our attention to the assessment of lagging skills and unsolved problems. Here it is. This is it. Assessment goal. In is the most recent edition, ALSUP 2020, rerevised it nine months ago. Two sections. Top section, lagging skills. As promised, 18 of them. That is not an exhaustive list

of lagging skills. It is a representative list of lagging skills. If I had tried to be exhaustive about all the skills the research tells us kids with concerning behaviors could be lacking the ALSUP would be five to six pages long. We don't need five to six pages of lagging skills to get the right lenses on. 18 lagging skills will do the trick. And remember, that's the primary purpose of the lagging skills section. Lagging skills, not lagging motivation.

In the bottom section we will be writing in or typing in the ALSUP is available on the Lives in the Balance website, you will find it in the editable, fillable format so you can type instead of write and save and share electronically. That bottom section is where you will be writing in all of the expectations a kid is having difficulty reliably meeting. You will come up with those unsolved problems using the prompts that are in the unsolved problems section. There are specific prompts for schools and facilities and there are specific prompts for homes and clinics. Those prompts will help you think of all of the expectations a kid is having difficulty reliably meeting. And the idea is to be exhaustive.

All right. Just a few mention about this instrument. I should also mention I'm not -- we don't have time for me to teach you how to use the ALSUP. But on the Lives in the Balance website you will want to find the guided tour on the Lives in the Balance website. It's same one actually. But you will find it either in the educators and schools section or the parents and families section or the pediatricians and physicians section. The guided tour that through streaming video walks you through the CPS model. In the second section of the guided tour, you will find a 35-minute video teaching you how to use the assessment of lagging skills and unsolved problems. Worth watching before you try to use it.

You'll also find a video in that section of an ALSUP meeting, a COVID ALSUP meeting so it was done by Zoom, me leading three educators through the ALSUP to identify the lagging skills and unsolved problems of a 5 or 6-year-old student who was very puzzling to them. I often hear, this kid is a puzzle. I often hear, this kid is a mystery. I often hear, this kid has seven or eight different diagnoses. All of those simply tell me we haven't yet figured out what the kid's lagging skills and unsolved problems are. Until now, a quick anecdote. I was speaking at an autism conference in Denmark pre-COVID, maybe two years ago, and a mom in my audience raised her hand very tentatively and said I found my daughter's autism diagnosis to be very useful. I said, that's great. But she then thought about it a little bit and said I think what you're saying is that my daughter's autism diagnosis really didn't tell me much about all about her specific lagging skills and unsolved problems. I said, right. She thought about it a little bit more and then said, and I think what you're saying is that once I figure out my daughter's lagging skills and unsolved problems I'm going to find that her autism diagnosis wasn't telling me anywhere nearly as much as I thought it was. I said, probably.

The fact that there is a place to check off lagging skills often misleads people into believing the ALSUP is a checklist. It's not. Although it must be a rating scale, not that either. I think those of us who work with kids with concerning behaviors are often asked to check too much. I think we're often asked to rate too much. And of course what are we busy checking and rating? Signals, behaviors. What do we do with our checks? We count them. What do we do with our ratings? We tabulate them. All so that we can come up with a total

score, all so that we can compare this kid's total score to total scores of other kids with same age, grade, gender. All so that we can come up with what has become the holy grail of assessment, a percentile that will somehow communicate to us whether this kid needs our help. I've never had a percentile tell me whether a kid needed my help and I've never had a percentile tell me what kind of help a kid needed. Nope. If you're trying to figure out a kid's lagging skills and unsolved problems, I promise you, the kid needs your help. If the ALSUP is neither a checklist nor a rating scale, then what is it?

It's a discussion guide. A guide for helping caregivers identify, come together to identify a kid's lagging skills and unsolved problems. You want to get everybody on the same page? Checklist isn't going to do it. A discussion will. You want to get everybody talking the same language? Checklists isn't going to do it. A discussion will. You want to persuade the unpersuaded? Checklist isn't going to do it. A discussion will. And what are we discussing? Lagging skills, unsolved problems. We don't need to talk about the kid's behavior in our meetings, we've known what the kid's concerning behaviors have been for a very long time. We don't need to talk about the kid's diagnoses, we've known what those are for a very long time. We definitely don't need to talk about how this kid got to be this way. We spend a lot of meeting time talking about how the kid got to be this way when the reality is you cannot establish how this kid got to be this way with any level of precision so I don't recommend we spend any time trying. Plus, often the things we're talking about that we think are how the kid got to be this way are things about which you can do nothing. And I would rather talk about the things in which we can do

something. Lagging skills, unsolved problems. Now, what do we hope happens in an ALSUP meeting? Which by the way on average should take about 45 minutes. We hope light bulbs go on. We hope people say, wow, as in, wow, this kid really is lacking a lot of skills. That is a beautiful wow moment. Especially when it is uttered from the lips of someone who wasn't thinking that when they walked into the meeting. Wow, no wonder what we've been doing hasn't been working. That is a beautiful wow moment. Especially when it's uttered from the lips of someone who came into the meeting thinking, we should just keep doing what hasn't been working for the last three years, just ramp it up a little bit. The ALSUP changes lenses.

