

## **Unit one**

### **Understanding the problem of Children with Behavioral and Emotional Difficulties**

#### **1.1. Definition of Emotional and Behavioral Disorders (EBDs)**

Childhood is supposed to be an enjoyable time, a time for playing, growing, learning and making friends and for most children it is. But for some children, life seems to be in a constant turmoil (confusion). They are in conflict, often serious, with others and themselves. Or they are so shy and withdrawn that they seem to be in their own world. In either case playing with others, making friends and learning all the things a child must learn are extremely difficult for these children. Their behavior violates expectations for what is accepted and caused concern for parents, teachers or other children. These children are referred by a variety of terms such as: emotionally disturbed, socially maladjusted, psychologically disordered, emotionally handicapped or even psychotic if their behavior is extremely abnormal or bizarre (odd). Such children are not mostly liked by anyone. Worst still, they do not even like themselves. They are difficult to be around, and attempts to be friend them may lead to rejection, verbal abuse or even physical attack.

Some of the problems associated with behavioral difficulties include: disruptiveness, tantrum (fit of temper), anxiety, depression, fighting, shyness, social withdrawal, extreme passivity, bossy feeling, feeling of inferiority, gang membership, disobedience, daydreaming, phobia, etc. Although children with EBDs are not physically disabled, their misbehavior can be as serious as handicap to their development and learning. Children with EBDs make up a significant portion of school children who need special needs education.

In short, emotional and behavioral disorder can be defined as:

- ✓ Is more than a temporary response to stressful events in the environment
- ✓ Is consistent discipline exhibited in two different settings, at least one of which is school related
- ✓ Persists despite individualized interventions within the education program, unless, in the judgment of the team, the child's or youth's history indicated that such interventions would be effective.
- ✓ EBDs can co-exist with other disabilities such as schizophrenic disorder, affective disorders or other sustained disturbances of conduct or adjustment

Generally, definitions of EBDs are subject to controversies. Perhaps the most functional way to look at behavioral disorders is: (1) to describe how children who are called emotionally disturbed actually act and (2) identifying dimensions of behavior that are different from other normal peers

## **1.2. Dimensions to measure EBDs**

EBDs can be analyzed or measured in terms of four dimensions. These are

### **1. Rate**

#### **What does rate of behavior mean?**

Rate refers to how often a particular behavior is performed. The primary difference between disturbed children and normal children is the rate at which undesirable kinds of activities occur. Although the disturbed child often does nothing that a normal child does he/she does certain undesirable things much more often (e.g crying, hitting others playing alone). In other words, simple observation of a certain undesirable behavior at one time does not indicate the existence of behavioral problem.

### **2. Duration**

Duration is a measure of how long a child engages in a given activity. That is, even though normal and behavior disturbed children may do the same things, the amount of time the behavior disordered child spends in a certain activities is often markedly different from that of the normal child. The time is either longer or shorter.

### 3. Topography

It refers to the physical shape or form of an action. For instance, throwing a baseball and rolling a bowling ball involve different topographies. Although both involve the arm, each activity requires a different movement. The responses showed by a behavior disordered child may be topography seldom, if ever seen in normal children. These behaviors are often maladaptive or dangerous to the child or others (e.g. pulling)

### 4. Magnitude (force)

Behavior is sometimes characterized by its magnitude or force. It may either too soft (e.g talking in a volume too low that you cannot be heard) or too hard such as slamming the door.

Disturbed children also have difficulty to discriminate when and where certain behaviors are appropriate. Learning that kind of stimulus control is a major task of growing up, which most children master naturally through socialization. However, some behavior disturbed children often appear unaware of their surroundings. They do not learn the proper time and place of many of their actions without being carefully instructed.

In general, definition of emotional and behavioral difficulties depends on the nature, frequency, persistence, severity or abnormality and cumulative effect of the behavior, in context, compared to normal expectations for a child of the age concerned’.

The continuum-based approach to definition of EBDs defines EBDs as continuum in the following way;

#### ***Behavior that ‘is simply disruptive or naughty’***

- results from a child ‘experiencing some emotional stress within normal and expected bounds’
- challenges teachers but is within normal, albeit unacceptable, bounds’



### ***Emotional and behavioral difficulties***

- are persistent (if not necessarily permanent) and constitute learning difficulties’
- ‘range from social mal adaption to abnormal emotional stresses’
- may become apparent through withdrawn, passive, depressive, aggressive or self-injurious tendencies’
- ‘may be associated with school, family or other environments or physical or sensory impairment’
- mean a child will ‘generally behave unusually or in an extreme fashion to a variety of social, personal, emotional or physical circumstances’



### ***Serious mental illnesses***

- ‘may be episodic, but are generally indicated by significant changes in behavior, emotions or thought processes which are prolonged and/or so severe that, taking into account the child’s development and the social and cultural background, they interfere profoundly with everyday life and are a serious disability for the child, the family, friends or those who care for or teach the child’.

