TOOLS FOR SCHOOL STAFF WORKING WITH STUDENTS WITH EMOTIONAL DISTURBANCE

A Project

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by

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TOOLS FOR SCHOOL STAFF WORKING WITH STUDENTS WITH EMOTIONAL DISTURBANCE

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Department of Special Education, Rehabilitation, School Psychology, and Deaf Studies
Abstract

of

TOOLS FOR SCHOOL STAFF WORKING WITH STUDENTS WITH EMOTIONAL DISTURBANCE

By

Caitlin C. Robles
Alexandria Spence Weathers

The authors collaborated and shared equal responsibility in all aspects of the development of this project, which reviews current research on emotional disturbance and individual and classroom interventions. Strategies and interventions are included to address common social and emotional concerns experienced by students with emotional disturbance, which include: social skills, effective communication, anxiety, depression, anger management, aggression, and noncompliance. Additionally, classroom and school-wide strategies and interventions are included which not only benefit students with emotional disturbance, but decrease problem behaviors among all student populations.

The prepared project is a resource binder which includes worksheets and handouts to address various social and emotional concerns experienced by students with emotional disturbance. The resource binder is designed to be used by school psychologists, special education teachers, and other professionals working closely with this population of students.

____________________________, Committee Chair
Stephen E. Brock, Ph.D.

____________________________ Date
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Chapter 1

INTRODUCTION

Emotional disturbance (ED) is a special education eligibility category that includes students with challenged social, emotional, and behavioral functioning; and creates a ripple down effect that further affects their learning, home, and school environments. Students eligible for special education in the ED category typically exhibit both poor social functioning and high levels of problem behavior (Kauffman & Landrum, 2009). School Psychologists as well as both general and special education teachers have the opportunity to work with these students in the classroom and throughout the school day. With this population of students participating more and more in general education classes, IDEA mandates that every teacher make specific accommodations for their students with emotional disturbance (Wagner et al., 2006). The provision of resources in this document (suggested to help address the common social and emotional concerns experienced by students with an ED) was the goal of this project. The resource binder developed from it will allow school professionals to have access to a variety of tools and strategies helpful when working with students who are dealing with social and emotional issues.

Background of the Problem

Students with ED have typically had problem behaviors and deficits in social skills, which place them at risk for problems in relationships, school failure, substance abuse, problems with the law, difficulty adjusting to life in their community, and even mental health problems (Wiley, Siperstein, Forness, & Brigham, 2009). Merrell and
Walker (2004) asserted that students with emotional disturbance and behavioral disorders have been underserved within special education programs as well as have been underidentified. In schools, where it is essential to provide students with the services they need to be successful, not having required services creates a problem. Studies show that a minimum of 3% to as much as 6% of students could qualify and benefit from additional services, both mental health services and educational (Merrell & Walker, 2004). It becomes apparent that while students who are identified are receiving some services, there is more to be done. With research suggesting that students with ED are underserved and with such high risk potential for negative developmental outcomes it was clear that there was a need for education and resources to work with students with ED (Merrell & Walker, 2004; Wiley et al., 2009).

**Statement of the Problem**

The fact that Merrell and Walker (2004) found in some cases, there are no special education services for students with ED outside of what is given in the special education classroom results in a major challenge. Specifically among students with ED, many times the only special education services include a self-contained classroom with other ED peers (Merrell & Walker, 2004). As IDEA states, services and accommodations for students in special education is mandatory and should not be at a minimum (U.S. Department of Education, 2006). Merrell and Walker (2004) explained that as professionals, “we should be more concerned with improving our systems of service delivery to enhance the benefit and outcomes for those who are served as ED” (p. 904). With this in mind, it was the authors’ desire to create a resource binder that provides a
collection of information and tools that could be used by educators to better meet the needs of ED students.

**Purpose of the Project**

Wagner et al. (2006) explains that teachers, both in general and special education are required to make accommodations based on the needs of the student as required by IDEA. That mandate along served as the primary for this project. This project provides a resource binder for educators and parents, and offers tools, strategies, and facilitates an understanding of how to work with students with ED. The project contains information and worksheets that can be helpful when working on the many common social or emotional issues experienced by individuals with emotional disturbances. The authors hope that this project will help better equip school professionals with the knowledge and resources they need when providing services.

**Definition of Terms**

**Individuals with Disabilities Education Act (IDEA)**

The term IDEA refers to a law that ensures children with disabilities receive services throughout the United States. IDEA dictates how public agencies as well as every state is to provide early interventions and special education. These services are intended for students of every age, including infants, toddlers, primary, and secondary students. This act ensures that every student has a right to a free and appropriate public education, provided in the least restricted educational environment (U.S. Department of Education, 2006).
**Emotional Disturbance**

The term emotional disturbance refers to a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects educational performance: (a.) An inability to learn that cannot be explained by intellectual, sensory, or health factors. (b.) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers. (c.) Inappropriate types of behavior or feelings under normal circumstances. (d.) A general pervasive mood of unhappiness or depression. (e.) A tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance (U.S. Department of Education, 2006).

**Social Maladjustment**

The term social maladjustment is not a clinical term and is poorly defined in state and federal regulations. Commonly, it is suggested to refer to a student displaying destructive and/or delinquent behavior as well as engaging in a pattern of purposive antisocial behavior (Merrell & Walker, 2004). For the purposes of this project, the authors compared and contrasted the socially maladjusted student and the student with emotional disturbance. The tools provided in this document could benefit both the socially maladjusted student as well as the student with emotional disturbance.

**Social Competence**

The term social competence refers to the social skills displayed by the student with regard to their ability to communicate and interact successfully with peers and adults.
(Hill & Coufal, 2005). A student’s social competence plays an integral part in determining if they would benefit from a social skills group or curriculum.

Assumptions

It is assumed that school staff and officials have some knowledge of childhood development and what to expect of students. It is also assumed that general education teachers have less knowledge (as compared to special educators) with what to expect with respect to special needs and services. By providing these resources to general educators, it is our hope that this gap will be reduced.

Limitations

Although most students who are emotionally disturbed have typically responded to some of the strategies and techniques provided in this project, the tools are not intended to provide total rehabilitation. Additionally, students who are expressing extreme social or emotional distress that is impacting their learning or home environments should be seen by a professional health care provider. In other words, if a given student’s situation or emotional distress appears to be beyond the scope of the educators training, it is anticipated that the educator will refer the student out to a professional (typically a mental health professional) specializing in the needs of the student. School-based practitioners can often provide parents and teachers with guidance, advice, and resources. In summation, this project is intended to provide school staff with tools for working with students with ED, but for this population the offered will not in and of themselves be sufficient. The tools should be considered only one part of a comprehensive treatment package.
Statement of Collaboration

The authors Caitlin Robles and Alexandria Weathers collaborated equally on all phases of this project. The authors contributed equally on the research aspect of this study as well as the writing and editing of this document. Each author collected and compiled interventions that would benefit the students in which the project supports. The interventions can include therapeutic techniques as well as assorted worksheets, both created and collected from published sources. The final project was first created separately as drafts and then compiled by both authors to make the final product.
Chapter 2

LITERATURE REVIEW

Emotional Disturbance (ED) is special education eligibility category that includes a range of emotional, social, and behavioral disabilities that affects many students. Working with students with an ED in schools is a task that both general education and special education teachers share. The purpose of this project is to provide information and tools for teachers so that they may effectively address the most common social and emotional concerns experienced by these students. This document reviews current literature in the psychological and educational fields that discuss the definition, characteristics, and interventions useful for working with students with emotional disturbance.

ED is one of the 13 special education eligibility categories specified in the Individuals with Disabilities Education Improvement Act (IDEA). Approximately 475,000 students are identified as eligible for and receive special education services under the ED category (Cullinan & Sabornie, 2004). The ED category is useful for identifying students whose unique emotional and behavioral needs impact their ability to achieve academically and function socially at school.

IDEA’s definition of ED currently encompasses a variety of behavioral, emotional, and cognitive problems (Cullinan & Sabornie, 2004). According to the U.S. Department of Education (2006), the current ED definition and eligibility qualifications are as follows:
(i) The term serious emotional disturbance means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects educational performance:

a. An inability to learn that cannot be explained by intellectual, sensory, or health factors.

b. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.

c. Inappropriate types of behavior or feelings under normal circumstances.

d. A general pervasive mood of unhappiness or depression.

e. A tendency to develop physical symptoms or fears associated with personal or school problems.

(ii) The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance (U.S. Department of Education, 2006).

According to the U.S. Department of Education, approximately 65% of the 475,000 students served under the ED special education category are 12 years of age or older, with 15 year-olds making up the largest group. Research indicates that more than 50% of students with ED between the ages of 12 and 17 receive special education services outside of the general education curriculum. These placements include special day classes, classes designed specifically for students with ED, and non-public schools. In comparison, only one sixth of adolescent students with learning disabilities spend more than 60% of their day outside of general education classrooms. In addition,
approximately 51% of students with ED drop out of high school and only 42% graduate with a standard diploma (Cullinan & Sabornie, 2004).

Research indicates that youth with ED are over represented among low-income and poverty stricken families. In terms of minority groups, more African American and Hispanic students are identified as ED than any other ethnicity. However, in reality ED students share more characteristics with students in general than differences. Students with ED are typically white, live above the poverty line, and have private insurance. In addition, while adolescents currently make up the majority of students identified with ED, it is more likely their distribution is equal across age groups and the difference lies in referrals and eligibility determination (Mark & Buck, 2006).

While most students with ED are similar to general education students in terms of demographic characteristics, there are specific risk factors that increase the likelihood of developing an emotional disturbance. These risk factors, when combined, create a greater likelihood a student will experience psychosocial adversity and meet ED eligibility. While students with ED are more likely to live above the poverty line, poverty is a risk factor. Inadequate housing, dangerous neighborhoods, poor schools, and a lack of resources (such as recreational activities and vocational services) contribute to increased emotional disturbance risk. In addition, certain familial characteristics are also considered risk factors, including parental mental illness, substance abuse, domestic violence, and child abuse and neglect. These risk factors suggest that intervention for students with ED should include family members and other service providers (Yale Child Study Center, 2007).
ED Eligibility Criteria

Inability to Learn

Most students with ED have the cognitive abilities necessary to achieve academically. However, despite their cognitive abilities, research indicates that these students are more likely to struggle with mathematics and reading than students without disabilities. In addition, these students’ overall academic achievement has been found to be less than their chronological age would suggest. Students with ED are more likely to fail classes than students with specific learning disabilities or without disabilities. Approximately 58% of students with ED ages 9 to 17 are performing below grade level in reading and 93% are performing below grade level in math (Cullinan & Sabornie, 2004).

Relationship Problems

Research indicates adolescent students with ED are more likely to be rejected socially by their peers. In fact, students with ED are less likely to be accepted by their peers than students with or without learning disabilities (Sabornie, Kauffman, & Cullinan, 1990). In school, students with ED tend to display less peer-preferred social behavior than general education students. In addition, these relationship problems extend beyond the school environment. Research shows that students with ED display relationship problems at work and community living settings (Cullinan & Sabornie, 2004). Overall students with ED, particularly boys, display less empathy, have less contact with friends, and have poorer quality of relationships than students without disabilities (Schonert-Reichl, 1993).
Inappropriate Behavior & Feelings

Research indicates that the types of inappropriate behavior and feelings displayed by students with ED typically are psychotic, overtly bizarre, or are potentially or actually harmful to the student or others. For example, these behaviors can include overly dramatic reactions to everyday occurrences and includes extreme emotional liability, low frustration tolerance, overreaction to environmental stimuli, and extreme anxiety. Additionally, the inappropriate behaviors may be a result of hallucinations or delusions caused by a more serious mental disorder. Limited or excessive self-control, self-injurious behavior, obsessive and/or compulsive behaviors, and inappropriate sexual behavior and fetishes may be present (Tibbetts, Pike, & Welch, 1986).

Unhappiness & Depression

Research indicates that students with emotional disturbance or other behavior disabilities tend to be more depressed than students of the same age without disabilities (Newcomer, Barenbaum, & Pearson, 1995). In addition, students with ED are more likely to report suicidal ideation and attempts than students without disabilities. Of these students, girls are more likely to experience suicidal ideation and attempt suicide than boys. Overall students with ED, particularly adolescents are more likely to experience severe depression (Miller, 1994).

Physical Symptoms & Fears

Overall, research suggests that students with ED, particularly adolescents, experience more anxiety than their peers without disabilities (Newcomer et al., 1995). These students experience irrational and persistent fear that can result in the avoidance of
school. In addition, students with ED may experience panic attacks and disproportionate disabling anxiety over situations and experiences. This excessive anxiety results from a lack of self-awareness and an inability to monitor and change their reactions and behavior (Cooley, 2010a). Anxiety disorders in students are one of the most common psychiatric disorders with prevalence rates ranging from 3% to 20% (Dobson, Hopkins, Fata, Scherrer, & Allan, 2010).

This eligibility category also addresses the somatic or physical symptoms that can be associated with anxiety and other internalizing problems. Students with ED may experience frequent headaches, gastrointestinal problems, and cardiopulmonary symptoms that are not associated with a medical condition, but rather are linked to psychological factors (Tibbetts, Pike, & Welch, 1986).

**Emotional Disturbance vs. Socially Maladjusted**

The definition of emotional disturbance has received numerous complaints since its inclusion in federal law in 1975. The most controversial aspect of the definition appears to be the added exclusionary clause, which states:

The term does not include children who are socially maladjusted unless it is determined that they have an emotional disturbance. (34 C.F.R. 300.7(9)§602(3)(b)(8)(ii))

According to Merrell and Walker (2004), practitioners have long debated the ability to differentiate socially maladjusted (SM) students from those with emotional disturbance (ED). Despite there being no legal definition of social maladjustment available, researchers have attempted to provide a clear and recognizable definition.
Characteristics of Social Maladjustment & Emotional Disturbance

While most researchers would agree that SM can be defined as “a pattern of engagement in purposive antisocial, destructive, and delinquent behavior” (Merrell & Walker, 2004, p. 901), they disagree with how to more formally identify these students. Some researchers have equated the willful and self-serving behaviors of students with SM to students with a diagnosis of Conduct Disorder (Cheney & Sampson, 1990; Slenkovitch, 1983, 1992a), Oppositional-Defiant Disorder (Clarizio, 1992), or those with a history of incarceration due to delinquent behavior. Other common characteristics of the traditional model of social maladjustment include:

- Student engages in antisocial and delinquent behavior within the context of a deviant peer group.
- Student maintains social status within deviant peer group by engaging in antisocial and delinquent behavior.
- Problem behavior is “willful,” individual is making a “choice” to do it and could stop the problems behavior if they desired.
- Problem behavior is purposive, goal-oriented, or instrumental.
- Student engages in the behavior to “get something” they want.
- Student with SM does not have internalizing/emotional problems or mental health problems.
- Student with SM believes that behavioral rules should not apply to them, or that they should be able to self-select their own rules of conduct.
- Students with SM are shrewd, callous, streetwise, and lack remorse (Merrell & Walker, 2004, p. 902).

In contrast, students with ED are believed to be unable to control their behavior due to internal psychological issues and feel distress when they engage in problem behavior (Clarizio, 1992).

**Defining Social Maladjustment**

According to Merrell and Walker (2004), research has indicated that students with SM also exhibit internalizing problems (depression and anxiety) and likely do not engage in antisocial behavior in isolation of other emotional or behavioral problems. In addition, SM is often found to co-occur with Attention-deficit/Hyperactivity Disorder and/or depression. Therefore, it is suggested that using a definition that equates SM with Conduct and Oppositional-Defiant Disorder will likely exclude students who also experience an emotional disturbance. Instead, defining SM in terms of problems with the law, antisocial behavior in peer-oriented contexts, and involvement in gangs is easily observable and is less likely to exclude students with co-morbid social maladjustment and emotional disturbance. Therefore, despite a student displaying behaviors consistent with social maladjustment, it is necessary to further investigate the purpose behind their behavior to ensure that students who display comorbid social maladjustment and emotional disturbance are not excluded from services (Merrell & Walker, 2004).