Wow, this comes with a rather shaken up look attached. Wow, I'm kind of feeling bad about how I've been treating the kid. Now what's that person all shook up about? Well, they are now simultaneously reflecting on what they now know about the kid and how they've been treating the kid and coming to the recognition that the two do not square up. More wow moments.

So you're saying the kid only gets upset when these unsolved problems pop up? That's right. An you're saying these unsolved problems don't pop up, we know they're coming? Well, that's right, any unsolved problem you've written in on the assessment of lagging skills and unsolved problems is by definition predictable or you wouldn't have been able to write it in. And you're saying that if we solve these problems with the kid the kid won't get upset over them anymore? Right. And you're saying we don't have to wait until the problem pops up to solve it, we can do it proactively? Bingo. I'm going to get you out of the heat of the moment. The ALSUP should be the standard, pre-referral,

triage instrument in every school in Texas. We'll let Louisiana use it, too. In every school. Gonna save people a lot of time. Gonna save a lot of money. Gonna give us the information that's been missing.

All right. I've got to skip a few here because I'm running late. What are we going to do with those unsolved problems? Well, this is sort of part two of the model. You have three options for handling those unsolved problems. Those three options are called plan A, plan B, and plan C. What I've done here is I've taken the many different ways in which adults handle problems with kids and I've reduced them to three options, A, B, C. Kind of condenses what we're doing and provides us with a very nice shorthand for what it is that we want to be doing. Notice that the top unsolved is underlined. That's because if a problem isn't unsolved you don't need a plan. It's not an unsolved problems. If a kid is coming to school on time and as often as we would like them to you don't need a plan. It's not an unsolved problem. It's a met expectation. No plan needed. The kid is doing their homework as well and as often as you would like them to. You don't need a plan. It's not an unsolved problem. It's a met expectation. No plan needed. But if there's any expectation the kid is having difficulty reliably meeting, you need a plan. And the real world you have three options. In this model you're only using two of them. B and C. A is only up there because at least at this point in human evolution, it's still quite popular, its popularity notwithstanding you're almost never using plan A when you're implementing this model. Until let me run through these very quickly. Plan C, that's where you're setting a particular unsolved problem aside, at least for now. Many people hear that and think giving in? There's no giving in in the entire

model. Giving up? No giving up in the entire model. Prioritizing? There is prioritizing in this model. Plan C is what you're doing with the unsolved problems you have consciously, deliberately and proactively decided, we're not going to try to solve that one right now. We've got bigger fish to fry. See, here's the deal. A lot of kids who have been exhibiting concerning behaviors for a long time are going to have 30, 40, 50 different unsolved problems. You cannot solve 30, 40, 50 unsolved problems all at once so we have to prioritize. On the slide I skipped, your number one priority is safety. Any unsolved problems causing safety issues, high priority. You don't have any safety issues with the kid you're either going with frequency, unsolved problems, setting in motion concerning behaviors most often, or gravity, the unsolved problems having the greatest negative impact on this kid's life or the lives of others. You're never working on more than three unsolved problems at any particular given point in time with the kid. Any more than three, both the caregivers and the kid are going to get overwhelmed. Seriously? Seriously. A lot of adults get a little queasy about the thought of plan C. Let me help you feel a little bit better about plan C if you're getting that queasy plan C feeling.

The kid is not meeting the expectation reliably anyways. The kid isn't meeting the expectation reliably anyway so now we have two options. Keep putting the expectation on the kid, keep pushing the kid, cause concerning behaviors, and everything that goes along with it, or make it official, we don't expect you to meet that expectation right now. Forever right now? No. Right now right now. When will we start working on that one again? As soon as we get some of our higher priority unsolved problems solved. That's plan C. That

leaves us with only two other plans, A and B. Both represent a way to solve a problem with a kid. Massive difference between them. With plan A you're solving the problems unilaterally. With plan B, you're solving the problem collaboratively. I think you know which one you're using in this model.

