CENTRES OF EXCELLENCE FOR CHILDREN'S WELL-BEING
CENTRES D'EXCELLENCE POUR LE BIEN-ÊTRE DES ENFANTS
Children and Adolescents with Special Needs
Les enfants et les adolescents ayant des besoins spéciaux

Strength-Based Strategies to Facilitate Engagement and Address Behavioural Issues in Students

Dryden Conference
November 6-7, 2008

www.coespecialneeds.ca

Production of this document has been made possible through a financial contribution from the Public Health Agency of Canada. The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

<<La production de ce document a été rendue possible grâce à une contribution financière provenant de l'agence de santé publique du Canada. Les vues exprimées ici ne représentent pas nécessairement les vues de l'Agence de santé publique du Canada.>>

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CENTRES OF EXCELLENCE FOR CHILDREN'S WELL-BEING
Children and Adolescents with Special Needs

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Outline

I. Behavioural Disorders
- **a. Oppositional**
- **b. Attention & Hyperactivity**

II. Strengths Assessment

III. Strength-Based Strategies

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Behavioural issues generally represent either difficulties in self-management or a choice to behave inappropriately.

Either way, there are many strategies that professionals can use both to reduce the probability that a behavioural problem will occur and to motivate the student to learn appropriate coping skills and demonstrate pro-social behaviours.

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From the time of birth and at least through their elementary school years, children are faced with a number of challenges that they have to address in order to develop good self-regulatory skills. Essentially, they rely on the adults in their lives to provide guidance and support for these skills to develop.

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I. Behavioural Disorders

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Oppositional Defiant Disorder (ODD)

Oppositional behaviours in students are generally associated with Oppositional Defiant Disorder (ODD).[1] Essentially, ODD is defined as:

A pattern of negativistic, hostile and defiant behaviour lasting at least six months, during which four (or more) of the following are present:

1. American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders (4th ed. text revision). Washington, D.C.*

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ODD continued…

- ✓ Often loses temper
- ✓ Often argues with adults
- ✓ Often actively defies or refuses to comply with adults' requests or rules
- ✓ Often deliberately annoys people

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ODD continued…

- ✓ Often blames others for his or her mistakes or misbehaviour
- ✓ Is often touchy or easily annoyed by others
- ✓ Is often angry and resentful
- ✓ Is often spiteful or vindictive

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Attention Deficit Hyperactivity Disorder (ADHD)

The symptoms are in contrast to the symptoms of Attention Deficit Hyperactivity Disorder (ADHD). Essentially, Attention Deficit Hyperactivity Disorder is defined as:

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders (4th ed. text revision). Washington, D.C.*

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Inattention

1. Six (or more) of the following symptoms of **inattention** have persisted for at least six (6) months to a degree that is maladaptive and inconsistent with developmental level

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Inattention continued…

- often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities
- often has difficulty sustaining attention in tasks or play activities
- often does not seem to listen when spoken to directly

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Inattention continued…

- often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behaviour or failure to understand instructions)
- often has difficulty organizing tasks and activities in tasks that require sustained mental effort (such as schoolwork or homework)

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Inattention continued…

- often loses things necessary for tasks or activities (eg., toys, school assignments, pencils, books or tools)
- is often easily distracted by extraneous stimuli
- is often forgetful in daily activities

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2) Six (or more) of the following symptoms of **hyperactivity-impulsivity** have persisted for at least six (6) months to a degree that is maladaptive and inconsistent with developmental level:

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Hyperactivity

- often fidgets with hands or feet or squirms in seat
- often leaves seat in classroom or in other situations in which remaining seated is expected

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- often runs about or climbs excessively in situations in which it is inappropriate (in adolescents or adults, may be limited to subjective feelings of restlessness)
- often has difficulty playing or engaging in leisure activities quietly
- is often "on the go" or often acts as if "driven by a motor"
- often talks excessively

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Impulsivity

- often blurts our answers before questions have been completed
- often has difficulty awaiting turn
- often interrupts or intrudes on others (eg., butts into conversations or games)

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Notice that while ADHD resides in the individual, ODD is an Interactional Disorder, ie., oppositional behaviours are the product of an interaction between two individuals.

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II. Strengths Assessment

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Strengths defined . . .

Strengths refers to "emotional and behavioural skills, competencies, and characteristics that create a sense of personal accomplishment; contribute to satisfying relationships with family members, peers and adults; enhance one's ability to deal with adversity and stress; and promote one's personal, social, and academic development" (Epstein, 1999).

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10 Domains of the SAI

CONTEXTUAL	PERSONAL DEVELOPMENTAL
Peers	Personality
Family/Home	Personal and Physical Care
School	Spiritual and Cultural
Employment	Leisure and Recreation
Community	Current and Future Goals

SAI DOMAIN EXAMPLES

CONTEXTUAL	PERSONAL DEVELOPMENTAL
Peers •Handles conflict with peers effectively and safely •Is particularly close to one or more Friends	**Personality** •Demonstrates a sense of humour. •Can accept disappointments.
Family/Home • Is respectful to family members • Expresses concern for other family Members	**Personal and Physical Care** •Takes medications as prescribed •Has healthy eating habits
School •Seems to enjoy school •Attends classes	**Spiritual and Cultural** •Has spiritual or religious beliefs •Feels a connection with nature
Employment • Works hard when on the job • Works well with others	**Leisure and Recreation** •Likes to read •Participates in physical activity
Community • Is respectful of community members and community leaders • Feels part of the community	**Current and Future Goals** •Is motivated to achieve future goals. •Has a plan for self for future (family, career, dreams).