**Differentiating SM from ED**

Distinguishing between ED and SM can be difficult. However, it can be done by considering each of the eligibility criteria for emotional disturbance: inability to learn,
relationships problems, inappropriate behaviors, pervasive mood of unhappiness or depression, and physical fears or symptoms. When addressing an inability to learn, Cooley (2010) describes socially maladjusted students as having a tendency to dislike school and avoid school achievement, whereas students with ED view school as a source of confusion and anxiety. Additionally, any anxiety felt at school may impair an ED student’s concentration and attention and, thereby, impact their level of achievement (Cooley, 2010).

The second ED criterion refers to the inability to build or maintain relationships with peers or teachers. Cooley (2010) notes that for students with SM, peer relationships are typically intact or fringe in nature, such as belonging to an antisocial subculture (such as gangs). Cooley also explains that students with SM may blame other people for their problems, lack appropriate guilt, and act very self-assured, whereas students with ED tend to display inappropriate affect, have poor self-concept and may experience confusion, denial, or a distortion from reality.

The third criterion for Emotional Disturbance includes having or displaying inappropriate behaviors or feelings under normal circumstances. Students with SM usually display persistent defiance or willfulness in rule violation, while ED students may display similar behavior, but their attitude and purpose is less manipulative. Students with SM also tend to reject authority, but ED students who engage in similar behavior are more likely to feel remorse and are less likely to lay blame on others with regard to the acts they committed (Cooley, 2010).
The fourth eligibility criterion is defined as a pervasive mood of unhappiness or depression. Differential diagnosis for students with ED and SM is difficult when addressing internalizing disorders. Before a diagnosis is made, Cooley (2010) explains that anxiety, inattention, or hyperactivity should first be considered as possible causes of the behavior.

The final criterion for Emotional Disturbance is physical fears or symptoms related to school or personal life. As with a pervasive mood of unhappiness and depression, it is difficult to separate students with ED from students with SM in regards to personal fears. The following concerns should be addressed before a diagnosis of ED is considered: substance abuse, health problems, parenting issues that may include developmentally inappropriate exposure (such as to pornography and violence) and family circumstances that may be contributing to fears regarding their personal or school life. These situations may cause distress for students, but it would be inappropriate to diagnosis ED based on these situational factors in most cases (Cooley 2010). The characteristics discussed previously differentiate between students with social maladjustment and students with emotional disturbance. Unless the socially maladjusted student’s condition is comorbid with ED, they are not eligible for special education, which is known as the exclusionary clause (Olympia et al., 2004).
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<td>Inability to Learn</td>
<td>View school as a source of confusion &amp; anxiety.</td>
<td>Dislikes school.</td>
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<td></td>
<td>Anxiety may impair concentration, attention, &amp; achievement.</td>
<td>Avoids school achievement.</td>
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<tr>
<td>Relationship Problems</td>
<td>May display inappropriate affect.</td>
<td>Peer relationships typically intact.</td>
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<tr>
<td></td>
<td>May have poor self-concept.</td>
<td>Possible member of antisocial subculture.</td>
</tr>
<tr>
<td></td>
<td>May experience confusion, denial, or distortion from reality.</td>
<td>Blame others for their problems.</td>
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<td></td>
<td>May have social skills deficits.</td>
<td>Lacks appropriate guilt.</td>
</tr>
<tr>
<td>Inappropriate Behavior &amp; Feelings</td>
<td>May display defiance and rule violation, but with a less manipulative attitude.</td>
<td>Typically displays persistent defiance.</td>
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<td></td>
<td>Less likely to blame others for the acts they committed.</td>
<td>Displays willfulness in rule violation.</td>
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<td></td>
<td>Likely to feel remorse.</td>
<td>Rejects authority.</td>
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<td>Unhappiness &amp; Depression</td>
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*Note:* (Adapted from Cooley, 2010a)
Most Common Social/Emotional Concerns for Students with ED

Students with emotional disturbance often display common internalizing and externalizing behaviors that affect their performance in school academically and socially. Some of the most common concerns teachers and educators observe in the school setting are described in more detail in the following sections.

Common Concerns: Social Skills

Research suggests that the “acquisition and performance of pro-social behaviors,” comes naturally in “normal human development” (Maag, 2006, p. 4). When there is a lack of this development, it can result in rejection by peers, feelings of isolation and loneliness, as well as academic failure. In addition to these difficulties, Maag further explains that someone lacking this development may also experience “difficulty maintaining employment and relationships with others” (p. 4).

To understand the development of pro-social behavior, it is important to define social skills and social competence, both of which are critical elements in social functioning. Social skills are defined by Hill and Coufal (2005) as behaviors individuals use to “function in social tasks, such as starting up and maintaining conversations, giving and receiving compliments, engaging in play with peers, requesting action or information, and taking part in other socially relevant activities for the individual’s age group” (p. 33). Social skills deficits for individuals can include frequently losing their temper, arguing with adults, deliberately trying to annoy others, being easily annoyed by others, actively refusing to comply with adults’ rules and requests, and blaming others for their own mistakes (Skoulos & Tryon, 2007). Maag (2006) explains that social
competence is generally defined as a “person’s social functioning” (p. 5). Hill & Coufal (2005) add that social competence is the “ability to interact successfully with peers and other significant adults” (Gresham, Sugai, & Horner, 2001, p. 333). Maag (2006) further explained that social competence is inferred when referring to social skills, particularly when the targeted social skills “result in increased ratings of acceptance from peers and positive judgments from important others” (p.5).

It is lack of social competence that has been “considered characteristic of students with emotional and behavioral disorders” (Maag, 2006, p. 4). Typical behaviors that can be seen in the classroom are often reported on social skills rating scales and include hyperactivity, externalizing, and internalizing behaviors (Wiley et al., 2009). Cooley (2010) described internalizing behaviors as avoidance or withdrawal, discomfort or dread (of school or classroom experiences), and physiological responses (sweating or nausea). Externalizing behaviors can include behaviors similar to those seen in a student with an ODD diagnosis, such as defiant, disobedient, and hostile behavior towards authority figures. Hostile behavior may also include bullying peers.

Ultimately, social competence can serve as the foundation for developing social skills. Developing a student’s social skills is very important and will ideally result in the student receiving interventions focusing on their social skills deficits. The repercussions for lacking social skills can result in many missed opportunities in school, at home and with peers. “Children not exhibiting appropriate social competence in the context of school, home, or other cultural contexts are often included in programs designed to improve their social skills” (Hill & Coufal, 2005, p. 33).
Social skills training (SST) focuses on skill deficits and should facilitate the student’s adjustment in school, making it easier to adapt and be mainstreamed in general education classrooms (Skoulos & Tryon, 2007). Trainings, interventions or programs that are designed to work on the specific behaviors may include cognitive, behavioral, or cognitive-behavioral techniques (Maag, 2006). Other interventions may include: self-monitoring, problem solving training, peer training, goal setting, modeling, feedback, reinforcement, self-evaluation, and self-reinforcement (Maag, 2006). Social skills trainings may include having the student practice social skills while being coached (Quinn, Kavale, Mathur, Rutherford, & Forness, 1999). Trainings may also include a self-monitoring card, behavioral contracts, and targeted social skills training (Miller & Rainey, 2008). Another strategy when working with students on social skills can be organizing a social skills group where students can gather together and work on issues of self-concept, self-efficacy, improving social relations, emotional adjustment, and decreasing internalizing behavior (Harrell, Mercer, & DeRosier, 2009).

**Common Concerns: Effective Communication**

According to Hill and Coufal (2005), students with behavior and emotional disorders are more likely to also have co-morbid language disorders. In addition, children age three to five years old who exhibit language disorders are more likely to have a diagnosable behavioral or emotional disorder between the ages of eight to twelve years old.

Students with language deficits often have difficulty developing friends and maintaining relationships due to their lack of communication skills. These students often
play alone at recess, disrupt the group play of others, or attempt to join groups, but instead just shadow other students. These students often do not have the communication abilities necessary to build friendships such as self-disclosure, negotiation, expressing concerns and preferences, and utilizing conflict management strategies. In addition, using appropriate humor, understanding sarcasm, and taking turns is difficult. Deficits in these skills lead to a lack of social interaction, which has been shown to result in compromised social-emotional developmental and academic performance (Hill & Coufal, 2005).

Cooley and Triemer (2002) note that in addition to deficits in verbal communication, students with ED also display deficits in nonverbal communication skills. Research has shown that students with difficulties understanding nonverbal cues, such as facial expressions of emotions, tend to have more negative interactions and are rejected by their peers. This results in a cycle where students who have been rejected by peers display more inappropriate behavior, aggressiveness, and withdrawal, which contribute to ongoing peer rejection. Therefore, programs and interventions addressing the social needs of students with ED need to focus on increasing the verbal and nonverbal communication skills of these students in order for them to have a successful school experience.

Some simple strategies to increase the use of effective communication skills include: role playing difficult social situations and discussing possible conversations, using puppets to model effective communication for younger students, playing “miming” games where students determine the suspected feelings of the person based on facial
expressions and body language, and other games involving turn-taking or choosing reactions to situations and discussing possible consequences (Callander & Butriss, 2008).

Common Concerns: Anxiety

Anxiety is an internalizing behavior that is often seen in students with ED. Wilamowska et al. (2010) reported that anxiety and other mood disorders are often co-morbid with ED and can be chronic conditions. Some risk factors for anxiety can include: parental anxiety, parenting characteristics, behavioral inhibition, negative or stressful life events, and anxious-resistant/ambivalent attachment style (Farrell & Barrett, 2007). Farrell and Barrett further reported that internalizing behaviors, such as anxiety, are also associated with inattention, concentration problems, immaturity, academic difficulties, low self-esteem, low social competence, and poor peer relations. Anxiety and its symptoms can be prevalent in the classroom and can ultimately interfere with the student’s academic performance. Behaviors that may be seen in the classroom can include: hyper vigilance (increased arousal and being constantly on guard as if they are waiting for something to happen), avoidance (attempting to escape work or situations that may correspond to a stressful event), and somatization (physical symptoms of pain that may be a result of an underlying emotional problem). These behaviors may be in response to general anxiety or a result of a traumatic experience, in which case the student may have symptoms consistent with Posttraumatic Stress Disorder (PTSD) (Brock, 2010). It is important to remember that students with ED who also have anxiety may need extra consideration and services since they often internalize their feelings or
emotions. Services for these students can include school-based interventions as well as outpatient services.

According to Farrell and Barrett (2007) many students who are diagnosed with anxiety rarely receive clinical treatment or, if they do, they end treatment prematurely (before 6-8 sessions). Implementing an intervention that may treat and/or reduce the symptoms is a primary goal. Some interventions for students with anxiety can include variations of cognitive behavioral therapy (CBT) that can focus on the internalizing or externalizing behaviors exhibited by students with anxiety, psychiatric medication, as well as invented programs such as FRIENDS or Coping Cat, Coping Koala (Schoenfeld, College, & Janney, 2008). Despite the diagnosis, interventions may reduce risk, build resiliency, and enhance overall mental health (Farrell & Barrett, 2007). Research suggests that school-based interventions for anxiety are effective and beneficial (Schoenfeld, College, & Janney, 2008). Beyond the prevention and intervention programs available, there are also protective factors to consider that may “promote positive development” or reduce risk (Farrell & Barrett, 2007, p. 60). A few of these factors include: cognitive ability, temperament, social competence, attachment to peers and adults who model pro-social behavior, parental attachment, peer acceptance and support (Farrell & Barrett, 2007).

**Common Concerns: Depression**

Feelings of unhappiness or depression comprise one of the qualifying characteristics of emotional disturbance. According to Khalil et al. (2010), research has shown that prevalence rates for adolescent depression are 5.9% for girls and 4.6% for
boys. In addition, research suggests that around 15% to 20% of these students will suffer from depression throughout their lives. Children and adolescents may display depression in varying ways when compared to adults. These students often display a pervasive mood of unhappiness and may be irritable. In addition, they may become tearful, displays bouts of anger, and might be set off by small provocations. Depression in adolescence has been shown to lead to multiple negative consequences, such as lowered self-esteem, poor academic performance, comorbid psychiatric disorders, increased suicidal ideation, and increased risk for substance abuse (Dobson et al., 2010).

In regards to substance abuse, Wu et al. (2008) have shown depression in adolescents is a predictor for the onset of cigarette smoking. Cigarette smoking has been shown to be a precursor to the use of alcohol and possible progression to the use of illicit drugs. According to Wu et al. students with severe emotional disturbance are at a greater risk for using mood altering substances. In particular, as the rate of depression in these students increases, the likelihood of alcohol use and later illicit drug use increases. Therefore, treatment of students with ED should focus on alleviating depressive symptoms before the onset of other negative outcomes such as substance abuse.

Research has shown the effectiveness of many interventions for depression, including Cognitive Behavioral Therapy (CBT) (Dobson et al., 2010). Dobson et al. report that CBT is “among the most effective, efficient, and cost-beneficial psychosocial treatments for several mental health problems, including depression and anxiety” (p. 293). CBT has been found to decrease the severity of symptoms related to depression and anxiety among high-risk adolescents. In addition, CBT has been shown to increase
self-esteem which in turn decreases the chance of developing long-lasting mood disorders in the future.

**Common Concerns: Anger Management**

Students with an Emotional Disturbance often experience a variety of emotions, including aforementioned anxiety and depression. In addition, anger is an emotion often experienced by students with ED. Anger is described in the *American Psychological Association Dictionary of Psychology 2006* as:

An emotion characterized by tension and hostility arising from such sources as frustration, real, or imagined injury by another, or perceived injustice, and it can manifest itself in behaviors designed to remove the object of anger… or… merely express the emotion (VandenBos, 2006, p. 53).

Anger and associated externalizing behaviors can result in harm to others as well as property damage (Ho et al., 2010). The externalized behaviors may be seen in the classroom, at school, or at home and may manifest as aggression, impulsiveness, temper tantrums, noncompliance and destructiveness (Miller & Rainey, 2008). Many times students with ED also have deficits in their cognitive abilities or social skills, which make it difficult to develop skills to handle the anger they experience (Ho et al., 2010). With this in consideration, it is important to address the anger that is seen in ED students and help them to manage that anger.

There are several approaches to managing behavior, including a variety of behavioral interventions. “Behavioral interventions are most successful with students exhibiting inappropriate externalized emotions” (Miller & Rainey, 2008, p. 17).
Behavioral intervention techniques attempt to “increase appropriate behaviors and decrease and eventually eliminate inappropriate behaviors all together” (Miller & Rainey, 2008, p. 17). Students in middle and high school may benefit from Cognitive Behavioral therapy (CBT), which includes interventions based on “challenging and restructuring irrational beliefs” (Miller & Rainey, 2008, p. 18). Lishman, Lay, and Steward (2008) reported that CBT is often the most frequent type of therapy used when working on anger management. Specifically for the purposes of anger management, therapy sessions can include evaluating what makes the student angry, identifying differences between anger and aggression, identifying anger in the body (requires some self-awareness), and noticing warning signs of anger. The sessions can also include coping and calming strategies as well as techniques to manage the anger.

Ho et al. (2010) also listed other techniques used to manage anger and the associated behaviors that include the following: reinforcement, punishment, manipulation of environmental stimuli, functional communication training, social skills training, and medication to name a few. These interventions typically focus on the “reduction of observable disruptive or aggressive behaviors through the use of external controlling agents.” Dependence on these external controlling agents (environmental factors) for continued supports and interventions may “restrict independence” (Ho et al., 2010, p. 246). Ultimately, independent anger management is the goal and any one of these interventions, or variations of these interventions, can help obtain the desired outcome.
Common Concerns: Aggression

Research shows that aggressive behavior is the most common reason students are referred for psychiatric services (Connor, Melloni & Harrison, 1998). Aggression is arguably the most concerning externalizing behavior displayed by students with ED as it threatens the security and safety of teachers and other students. In addition, aggression is often used by these students as a way to solve social problems; a maladaptive skill that remains stable over their lifetime. A study conducted by Wehby, Symons, and Shores (1995) found elementary school students with ED used verbal and/or physical aggression at least one to six times per hour.

