

Supporting Students with Emotional or Behavioral Disorders

TIPS AND RESOURCES FOR TEACHERS



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What are Emotional or Behavioral Disorders (E/BD)?

The term emotional or behavioral disorders (E/BD) refers to a variety of conditions and symptoms that impair the learning, social functioning, safety, and behavioral health of children or adolescents. E/BD may occur in conjunction with a variety of other developmental disabilities, and when their presence leads to eligibility for special education services, the disability label Emotional Disturbance (ED) is used in accordance with federal Individuals with Disabilities Education Act (IDEA) legislation. E/BD include externalizing behaviors (characterized by aggression or outward disruption), and internalizing behaviors (including social withdrawal, depression, anxiety, and self-harm). Students with E/BD have varying levels of intelligence, academic ability, and social skills.

How to determine if a child has E/BD

Because many symptoms of E/BD are common to other disabilities, it can be difficult to determine when a child has emotional or behavioral disorders. The academic performance of students with E/BD may be similar to that of students who have a learning disability. Some students have a tendency to engage in risky behavior characterized by impulsivity or hyperactivity, which may raise questions about the presence of Attention Deficit Hyperactivity Disorder (ADHD). Additionally, other students with E/BD may exhibit social or communication impairments that resemble students diagnosed with an autism spectrum disorder. Often, a child may have E/BD along with one or several of these other disabilities.

Significant mental health needs are noted in many young people with E/BD. The IDEA definition of ED requires that one or more of the following symptoms be present persistently and to a marked degree:

1. Learning problems in school not derived from intellectual, sensory, or health factors
2. Difficulty establishing and maintaining interpersonal relationships
3. Behaviors and feelings that are inappropriate
4. Ongoing feelings of depression or unhappiness
5. Fears or physical symptoms relative to school or personal problems

What is at stake educationally and personally?

Students with E/BD are at risk for a multitude of academic and personal hardships if they do not receive adequate intervention. Academic failure that results in low levels of literacy and numeracy, a tendency to be excluded from general education settings for both academic and behavioral reasons, and an increased probability of dropping out of school early are some of the short-term outcomes that are common for students with E/BD. Over the long-term, students with E/BD are at elevated risk for incarceration, violent crime, substance abuse, unemployment, and suicide.

What treatments are effective with students who have E/BD?

Students with E/BD benefit from intervention that is individualized to meet their academic and behavioral needs. Ongoing data collection and analysis relative to academic and behavioral performance are a critical part of identifying appropriate services and interventions. Depending on a student's needs, the following services may be warranted: counseling, psychiatric consultation, direct special education services, or consultation with a behavior analyst.

For many students with E/BD, close staff supervision is necessary throughout the school day to provide contextualized behavioral and emotional support and oversight. A continuum of services allowing for a range of class sizes, adult support, and academic levels must be provided. The provision of high quality School-wide Positive Behavior Intervention and Supports can reduce problem behavior for students with E/BD, along with their typical peers.

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Lessons should be carefully structured to provide many opportunities for students with E/BD to respond, and pacing should be modulated to maximize student engagement with content. Assignments should be within the instructional or independent level of difficulty to prevent frustration with tasks that are overly challenging, and there must be a capacity to provide needed scaffolding. Remedial instruction should be carefully planned and delivered to address deficits in core academic skill areas. Neglecting these core deficits in order to address grade level standards will prolong students' dependency on staff to translate, modify, and accommodate with respect to instruction and content that assumes basic academic proficiency.

Supervision should be decreased as data indicate that students with E/BD continue to be safe and responsive to intervention despite reduced oversight. Peer-mediated interventions can be beneficial academically and socially, but must be carefully structured and supervised to ensure that students learn as much as possible from these situations. Using individual or class-wide token economies is likely to provide additional motivation necessary to engage students in appropriate school work and socialization. Systems of self-management provide improved independence and autonomy, and can allow for the extension of a token economy into general education settings with less supervision. It is best practice to publicize and review schedules and follow consistent routines throughout the school day in order to reduce student stress and set the stage for students' behavioral and academic progress.

Vanderbilt Kennedy Center

The **Vanderbilt Kennedy Center** (VKC) works with and for people with disabilities and their family members, service providers and advocates, researchers and policy makers. It is among only a few centers nationwide to be a University Center for Excellence in Developmental Disabilities, a *Eunice Kennedy Shriver* Intellectual and Developmental Disabilities Research Center, and a Leadership Education in Neurodevelopmental and Related Disabilities Training Program. The following are some of the ways the Center's programs and staff can assist families, educators, and other service providers.

Treatment and Research Institute for Autism Spectrum Disorders (TRIAD)

TRIAD is a Vanderbilt Kennedy Center program dedicated

to improving assessment and treatment services for children with autism spectrum disorders and their families while advancing knowledge and training. See TRIAD. vumc.org or call (615) 936-0267.

Vanderbilt Autism Resource Line

Free information and referral service for parents, teachers, and community professionals. Information is available about autism-specialized diagnostic evaluation services, school consultation, parent workshops, and professional training at Vanderbilt for children, adolescents, and adults with ASD. Contact autismclinic@vumc.org, or (615) 322-7565, or toll-free (877) 273-8862.

Tennessee Disability Pathfinder

Tennessee Disability Pathfinder is a free statewide phone, web, and print referral service in English and Spanish. It connects the Tennessee disability community with service providers and resources. Its website database has over 3,000 agencies searchable by Tennessee county and service. Pathfinder is a project of the VKC, TN Council on Developmental Disabilities, TN Department of Health, and the TN Department of Intellectual and Developmental Disabilities. Contact www.familypathfinder.org, (615) 322-8529, toll-free (800) 640-4636.

Other Resources

- **The IRIS Center**

A national center dedicated to improving education outcomes for all children, especially those with disabilities birth through age twenty-one, through the use of effective evidence-based practices and interventions. <http://iris.peabody.vanderbilt.edu>

- **Council for Children with Behavior Disorders**

www.ccbd.net

- **Tennessee Voices for Children**

www.tnvoices.org

- **Journal of Emotional and Behavioral Disorders**

<http://ebx.sagepub.com>

- **Intervention Central**

www.interventioncentral.org

Contact the Vanderbilt Kennedy Center

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