Does that mean we are allergic to plan A in this model? No, not allergic. We just don't think it's a very good idea. But if a kid is about to dart in front of a speeding car in a parking lot, you're not doing plan C. You're not thinking, got bigger fish to fry right now. You're not doing plan B, you're too late. You're doing plan A. You yank on the kid's arm, save the kid's life. If the kid blows up, so be it. But, if three weeks later the kid has now darted in front of a speeding car 17 additional times and you've yanked 17 additional times, I'll agree with you that yanking is working, it's saving the kid's life but yanking is not working at solving this problem. You're going to need a different plan. And if you decide that this kid is not capable of meeting that expectation at this point in their development, yes, I had worked with kids over the last 30 or 40 years that were not capable of being safe in parking lots yet or if you decide this is not a high priority right now, you're going to do plan C. And if you decide, I do think this kid is capable of meeting this expectation and/or this is a high priority right now and/or we can't just avoid parking lots forever, or right now, you're going to do plan B. You aren't avoiding parking lots forever anyways with plan C, you are just avoiding them for now. See the problem is not that we adults sometimes use plan A, the problem is that we use it a lot and we stick with it even when it's clearly not working.

Let me spend my last few minutes of presenting here covering the three

steps that are involved in solving a problem collaboratively and proactively. The three steps -- and by the way, it's the same three steps, whether this is a prison or an in-patient psychiatry unit or residential facility or a school or a household. It's the same three steps. The empathy step, define adult concerns step, and invitation step. Now, the names of the steps don't matter that much although I very much like the name of the empathy step, because what you're doing in the empathy step is a very empathic thing to do. You're doing gathering information from the kid about what's making it hard for the kid to meet a particular expectation. As I always say, kids have information we badly need about what's making it hard for them to meet a particular expectation. If we do not gather that information, then we won't know what's making it hard for the kid to meet it. The kid's concerns won't get addressed and the problem will remain unsolved. You need info. The empathy step is where you get it. The empathy step is where the kid has voice. The empathy step is where the kid is heard.

The define adult concerns step, this is where the adult is entering their concern into consideration, where the adult is heard. By the way, an interesting definition of equity, not the only definition but an interesting definition, equity is where everyone's voice is heard. Equity is where everyone's concerns are addressed. Something to ponder. What are we adults usually concerned about? Why it's important that the expectation be met, and why is it important that the expectation be met? Either because of how the unsolved problems is affecting the kid, health, safety, learning, and/or how the unsolved problem is affecting other people, health, safety, learning. Believe it or not that's the universe of kids' concerns. Uh-oh. Yes. We're still there. I clicked on

something. That's the easiest and the fastest of the three steps. Oh, let me give you an example of an empathy step. I was doing a podcast with a father -- a good quick example. I was doing a podcast with a father about two years ago. Father's podcast. He was telling me about his 3-year-old daughter who was having difficulty brushing her teeth before going to bed at night. Like a lot of caregivers he thought he already knew what was making it hard for his daughter to brush his teeth before bed a night. He was positive it was the taste of the toothpaste. So he's telling me this. Eight to ten different flavors of toothpaste later, who knew there were eight to ten different flavors of toothpaste, she was still having difficulty brushing her teeth before going to bed at night. Finally he's telling me he did the empathy step. I'm thinking to myself, people think the empathy step saves time. I could have saved you a lot of time if you just started with the empathy step. What did he learn from his 3-year-old daughter? Wait a minute, you can solve problems collaboratively with a 3-year-old? We do it all the time. Don't sell those 3-year-olds short. What did he learn from his 3-year-old daughter? He learned when he was brushing her teeth with the electric toothbrush he was getting water all over her face and she didn't like it. What did I tell him? I said, well, now, there's a concern. Eight to ten flavors of toothpaste would never conceivably address. What was the father's concern in the define adult concerns step in here's what it sounded like -- or could have sounded like. Well, if you don't brush your teeth before going to bed at night, the bacteria that got on your teeth from all the food that you ate all day is going to stay on your teeth all night and that could cause cavities. It hurts a lot to get cavities filled and, quite frankly, I would rather not

spend the money if I don't have to. No turning back now. We're ready for the invitation.