Aggressive behavior displayed by students with ED can be described as two types: reactive aggression and proactive aggression. Reactive aggression can be characterized as a response that is angry, defensive, and occurs in response to a perceived threat, frustration, or provocation. In contrast, aggressive behavior that is intentional, coercive, and used as a means of obtaining a goal or desired stimuli is defined as proactive aggression (Ford, Fraleigh, & Connor, 2010).

The distinction between emotional disturbance and social maladjustment suggests students that display reactive aggression are typically students with ED, while proactive aggression, which is characteristic of conduct disorder, is likely due to social maladjustment. Research has shown that children with a history of maltreatment, such as physical abuse, are likely to display aggressive behavior. In addition, it is believed these children display communication deficits that make it more difficult for them to defuse
aversive situations and therefore increase their risk of aggressive behavior (Ford et al., 2010).

Since most people experience physiological arousal including increased heart rate, muscle tension, blood pressure, and increased breathing rate during aggressive acts, addressing these symptoms is a strategy to decrease overall aggression. Some strategies to alleviate physiological symptoms associated with stress, frustration, and anxiety include relaxation techniques such as meditation, progressive muscle relaxation, guided imagery, and yoga. These techniques have been shown to decrease heart rate, respiration, and impulsivity. Additionally, cooperation increases and acting out and distress has been shown to decrease among students with learning and behavioral problems (Lopata, 2003).

**Common Concerns: Noncompliance**

Noncompliance is a common characteristic exhibited by students with emotional disturbance. Noncompliance to teacher requests is often the catalyst to other problem and disruptive behaviors in the classroom. Research suggests that teachers often unknowingly reinforce student noncompliance. This occurs when teachers repeatedly ask for compliance and do not always reinforce or praise students when they do comply with requests. It appears there is an inverse relationship between compliance and disruptive behaviors. In other words, when students readily comply with teacher requests, disruptive behavior decreases and on-task behavior increases (Musser, Bray, Kehle, & Jenson, 2001).

Research suggests that teachers most frequently use aversive measures to attempt to gain compliance and control in the classroom, such as verbal reprimands, exclusion
from activities/class, and teacher disapproval. However, these measures have not been proven to increase compliance or decrease disruptive behaviors. Therefore, teachers should focus on more positive strategies that have been proven to increase compliance and in turn decrease disruptive behaviors (Ducharme, & DiAdamo, 2005).

**Systematic Interventions and Tools for working with Students with ED**

Providing support for teachers in both the ED and general education classroom is critical. As previously mentioned, social and emotional concerns such as anxiety, depression, anger and aggression, social skills, and noncompliance can all surface in the classroom. Noncompliance is a common characteristic seen in students with an Emotional disturbance, and teachers’ constant requests for compliance can be the “impetus for their disruptive classroom behaviors.” Teachers’ may “inadvertently reinforce noncompliance” by re-issuing countless demands for compliance and providing inadequate or undesired reinforcement for compliance (Musser et al., 2001, p. 294).

Ultimately, educating students with emotional disturbances is the goal and providing teachers with strategies and tools are the methods to meeting that goal.

According to Wagner et al. (2006), in 2003 the U.S. Department of Education reported “nearly half of all students with disabilities, including approximately 25% of students with ED, already spend more than 79% of their school day in general education classroom” (p. 13). This statistic reinforces the need to provide school teachers with tools and strategies when working with this population of students. The objective of this project is to provide general education and ED teachers with a variety of strategies that may be used in the classroom.
Classroom Strategies

Bibliotherapy has been described as “the process by which teachers, as informed decision-makers, select appropriate reading materials and match them to the needs of students to assist in the development of self-awareness, problem-solving skills, perspective-taking, and understanding of problems” (Johnson, Wan, Templeton, Graham, & Sattler, 2000). As a new-age technique, teachers are using books to cover a range of topics in class such as anger, bullying, and social skills to name a few. Coverage of these topics can be helpful in the classroom for all students, including students with emotional disturbance. The underlying premise of bibliotherapy is that students will identify with literary characters similar to themselves, creating an association that helps students release emotions, gain new perspectives, and explore new ways of interacting with others. It is a class wide strategy can bring serious topics to light through literature and offer an opportunity for discussion.

Another classroom strategy includes, “instructing teachers to use ‘do’ instead of ‘don’t’ commands to increase compliance rates” with students with emotional disturbances (Musser et al., 2001, p. 294). Another strategy that Musser et al. reported could benefit the classroom as well as the students’ home includes training the adult (teacher, parent, or aide) to give a 5-second wait period after a initial request is made before making a second request for compliance. Musser et al. continued that if the requests are complied with, immediately reinforce the student and if there is no compliance for the request, “a reductive technique, usually in the form of a time out”
should be delivered. To strengthen the delivery of the requests for compliance, they should be made in “a firm, but quiet tone of voice” (p. 295).

Research for additional classroom strategies include token economies paired with response cost (Musser et al., 2001), independent learning strategies, peer-mediated learning that includes reciprocal and class wide peer tutoring, and cooperative learning. “A structured learning environment” that provides “explicit, systematic, and highly interactive direct instruction delivered in learning-friendly, memorable ways” is another classroom strategy that can be used with students with emotional disturbances (Wagner et al., 2006, p. 13).

**School Wide Strategy: Positive Behavior Supports (PBS)**

Another systematic approach to working with students with emotional disturbances includes positive behavior supports (PBS). Morrissey, Bohannon, and Fenning (2010) write that PBS is a support model that is gaining momentum as a successful method for “addressing school wide behavioral issues, classroom management, and individual support systems for students with and without special needs” (p. 27). Morrissey et al. (2010) explain the PBS system includes recognizing appropriate behaviors on a “prevention-orientated basis” instead of a reactionary basis (that includes consequences based on problem behavior) (p. 27). The “prevention-orientated basis” can be the impetus for “safer schools designed for keeping students in school and experiencing success” (Morrissey et al., 2010, p. 27). Ideally, PBS includes teachers, students, parents, administrators, other staff members at school and community members...
and it is a three-tiered school wide model. Morrissey et al. explains that PBS is a school wide, proactive approach to dealing with discipline and includes the following:

- Committed to addressing behavior in the school.
- Forming a representative team.
- Examining behaviors at a school-wide level using data such as office discipline referrals and surveys.
- Choosing three to five behavioral expectations and generating specific examples of these for locations throughout the school.
- Providing systematic direct teaching of expected behaviors to all staff and students and then acknowledging (rewarding in some way) all those who meet the expectations.
- Clarifying consistent procedures for responding to problem behaviors.
- Using data to progress monitor students and modifying interventions as needed (p. 28).

**Conclusion**

Regardless of the strategy or support technique that is chosen to address common social-emotional concerns experienced by students with ED, it is clear that extra time and consideration is needed when working with this population. Students with ED display a wide range of externalizing and internalizing behaviors that interfere with their learning and the learning of others. Therefore it is important that an array of strategies and techniques are available to teachers and support staff working with these students to ensure school success.
Chapter 3

METHODOLOGY

This chapter will discuss the research process used in the development of a resource binder designed to help meet the needs of students with Emotional Disturbances. Obtaining the background knowledge important to this project first involved a careful review of the literature, which made use of the Academic Search Premier and ERIC databases. Search terms used included “emotional disturbance” and “emotional and behavioral disorders.” These terms were used in combination with other terms such as aggression, anger management, depression, anxiety, effective communication, social skills, and non-compliance. In addition, from the authors’ background knowledge (obtained from their school psychology graduate studies) specific interventions were identified and searched for in the databases. These interventions included cognitive behavioral therapy, group therapy, worksheets, and positive behavioral interventions. Finally, key words such as special education, social maladjustment, and classroom strategies were also used in the database searches. In addition to the database search, references cited within identified articles and books were carefully searched for additional resources.

Both qualitative and quantitative studies were considered. The articles found were categorized by themes according to an initial outline. The outline was then adapted based on information gathered. Specifically, the following the resources identified by the just described literature review were placed into the following categories: ED Eligibility Criteria, Emotional Disturbance vs. Social Maladjustment, Most Common

As was previously mentioned, the development of the resource binder began by creating a rough outline of topics of concern and interest in regards to helping students with emotional disturbance to be successful at school. These rough ideas and topics were then researched and a detailed final outline was produced. This outline included background information on students with emotional disturbance, the difference between social maladjustment and emotional disturbance, and tentative common social and emotional concerns including: anxiety, depression, noncompliance, effective
communication, social skills, aggression, and anger management. From this fluid and frequently updated outline, a detailed review of the current literature was completed.

**Development of the Resource Binder**

Making use of the literature review via the process just described, the resource binder was developed to facilitate knowledge of emotional disturbance, the difference between students with emotional disturbance and social maladjustment, the most common social and emotional concerns experienced by students with emotional disturbance, and information as to how to best address these concerns through research based interventions.

The main points from the literature review were summarized in a school psychology seminar presentation. Feedback and recommendations were given by the authors’ school psychology colleagues in regards to areas of interest and areas of confusion requiring more clarity. Specifically, from this presentation, seminar participants identified classroom strategies as a possible intervention technique and behavioral terms were changed to be consistent throughout the project (e.g., Emotional Disturbance was adopted for Serious Emotional Disturbance and Emotional and Behavioral Disorders).

It was from a combination of the review of the literature described above and feedback offered by our school psychology colleagues that an outline of the resource book was created. The outline that was created is provided in Table 1.
### Table 1

**Resource Binder**

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<tr>
<td>Interventions and Strategies</td>
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<tr>
<td>Positive Behavior Supports (PBS)</td>
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</table>

The resource binder is designed to be used by teachers as a tool for prevention or intervention for common concerns of students placed in an emotional disturbance program.
Chapter 4

RESULTS

Using the method described in Chapter 3 a resource binder titled *Tools for School Staff Working with Students with Emotional Disturbance* was developed and is provided in the Appendix. The resource binder includes instructions and worksheets to address the most common social and emotional concerns experienced by students with Emotional Disturbance: depression, anxiety, social skills, effective communication, aggression, anger management, and noncompliance. Additionally, information on classroom wide as well as school wide strategies to promote appropriate behavior and safe schools were included. This research project and the related resource binder also included background information on demographics, common concerns and behavior, and appropriate research-based techniques to address these concerns.

The resource binder itself has several major sections. The first section is titled “Eligibility and Characteristics of Emotional Disturbance.” From this section we anticipate that school professionals will be better able to understand the various subtypes of Emotional Disturbance including: inability to learn, inability to build and maintain appropriate relationships, inappropriate behavior, pervasive mood of unhappiness or depression, and physical symptoms and fears associated with school and home. This background knowledge is a necessary foundation for implementing interventions and strategies discussed later in the resource binder.

The second major section of the resource binder is title “Common Social and Emotional Concerns” and includes brief descriptions of social skills, effective
communication anxiety, depression, anger management, aggression, and noncompliance. Each of these common concerns is further investigated within this section and includes detailed descriptions of interventions, how to implement the inventions, and associated worksheets and handouts. Additionally, a subsection titled “Systematic Interventions and Tools for Working with Students with ED” provides information and strategies that can be implemented class- and/or school-wide and includes strategies such as positive behavior supports (PBS) that can support not only the ED student, but improve behavior of the class or school as a whole. Finally, the resource binder concludes with a comprehensive reference list.

**Resource Binder Objectives**

The resource binder includes teacher-friendly language and easy to use worksheets and visual aides to help staff work with students with Emotional Disturbance. The resource binder aims to help teachers, school staff, and school psychologist better understand the often complex emotional and behavioral symptoms commonly displayed by students with Emotional Disturbance. The resource binder provides background information and easy to follow instructions on how to implement a wide range of research-based interventions and strategies to alleviate problem symptoms displayed in the school environment. The primary goal is to provide school staff with easy to use research-based tools that can be used individually with students and/or class wide, therefore decreasing the often maladaptive behaviors displayed by students with Emotional Disturbance.
**Recommendations**

It is recommended that school staff view the contents of this project with the understanding that the resource binder is intended for use under the current research on Emotional Disturbance and eligibility criteria. This project serves as a guide for both understanding the basics of Emotional Disturbance as well as the practical application of research-based interventions and strategies to address common associated emotional and behavioral symptoms. It is the goal of this project that the resource binder produced serves as a starting guide for general education and special education teachers, most notably those who work with students with Emotional Disturbance and provide individual and classroom interventions.

**Conclusions**

Emotional Disturbance is one of the 13 eligibility categories for students to receive special education services in school. There is a large population of students served under this category that need our support in promoting healthy emotional and behavioral skills related to depression, anxiety, social skills, noncompliance, aggression, anger management, and effective communication. In evaluation of this project, it is hoped that this information can provide teachers and school staff with a foundational knowledge of Emotional Disturbance and how to deliver research-based social and emotional interventions and strategies.
APPENDIX
TOOLS FOR SCHOOL STAFF WORKING WITH STUDENTS WITH EMOTIONAL DISTURBANCE

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Introduction

Emotional disturbance (ED) is a condition that affects students’ social, emotional, and behavioral functioning; and creates a ripple down effect that further affects their learning, home, and school environments. Students with emotional disturbance typically exhibit both poor social functioning and high levels of problem behavior (Kauffman & Landrum, 2009). School Psychologists as well as both general and special education teachers have the opportunity to work with these students in the classroom and throughout the school day. With this population of students participating more and more in general education classes, IDEA mandates that every teacher make specific accommodations for their students with emotional disturbance (Wagner et al., 2006).

First, it is imperative to understand the definition of Emotional Disturbance. The term emotional disturbance refers to a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects educational performance: (a) an inability to learn that cannot be explained by intellectual, sensory, or health factors; (b) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (c) inappropriate types of behavior or feelings under normal circumstances; (d) a general pervasive mood of unhappiness or depression; and (e) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance (U.S. Department of Education, 2006).
With an understanding of emotional disturbance and the fact that there is a definite need for supports for this population, it was the authors’ desire to create a document that would include many useful worksheets and intervention plans to address the most common concerns. These documents are intended to be useful tools for both general education and special education teachers as well as other school professionals.
Social Skills

Social skills are defined by Hill and Coufal (2005) as behaviors individuals use to “function in social tasks, such as starting up and maintaining conversations, giving and receiving compliments, engaging in play with peers, requesting action or information, and taking part in other socially relevant activities for the individual’s age group” (p. 33). Social skills deficits for individuals can include frequently losing their temper, arguing with adults, deliberately trying to annoy others, being easily annoyed by others, actively refusing to comply with adults’ rules and requests, and blaming others for their own mistakes (Skoulos & Tryon, 2007). Maag (2006) explains that social competence is generally defined as a “person’s social functioning” (p. 5). Hill & Coufal (2005) add that social competence is the “ability to interact successfully with peers and other significant adults” (Gresham, Sugai, & Horner, 2001, p. 333).

There are several interventions that can address social skill deficits. For example, social skills training (SST) focuses on skill deficits and should facilitate the student’s adjustment in school, making it easier to adapt and be mainstreamed in general education classrooms (Skoulos & Tryon, 2007). Trainings, interventions or programs that are designed to work on the specific behaviors may include cognitive, behavioral, or cognitive-behavioral techniques (Maag, 2006). Other interventions may include: self-monitoring, problem solving training, peer training, goal setting, modeling, feedback, reinforcement, self-evaluation, and self-reinforcement (Maag, 2006). Social skills trainings may include having the student practice social skills while being coached.
(Quinn, Kavale, Mathur, Rutherford, & Forness, 1999). Trainings may also include a self-monitoring card, behavioral contracts, and targeted social skills training (Miller & Rainey, 2008). Another strategy when working with students on social skills can be organizing a social skills group where students can gather together and work on issues of self-concept, self-efficacy, improving social relations, emotional adjustment, and decreasing internalizing behavior (Harrell, Mercer, & DeRosier, 2009). With many topics included under the umbrella of social skills, the following worksheets covering self-regulation, self-evaluation, self-concept (how a student thinks or sees themself), self-esteem, and improving social relations can be helpful:

1. **“Rate Your Week”**

   This worksheet allows the student to rate their week and consider the things that went well and the things they want to improve on. This activity provides a tool for self-evaluation and can be used during social skills trainings, during groups, or one on one counseling.

2. **“Who Am I?”**

   This worksheet lists a multitude of personal characteristics the students can select. This activity provides an opportunity for self-evaluation and even self-adjustment as they calculate how many of the selected traits are positive versus negative.

