You Can't Make Me….Working with Students with Oppositional Defiant Behaviors

Presented by Bev Johns
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Special Education Resolution Center

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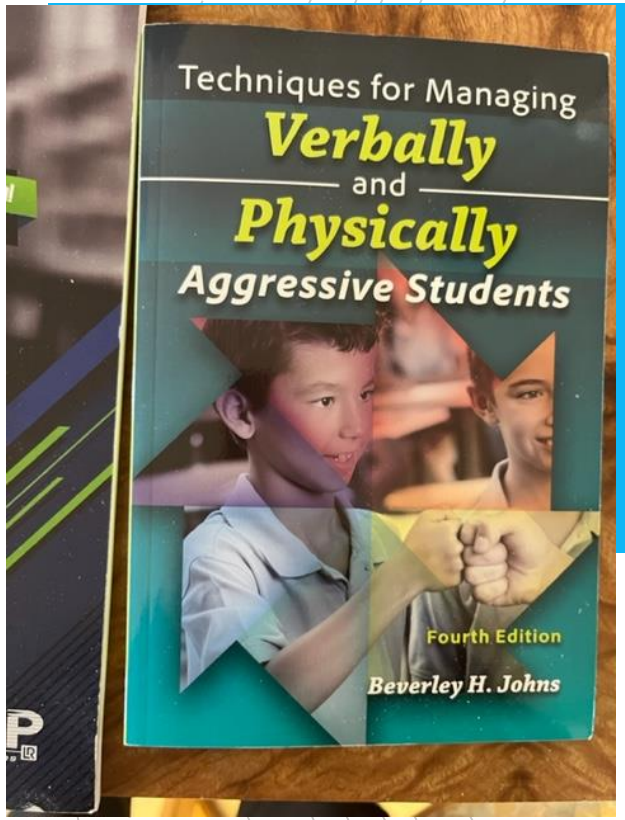
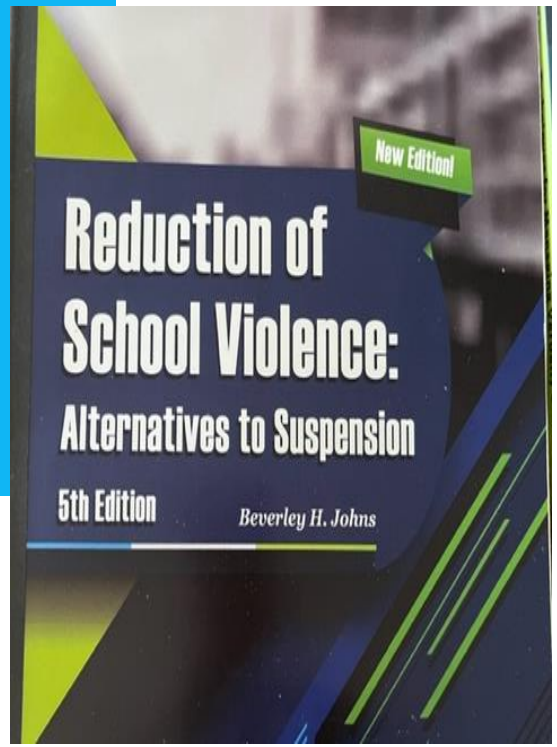




- 40 years experience working with students with significant emotional behavioral disorders—the case of the dangling earring
- Was the administrator of an alternative school for children with the most significant behavioral and emotional problems
- Was a Professional Fellow at MacMurray College in Jacksonville
- Author of over 25 books mostly non-fiction about students with behavioral and emotional problems
- Detective

Restorative Practices in Education through Art

Lisa Kay, Donalyn Heise, & Beverley Johns

Investigate the restorative aspects of the arts with a focus on healing beyond adversity. Through a collection of essays from experts in the field, this new title brings together a wide range of voices on the path towards restorative arts education. **Practical arts-based examples and strategies** provide a greater understanding of **how to intentionally support students' in any educational setting**.