The invitation starts with the words "I wonder if there's a way." What are you doing in the invitation? You are collaborating on a solution with the kid. But a solution that must meet two criteria. Got to be realistic, got to be mutually satisfactory. Realistic means both parties agreeing to do it. Mutually satisfactory means the concerns of both parties will be addressed by the solution. Here's what I've been saying a lot lately. And world history bears me out on it, if the solution is not realistic and mutually satisfactory, I promise you this problem is still unsolved. Here's what the invitation would have sounded like. I wonder there's a way? What you're doing in the invitation is recapping, restating the concerns of both parties. I wonder if there's a way for us to do something about me getting water on your face when I'm brushing your teeth with the elect trick toothbrush? Kid's concern. And also make sure you don't get cavities which hurt to get filled and that I'd rather not spend the money on. Believe it or not you're then giving the kid the first crack at the solution. You got any ideas? She did. He's telling me this story. She said, maybe we could wrap a towel around my face when you're brushing my teeth so that my face doesn't get all wet? And so that I don't get cavities? Who won? Both. Who lost? Nobody. Whose authority was undermined? Nobody's. Who's being held accountable? Both parties. It is to the great misfortune of kids that we have been defining accountability as punishment for so long. No. Accountability is when kids are participating in the process of solving the problems that affect their lives so that the behaviors that we're trying to hold them accountable for

don't occur anymore. Only unsolved problems that cause concerning behaviors, solved problems don't.

There are four websites to help you out. I've already mentioned two of them. The Lives in the Balance website, tons of free resources.

Truecrisisprevention.org, tons of resources, specifically aimed with helping schools and facilities eliminate their use of restraint and seclusion.

Cpsconnection.com, you will find trainings on there. Thekidswelose.com is the website for the documentary film that I mentioned earlier. Don't forget the children's mental health conference. I suspect there are a lot of people listening now who would be very interested in that conference. And that's the end of my formal presentation. Shall we turn our attention to questions?

>> Randi Turner: Do you want to take those one at a time, Dr. Greene?

>> Ross Greene: I would be delighted to. Jana is asking does this model have any components for children or adults with intellectual disabilities? We do this with a lot of kids, creativity is the primary component but we describe a lot of strategies for kids with developmental delays on the Lives in the Balance website, in my books. Quite frankly it's still the same three steps. The question is, do we need to get creative to help kids participate in those three steps if they're having difficulty for whatever reason, and the answer is, yeah, there's a lot of strategies we can use. Here's the interesting thing. Because this is collaborative, we really need the kid to participate. And so as compared to approaches that really don't need the code to participate because you're doing something to the kid we've probably had to give more thought in how to engage kids who are having difficulty engaging than a lot of other models that are just

doing something to a kid. It's something that we think about nonstop. By the way, put your questions in the Q&A, not the chat or I won't see them.

Robin is asking, do you have resources for developing a behavioral support plan based on this new paradigm shift. We do have a CPS flavored functional behavior Social Security on the website in that paperwork section where the research is, in the materials section, the CPS flavored IEP and behavior plan delayed by COVID should be up there in the next month.

Kelly is asking is a recording on this call be available online. I don't know the answer to that question but perhaps somebody who does can answer that question.

>> Randi Turner: Yes, this is being recorded. We will post it to our YouTube channel. You will all receive an e-mail about 24 hours after the session with the link to our website where the materials and the recording can be found.

>> Ross Greene: There you go. Anonymous attendee is asking have you ever run into a situation where you taught a child those skills and they still didn't use them. Don't forget what you're primarily doing in this model is solving problems. The skills on the assessment of lagging skills and unsolved problems is not clear to me that those skills can actually be taught explicitly, though many people try. So I appreciate the fact that a lot of people are busy trying to teach those skills and, by the way, I'm talking about the skills on the ALSUP. I'm not talking about reading, writing, arithmetic, spelling, entering a group, starting a conversation, those are not skills that I'm talking about. Those can be taught explicitly. But the vast majority of the skills in the lagging skills section on the assessment of lagging skills and unsolved problems, there is no

evidence-based methodology for teaching those skills explicitly. Fortunately they are going to be enhanced when you're solving problems collaborative and proactively but if I was to paraphrase the question, have I ever seen instances in which a solution that we came up with didn't stand the test of time, yeah, that's not that uncommon. And it's usually because the solution wasn't as realistic as we thought it was. We thought it was but it wasn't. Back to plan B to get it sorted out. It wasn't as mutually satisfactory as we thought it was. We thought it was, it wasn't. That's not a plan B fail, good reason to go back to plan B to get it sorted out.

Where would I find additional training for this model to include the assessment? Brenda, you can hop on the Lives in the Balance website or CPS Connection website and find the two-day trainings that we do -- that I do on this model. We just finished one but there are also available through a pay-per-view format so if you couldn't attend live there's another one coming up in January live. If you don't want to wait that long you can do the pay-per-view. Jocelyn is asking, does this approach translate to adults in any way? In child welfare, using a trauma-lens we recognize that often the caregivers have their own history of trauma and to reunify the family we need to focus on the caregiver's needs just as much as the child's. This is very applicable to large human beings as much as it is to small ones. I have to confess, I have not been primarily focused on large human beings. There's been so much to deal with with little human beings. But it's just as applicable. And we have implemented the model in adult psychiatric facilities. Imagine me having never done it before, wondering can you solve problems collaboratively with an adult who is

psychotic? I didn't know the answer to that until about three years ago. The answer is, yes. You may have to keep bringing them back to what you're talking about but generally speaking, and of course not all psychotic adults are the same but generally speaking the answer is yeah. Can you do plan B with incarcerated adults? Doesn't look any different than it does in any other setting or with any human being of any size.