3. **“5 Qualities and One Wish”**

   This worksheet is somewhat basic as it allows the student to pick five qualities about themselves that they like or five things they think they do well. The
worksheet also provides an opportunity to write one wish. This activity provides the student an opportunity to evaluate himself or herself.

4. “I Am Who I Am”
This worksheet covers many positive characteristics the student may see in themselves. It provides an opportunity to look at and discuss the student’s self-concept.

5. “Building My Self-Esteem”
This worksheet provides a list of ideas of how to build self-esteem from a student’s perspective.

6. “Self-Esteem Questionnaire”
This worksheet is an activity that assesses the student’s feelings on self-esteem and also provides a small self-evaluation for the student regarding their level of self-esteem.

7. “Is This a Good Friend?”
This worksheet provides true and false questions regarding what a good friend would look like. This activity is intended to be helpful when working on social relations or friendships.
Rate Your Week

Rate Your Week (scale 1-10):

I thing that went well this week ______________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I thing that I want to improve/change for next week ___________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Rate Your Week (scale 1-10):

I thing that went well this week ______________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I thing that I want to improve/change for next week ___________________________
________________________________________________________________________
________________________________________________________________________

Rate Your Week (scale 1-10):

I thing that went well this week ______________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I thing that I want to improve/change for next week ___________________________
________________________________________________________________________
________________________________________________________________________

________________________________________________________________________
Who Am I?
(Adapted from Harrell, et al. 2009)

*Directions:* Please check the box next to the word(s) that best describe you. When finished, there will be a discussion on whether these words are positive or negative.

**PERSONAL TRAITS**

- □ Nice
- □ Strong
- □ Bad
- □ Weak
- □ Good talker
- □ Sad
- □ Courageous
- □ Intelligent
- □ Funny
- □ Lonely
- □ Street smart
- □ Serious
- □ Well-liked
- □ Artistic
- □ Clumsy
- □ Friendly
- □ Creative
- □ Worried
- □ Fearful
- □ Athletic
- □ Ugly

- □ Dumb
- □ Sick
- □ Handsome
- □ Slow
- □ Different
- □ Pretty
- □ Angry
- □ Accepted
- □ Shy
- □ Guilty
- □ Dull
- □ Outgoing
- □ Comfortable
- □ Uncomfortable
- □ Talented
- □ Talkative
- □ Spiritual
- □ Quiet
- □ Overweight
- □ Underweight
- □ Realistic

- □ Alone
- □ Negative
- □ Beautiful
- □ Muscular
- □ Masculine
- □ Feminine
- □ Responsible
- □ Good listener
- □ Silly
- □ Good student
- □ Kind
- □ Jealous
- □ Positive
- □ Lazy
- □ Generous
- □ Ambitious
- □ Hard worker
- □ Failure
- □ __________
- □ __________
5 QUALITIES and 1 WISH

List 5 qualities you like about yourself or things that you do well.

1.

2.

3.

4.

5.

I wish ____________________________________________________________

______________________________________________________________

______________________________________________________________

______________________________________________________________
**I Am Who I Am Worksheet**  
*(Adapted from Vernon, 2006)*

*Directions:* Think about the personal characteristic listed below and how much you believe that characteristic describes you. Please circle the response that most accurately defines you.

1. Creative
   - Definitely
   - Somewhat
   - Not at all
2. Smart
   - Definitely
   - Somewhat
   - Not at all
3. Attractive
   - Definitely
   - Somewhat
   - Not at all
4. Nice Smile
   - Definitely
   - Somewhat
   - Not at all
5. Physically Fit
   - Definitely
   - Somewhat
   - Not at all
6. Good Leader
   - Definitely
   - Somewhat
   - Not at all
7. Good Sense of Humor
   - Definitely
   - Somewhat
   - Not at all
8. Fun To Be With
   - Definitely
   - Somewhat
   - Not at all
9. Others Look Up To
   - Definitely
   - Somewhat
   - Not at all
10. Lots of Talents
    - Definitely
    - Somewhat
    - Not at all
11. Perceptive
    - Definitely
    - Somewhat
    - Not at all
12. Relates Well to Others
    - Definitely
    - Somewhat
    - Not at all
13. Prejudiced
    - Definitely
    - Somewhat
    - Not at all
14. Loyal and Trustworthy
    - Definitely
    - Somewhat
    - Not at all
15. Conscientious
    - Definitely
    - Somewhat
    - Not at all
16. Sensitive and Caring
    - Definitely
    - Somewhat
    - Not at all
17. Self-Confident
    - Definitely
    - Somewhat
    - Not at all
18. Makes Good Choices
    - Definitely
    - Somewhat
    - Not at all
Building My Self-Esteem
(Adapted from Harrell, et al. 2009)

Directions: Read the following ideas for raising your self-esteem. Discuss each suggestion with a partner or in a group. Check one or two ideas you decide to practice during the week.

**I CAN BUILD SELF-ESTEEM BY DOING THE FOLLOWING:**

☐ Learn to ask for what you want.

☐ Before going to sleep at night, think three positive thoughts about yourself.

☐ Look in the mirror first thing every morning and think of three things you like about yourself.

☐ Write down two things you’d like to change about yourself and then do it.

☐ Tell the truth to yourself as well as others.

☐ Don’t associate with people who are negative and complain about everything and anything.

☐ Don’t speak ill of anyone or yourself.
SELF-ESTEEM QUESTIONNAIRE
(Adapted from Harrell, et al. 2009)

Directions: Read each of the following questions and answer them as honest as you can.

Step 1

1) What is self-esteem?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2) How do you feel and act when you have high self-esteem?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3) How do you feel and act when you have low self-esteem?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Step 2
Circle YES if you agree, and circle NO if you disagree, ? if you are not sure.

1) Do you feel good about yourself? YES NO ?
2) Are you usually glad that you are you instead of someone else? YES NO ?
3) Can you make a list of all your strengths? YES NO ?
4) Are you proud of what you can accomplish? YES NO ?

If you answered, “YES” to these questions, you are feeling pretty good about yourself and that shows high self-esteem! If you answered “NO” to any of these questions, then your self-esteem might be low. All this means is that you don’t quite KNOW how SPECIAL you are!!!
Is This A Good Friend?
(Adapted from Miller & Rainey, 2008)

Read the following statements and CIRCLE TRUE if you think it is true or FALSE if you disagree with the statement.

1) A FRIEND IS ALWAYS IN A POSITIVE MOOD. TRUE FALSE
2) A FRIEND DOESN’T TALK BEHIND YOUR BACK. TRUE FALSE
3) A FRIEND STICKS UP FOR YOU. TRUE FALSE
4) A FRIEND IS SOMEONE WHO NEVER DISAGREES WITH YOU. TRUE FALSE
5) A FRIEND IS SOMEONE WHO IS ALWAYS CLOSE TO YOU. TRUE FALSE
6) A FRIEND IS SOMEONE WHO GIVE YOU WHATEVER YOU WANT. TRUE FALSE
7) A FRIEND IS SOMEONE WHO IS ALWAYS THERE FOR YOU. TRUE FALSE
8) A FRIEND IS SOME WHO WOULD LIE FOR YOU. TRUE FALSE
9) A FRIEND IS SOMEONE WHO WILL LISTEN TO YOU. TRUE FALSE
10) A FRIEND IS SOMEONE WHO GIVES GOOD ADVICE. TRUE FALSE
11) A FRIEND DOESN’T HAVE OTHER FRIENDS-ONLY YOU. TRUE FALSE
12) A FRIEND IS SOMEONE WHO UNDERSTAND YOU. TRUE FALSE
13) A FRIEND IS SOMEONE WHO DEFENDS YOU. TRUE FALSE
Effective Communication

According to Hill and Coufal (2005), students with behavior and emotional disorders are more likely to also have co-morbid language disorders. In addition, children age three to five years old who exhibit language disorders are more likely to have a diagnosable behavioral or emotional disorder between the ages of eight to twelve years old.

Students with language deficits often have difficulty developing friends and maintaining relationships due to their lack of communication skills. These students often play alone at recess, disrupt the group play of others, or attempt to join groups, but instead just shadow other students. These students often do not have the communication abilities necessary to build friendships such as self-disclosure, negotiation, expressing concerns and preferences, and utilizing conflict management strategies. In addition, using appropriate humor, understanding sarcasm, and taking turns is difficult. Deficits in these skills lead to a lack of social interaction, which has been shown to result in compromised social-emotional developmental and academic performance (Hill & Coufal, 2005).

Cooley and Triemer (2002) note that in addition to deficits in verbal communication, students with ED also display deficits in nonverbal communication skills. Research has shown that students with difficulties understanding nonverbal cues, such as facial expressions of emotions, tend to have more negative interactions and are rejected by their peers. This results in a cycle where students who have been rejected by
peers display more inappropriate behavior, aggressiveness, and withdrawal, which contribute to ongoing peer rejection. Therefore, programs and interventions addressing the social needs of students with ED need to focus on increasing the verbal and nonverbal communication skills of these students in order for them to have a successful school experience.

Some simple strategies to increase the use of effective communication skills include: role playing difficult social situations and discussing possible conversations, using puppets to model effective communication for younger students, playing “miming” games where students determine the suspected feelings of the person based on facial expressions and body language, and other games involving turn-taking or choosing reactions to situations and discussing possible consequences (Callander & Buttriss, 2008).

The following worksheets provide basic steps for students to learn how to talk to others and alter the way they speak given the situation. Information on role-playing and teaching verbal and nonverbal skills is provided in more detail as well.

1. **“I Am Statement”**
   
   This worksheet provides basic instructions on how to have a conversation or argument with another person using “I” statements instead of blaming.

2. **“Increasing Flexibility Activity Sheet”**
   
   This worksheet provides strategies that can be used when students are trying to negotiate, compromise, or problem-solve.
3. “Talk to Yourself Situations List”

This worksheet lets students practice what they would say to students given various situations. Additionally, it helps them understand that what they might say to themselves in a given situation may be different than to a friend.
**I Am Statement**

1. Schedule a time to talk.

2. Tell the other person what you want without insulting him or her.

   Use an “I AM STATEMENT.”

   I FEEL ________________________________
   
   (feeling word)

   WHEN YOU ________________________________
   
   (what they said or did)

   BECAUSE ________________________________
   
   (the reason it upsets you)

   WHAT I WANT OR NEED IS ________________________________.

3. Listen to the other person’s side so you can offer solutions that work for both of you.
Increasing Flexibility Activity Sheet

*Below are the “THAT'S FAIR” strategies that can be used when you are trying to negotiate, compromise, or problem-solve.*

**Try to understand what the other person is saying.**

**T**ry to understand what the other person is saying.

**H**ear how they feel.

**A**gree with something they said.

**T**ell your side.

**S**tate how feel.

**F**ind the main issues.

**F**ind the main issues.

**A**llow discussion of the issue and look for a solution.

**I**dentify and agree to a solution.

**R**eview and evaluate the process.

Our Problem:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Our Solution:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
Talk to Yourself Situations List
(Adapted from Vernon, 2006)

Directions: Read each of the situations and identify what you might say to yourself if this problem occurred and what you might say to a friend with the same problem.

1. Got an F on a paper.
   Self- Talk _______________________________________________________
   Other talk _______________________________________________________

2. Didn’t get asked to the dance.
   Self- Talk _______________________________________________________
   Other talk _______________________________________________________

   Self- Talk _______________________________________________________
   Other talk _______________________________________________________

4. Have to get glasses.
   Self- Talk _______________________________________________________
   Other talk _______________________________________________________

5. Got asked to party and don’t like the person giving it.
   Self- Talk _______________________________________________________
   Other talk _______________________________________________________
Strategies for Effective Communication: Role Playing

Role playing is a simple strategy that can be used with an individual student or class wide. Practitioners and students can role play particular situations they are struggling with, such as joining games or other group activities, or use role playing as a way for a student to work out a problem. For example, role playing is helpful when students are experiencing conflict with peers. The practitioner can role play with the student various scenarios and ways to address the situation. This can help the student practice pro-social ways of dealing with conflict which otherwise may not occur if addressing the situation without prior practice and support. For younger students, the use of puppets in role playing makes the activity more engaging and creates an environment where multiple social situations can be modeled.

The following lesson plan will help school staff initiate conflict resolutions skills using puppets to talk about the situation and discuss various consequences.

1. “Talk it Out Together”
   a. Lesson Plan
   b. Conflict Solving Chart
Talk it Out Together
(Adapted from Kreidler & Tsubokawa, n.d)

Grade Level: Primary Grades

Objectives:

- Students will learn the "Talk It Out Together" method of solving conflicts.
- Students will practice this conflict-solving process.

**NOTE:** Few children in preschool or the primary grades will master this process initially, and most will need help remembering and implementing it. By introducing it and practicing it, children will begin to acquire some of these skills, but even older children may still need help in using them or rely on adults to get the process started.

Materials:

- Talk it Out Together Conflict-Solving Chart
- Two Puppets

Procedures

1. Display the Talk It Out Together Conflict-Solving Chart and explain that the "Talk It Out Together" method is a problem-solving process that's easy to remember. It consists of the following steps:

   **Step One:** Get Together
   **Step Two:** Take Turns Talking and Listening.
   **Step Three:** What Will Help?
   **Step 4:** Choose a Plan.
   **Step 5:** Do It!

2. Walk the group through the "Talk It Out Together" method, using the following puppet role play:

   The puppets are cleaning up after an activity. Two puppets are pulling at the same toy until one of the puppets pushes the toy at the other and he falls down and starts to cry. Say, "The puppets seem to have a problem. Let's use the 'Talk It Out Together' method to resolve this conflict."

3. Have the puppets model the steps of the method in the following ways:
Step One: Get Together. The puppets face each other for step one.

Step Two: Take Turns Talking and Listening. The puppets take turns talking about how they felt about the toy and about the pushing and falling.

Step Three: What Will Help? The puppets take turns suggesting plans that will make both parties feel okay.

Step Four: Choose a Plan. The puppets suggest two different solutions that are agreeable to both of them.

Ask the students to give a thumbs-up for the plan they like the best.

Step Five: Do It! The puppets pick the plan they like by signaling thumbs-up.

Once students have observed a few role-plays they may choose to use the puppet themselves to role-play a situation and discuss possible solutions with the practitioner.
Talk it Out Together Conflict-Solving Chart
(Adapted from Kreidler & Tsubokawa, n.d)

Step 1: Get Together

Step 2: Take Turns Talking and Listening

Step 3: What Will Help?

Step 4: Choose a Plan.

Step 5: Do it!
Strategies for Effective Communication: Teaching Nonverbal Cues and Tone of Voice

As was previously discussed, students with emotional disturbance often display difficulties understanding nonverbal cues, such as facial expressions and body language. Additionally, these students struggle to pick up on subtle body language cues, such as posture, proximity, and eye contact. Tone of voice is also an important skill necessary to determine another person’s feelings and reactions to various situations.

The following activities will help school staff to teach students to attend to body language and distinguish tone of voice through the use of role playing in charades-like games.

1. **“Body Language Charades”**

   This lesson and following game teaches students to learn to identify body language and internalizing physical symptoms associated with various emotions. The students then act out various scenarios and feelings using body language and other students try to guess the feeling. Includes:
   
   a. Lesson Plan
   b. Feelings Cards

2. **“Tone of Voice Charades”**

   This lesson and following game teaches students to recognize various voice tones and how it can convey different feelings. The students play a game of charades where they say a random sentence using a contradictory
voice tone. The other students then attempt to guess the feeling behind the tone of voice being used.

a. Lesson Plan

b. Feelings and Sentence Strips
Body Language Charades

Objectives:
- Teach students to understand and identify their own feelings and related physical responses.
- Teach students to identify the possible feelings of others through body language.

Materials:
- Slips of paper with various feelings provided. Possible feelings to act out are provided in a grid and can be cut out to allow students to draw a random feeling.

Procedures:
Say, “We are going to learn some new skills. We are going to learn how to understand our own feelings and how to tell what someone else might be feeling. There are certain steps that can help us learn to understand our own feelings, which make it easier to understand others’ feelings.”