Content includes:

- Mind/body practices and interventions
- Ways to build social/emotional resilience through the arts
- Creative healing practices for individuals, groups and communities

DAVIS Committed to Art Educators Since 1901

- https://www.additudemag.com/must-read-adhd-articles/

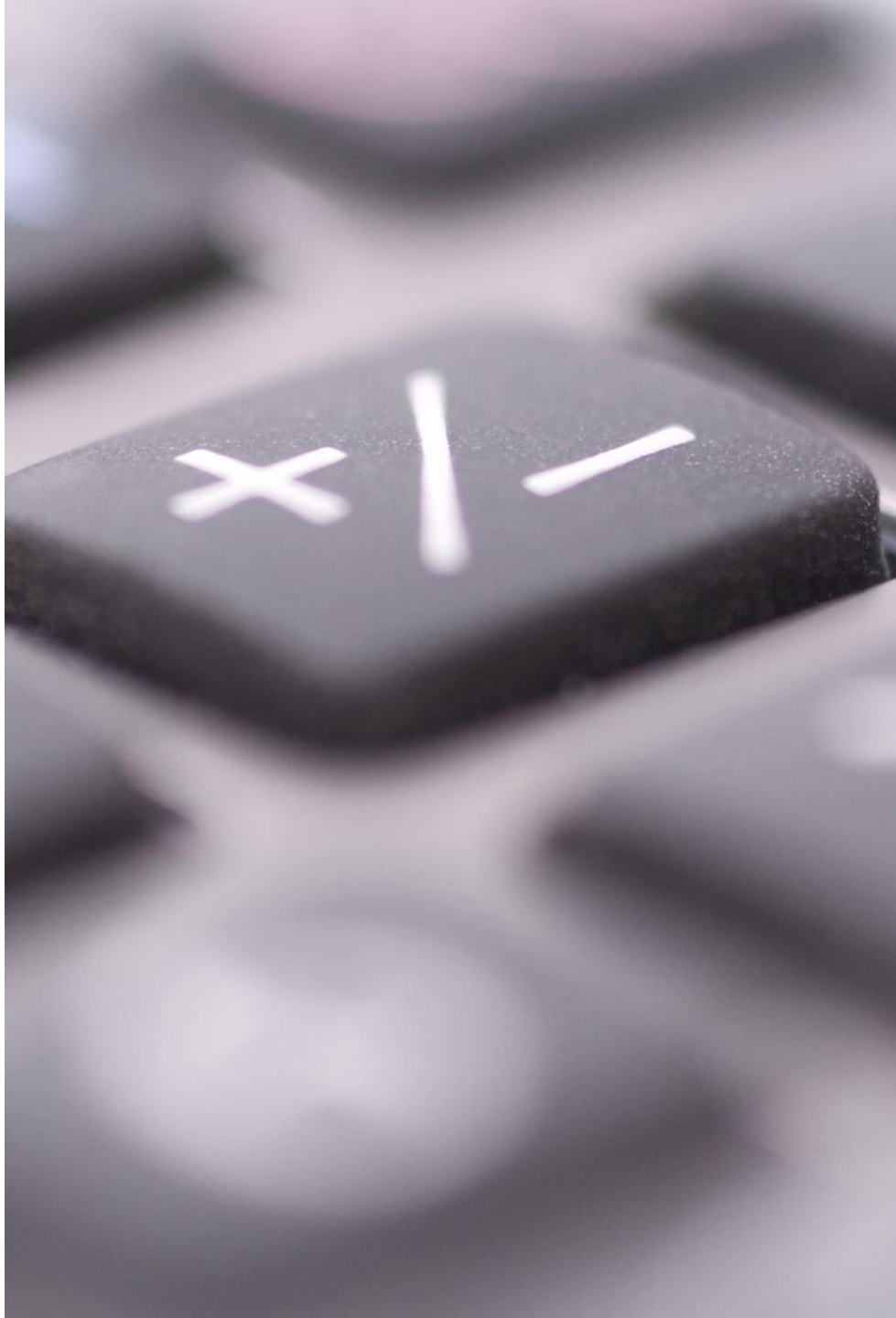
Outcomes

Recognize the characteristics of ODD

Recognizing how our bias influences our work

Recognize the key components of an evaluation

Identify key strategies for working with students with ODD



Wheel of Fortune—Can you answer these?