Anonymous attendee is asking suggestions for working with parents who are incredibly closed to trying new methods. My parents did X and I turned out just fine attitude. Well, the first step is always to help caregivers, even if it's not -- by the way, I'll hear that from educators, too, and staff in facilities, but no matter who the caregiver is, we've got to help them get new lenses on. And my parents did X and I turned out just fine suggests that we may have started talking about intervention prematurely. Remember, step one is the assessment of lagging skills and unsolved problems. The assessment of lagging skills and unsolved problems, helping caregiver have those wow moments that I covered, those light bulb moments, is what helps them start to recognize that what they're doing now isn't working and that maybe, just maybe, their kid is not just like them. Maybe they didn't have lagging skills and unsolved problems, although we all have lagging skills. Maybe theirs weren't so pronounced for us to notice and their kid is not that kid. And their kid may need a different approach than what worked for them. Why would we assume that what worked for one person is going to work with another? I was on a call just before this with a colleague who does some racial equity work and some -- some work with universally designed for learning in which identifying barriers is one of the main

features. We want educators to identify barriers to learning and adjust accordingly so the barriers are not there. And one of the best phrases, her name is Nicole Tucker Smith, I want to attribute it properly, is how would you recognize a barrier if there's it's not a barrier for you? It's harder to recognize barriers when it's not a barrier for you. That's a taking another person's perspective issue and that's a being open minded to what barriers could be even if those barriers didn't affect you. Believe it or not, I find that the lens part of this model is the easy part, changing practices is a little harder. Changing structures and systems in schools, hardest. It can be done but the lens part is the easiest. But not if we jump into talking about intervention first. We've got to set the stage for intervention by helping adults by participate in the process of identifying a kid's lagging skills and unsolved problems.

And Demi is asking, when would you reassess? Is there a preferred time frame? Well, there is another instrument that I skipped past called the problem solving plan and the problem solving plan is how you're keeping track of the unsolved problems you're working on right now with the kid and where you are in the process of solving those problems with the kid. That's the instrument. It's also available in the Lives in the Balance website, free and editable, fillable. That's the treatment that's constantly being revised. I would go back and do the ALSUP if we've got a new group of people working with the kid who weren't a participant in figure out what the kid's lagging skills were originally, they might need the right lenses. And since new expectations are constantly being placed on kids, not a bad idea to periodically revisit the ALSUP for the purpose of seeing if new problems have cropped up. One more point, while it is true that a

kid could have 30, 40, 50 different unsolved problems, here are two other things that are also true. In many kids it's three or four of those unsolved problems that are accounting for a very high percentage of their concerning behaviors, so solve those three or four and you will have made a significant dent in the kid's concerning behaviors.

Number two, if the kid has 30, 40, 50 unsolved problems, yes, that's overwhelming but you're not going to have to solve all 30, 40, 50. My estimate is you're going to end up solving 12 or 15 because some are going to solve by solving others. But there is tremendous added value in memorializing all of the expectations a kid is having difficulty meeting using the assessment of lagging skills and unsolved problems because that's what frequently prompts the people who are a participant in that discussion to say things like, wow, I didn't know it was this many, and, wow, how much do we really care about all of these? And, wow, I'm not even sure he can meet a lot of these. And, wow, if I had 30, 40, 50 different unsolved problems greeting me when I woke up every morning I don't know that I would get out of bed. And, wow, you mean all these unsolved problems are staring this kid in the face the minute the kid walks into school during the day? I don't think I would show up. Pretty amazing that the kid is still showing up.

We are out of time. Let me see if I can answer LaShaila's question. What are some strategies to educate employers on how to create inclusive worksites for this demographic. Contact Lives in the Balance, contact form on any of the three -- any of the four websites and well have a conversation.

On that note, thanks for inviting me to do this. I hope this is very useful.

>> Randi Turner: Thank you, doctor. We have a lot of comments in the chat box thanking you and saying how useful this has been and how much they've learned in the session. So I do appreciate your time today. I know you're a busy man, giving us this webinar. In addition, I'd like to thank the sign language interpreters and the real time captioner. Have a great afternoon.

>> Ross Greene: Take care, all.

>> Randi Turner: You, too. Bye-bye.