Go over the steps for Understanding Your Feelings (prove either a copy of the steps for students to reference or write on the board):

Step 1: Tune into what is going on in your body that can help you know what you are feeling.

Step 2: Decide what happened to make you feel that way.

Step 3: Decide what you could call the feeling.

Go over each of the steps in more detail:

Step 1: Say, “Does anyone notice any changes in their body when they get mad? What about when you get sad?”

Provide examples:
- Mad: face gets hot, sweat, sweaty palms, face gets red, and clenched fists.
- Sad: tight throat in feeling, become teary eyed or cry.
- Anxious/Worried: heart beats quickly, sweaty palms, throat feels tight, and stomach may feel upset.

Step 2: Say, “Now think about what could have made you feel that way. What happened right before you started to feel this way?”
Step 3: Say, “Now try and name what you are feeling. Are you feeling sad? Mad? Angry? Exhausted? Tired? Bored? There are lots of names we can give to our feelings.”

Model an Example:
Act out and say, “My body is shaking, my fists are clenched, my face is tense, and I feel hot. Someone just called me a name, took my backpack from and ran away with it. What could I be feeling?”

Charades:
Say, “Now we are going to play a game, kind of like charades. Has anyone ever heard of or played charades before? Would anyone like to come up and act out a feeling and we will all try and guess?”

Provide the student with a feeling card which includes: the scenario the student shares with the class, the feeling they act out, and possible body language cues.

End:
At the end of group review the steps for understanding your feelings again:
Step 1: Tune into what is going on in your body that can help you know what you are feeling.
Step 2: Decide what happened to make you feel that way.
Step 3: Decide what you could call the feeling.

Say, “Pay attention this week to how you are feeling. Try to remember how your body feels when something makes you upset, happy, jealous, etc.”
**Body Language Charades: Feelings Cards**

Cut out the following cards to use for the Body Language Charades Games or use the cards as examples and create your own feelings cards based on the specific needs of your students!

<table>
<thead>
<tr>
<th>Scenario:</th>
<th>I just walked into my house and all my friends were there for my birthday and I had no idea.</th>
<th>Scenario:</th>
<th>I am doing my math work, I don’t get it, and it’s really hard.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Act:</td>
<td>Smile, eyes open wide, “oh” shape with mouth, arms out.</td>
<td>Act:</td>
<td>Sigh loudly, look around room, put head in hands, scrunch up face.</td>
</tr>
<tr>
<td>What am I feeling?</td>
<td>Surprised, excited</td>
<td>What am I feeling?</td>
<td>Frustrated</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scenario:</th>
<th>I am doing my math work, I don’t get it, and it’s really hard.</th>
<th>Scenario:</th>
<th>My friend just got a new video game that I wanted.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Act:</td>
<td>Sigh loudly, look around room, put head in hands, scrunch up face.</td>
<td>Act:</td>
<td>Role-eyes, clench fists, sigh loudly.</td>
</tr>
<tr>
<td>What am I feeling?</td>
<td>Frustrated</td>
<td>What am I feeling:</td>
<td>Jealous</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scenario:</th>
<th>I just found out my best friend is moving away.</th>
<th>Scenario:</th>
<th>My friend just got a new video game that I wanted.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Act:</td>
<td>Frown, head down, rub eyes (like you are crying).</td>
<td>Act:</td>
<td>Role-eyes, clench fists, sigh loudly.</td>
</tr>
<tr>
<td>What am I feeling?</td>
<td>Sad, upset</td>
<td>What am I feeling:</td>
<td>Jealous</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scenario:</th>
<th>I just won an award for being the best cook.</th>
<th>Scenario:</th>
<th>I just found out that I am going to get the puppy I wanted.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Act:</td>
<td>Stand up tall, head up, smile, hands on hips.</td>
<td>Act:</td>
<td>Smile big, stand tall, maybe shake arms/hands.</td>
</tr>
<tr>
<td>What am I feeling?</td>
<td>Proud</td>
<td>What am I feeling:</td>
<td>happy, excited</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scenario:</th>
<th>I just feel down in front of my whole class.</th>
<th>Scenario:</th>
<th>I just took money from my mom without asking.</th>
</tr>
</thead>
<tbody>
<tr>
<td>What am I feeling?</td>
<td>Embarrassed</td>
<td>What am I feeling:</td>
<td>Guilty</td>
</tr>
</tbody>
</table>
Tone of Voice Charades

Objectives:
- Teach students to understand and identify how a person’s tone of voice can convey how they are feeling even if contradictory to what they are saying.

Materials:
- Slips of paper with various feelings provided.
- Slips of paper with random sayings provided.

Procedures:
Say, “Today we are going to learn to identify the meaning behind different tones of voice and the way people talk. Does anyone know what tone of voice means?” If no one can answer explain, “Your tone of voice is a way of talking that shows your feelings, mood, and personality. For example, some people may talk in a way that makes you think they are angry or sad.”

Ask, “Can anyone show us what an angry tone of voice might look like? What about a sad tone of voice?”

Charades:
Say, “Now we are going to play a game, kind of like charades. Has anyone ever heard of or played charades before? What we are going to do is choose a feeling and a random sentence. We are going to read the sentence using the tone of voice we think sounds like the feeling.”

Model an Example:
Choose a feeling slip and a sentence slip and say the sentence using the tone of voice. For example, if the feeling was “sad” and the sentence was “I have a pet monkey” you would say, “I have a pet monkey” in a sad tone of voice. Then ask the students to guess the tone of voice you were using.

Say, “Would anyone like to come up and trying saying a sentence and we can all guess the tone of voice?”

Provide the student with a feeling slip and a tone of voice slip. If the student does not understand what the tone of voice would sound like you can either model it for them (without the other students hearing) or let them choose another slip.

End:
Say, “Remember, the way we say our words to other people can tell them if we are feeling sad, happy, or any other emotion. Also we can listen to the way others’ speak to understand how they are feeling, even if they don’t say they are feeling that way.”
Tone of Voice Charades: Feelings and Sentence Strips

Feelings:

<table>
<thead>
<tr>
<th>Relaxed</th>
<th>Worried</th>
<th>Lonely</th>
<th>Shy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sad</td>
<td>Tough</td>
<td>Happy</td>
<td>Depressed</td>
</tr>
<tr>
<td>Angry</td>
<td>Silly</td>
<td>Scared</td>
<td>Bored</td>
</tr>
<tr>
<td>Tired</td>
<td>Hurried</td>
<td>Excited</td>
<td>Shocked</td>
</tr>
</tbody>
</table>

Sentences:

<table>
<thead>
<tr>
<th>Can you help me find my contact lens?</th>
<th>Can I help you with anything?</th>
<th>I’ve got to stay alert in class today.</th>
</tr>
</thead>
<tbody>
<tr>
<td>I need to finish this book, but I’m so sleepy.</td>
<td>I’m so angry with you right now.</td>
<td>This is so boring.</td>
</tr>
<tr>
<td>It’s freezing in here.</td>
<td>I am so frustrated.</td>
<td>I don’t understand a thing you just said.</td>
</tr>
<tr>
<td>Wait a minute.</td>
<td>Please be quiet. I can’t hear the teacher.</td>
<td>Oh. What a cute puppy.</td>
</tr>
<tr>
<td>What is that smell?</td>
<td>You did a great job. Way to go.</td>
<td>Who is that?</td>
</tr>
<tr>
<td>That’s the saddest thing I ever heard.</td>
<td>Your big-screen TV is way cool.</td>
<td>Don’t mess with me.</td>
</tr>
</tbody>
</table>
Strategies for Effective Communication: Teaching Compromise

Part of effective communication is being able to have a calm discussion when there is a disagreement between two people. Many arguments occur between students because they are unwilling or don’t have the skills necessary to compromise with others. The following group activities can be used to teach the skill of compromising through role-play and games.

1. “Teaching Compromise”

This activity teaches the specific skills and steps necessary to effectively compromise with another person. The lesson utilizes modeling and role-play to act out various situations in which compromise is necessary.

2. “Compromise Game”

This game requires students to work together to plan a birthday party. It requires students to compromise their first choices for food, activities, and type of cake they would like for the party. After the party planning is completed, questions are asked to discuss the various techniques groups used to determine the outcome of the party.
Teaching Compromise

Objective:
The student will compromise in conflict situations with others by changing an opinion, modifying actions, and/or offering alternative solutions.

Procedures:
Introduce the skill and ask questions about it:

Ask, “When was the last time you had an argument with one of your classmates? What was the argument about and what did you do?”

“What happened?”

“What does the word ‘compromise’ mean?” If students are unable to explain what compromise means, explain, “Compromise means working together with someone to come to an agreement, usually where both people or the group, get part of what they originally wanted.”

“What are some things people would do to show that they are compromising?”

“How do people show that they are not willing to compromise?”

“What are some good things that might happen if you compromised in an argument or disagreement with your classmates, friends, teachers, or parents?”

“What are some bad things that might happen if you do not compromise with classmates, friends, teachers, or parents?”

Define the Skill and Discuss Key Terms:
Compromising is ending disagreements or arguments with others by offering alternative ideas, actions, or suggestions.

Key terms: Compromise, Negotiate, Alternatives, Listening, Opinions, Give and Take

Discuss Why Skill is Important:
Say, “Sometimes you can avoid arguments or disagreements by compromising”

“Many times you can come up with a better solution to a disagreement by compromising or listening to another person’s opinions.”

“A lot of times people will think better of you if you calmly end disagreements rather than yelling, screaming, or fighting.”
“In a compromise, everybody involved gets some of what they want, for example everybody involved gets something and gives something up.”

Identify Skill Steps (Write on Board):
1. Recognize that you are in a situation that has the potential for conflict.
2. Identify the main source of disagreement and why the other person is upset.
3. Listen to what the other person is saying.
4. Calmly present your side and see how the other person reacts.
5. Offer a compromise.
6. If they accept the compromise, enact the compromise.
7. If they do not accept the compromise, offer another solution or ask for alternatives.

Model the Skill:
Using one of the following situations, model and role-play the situation with students.

Situation 1:
Say, “You are at a friend’s house on Saturday and the two of you want to watch TV. Your friend wants to watch cartoons but you want to watch a movie on another channel. Your friend says it’s his house and you will watch what he wants to. You start to argue.”

Situation 2:
Say, “Your parents tell you to clean your room, but you want to go to a friend’s house. You get mad and start to yell at them and you start to get into a huge fight.”

Situation 3:
Say, “On the playground, another kid grabs the basketball you are playing with and won’t give it back. You grab it back and the other kid starts yelling at you and wants to fight with you.”

Practice:
- Choose two participants to role-play the first situation
- Have students state how they are going to compromise
- Role-play the situation
- Instruct others to watch what goes on
- Give feedback on compromising skills
- Ask group to critique compromising behaviors
- Select new participants and role-play other situations above
Compromise Game

Objective:
- To teach students to work together to compromise.

Materials:
- Party Choices Slip of Paper

Procedures:
Say, “Today we are going to play a game and then talk about it afterwards.”

Hand out slips of paper to each person.

Say, “Imagine you are going to help plan a birthday party. I want you to put a smiley face next to the type of lunch, activity, and cake you like the most. Then put a frowny face next to the type of lunch, activity, and cake you like the least. Do this without talking to anyone else.”

Once everyone is finished making their selections, group them into small groups (4-5 students or less depending on class size).

Once in their groups explain, “Now I want your groups to figure out the birthday party together. As a group, decide what type of lunch, activity, and cake you would like for the birthday party. You decide how to do this, GO!”

Give the groups about 10 minutes or less to decide.

Once each group is done making their selections, ask them what they came up with you may wish to write their party ideas on the board.

Ask, “Was it difficult to figure out how to decide what to do?”
  - “Did anyone get all their first choices?”
  - “Did anyone not get anything they wanted?”
  - “How did you decide which items to pick over others?”
    - Provide suggestions if no one else can, for example the group took a vote or eliminated the options most people didn’t like.
  - “What did you do when someone disagreed with you?”
“Does anyone have any suggestions on other ways to handle someone not agreeing without making them angry?”

“Can anyone think of another time they had to work with someone to decide something to do, where to go, what to eat?”

“How does it make you feel when you have to compromise?” Explain what the concept ‘compromise” means if necessary (working together with someone to come to an agreement, usually where both people or the group, get part of what they originally wanted).

“How can you make sure everyone is happy?”

**End:**

“It seems like you all worked together well and compromised on how the birthday party would go. Not everyone got exactly what they wanted, but they got parts and everyone seems happy.”

**OR**

“It seems like some groups struggled to find ways to compromise and come up with a party idea together. Next time you are in a situation where you have to compromise, think about what you are willing to change and what you really don’t want to change. If you are willing to change something, then change it. Think about some of the strategies we talked about.”
Compromise Game: Party Choices

Make copies of the following sheet and cut horizontally into slips so each student gets lunch, activity, and cake choices.

<table>
<thead>
<tr>
<th>Lunch Food</th>
<th>Activities</th>
<th>Cake</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Peanut Butter &amp; Jelly Sandwich</td>
<td>• Roller Skating</td>
<td>• Chocolate cake</td>
</tr>
<tr>
<td>• Noodle Soup</td>
<td>• Pin the Tail on the Donkey</td>
<td>• Carrot Cake</td>
</tr>
<tr>
<td>• Fish Pancakes</td>
<td>• Bounce House</td>
<td>• Vanilla Cake</td>
</tr>
<tr>
<td>• Pizza</td>
<td>• Going to the Beach</td>
<td>• Lemon Cake</td>
</tr>
<tr>
<td>• Salad</td>
<td>• Mountain Climbing</td>
<td>• Red Velvet Cake</td>
</tr>
<tr>
<td>• Dog Food</td>
<td>• Going to a Museum</td>
<td></td>
</tr>
</tbody>
</table>

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</tr>
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</tr>
<tr>
<td>• Dog Food</td>
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<td></td>
</tr>
</tbody>
</table>
Anxiety

Anxiety is an internalizing behavior that is often seen in students with ED. Wilamowska et al. (2010) reported that anxiety and other mood disorders are often co-morbid with ED and can be chronic conditions. Some risk factors for anxiety can include: parental anxiety, parenting characteristics, behavioral inhibition, negative or stressful life events, and anxious-resistant/ambivalent attachment style (Farrell & Barrett, 2007). Farrell and Barrett further reported that internalizing behaviors, such as anxiety, are also associated with inattention, concentration problems, immaturity, academic difficulties, low self-esteem, low social competence, and poor peer relations.

Anxiety and its symptoms can be prevalent in the classroom and can ultimately interfere with the student’s academic performance. Behaviors that may be seen in the classroom can include: hyper vigilance (increased arousal and being constantly on guard as if they are waiting for something to happen), avoidance (attempting to escape work or situations that may correspond to a stressful event), and somatization (physical symptoms of pain that may be a result of an underlying emotional problem). These behaviors may be in response to general anxiety or a result of a traumatic experience, in which case the student may have symptoms consistent with Posttraumatic Stress Disorder (PTSD) (Brock, 2010). It is important to remember that students with ED who also have anxiety may need extra consideration and services since they often internalize their feelings or emotions. Services for these students can include school-based interventions as well as outpatient services.
According to Farrell and Barrett (2007) many students who are diagnosed with anxiety rarely receive clinical treatment or, if they do, they end treatment prematurely (before 6-8 sessions). Implementing an intervention that may treat and/or reduce the symptoms is a primary goal. Some interventions for students with anxiety can include psychiatric medication, variations of cognitive behavioral therapy (CBT) that can focus on the internalizing or externalizing behaviors exhibited by students with anxiety, as well as invented programs such as FRIENDS or Coping Cat, Coping Koala (Schoenfeld, College, & Janney, 2008). Despite the diagnosis, interventions may reduce risk, build resiliency, and enhance overall mental health (Farrell & Barrett, 2007). Research suggests that school-based interventions for anxiety are effective and beneficial (Schoenfeld et al., 2008).

School-based interventions can take the form of one to one therapeutic services or group counseling. During the counseling sessions, either group or individual, working through the stress or anxiety can be done by CBT, as mentioned earlier. Another tool that can be utilized is the use of worksheets. The following worksheets can be used to address stress or anxiety found in daily life or due to particular experiences.