- P_A_S_
- CH__C_
- _RE_ACK
- _E_P_N_E C_RD_
- B_H____R M_M____M

Why These Students May Be Difficult for us.

- Co-morbidity is the rule
- Challenge to our competence
- Can't fix everything, fix what you can
- Consider their fight, flight, freeze response. Females are more likely to freeze.
- Hard for us to use the Q-Tip method.

We Can't Take Care of the Children if Our Needs Are Not Met

- If I have no food, I can't give the child any food
- If I am naked, I can't clothe a child
- If my emotional needs are drained, I can't give the child the emotional support they need

And What About Attentional Bias

- Brains pay more attention to negative information as compared to positive information
- Brain is trained to look for threats
- Exemplified in children with anxiety and they may use avoidance as an anxiety reduction strategy. Procrastination may be fear.

Other types of bias

- Confirmations Bias—when we accept information that affirms our original belief while rejecting anything contrary
- Fundamental Attribution bias—blame on person and don't recognize systemic facts
- Binary bias—either/or
- Hostile attributions—tendency to interpret the behaviors of others as having hostile intent.
- Dunning-Kruger effect—cognitive bias where people with little expertise or ability assume they have superior expertise or ability. Don't have enough knowledge to know they don't have enough knowledge.
- Think about our own bias

Why Are We Seeing More Oppositional Behavior

- As a result of the pandemic, anxiety has increased and with it--problems with executive function--emotional regulation, cognitive flexibility, and in processing information, and in attending school
- Some students may now be as much as 2 years behind socially and emotionally
- Increase in trauma in our students—Big E—massive events impacting all and Little E—trauma some experience and others don't. Trauma Assuming.
- Children are grieving and part of the grieving process is anger—losses in relationships during the pandemic
- Our society has become desensitized to aggression
- An increase in toxins in the environment
- Reduction in time to play
- The impact of social media—isolation, auditory processing
- Drugs—Fentanyl Crisis, Vaping

Incidence rates—anywhere from 1 to 16% of all school-age children and adolescents have ODD.

Behaviors Displayed

- **Argumentative**
- **Overall irritable and negative attitude**
- **Uncooperative on purpose—this may be surface behavior**
- **Angry**
- **Defies rules**

Co-Morbidity

The Rule rather than the exception

More about ODD and co-morbidity

- 15-50% of students with ADHD may also have ODD
- 12% of young children with OCD have ODD
- Anxiety Disorder and ODD—40%
- Autism and ODD—42%
- Disruptive Mood Dysregulation Disorder– seen in high percentage of students with ODD
- Risk factor for future depression
- ODD associated with intentional, unintentional harm with self – injuries
- About 10% of children who are homeless may have ODD
- 20% of children were observed with ODD after a traumatic event
- Seen as a disorder of emotional regulation***
- Language ability predicted later behavior problems
- 30% of children with ADHD are delayed in self-regulation

Behavior is the cover

- Some more facts:
- **ODD associated with
- unintentional, intentional
- and self injuries
- **9.8%-10% of children who are homeless may have more disruptive behavior
- **20% of children were observed with ODD behaviors after a traumatic event

Behavior is the cover

- **Could be a sensory processing disorder**
- **Could be a specific learning disability**
- **Could be a language problem—Language styles—direct vs. indirect mismatch between language system at home vs. at school**
- **Could be a motor problem**
- **Could be……**

Think About a Student with Whom You Worked or work with now.

- What other co-morbidities may exist

POLL

One of these statements is a lie. Which one?