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Evidence for the value of a strength based approach to risk assessment and treatment has been documented by several independent experts:

- Kurtz & Linnemann (2006) showed that this approach can reduce the risk of re-offending in a population of juvenile offenders.
- Lyons et al. (2000) showed that strengths could predict how well risk behaviours were reduced during treatment.

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- Toche-Manly et al (2004) reported that strengths can help predict improvement in residential and outpatient services.
- Cox (2006) found a strength based approach to increase parent satisfaction and lower termination rates and missed appointments in a group of adolescents with emotional and behavioural problems.

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- In order to answer this question, we developed the original Strength Assessment Inventory (SAI) which was later refined for greater cultural applicability to First Nations Youth.
- A Strength Assessment has been used to assess its influence on risk in incarcerated adolescents (Cartwright, 2003). Findings from this study indicated that strengths do appear to act as a buffer and were related to lower levels of delinquency, aggression, and staff reported behavioural incidents.

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- We have since implemented the SAI as a key component of an assessment and treatment protocol that been successfully applied both to a high-risk population of adolescents with substance abuse problems and intermediate students with very serious violent behaviours in the elementary school (Rawana & Brownlee, 2008).
- Results from this application have led to the identification of how development of these strengths can influence participation in treatment and lead to positive changes throughout treatment.

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Specific strategies can be used to reduce behavioural problems and encourage students to demonstrate more appropriate behaviours.

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III. Strength-Based Strategies

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Using a Strength Based Approach in Schools

- Strengths can inform individual behavioural interventions and educational planning through an improved understanding of a student's characteristics, abilities, and resources (e.g. Gleason, 2007; Jimerson et al., 2004)
- Strengths can also be used for:
  - Creative problem solving (Gleason, 2007)
  - Increasing optimism, hope, and motivation (Jimerson et al., 2004)
  - Encouraging a positive understanding of the child in the classroom (Gleason, 2007)

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Using a Strength Based Approach in Schools

- Strength based approaches can also be used more broadly to promoting prosocial behaviours in all students and in prevention programs (Edwards et al., 2007)
  - For example, mentoring programs and positive skills training workshops
- Teachers can also incorporate strengths into lesson plans and group activities to promote positive student development (Edwards et al., 2007)

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The development of a more harmonious relationship is first of all contingent on strategies that facilitate engagement between the student and significant others in the child's life.

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Develop a relationship with the student where mutual trust is fundamentally established by using strategies of:

1) Support
2) Scaffolding techniques
3) Predictability
4) Statements to take responsibility for both one's successes and failures

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5) Offer reasonable choices to the student.
6) Discuss roles and responsibilities of students and Education Assistants
7) Discuss with student the impact of annoying behaviours on how they are being perceived by other individuals.
8) Encourage student to not personalize the behaviours of other students.
9) Use of the "when…then" rule.
10) Keep communications simple and concise, and without any emotional negativity.

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Strategies to Facilitate Emotional Development

- Use questions that facilitate curiosity and willingness to learn from others.
- Use statements that are clear, brief and concise.
- Encourage planning strategies for self-regulation.

Strategies to Facilitate Social Development

- Help children understand their roles and responsibilities, and connections to the roles and responsibilities of others in their environment, eg. siblings, parents, peers.
- Focus on trust and security for children and others.
- Facilitate skills for sharing and co-operation, and appropriate competitiveness when necessary.
- Encourage perspective-taking.

- Acknowledge their importance in their social network, coupled with the importance of others.
- Appropriate celebration of important events.
- Acknowledgement of successes and failures, and gentle guidance around failures.

De-escalation Strategies

- Be vigilant about the triggers that may have initiated the reaction and see if the triggers can be removed during the incident.
- Discussion with the child at a much later time about more appropriate coping strategies to deal with the triggers.
- Use strategies to de-escalate and stabilize emotional responses since these incidents are generally emotionally-driven.

- Acknowledge the student's attempts to be successful and build on them.
- Allow ample psychological and physical space for emotional de-escalation of the student, depending on the perceived momentary needs of the student.

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Task-Oriented Engagement Strategies:

- Find out what the student can and cannot do with respect to the assigned tasks and help the child to be successful in task completion.
- Provide supportive feedback about success in task completion.
- Help the student deal appropriately with experiences of failure.

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Strategies to Facilitate Impulse Regulation

- Encourage appropriate self-talk in students.
- Implementation of the "when…then" rule.
- Encourage students to use appropriate attribution strategies, ie., internal/external, stable/unstable, specific/global.

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In summary, a significant end goal in education is to help the student develop a sense of competence in their ability to be successful and to reach or exceed their full potential.

It is important that front line staff (i.e., teachers and EA's) be encouraged to develop a framework to increase the motivation of students as staff work toward helping them to address their difficulties and become more autonomous and self-directed learners.

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Thank you!