1. “Attitude is Everything”
   This worksheet provides a positive outlook on how one’s attitude can make a difference. This worksheet can also be used as a tool for reminding students that all they can control is themselves. Students could repeat the statement on the worksheet as a way of letting go of stress and remaining positive.
2. “Identifying My Stress”

This worksheet lists many concerns a student could be stressed about. This allows for the group or individual to rate the amount of stress they feel for a particular item. This tool provides an excellent opportunity to identify what stressors the student(s) dwells on.

3. “Let Go of STRESS!”

This worksheet offers strategies to help students let go of stress. It can be a great resource for the students in a group or in individual counseling. Many techniques require a quiet classroom where light could be dimmed and/or the student(s) would feel comfortable closing their eyes.

4. “Stress Alert”

This worksheet provides an opportunity to think through potential situations and consider how the student would feel. These stressful situations provide a chance to walk through and talk about ideas that can help release stress.

5. “Strategies to Reduce Stress”

This document provides a list of things to do when stressed or feeling overwhelmed. The list gives an opportunity to identify which strategies are already being put to use and which strategies could be used in the future.

6. “Worry, Fear, and Anxiety Survey”

This survey lists off many items that could create some anxiety, fear, or worry. The students are asked to rate how anxious they feel about each item.
7. “Managing My Stress”

This worksheet lets the student rate how well they are managing their stress.

8. “What Can You Control Worksheet”

This worksheet helps students learn that the stressors and difficult situations in their lives fall on a continuum from situations they can control to situations that are completely out of their control.
Attitude is Everything!

The remarkable thing is that we have a choice

EVERYDAY

Regarding the attitude we will embrace

For that day.

We cannot change our past... we cannot

Change the fact.

That people will act in a certain way.

We cannot change the inevitable.

The only thing we can do is play on the

ONE string we have.

And that is our ATTITUDE.

I am convinced that life is 10% what

Happens to me,

And 90% how I react to it.

And so it is with you...
Identifying My Stress
*(Adapted from Schoenfeld et al., 2008)*

*Directions*: Please read the list below of many possible stressors and rate the amount of stress you feel for each stressor. Circle NEVER if you never feel any kind of stress, SOMETIMES if you occasionally feel stress, and ALWAYS if you frequently feel stress.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>NEVER</th>
<th>SOMETIMES</th>
<th>ALWAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I am concerned about dying.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>I am concerned about my health.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>I am concerned about violence.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>I am concerned about not being loved.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>I am concerned about my weight.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>I am concerned about being shy.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>I am concerned about my work.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>I am concerned about making friends.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>I am concerned about not fitting in at school.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>I am concerned about responsibilities I have.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>I am concerned about money.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>I am concerned about the environment.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>I am concerned about my family.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>I am concerned about ____________________.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Let Go of STRESS!
(Adapted from Merrell, 2007)

When you find yourself stressed because of things happening at home, at school, with friends or other relationships, try to work through the following steps to help alleviate some stress. These steps can help you clear your mind and relax your body.

1. Find a quiet place where you feel comfortable relaxing and closing your eyes.
2. When you find the quiet spot, sit or lie down in a comfortable position.
3. Close your eyes.
4. Breathe slowly and listen for your breathing. Take in long, deep breaths. Slowly let them out and feel your body relax as you take these full breaths.
5. Breathe in and tighten your body, then breathe out and relax your body. Breathe in and tighten, breath out and relax. Breathe in and tighten, breathe out and relax. Do that again four more times. Feel your body relaxed and calm.
6. Continue breathing in and out, taking long, deep breaths.
7. Think about being in you very favorite place and being very relaxed and calm. Imagine putting all of your worries inside a box, locking the box, and burying it in the sand.
8. Stay quiet and relaxed for a few more minutes, or for as long as you need.
**Stress Alert!**  
*(Adapted from Schoenfeld et al., 2008)*

*Directions:* Please consider how you would handle these stressful situations. Write a stress releaser you might use to get through the situation. Write down your own stressful situation and stress releaser for number 5.

<table>
<thead>
<tr>
<th>STRESSFUL SITUATION</th>
<th>STRESS RELEASE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. You have been waiting all week to watch your favorite TV program and you find that you can’t find the channel.</td>
<td></td>
</tr>
<tr>
<td>2. You find out that your parents are going to get a divorce.</td>
<td></td>
</tr>
<tr>
<td>3. Your best friend has decided to start smoking cigarettes.</td>
<td></td>
</tr>
<tr>
<td>4. You’re feeling resentful of all the work you have to do with little time to do it.</td>
<td></td>
</tr>
<tr>
<td>5. ___________________________  ___________________________</td>
<td></td>
</tr>
</tbody>
</table>
Strategies to Reduce Stress
(Adapted from Schoenfeld et al., 2008)

Circle the apple by the ideas you have used to reduce stress. Place a 1, 2, and 3 by the top three ideas you will use the next time you’re under stress.

1. Use positive self-talk. When you want to calm down, remind yourself that whatever is happening is not really an emergency. You might say to yourself, “Breathe. This is not a real emergency, and I can deal with this.”

2. Take a bubble bath or a warm shower.

3. Read a small portion of a good book every day at the same time.

4. Listen to a piece of your favorite music.

5. Draw, paint, or make a collage.

6. Talk a walk.

7. Exercise, do some yoga, or dance.

8. Take time in nature to look at the clouds, smell the flowers, or listen to the birds.

9. Cook or bake something you love to eat.

10. Watch an inspirational or funny movie.

11. Cuddle with a pet and/or walk the dog.

12. Say “no” to some things so your plate doesn’t get so full that there is not enough free time for things you like to do.

13. Do something that has repetitive movement, such as jumping rope, knitting, or chopping vegetables.

14. Do some gardening.

15. Work on a puzzle that has lots of pieces – how about 1,000?

16. Sing out loud.

17. Use ear plugs or headphones when you want to cut down the noise.
- Visualize a quiet, peaceful place, like a beach, and go there in your imagination.
- Write in a journal or write yourself an email or text encouraging yourself about something that concerns you. Send it to yourself.
- Do some deep breathing, counting slowly to five on the in breath and backward on the out breath. Repeat at least seven times to feel yourself relaxing.
- Start counting backward from 100 by threes.
- Go swimming.
- Ride a bike.
- Have a joke book handy that you can read when you need a good laugh.
- Spend quality time with a good friend.
- Play a sport.
- Have a hobby and make time to do it regularly.
- Spend quality time with an adult you can trust and talk to.
- Play with a young child.
- Do a crossword puzzle.
- Build something.
- Make a list of things in your life for which you are grateful.
- Volunteer or do something positive to address a concern you have.
- Your ideas:
  _______________________________________________________
  _______________________________________________________
  _______________________________________________________
### Worry, Fear, and Anxiety Survey
*(Adapted from Vernon, 2006)*

*Directions:* Put a checkmark next to each item to show how much you worry about, fear, or are anxious about it.

<table>
<thead>
<tr>
<th>Item</th>
<th>Frequently</th>
<th>Sometimes</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents’ Fighting</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Money</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Parents’ Drinking</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Peer Pressure</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Grades</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>My Future</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Dating</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>How I look</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Sex</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Drugs</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Nuclear war</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Jobs</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Others’ opinions</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Not being popular</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Performances</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>What I say</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Weight</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Athletics</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Acceptance</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>AIDS</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Getting Sick</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Growing up</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
Managing My Stress  
(Adapted from Schoenfeld et al., 2008)

Directions: Please rate yourself on each question with a 5 for “I do well”; a 3 for “I’m average”; or a 1 for “Need to improve.”

I am succeeding at:

1. _____ Scheduling time for enjoyable activities.

2. _____ Getting enough sleep at night.

3. _____ Not taking on more that I can handle (learning to say no).

4. _____ Having a physical fitness program that involves strenuous exercise.

5. _____ Practicing relaxation.

6. _____ Eating nutritious foods and avoiding junk foods.

7. _____ Avoiding alcohol or drugs.

8. _____ Planning regular recreation that’s fun.

9. _____ Talking out troubles and getting professional help if needed.

10. _____ Having a good laugh at least once per day.

☐ Now score yourself by totaling your numbers.
What Can You Control Worksheet
(Adapted from Vernon, 2006)

Directions: Read each situation and place a mark on the continuum to indicate how much control you think you have over it. If you do have some control, write down what you think you can do about the problem.

1. You want a certain boy or girl to go with you to the dance on Saturday.
No control at all _______________________________________ Total control
What can you do?

2. Your mom lost her job, and your family is really strapped for money.
No control at all _______________________________________ Total control
What can you do?

3. You just found out that your older sister, a junior in high school, is pregnant.
No control at all _______________________________________ Total control
What can you do?

4. Someone in your class continually teases you, and you don’t like it.
No control at all _______________________________________ Total control
What can you do?

5. You are failing a subject in school.
No control at all _______________________________________ Total control
What can you do?

6. Your best friend hates his or her parents and is threatening to run away from home.
No control at all _______________________________________ Total control
What can you do?
Depression

Feelings of unhappiness or depression comprise one of the qualifying characteristics of emotional disturbance. According to Khalil, Rabie, Abd-El-Aziz, Abdou, El-Rasheed, and Sabray (2010), research has shown that prevalence rates for adolescent depression are 5.9% for girls and 4.6% for boys. In addition, research suggests that around 15% to 20% of these students will suffer from depression throughout their lives. Children and adolescents may display depression in varying ways when compared to adults. These students often display a pervasive mood of unhappiness and may be irritable. In addition, they may become tearful, displays bouts of anger, and might be set off by small provocations. Symptoms such as a loss of interest in activities they previously enjoyed, failure to make expected weight gains, sleep disturbances, lack of energy or excessive fatigue, feelings of guilt or worthlessness, difficulty making decisions, thoughts or preoccupation with death, or somatic complaints such as headaches or nausea may also be present (Merrell, 2008). Depression in adolescence has been shown to lead to multiple negative consequences, such as lowered self-esteem, poor academic performance, comorbid psychiatric disorders, increased suicidal ideation, and increased risk for substance abuse (Dobson, Hopkins, Fata, Scherrer, & Allan, 2010).

Research has shown the effectiveness of many interventions for depression, including Cognitive Behavioral Therapy (CBT) (Dobson, Hopkins, Fata, Scherrer, & Allan, 2010). Dobson et al. report that CBT is “among the most effective, efficient, and cost-beneficial psychosocial treatments for several mental health problems, including
depression and anxiety.” CBT has been found to decrease the severity of symptoms related to depression and anxiety among high-risk adolescents. In addition, CBT has been shown to increase self-esteem which in turn decreases the chance of developing long-lasting mood disorders in the future.

Cognitive Behavioral Therapy (CBT) is a cognitive method that focuses on identifying and then changing and modifying thought processes and beliefs that may cause or contribute to depression. Cognitive Behavioral Therapy involves four main steps: first developing awareness of emotional variability, second detecting automatic thoughts and identifying beliefs, third evaluating automatic thoughts and beliefs, and fourth changing negative automatics thoughts and maladaptive beliefs (Merrell, 2008). The following worksheets will aide in progressing through the necessary steps of Cognitive Behavioral Therapy to address thoughts and beliefs associated with and contributing to depression in children and adolescents.
Techniques for Depression: Cognitive Behavioral Therapy

Step 1: Developing Awareness of Emotional Variability

To address and change negative automatic thoughts and beliefs, a person must first be aware of emotions they are experiencing. As was addressed previously, the first step of Cognitive Behavioral Therapy is to develop awareness of emotional variability. This is done through a process that eventually teaches the child or adolescent about depression and how their thoughts, feelings, and behavior are interconnected. The goal of Step 1 is to increase the child or adolescent’s awareness of their emotions and the variability of their emotions. These ranges of emotions are then connected to the range of thoughts and behaviors they may be experiencing (Merrell, 2008).

The following worksheets may aide in helping students learn to understand that the emotions they may be experiencing occur in various intensities and are not absolute.

1. “Emotion Intensity Matrix”

The Emotion Intensity Matrix helps students learn that basic feelings, such as happy, sad, and afraid are experienced in various intensities. The Emotion Intensity Matrix helps teach students the names of commons emotions and feeling experienced in low, medium, and high intensities and overall increases their emotional language and repertoire.

2. “Emotion 1-10 Scale”

The Emotion 1-10 Scale is a basic rating scale that can used frequently with students to help them gage their current feelings and intensity of
those feelings. Instead of a student responding that they are feeling “sad” they are asked to rate their level of sadness on a scale of 1-10 and describe what a “1” or a “10” on the scale would look and/or feel like.
**CBT Step 1: Emotion Intensity Matrix**

What are you feeling? Use the chart to help describe the intensity of your emotions.

<table>
<thead>
<tr>
<th>Intensity</th>
<th>Happy</th>
<th>Sad</th>
<th>Angry</th>
<th>Afraid</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Low</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cheerful</td>
<td>Resigned</td>
<td>Peeved</td>
<td>Uneasy</td>
</tr>
<tr>
<td></td>
<td>Glad</td>
<td>Blue</td>
<td>Bugged</td>
<td>Tense</td>
</tr>
<tr>
<td></td>
<td>Pleased</td>
<td>Blue</td>
<td>Annoyed</td>
<td>Anxious</td>
</tr>
<tr>
<td></td>
<td>Amused</td>
<td>Gloomy</td>
<td>Ruffled</td>
<td>Nervous</td>
</tr>
<tr>
<td></td>
<td>Relieved</td>
<td>Ignored</td>
<td>Cross</td>
<td>Puzzled</td>
</tr>
<tr>
<td><strong>Medium</strong></td>
<td>Delighted</td>
<td>Forlorn</td>
<td>Disgusted</td>
<td>Alarmed</td>
</tr>
<tr>
<td></td>
<td>Excited</td>
<td>Dejected</td>
<td>Irritated</td>
<td>Fearful</td>
</tr>
<tr>
<td></td>
<td>Bubbly</td>
<td>Slighted</td>
<td>Hostile</td>
<td>Strained</td>
</tr>
<tr>
<td></td>
<td>Tickled</td>
<td>Defeated</td>
<td>Riled</td>
<td>Shaky</td>
</tr>
<tr>
<td></td>
<td>Glowing</td>
<td>Burdened</td>
<td>Biting</td>
<td>Jittery</td>
</tr>
<tr>
<td><strong>High</strong></td>
<td>Elated</td>
<td>Miserable</td>
<td>Fuming</td>
<td>Panicked</td>
</tr>
<tr>
<td></td>
<td>Ecstatic</td>
<td>Crushed</td>
<td>Furious</td>
<td>Horrified</td>
</tr>
<tr>
<td></td>
<td>Jubilant</td>
<td>Helpless</td>
<td>Outraged</td>
<td>Terrified</td>
</tr>
<tr>
<td></td>
<td>Overjoyed</td>
<td>Worthless</td>
<td>Hateful</td>
<td>Petrified</td>
</tr>
<tr>
<td></td>
<td>Radiant</td>
<td>Depressed</td>
<td>Burned Up</td>
<td>Desperate</td>
</tr>
</tbody>
</table>
CBT Step 1: Emotion 1-10 Rating Scale

Use the following questions to help you get started:

What am I feeling? What does my body feel like when I experience this emotion? How would I rate this feeling? What would a 1 versus a 10 feel like?

<table>
<thead>
<tr>
<th>List Emotion:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rating</strong></td>
</tr>
<tr>
<td>10</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>1</td>
</tr>
</tbody>
</table>

*After completing the worksheet, choose the final rating for the intensity of your emotion:*

1  2  3  4  5  6  7  8  9  10
Techniques for Depression: Cognitive Behavioral Therapy

Step 2: Detecting Automatic Thoughts and Identifying Beliefs

Step 2 of Cognitive Behavioral Therapy occurs after students have practiced the techniques of Step 1 and have a better understanding of the variability of the emotions they experience. Step 2 includes teaching students how to detect their “automatic thoughts” and the underlying negative thinking process behind those thoughts. This step is based on the belief that people develop patterns of thinking due to automatic cognitions that occur in response to various situations and stimuli. For example, many people who experience depression have a pattern of negative automatic thoughts to most situations and experiences. This negative thinking pattern is typically maladaptive and results in continued depressive symptoms and feelings because the thoughts are often unrealistic or distorted in some manner.