A.
Oppositional Defiant Disorder generally shows up before age 8.

B.
Behaviors of students with oppositional defiance last over 6 months.

C.
ODD and Conduct Disorders are the same thing.

Some Facts About Co-Morbidity

- Children with ADHD have impulsive behaviors that make it harder for them to control their behavior. Children with ADHD receive 20,000 more negative messages by age 10 than other children.
- Three defining characteristics of ADHD that are often forgotten—interest based nervous system, emotional hyperarousal, and rejection sensitivity
- Symptoms of ODD were more strongly associated with both physical and relational bullying than the symptoms of ADHD.
- ODD may be an indication that other underlying disorders are occurring—Depression, Bipolar Disorders, ADHD, Specific Learning Disabilities

PICTURE THIS SEQUENCE

ADHD

ANXIETY

ODD

Evaluation Components and Cautions

Deep Dive Evaluations

- Cognitive Assessment
- Achievement Assessment
- Social Developmental Study
- Medical History
- Functional Behavioral Assessment
- Motor Skills
- Language Skills
- Executive Function
- Strengths
- Interests
- Cultural Factors
- Other

Here Comes the Judge

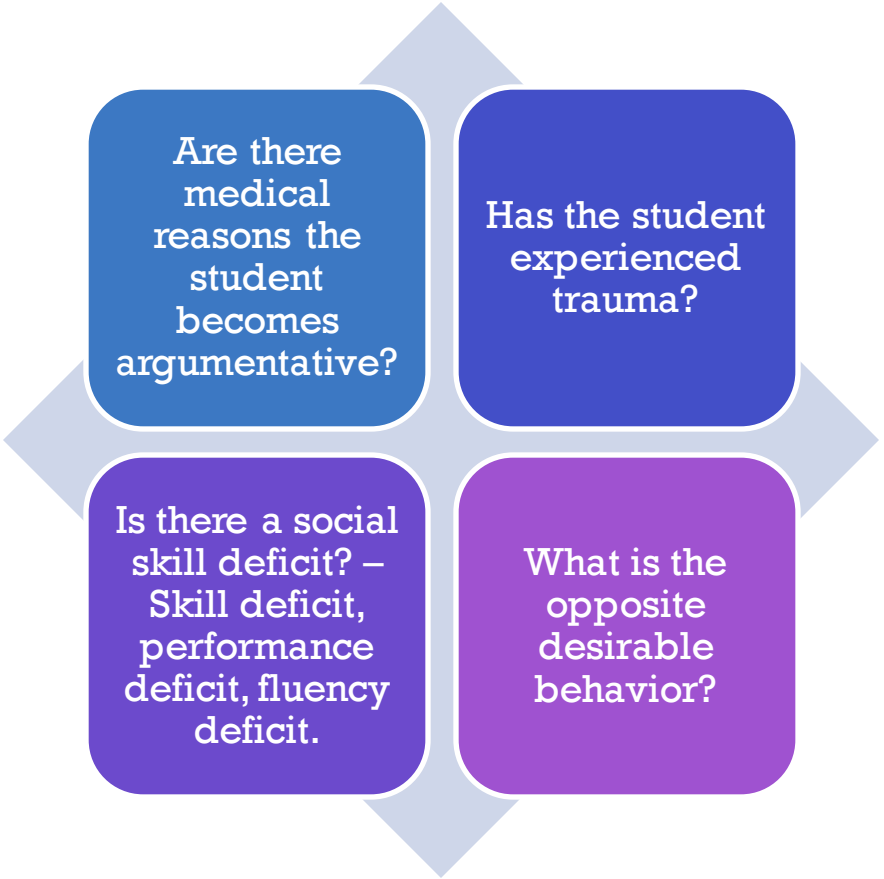
What Was the Ruling

- Student had been found eligible for special education under OHI for conduct problems, social maladjustment, possible post traumatic stress disorder. Student was to get counseling services. Parents maintained that his mental health needs justified counseling services.
- Was compensatory service ordered?

Another case

- Student was diagnosed with conduct disorder, bi-polar disorder, and ADHD. Parents wanted special education. School district said the behaviors were manifested as conduct disorder and they did not believe he was eligible under IDEA.
- What other factors would you look at?