### **1.3. Theoretical Approaches for Understanding behavioral and emotional difficulties**

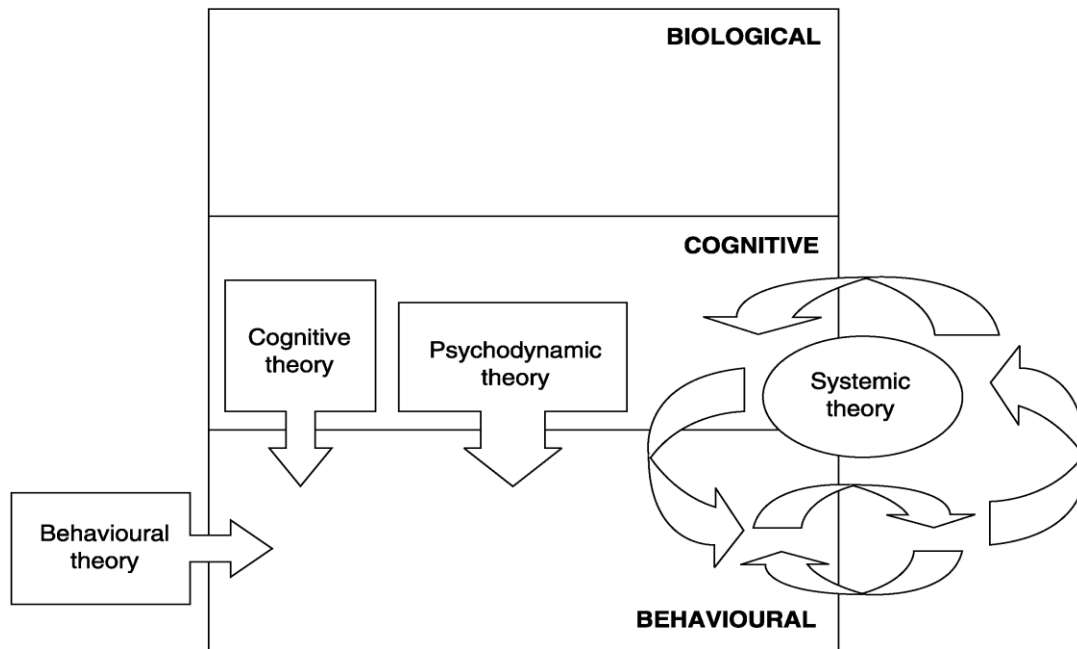
There are a number of different approaches that can be adopted in understanding and managing pupil behavior in schools. Given the range of the behavior and the influences involved, it is widely argued that a multi-level approach is usually most useful for understanding EBDs. This section presents the interactive factors (IF) framework which is based on the work of Morton and Frith (1995), and summarizes different theoretical approaches for understanding EBDS.

The IF framework uses three levels of description to explain developmental problems – the biological level, the cognitive level and the behavioral level – and, in addition, recognizes the operation of environmental factors at all three levels. At the biological level we record information about the brain and about sensory processes such as hearing and vision.

Hypothesized within-child factors, including affective factors, are located at the cognitive level, while directly observable behaviors are placed at the behavioral level. The major theoretical approaches that have been developed to understand EBDS are represented in Figure 1 using the IF framework which can help to clarify similarities and differences between them.

Figure 1: The major theoretical approaches that have been applied to understanding EBDS

**ENVIRONMENT/MANAGEMENT**



**1.3.1. Behavioral approaches**

In behavioral approaches the primary focus is on behavior that can be directly observed. It is assumed that behavior is learned through what happens in a child’s environment, so that well-established patterns of behavior can be changed by changing environmental consequences or other related events. There are a number of different learning theories – for example, Pavlovian classical conditioning, Skinner’s operant conditioning and Bandura’s social learning theory. They all share the basic assumptions of the behavioral approach but differ in the detailed mechanisms through which behavior is thought to be learned. Behavioral approaches make no reference to students’ thoughts or feelings. The relationship between the environment and pupil behavior which they embody is represented in Figure 2. In understanding emotional and

behavioral difficulties the focus is on clarifying the specific behaviors regarded as undesirable and identifying the features of the environment that support the undesirable behavior or can be used to help the pupil unlearn it.

From a behavioral perspective the undesirable behavior characteristic of EBDS develops when children learn to engage in it because it is associated with outcomes that are positive for them.

In the behavioral approach intervention involves changing the environmental conditions to help the child unlearn the undesirable behavior and learn desirable behavior instead.