In Step 2, students are taught to identify automatic thoughts and then the underlying beliefs associated with the thoughts. For example, a student may automatically think they will fail and will not make the basketball team so they do not even attempt to try out for the team. The underlying belief is that they are “a failure or can never do anything correctly” (Merrell, 2008).

The following worksheet will help students learn to identify these automatic thoughts and the underlying beliefs associated with the thoughts. Keep in mind, younger children may have difficulties completing the worksheet independently. Therefore, it may be helpful to use it as a tool to guide individual counseling. By repeatedly asking
the student what their thought means about/to them, and “so what” if they feel that way, students will eventually be able to identify their core negative/maladaptive belief(s).

Additionally, some students may require the practitioner to offer suggestions about what they may feel or think during particular situations to get started (Merrell, 2008)

1. “Thought Record Sheet”

This worksheet allows students to keep track of their automatic thoughts, and related emotions.
CBT Step 2: Thought Record Sheet

Use the following questions to help you get started filling out your own Thought Record Sheet to determine automatic thoughts and beliefs.

**The Situation:**
- What specifically happened? Where was I? Who was I with? When did this occur?

**My Unhelpful/Automatic Thoughts or Images:**
- What went through my mind?
- What disturbed me/made me unhappy?
- What did my thoughts/memories/images mean to me or say about me?

**My Feelings/Body Sensations:**
- What emotion(s) was I experiencing during the situation?
- What did I feel in my body while experiencing the emotion(s)?

**Rate Feelings from 1-10:**
- How intense was the emotion(s)?
- What would a 1 versus a 10 feel like for this emotion?

<table>
<thead>
<tr>
<th>The Situation</th>
<th>My Unhelpful/Automatic Thoughts or Images</th>
<th>My Feelings/Body Sensations</th>
<th>Rate Feelings from 1-10</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
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</tr>
</tbody>
</table>
Techniques for Depression: Cognitive Behavioral Therapy

CBT Step 3: Evaluating Automatic Thoughts and Beliefs

Once a student is able to identify their automatic thoughts and the underlying beliefs of these thoughts, they can move on to Step 3 of Cognitive Behavioral Therapy which involves evaluating those identified thoughts and beliefs. While evaluating these beliefs, students learn to determine whether their thoughts and/or beliefs are realistic or unrealistic and adaptive or maladaptive. When teaching students to determine whether a thought is realistic or not, it is helpful to think of realistic thoughts are those supported by evidence. In contrast, an unrealistic thought is one that occurs despite evidence that proves it is untrue (Merrell, 2008). Additionally, Merrell has described an adaptive thought or belief as “one that appropriately helps to solve whatever problem is the focus of concern” (p. 114). In contrast, a maladaptive thought or belief “typically gets in the way of solving the problem” (p. 114).

Additionally, Merrell (2008) explains that in some cases, negative beliefs may be adaptive and/or negative thoughts may be realistic. He recommends the goal of treatment “should not be simply to eliminate negative thoughts or beliefs. Rather, the intervention should help to change negative thoughts and beliefs that are unrealistic and maladaptive, and to replace these with thoughts and beliefs that are more realistic and adaptive” (p. 115).
There are many common thinking errors that people adopt as a way of processing information, situations, and experiences. The following worksheets will help teach and identify the most common thinking errors and judge the severity of a situation.

1. “Unhelpful Thinking Errors”

This worksheet explains the various thinking errors that people may experience, which include: mental filter, making judgments, mind reading, emotional reasoning, predictions, mountains and molehills, compare and despair, catastrophizing, critical self, black and white thinking, should and musts, and memories.

2. “Helicopter View”

This worksheet helps students learn to take the “Helicopter View” and take perspective on a situation they are experiencing. The worksheet helps students determine the realistic consequences of the situation and judge the severity of the situation and their negative thoughts.
### CBT Step 3: Unhelpful Thinking Errors

(Adapted from Merrell, 2008)

<table>
<thead>
<tr>
<th>Mental Filter/Dark Glasses</th>
<th>Critical Self</th>
</tr>
</thead>
<tbody>
<tr>
<td>When we only notice what the filter allows us to. Like looking through dark glasses and only noticing negative things and dismissing positive things.</td>
<td>Putting ourselves down, criticizing ourselves, blaming ourselves for situations that are not completely our responsibility.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Judgments</th>
<th>Black and White Thinking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Making judgments about events, ourselves, other people, or the world rather than describing what we actually see and may have evidence to prove.</td>
<td>Believing that something or someone can only be good or bad, right or wrong, rather than anything in-between or a shade of grey.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mind Reading</th>
<th>Shoulds and Musts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assuming we know what others are thinking, especially about us.</td>
<td>Always thinking “I should”, “I shouldn’t”, or “I must” which puts pressure on ourselves and causes unrealistic expectations.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emotional Reasoning</th>
<th>Memories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thinking a situation is bad because you feel bad. Ex. I feel anxious, so I must be in danger!</td>
<td>Situations can trigger memories which cause us to believe the feeling or danger is here and now, rather than in the past. This can cause us distress now.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Predictions/Fortune Telling</th>
<th>Mountains and Molehills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Believing we know what’s going to happen in the future.</td>
<td>Exaggerating the risk of danger, or the negatives. Minimizing the odds of how things are most likely to turn out, or minimizing the positives.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Catastrophizing</th>
<th>Compare and Despair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always thinking, believing, or imagining that the worst will happen.</td>
<td>Comparing ourselves to others. Only seeing the good and positive aspects of others and comparing ourselves negatively against them.</td>
</tr>
</tbody>
</table>
**CBT Step 3: Helicopter View**

Answer the following questions to help you determine if your thoughts and beliefs are realistic/unrealistic or adaptive/maladaptive.

<table>
<thead>
<tr>
<th><strong>What was the situation?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>What was my automatic thought or belief?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>How was I feeling? What did my body feel like?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>What is the evidence for my thought or belief?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Take the helicopter view and take some perspective.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• What’s the bigger picture?</td>
</tr>
<tr>
<td>• Is this fact or opinion?</td>
</tr>
<tr>
<td>• How would someone else see this?</td>
</tr>
<tr>
<td>• Is there another way of looking at this?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>What if your negative thought happens?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Realistically what is the worst thing that could happen?</td>
</tr>
<tr>
<td>• Have you been through bad situations before?</td>
</tr>
<tr>
<td>• Did you survive-handle the situation?</td>
</tr>
<tr>
<td>• What did you do?</td>
</tr>
<tr>
<td>• Have other people gone through a similar situation and been ok?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Decide: Is my thought realistic or unrealistic?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Decide: Is my thought adaptive or maladaptive?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
Techniques for Depression: Cognitive Behavioral Therapy

CBT Step 4: Changing Negative Automatic Thoughts and Maladaptive Beliefs

After a student learns to identify their negative automatic thoughts and maladaptive beliefs they can then learn to replace these thoughts with more adaptive and supportive beliefs. The goal of therapy then becomes changing or reducing these well-ingrained thoughts and maladaptive beliefs.

The following worksheets will help students record their thoughts, determine if they are making an unhelpful thinking error and then choose a more realistic way of thinking about the situation.

1. “Alternative Thoughts for Unhelpful Thinking Errors”

   This worksheet provides alternative ways of thinking for the common thinking errors discussed previously.

2. “Thought Log”

   This worksheet helps students identify their negative thoughts, thinking errors, and possible alternative, more realistic ways of thinking.
## CBT Step 4: Alternative Thoughts for Unhelpful Thinking Errors

(Adapted from Merrell, 2008)

<table>
<thead>
<tr>
<th>Unhelpful Thinking Error</th>
<th>Thought/Questions to Consider</th>
<th>Alternative Way of Thinking</th>
</tr>
</thead>
</table>
| Mental Filter/Dark Glasses | **Automatic Thought:** ___________________________________  
  Am I only noticing the bad stuff?  
  Am I filtering out the positives?  
  Am I wearing dark or gloomy glasses?  
  What would be more realistic? | |
| Critical Self | **Automatic Thought:** ___________________________________  
  Am I bullying myself again?  
  Would most people who really know me say that about me?  
  Is this something that I am totally responsible for? | |
| Judgments | **Automatic Thought:** ___________________________________  
  I’m making an evaluation about the situation or person. It’s how  
  I make sense of the world, but that doesn’t mean my judgments  
  are always right or helpful.  
  Is there another perspective? | |
| Black & White Thinking | **Automatic Thought:** ___________________________________  
  Things aren’t either totally black or total white.  
  Remember, there are shades of grey. Where is this on the  
  spectrum or grey? | |
| Mind Reading | **Automatic Thought:** ___________________________________  
  Am I assuming I know what others are thinking?  
  What’s the evidence for my thoughts?  
  Is there another, more balanced way of looking at the situation? | |
| Shoulds and Musts | **Automatic Thought:** ___________________________________  
  Am I putting more pressure on myself?  
  Am I setting up expectations of myself that are almost  
  impossible?  
  What would be more realistic? | |
<table>
<thead>
<tr>
<th>Reasoning</th>
<th>Automatic Thought:</th>
</tr>
</thead>
</table>
| **Emotional**             | *Just because it feels bad, doesn’t necessarily mean it is bad.*
|                           | *My feelings are just a reaction to my thoughts.*                                                     |
|                           | *My thoughts are often automatic and unrealistic or maladaptive.*                                       |
| **Memories**              | *This is just a reminder of the past. That was then, and this is now.*
|                           | *Even though this memory makes me feel upset, it’s not actually happening again right now.*           |
| **Predictions/Fortune**   | *Am I trying to predict the future?*                                                                    |
|                           | *How likely is it that this will really happen?*                                                        |
| **Mountains and Molehills**| *Am I exaggerating?*
|                           | *Am I exaggerating the negatives and discounting the positives?*
|                           | *How would someone else see it?*
|                           | *What’s the bigger picture?*                                                                            |
| **Catastrophizing**       | *Is thinking about the worst possible thing going to help?*
|                           | *What’s most likely to happen?*                                                                          |
| **Compare and Despair**   | *Am I comparing myself to someone else?*
|                           | *Am I only noticing the good things about others and the bad about me?*
CBT Step 4: Thought Log

Use the worksheet to help identify your negative thoughts, thinking errors, and possible alternative, more realistic ways of thinking.

<table>
<thead>
<tr>
<th>Situation</th>
<th>Negative Automatic Thought</th>
<th>Unhelpful Thinking Error</th>
<th>Alternative / More Realistic Thought</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ex. I got a F on my test</td>
<td>I am a failure.</td>
<td>Critical Self, Judgments</td>
<td>I might not do well on all tests, but I can try harder next time. Just because I fail once, does not mean I am a failure.</td>
</tr>
</tbody>
</table>
Anger Management

Anger is an emotion often experienced by students with ED. Anger and associated externalizing behaviors can result in harm to others as well as property damage (Ho, Carter, & Stephenson, 2010). The externalized behaviors may be seen in the classroom, at school, or at home and may manifest as aggression, impulsiveness, temper tantrums, noncompliance and destructiveness (Miller & Rainey, 2008). Many times students with ED also have deficits in their cognitive abilities or social skills, which make it difficult to develop skills to handle the anger they experience (Ho et al., 2010). With this in consideration, it is important to address the anger that is seen in ED students and help them to manage that anger.

There are several approaches to managing behavior, including a variety of behavioral interventions. “Behavioral interventions are most successful with students exhibiting inappropriate externalized emotions” (Miller & Rainey, 2008, p. 17). Behavioral intervention techniques attempt to “increase appropriate behaviors and decrease and eventually eliminate inappropriate behaviors all together” (Miller & Rainey, 2008, p. 17). Students in middle and high school may benefit from Cognitive Behavioral therapy (CBT), which includes interventions based on “challenging and restructuring irrational beliefs” (Miller & Rainey, 2008, p. 18). Lishman, Lay, and Steward (2008) reported that CBT is often the most frequent type of therapy used when working on anger management. Specifically for the purposes of anger management, therapy sessions can include identifying when the student feels anger and/or aggression, identifying anger in
the body (requires some self-awareness), and considering the ABCs of anger (activating event, beliefs about the event, and consequences). The sessions can also include coping and calming strategies as well as techniques to manage the anger. The following worksheets can help with:

1. “What Triggers Your Emotions?”
   This worksheet allows the facilitator to introduce the student to some self-identification of emotions and what makes them feel a variety of emotions.

2. “Identifying Anger in the Body”
   This worksheet provides a checklist that has the student consider the typical physical symptoms the student feels experiences when they are angry. This also facilitates self-awareness, in hopes the student can catch themselves feeling angry and put healthy coping skills into action the next time anger occurs.

3. “Taking Inventory”
   This worksheet breaks down the most recent time the student felt angry and aggressive. It looks for trends in severity and frequency, providing an opportunity for a discussion based on the entire inventory collected.

4. “Stages of Anger”
   This worksheet allows the participants to understand the progression of anger, as it typically builds in stages. It provides an opportunity to break down previous situations and identify the stages from past experiences spurred on by anger.

5. “The ABC Model of Anger”
   This worksheet works on learning to change the student’s thoughts about frustrating situations that can help to control anger.

6. “Create a Calming Plan”
   This worksheet is a tool for identifying when the student is feeling upset, and creating a calming plan for when the student is at home or at school.
7. “How are you Coping: Do you Escape, Express, or Explode?”

This worksheet allows the student to contemplate how they cope when they are angry and provides a look at common healthy and unhealthy coping strategies for when the student feels angry.
What Triggers Your Emotions?
(Adapted from Miller & Rainey, 2008)

Consider all the things that can make you happy, make you laugh, make you upset or sad, or can push your buttons. Please consider all the things that can stir up your emotions.

1. What makes you feel ANGRY? _________________________________________
   _________________________________________
   _________________________________________

2. What makes you feel SAD? _________________________________________
   _________________________________________
   _________________________________________

3. What makes you feel SILLY? _________________________________________
   _________________________________________
   _________________________________________

4. What makes you CRY? _________________________________________
   _________________________________________
   _________________________________________

5. What makes you feel HAPPY? _________________________________________
   _________________________________________
   _________________________________________

6. What makes you feel EMBARRASSED? _________________________________________
   _________________________________________
   _________________________________________

7. What makes you feel PROUD? _________________________________________
   _________________________________________
   _________________________________________

8. What makes you feel DEPRESSED? _________________________________________
   _________________________________________
   _________________________________________
Identifying Anger in the Body

Typically, when we are angry, our body responds in different ways. This worksheet will allow you to identify what you are feeling when you are angry. Remember, everyone responds differently when they are angry and there are many different types of feelings that may be experienced.

Put a checkmark next to any feelings you experience when you are angry.

___ Heavy breathing or difficult breathing.
___ Dry Mouth.
___ Increased heart rate.
___ Increased blood pressure.
___ Burning or flush feeling in your face.
___ Clenched fists.
___ Tense muscles.
___ Stomachache.
___ Headache.
___ Sweaty palms or skin in general.
___ Shaking or trembling.
___ Difficulty thinking or speaking.
___ Numbness.
___ Increased adrenaline.

Now that you have identified what you typically feel when you are angry, is it important to listen to what your body is telling you! This checklist can help us identify if we are beginning to feel angry or if we are already angry. Once we identify these feelings, we can possibly slow down our reactions to the anger that is building.

Most people have a hard time dealing with anger. If you find anger a difficult emotion to handle, you are not alone. Managing anger takes a lot of hard work, but over time you will notice definite benefits to learning new anger-management skills. Anger-management skills can be used to help you at school, at home, with your family, other relationships, and even with employment.
Taking Inventory

Often times, the best way to see why we get angry is to look back on a recent event where we got so angry, we reacted. Let’s take inventory on the last time you felt angry and possibly got aggressive.

GATHERING THE FACTS

1. Describe the most recent incident when you got angry and/or aggressive.
   When? Date: ____________________________ Time: ____________________________
   Where were you? ________________________________________________________
   What happened? __________________________________________________________

2. List your thoughts during the incident: ________________________________________

3. Describe your feelings during the incident: ______________________________________

4. Describe your actions: (Explain exactly what you did.) __________________________

5. What was the outcome? ______________________________________________________

6. How common is this type of incident for you:
   ☐ Happens often.   ☐ Hardly ever happens.   ☐ Never happened before.

2. How frequently do you get seriously angry and/or aggressive?
   _________ Number of times per day.
   _________ Number of times per week.
   _________ Number of times per month.