Ask yourself these questions:



- Assess—skill deficit, performance deficit, fluency deficit
- Teach the skills you want
- Reinforce the skills you want
- Model the behavior you want
- Let students know on the front end what you want
- Teach that aggression is not appropriate in school—low level aggression leads to high level aggression

Why is it so hard to teach social skills? (With credit to Rick Van Acker)

Academics

- **2 + 2=4**
- **Teachers tend to agree**
- **Correct answers become habit**
- **Answers not usually dependent on peers**
- **Wrong response tends to elicit more teaching**
- **Students usually get reinforcement for correct response**
- **Learn it wrong and harder to unlearn**
- **If they can't learn it, we will accommodate**

Social Skills

- **Right answer varies from day to day or teacher to teacher**
- **Teachers don't agree with what is right answer**
- **Learn it wrong and it is harder to unlearn and learn correctly**
- **Incorrect behaviors may become habit**
- **Peers impact response**
- **Wrong response tends to elicit a consequence—teachable moment not utilized**
- **Wrong response elicits less teaching**
- **Wrong response may elicit removal of chance to learn**
- **If they get it wrong, we don't always teach the right way**
- **Students just expected to behave correctly and may not be reinforced**
- **People are not likely to accommodate**

The Good, The Bad, Using the Good to Prevent the Ugly

Bad

He can do it. He just won't.

He's just acting like a big baby.

He just takes his time doing everything I want him to do.

He just is acting like the class clown.

Good

I need to check to see if the student is able to do the task.

I need to check to see what the student's social/emotional level is.

I need to check to see what the child's processing time is.

I need to check to see if the student is covering up for something he can't do.

Controlling our own behavior:

- Do I have specific biases? The first step to countering bias is acknowledging its presence
- Do I let the students know that their behavior is getting to me?
- Do I know my own triggers?
- Do I give more reprimands than positive comments to students during the day?

INCIDENT REPORTS RESULTING IN POLICE CALLS –
THE INABILITY TO EMOTIONALLY REGULATE IN CHILDREN WITH OPPOSITIONAL DEFIANT DISORDERS

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Child engaging in
Oppositional Defiant Behaviors

The adult is Emotionally Regulating
Remains calm, Redirects positively,
Gives the student time to process and save face,
actively listens, gives choice

The adult is struggling to
emotionally regulate.
Raises voice, gets too close

Child escalates
Argues back
Yells

Adult escalates
Gives ultimatums
Raises Voice

Student loses control
Hits/damages
Police Call

Self- Monitoring our Own Behavior

- *Reflective Practice—When I am having a problem the first place I look is myself, knowledge doesn't translate into action
- *Taping--# of positive statements, # of reprimands,
- #of words in directions
- *Am I giving more reprimands than positive comments?
- *Check your four corners—am I focusing on all parts of the room?

Our reactions should be when a child makes a mistake

EMPATHY

INSIGHT

OPTIMISM

I Have The
RIGHT To
Remain
Silent...
#Final Quotes
I Just Don't
Have The
ABILITY.