### **1.3.2. Cognitive approaches**

In cognitive approaches the primary focus is on cognitive processes – how the individual perceives events, thinks about them, plans, and solves problems. It is assumed that the relationship between environmental events and a child's behavior will depend on the child's interpretation of events. If two children are reprimanded by the teacher they may each interpret this same event differently and attribute responsibility accordingly. One may feel that they deserved the reprimand and that they are to blame, while the other may feel that the teacher was picking on them unfairly and blame the teacher. An important factor in their response will be the way in which they *perceive* events. It is argued that in order to change the behavior of children who present EBDS it is important to help them change the way in which they think about themselves and the world. Different cognitive theories focus on different processes. Examples include:

- ✓ children's perception of themselves and their self-esteem;
- ✓ their attributions for the causes of their difficulties – for example, to themselves or others
- ✓ their attitudes and how these develop and change;
- ✓ their skills in problem-solving, applied to situations that arise in their everyday interactions with other people.

From a cognitive perspective the undesirable behavior that is characteristic of EBDS develops when children misperceive and misconstrue situations, so that they respond in a way that seems

appropriate and rational to them, but inappropriate to other people who see the situation differently. For example, if a pupil is bumped into in a corridor by another, most teachers and students would regard a physical attack as an unreasonable response. Most people would not attribute negative intent to this action but would assume that it was an accident. If hostile intent is attributed feelings of anger or anxiety are likely to result and can lead to the pupil hitting out at their unwitting assailant.

Traumatic life events may predispose children to interpret the world as a hostile place. Dodge *et al.* (1995) followed up children who had suffered physical abuse in the preschool years. They found that these children were four times as likely to be rated as aggressive by teachers at 8–10 years of age. The children rated as aggressive were also found to be experiencing a number of associated cognitive processing difficulties. They misperceived social situations because they tended to focus disproportionately on any hostile cues that were present (a tendency that doubtless had protective significance in the past but which was counterproductive in the present). They also showed strong hostile attribution biases about the intentions of others and held beliefs that aggressive behaviors lead to positive outcomes for the perpetrator. Traumatic violence that can lead to hostile attributional biases is not confined to out-of-school contexts but can also be experienced in schools, as the literature on bullying illustrates (MacDonald 1996).

Furthermore, vicious cycles are often set up where children who react in ways that seem unpredictable and unreasonable become rejected by the peer group and regarded negatively by teachers. In this way their belief that the world is a hostile place can become a self-fulfilling prophecy in each new situation they encounter.

Cognitive approaches to intervention involve working with the child or young person to challenge their misperceptions, faulty beliefs or attributions and to help them learn more adaptive ways of perceiving and interpreting themselves and their world. Students may be helped to improve their self-esteem by substituting rewarding and supportive self-talk for defeatist and undermining self-statements.

Cognitive mediation of biological-level influences may also be targeted, for example by anger and anxiety management programs where children are taught to recognize physiological

indicators of these emotions at an early stage (e.g. pounding heart, sweaty palms) and to engage in relabeling and other self-talk strategies in order to stay calm and not be panicked into ‘fight’ or ‘flight’ behavior (see Table 15.4 for sources of information on these strategies).

However, cognitive changes resulting from intervention are not always accompanied by changes in behavior. A pupil’s difficult behavior will often be well established and exacerbated by responses from peers which will not be changed by a cognitive approach that focuses on the target child alone. Cognitive interventions are therefore often combined with behavioral interventions designed to address other influences on the behavior.

### **1.3.3. Psychodynamic approaches**

Psychodynamic approaches are based on the assumption that many of the wishes, drives, anxieties and fantasies that determine our behavior are unconscious. Children’s behavior problems are seen as ‘outward and visible symptoms of internal and invisible conflict’ (Davie 1986: 6). But the individual concerned may not be aware of the conflict that is expressed in this way, they may simply have intense feelings for which they cannot easily find a cause. Perhaps, when their teacher sets them work that they find difficult, the scenario recaptures unconsciously a repeated sequence of events from earlier in their life. It may be that, whenever they tried to please one of their parents, there was a pattern in which whatever they did was not good enough and they were subjected to harsh criticism or punishment. Perhaps this did not always ‘really’ happen, but it seemed to them that this was how it was, because they came to expect to fail every time. Now, some years later, when work is set in the classroom the teacher is unconsciously treated as that parent through a process of *projection*. So the teacher too is seen to be expecting failure from the outset.

Psychodynamic approaches focus on understanding and resolving such internal conflicts rather than working directly to reduce the undesirable behavior that results from them.

### **1.3.4. Biological-level influences**

So far nothing has been said about biological-level influences on behavior, or about formulating and testing hypotheses at this level. While biological-level influences will be important in some

cases, their investigation is outside the scope of the professional qualification and expertise of teachers and educational psychologists. Close interdisciplinary collaboration with medical staff will be important in these cases, of which ADHD represents a good example.

At the biological level consideration is given to:

- factors that may result in types of neurological damage known to be associated with behavior of this kind (e.g. head injuries, epilepsy, the metabolic disorder phenylketonuria);
- possible genetic factors which have been suggested in a number of studies carried out with twins (Pennington and Ozonoff 1996);
- neuroanatomical and neurochemical factors implicating reduced blood flow or levels of key chemicals in particular areas of the brain.

It is recognized that there will be considerable individual differences in the effects such factors may have and that multiple influences may also be present.