Building Relationships

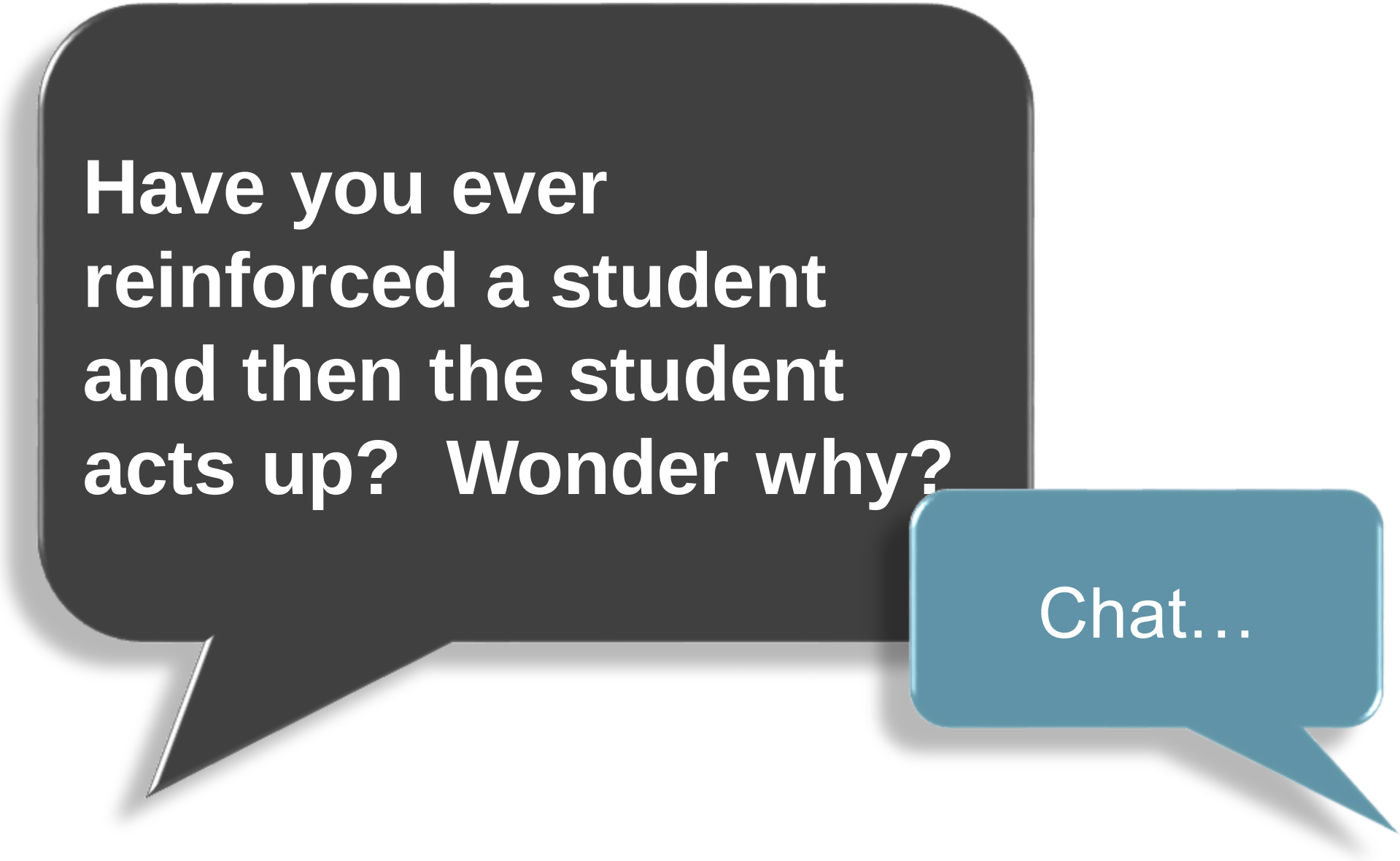
- Using students' names in positive ways, in assignments
- Building on strengths and Interests
- Restorative Practices
- Giving Hope
- Micro-adventures—Nature, ADHD study
- Community service
- Someday in school, I'd like to…… (Mark Tappan, 2023)
- 2 X10
- Moving Stories
- Your ideas?

Basic Behavior Management

- Be Positive, Be Brief, Be Gone
  - Allows Student to Save Face
  - Allows Student to Process the Information
- Behavior Momentum—give an example
- Behavior Specific Praise—Use a recording to monitor your use of behavior specific praise

Starting a Task Strategies

- Behavior Momentum-–setting up for success
- To begin one activity, you have to stop what you were doing—might use the word pause
- Give them an example of what something looks like done—visualization tool and then teach them how to create their own
- Do the first one-two steps with them so it is easier for them to move on. You started with them. You can also preview in advance and have them do part of the assignment
- Have the student rate the task on level of difficulty from one to five and then after they have completed so they can see for themselves inaccurate thinking
- Procrastination--Draw the child to the work environment with some of their favorite things.


Have you ever reinforced a student and then the student acts up? Wonder why?
Chat…

Avoiding Power Struggles

- Acknowledge, don't deny feelings.
- Utilize I statements
- Behavior Specific Dialogue—two requests
- Provide Choice

We're going to sit here until all of you settle down. And I don't care HOW long it takes!

It's All in How You Say it.

- Start and help them start
- Could instead of Should
- It's Your Choice, I know you can make a good decision.
- Calm and a slower rate of speech.

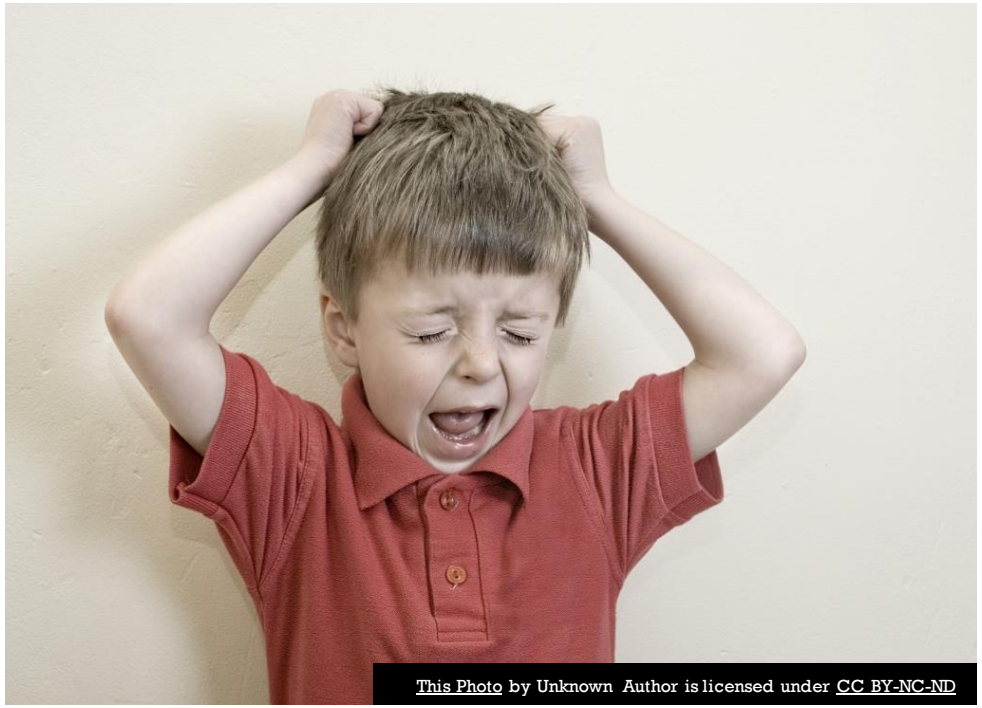
Emergency Plans

- When child is hurting self or others—when you can't wait 60 school days until an evaluation I completed
- Where is a calm space for student—in the room or outside the room
- Will the other students be removed or will the disruptive student be removed
- Who can be called for help
- What support is available for the teacher

POLL

What is a critical indicator on the teacher's part that increases aggression in the classroom?

1) Teacher sitting at his/her desk
2) Unclear directions
3) Number of teacher reprimands
4) I don't know



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Emotional Regulation

- *Mindfulness
- *Breathing
- *Antiseptic bouncing
- *Cathartic Dump
- *Sensory Needs
- *Exercise
- *Calm Area
- *Grounding
- *45 second pause

ENGAGING IN "CATHARTIC DUMPING" TO MOVE FORWARD
"THE ACCEPTABLE WAY TO CLEAR YOUR MIND SO YOU CAN MOVE FORWARD AND BE PRODUCTIVE"

BY Bev Johns • beverleyhjohns@gmail.com • www.bevjohns.org

A WHOLE ARRAY OF CATHARTIC DUMPING ACTIVITIES

- Writing Poetry
- Writing a Song
- Designing through Zentangle
- Creating a Vision Board
- Writing a Thank You Note
- Journaling
- Creating a Life Less Ordinary Board
- Writing an Op Ed
- Writing a Fictional Short Story about a bothersome event
- Creating a Game
- Writing a Skit or Play
- Blogging
- Drawing
- Painting
- Sculpting
- Coloring
- Sewing/ Needlepoint
- Knitting
- Crocheting
- Creating a Painted Rock Garden
- Creating a Recipe
- Creating a Plan for a Garden
- Creating a Feelings Collage
- Writing Your Memoir
- Creating a Memorial Tribute Collage

Think of two takeaways for you!

Stop Resistance by

R—Relationships

E—expectations—positive and clear

S—supportive assistance

I—involvement

S—structure

T—time--know processing time

A—antiseptic bouncing

N—use student names in a positive way

C—cathartic dumping

E--engage