3. What do you often get angry about?
   _________________________________________________________________________

4. Has your anger ever gotten you into trouble?
   Yes       No
   Have you ever been suspended from school because of your anger?  ☐  ☐
   Have you ever been in trouble with the law because of your anger?  ☐  ☐
   Have you ever been banned from a club, sport, or public place because of your anger?  ☐  ☐

5. What techniques have you tried to help yourself deal effectively with anger? Did they work? Please explain.
   _________________________________________________________________________
   _________________________________________________________________________

6. Self-Assessment
   How often would you say the following behaviors occur? Use the numbers 0-4 to score.
   0 = Never       1 = Every once in a while       2 = Occasionally       3 = Frequently       4 = Continually
   _____ Swearing at people
   _____ Putting people down
   _____ Breaking things on purpose
   _____ Deliberately hurting people
   _____ Throwing things
   _____ Yelling at people
   _____ Losing control
   _____ Getting revenge
   _____ Feel like beating people up
   _____ Shoving, hitting, or pushing others

   Add up your score to determine how much of an issue "aggression" is for you.
   0 – 10 = Mild              11 – 20 = Moderate              21 – 30 = Very serious              31 – 40 = Severe
Stages of Anger
(Adapted from Stewart, 2002)

FOOD FOR THOUGHT

Anger typically builds in stages and by understanding how your anger build, you can begin to identify when you begin to feel frustrated. When you can start to identify and understand when your anger is building, you can use that knowledge to stop yourself before the anger gets out of control.

Follow along with the story and consider your own personal experiences.

Tim was getting ready for a big football game. He looked at his watch and it said 6 o’clock. He was supposed to be at the field in 20 minutes, but his older brother was not home from work to drive him. “Where is he?” he thought. He tried calling to see where he was, but there was no answer. Each minute that passed by made Tim more agitated.

What was pushing Tim’s ANGER BUTTON?

Think of a time when you felt like your ANGER BUTTON(S) were getting pushed.

2. Your Thinking Gets Distorted.
While Tim was anxiously waiting for his brother to get home, he kept thinking, “By the time I get to the field, the game is already going to have started and I won’t get to play in the game. Everyone will hate me and I’ll get kicked off the team!”

Anger can DISTORT how people think about situations. Can you recognize how Tim assumed the worst-case scenario and blew things out of proportion? Other common distortions include blaming others and misinterpreting events.

Think of a time when your thinking was DISTORTED.

3. Your Feelings Take Over and You React
When Tim’s brother got home, he honked for Tim to come out to the car. By that time, 30 minutes had passed and Tim was already 10 minutes late. He stomped out of the house, fuming, and shouted with a beet red face, “I can’t believe you have made me so late! I won’t get to play for sure!”

Can you see how Tim’s feelings have taken control of his behavior? He was angry about being late to the field; he was embarrassed about facing his teammates and his coaches; and he was hurt his brother hadn’t tried harder to be on time. Most of all, he was angry because he was going to be late.

Think of a time when your feelings TOOK CONTROL OF YOUR BEHAVIOR.
Learning to change your thoughts about frustrating situations can help you control your anger. Some counselors use a simple technique called the ABC model to teach people how to change their thoughts about a situation.

Here’s how the ABC model works:

1) **Activating Event (the situation that makes you angry).**
   You are working on an art project and you took a 10 minute break. While you were getting a drink of water, you little brother went to grab something from the table and knocked over the cup of water where you rinsed your brushes. The water spilled over the right part of your art project, rinsing away the work you have done and you will have to redo that part.

2) **Beliefs about the Event**
   Beliefs can be rational and irrational. Rational beliefs are accurate interpretations of the event; for example, “Half of my art project was erased by an accident.” An irrational thought involves distorted thoughts, which could be “My brother wanted me to have to redo my project because he’s out to get me.”

3) **Consequences**
   You throw your pencil case at your brother and yell at him, telling him that he ruined everything and that you hate him.

Now that you have seen the ABCs, look at your own beliefs and see whether they are rational or not based on some of the more recent experiences you have had when you are angry. If your thoughts have not been rational, follow the next three steps:

1) **Dispute your beliefs.**
   **Think:** “Maybe spilling the water was an accident. It’s not like he meant to do it, I should have considered that he wasn’t trying to erase my project on purpose.”

2) **Set goals to avoid similar situations in the future.**
   **Think:** “I want to protect my work so next time I will do this on my desk and not on the table that everyone uses. I want to share our space and have a good relationship with my brother.”

3) **Create a plan to support your goals.**
   **Think:** “I’ll find my brother and explain I was just upset that I would have to redo my work. I will also apologize everything I said to him and offer him a change to tell me what he thinks of my project.”
Creating a Calming Plan

**FEELING UPSET**
How do I know when I am upset?

**HOME PLAN**
What calms me down at home?

Who can I talk to at home to help me solve the problem?

**SCHOOL PLAN**
What calms me down at school?

Who can I talk to at school to help me solve the problem?
How are you Coping: Do you Escape, Express, or Explode?

As individuals, we are in control of our thoughts, feelings, emotions, and behavior. It is important to consider how we cope with the feelings we experience, particularly anger in this case.

When you are angry, you have a choice of how you will respond.

**ANGER**

**Escape**
You can escape by burying your feelings or by ignoring or avoiding the situation entirely. Write a time where your anger-coping skill was ESCAPE: ________________________
_______________________________________________________________________
_______________________________________________________________________

**Express**
You can express yourself assertively by problem-solving, negotiating, or compromising. Write a time where your anger-coping skills was EXPRESS: ______________________
_______________________________________________________________________
_______________________________________________________________________

**Explode**
You can can explode by venting, blowing up, or becoming physically aggressive. Write a time where your anger-coping skill was EXPLODE: ______________________
_______________________________________________________________________
_______________________________________________________________________

CONSIDER each experience. WHICH coping skill had the best end result?
_______________________________________________________________________
_______________________________________________________________________

WHY?
_______________________________________________________________________
Aggression

Research shows that aggressive behavior is the most common reason students are referred for psychiatric services (Connor, Melloni, & Harrison, 1998). Aggression is arguably the most concerning externalizing behavior displayed by students with ED as it threatens the security and safety of teachers and other students. In addition, aggression is often used by these students as a way to solve social problems; a maladaptive skill that remains stable over their lifetime. A study conducted by Wehby, Symons, and Shores (1995) found elementary school students with ED used verbal and/or physical aggression at least one to six times per hour.

Aggressive behavior displayed by students with ED can be described as two types: reactive aggression and proactive aggression. Reactive aggression can be characterized as a response that is angry, defensive, and occurs in response to a perceived threat, frustration, or provocation. In contrast, aggressive behavior that is intentional, coercive, and used as a means of obtaining a goal or desired stimuli is defined as proactive aggression (Ford, Fraleigh, & Connor, 2010).

Since most people experience physiological arousal including increased heart rate, muscle tension, blood pressure, and increased breathing rate during aggressive acts, addressing these symptoms is a strategy to decrease overall aggression (Lopata, 2003). Some strategies to alleviate physiological symptoms associated with stress, frustration, and anxiety include relaxation techniques such as meditation, progressive muscle relaxation, guided imagery, and yoga. These techniques have been shown to decrease
heart rate, respiration, and impulsivity. Additionally, cooperation increases and acting out and distress has been shown to decrease among students with learning and behavioral problems (Lopata, 2003).
Techniques for Aggression: Meditation

Purpose of Meditation:

The purpose of meditation is to learn to calm the mind. Most people find it difficult to “turn off” their mind and stop thinking about the day’s events, do lists, or negative situations and experiences. As people learn to calm their minds, they become free from worries and discomforting thoughts and therefore experience true happiness. However, if a person’s mind is constantly filled with thoughts and is not peaceful, they find it more difficult to be truly happy, even when they believe they have everything they want. Through meditation people learn to train their mind to be more and more peaceful and less crowded with unnecessary thoughts and ruminations. The goal is that eventually, even when faced with difficult situations, a person who is trained in meditation will be able to remain calm and happy.

How to Meditate:

The goal of simple breathing meditation is to help calm the mind and create inner peace. The following steps are useful to begin learning the basics of breathing meditation. These steps can be used class wide as prevention for aggression in the classroom or be used as a specific strategy for individual struggling students. If the goal is help students learn to use meditation outside of the classroom environment, the provided guide will be helpful for students to remember and learn the steps of successful meditation.
1. Find a quiet and distraction free environment.

2. Sit in a comfortable position. This can be done by sitting in the traditional cross-legged posture or in any other sitting position that is comfortable, including in a chair. The most important aspect is to maintain good posture and keep your back straight.

3. Once you have found a comfortable position, sit with your eyes partially closed and begin focusing on your breathing. Breathe naturally, preferably through your nose, and do not attempt to control your breathing. The goal of this step is to become aware of the sensation of breathing as it enters and exits your lungs. Learning to focus on the sensation of breathing is the goal and purpose of meditation.

4. When first learning meditation, you may believe your mind is busier and that you are thinking more than normal. However, this is just you becoming more aware of how busy your mind actually is and how many thoughts cross your mind. It is important to not follow these trains of thought as they pass. By focusing on the sensation of breathing, it will be easier to let these thoughts pass. If you let your mind wander, go back to focusing on your breathe. This should be done repeatedly as needed and will eventually becoming easier (How to Meditate, n.d.).
Meditation Guide

Step 1: Find a quiet, distraction free environment.

Step 2: Sit in a comfortable position (e.g., cross-legged or in a chair).

Step 2: Focus on the sensation of your breath.

Step 3: Do not alter or control your breathing.

Step 4: Do not follow your thoughts or let your mind wander.

Step 5: If your mind wanders, continue to focus on your breath. Repeat as necessary.

Remember! It will become easier to let your thoughts pass you by!
Techniques for Aggression: Progressive Muscle Relaxation (PMR)

Many people experience muscle tension in their backs, necks, etc. in response to stressful events. Progressive Muscle Relaxation (PMR) is a method of reducing the tension caused by stress, anger, and anxiety.

Progressive Muscle Relaxation involves breathing in while tensing a group of muscles, and then breathing out while relaxing the muscles. Muscle groups are contracted and relaxed in a specific order. After tensing a muscle group, the muscle should feel more relaxed and less tense than prior to the tensing. While tensing the muscles groups it is important to concentrate on the way the muscles feel, specifically the difference between when they are tensed versus relaxed. Through repeated and consistent practice, identifying areas of tension will become easier, as will reducing that tension.

The following guide is useful for learning the steps of Progressive Muscle Relaxation. Through practice, it will become easier to remember the steps, in particular the muscles groups and order of tensing.

Progressive Muscle Relaxation is a technique that can be done class wide as prevention for aggression, stress, and anxiety. Additionally, it can be used as an intervention for individual students struggling with high stress and a lack of adaptive coping skills to address their stress.

1. “Progressive Muscle Relaxation”
Progressive Muscle Relaxation
(Adapted from Stress Management Health Center, 2010)

First things first!
- Sit in a comfortable chair, preferably a reclining arm chair.
- Remember, you will be alternately tensing and relaxing specific groups of muscles.
- Do not tense muscles other than the specific group at each step.
- Do not hold your breath, squint, or clench your teeth.
- Breathe slowly and evenly and try and think only about tensing the specific muscle groups.
- Tense the muscle group for 10 seconds and then relax for 10 to 15 seconds.
- Following the sequence provided below for the order of muscle tensing.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1. Hands</td>
<td>Tense your fists then relax. Extend your fingers then relax.</td>
</tr>
<tr>
<td>2. Biceps &amp; Triceps</td>
<td>Tense your biceps (ex. make a muscle, but be sure to keep hands from tensing into a fist) then relax. Tense your triceps (ex. try to bend your arms the wrong way) then relax.</td>
</tr>
<tr>
<td>3. Shoulders</td>
<td>Tense your shoulders by pulling them back, then relax. Tense your shoulders by pushing them forward (hunch), then relax.</td>
</tr>
<tr>
<td>4. Neck</td>
<td>First relax your shoulders and make sure they are straight. Turn your head slowly to the right as far as you can, then relax. Repeat this turning to the left. Then move your head forward, digging your chin into your chest, then relax. Do not bring your head back.</td>
</tr>
<tr>
<td>5. Mouth</td>
<td>Open your mouth as far as possible, then relax. Purse your lips together as tightly as possible, then relax.</td>
</tr>
<tr>
<td>6. Tongue</td>
<td>Open your mouth and extend your tongue as far as possible, then relax. Bring your tongue as far back into your mouth as possible, then relax. Push your tongue into the roof of your mouth, then relax. Push your tongue into the bottom of your mouth, then relax.</td>
</tr>
<tr>
<td>7. Eyes</td>
<td>Open your eyes as wide as possible, then relax. Close your eyes as tightly as possible, then relax. Make sure to completely relax your eyes and face after each tensing.</td>
</tr>
<tr>
<td>8. Breathing</td>
<td>Take as deep of a breath as possible, then a little more, and a little more. Let out your breath and breathe normally for 10-15 seconds. Push out all the breath in your lungs, then a little more, and a little more. Inhale and breathe normally for 10-15 seconds.</td>
</tr>
<tr>
<td>9. Back</td>
<td>Rest your shoulders on the back of the chair then bend forward into an arch, then relax. If you experience back problems, skip this muscle group.</td>
</tr>
<tr>
<td>10. Thighs</td>
<td>Extend your legs 6 inches off the floor, but make sure not to tense your stomach muscles, then relax. Push your feet (heels) into the floor, then relax.</td>
</tr>
<tr>
<td>11. Stomach</td>
<td>Suck in your stomach as far as possible, then relax. Tense your stomach (like preparing for a punch), then relax.</td>
</tr>
<tr>
<td>12. Calves &amp; Feet</td>
<td>Point your toes (without raising your legs), then relax. Point your feet up as far as possible, then relax.</td>
</tr>
<tr>
<td>13. Toes</td>
<td>Relax your legs, then push your toes into the floor and then relax. Then bend your toes up as far as possible, then relax.</td>
</tr>
</tbody>
</table>
Techniques for Aggression: Guided Imagery

Guided Imagery is a relaxation technique that can be used to decrease stress, anxiety, and symptoms related to anger, such as increased heart rate and blood pressure. With Guided Imagery a person uses their imagination to direct their thoughts to a specific scene that they find relaxing, such as a beach or meadow. With specific, detailed scripts the person begins to feel like they are actually present in the place in their imagination.

Guided Imagery can be used in multiple ways, including independently and with a group. Guided Imagery is more effective if the person is guided by another person or listens to a recording. However, it can be done independently by reading a script or by recording one’s own voice guiding the imagery (Healthwise Staff, 2010a).

The use of Guided Imagery with students with Emotional Disturbance is likely to be most effective if complete class wide. Students should be instructed to sit comfortably, either at their desk or on the floor and close their eyes. School staff can then read a guided imagery script, helping students learn to relax. If done frequently, students will learn to apply these techniques on their own time. Additionally, teachers may wish to incorporate the recording of Guided Imagery Scripts into class technology lessons. This would allow students access to scripts they can listen to outside of the school environment.

The following Guided Imagery Scripts can be used in a class setting, given to students for use at home, or recorded by students for personal use outside of school.

1. “Guided Imagery Script: Ocean Scene”
2. “Guided Imagery Script: Forest Scene”
Guided Imagery Script: Beach Scene
(Adapted from Inner Health Studios, 2011)

Get comfortable. Sit in a supportive chair or lie on your back.

Relax your body by releasing any areas of tension. Allow your arms to go limp... then your legs....

Now relax your neck and back by relaxing your spine.... release the hold of your muscles all the way from your head, down your neck....along each vertebra to the tip of your spine...

Breathe deeply into your diaphragm, drawing air fully into your lungs.... and release the air with a whooshing sound....

Breathe in again, slowly.... pause for a moment.... and breathe out.....

Draw a deep breath in.... and out....in..... out.....become more and more relaxed with each breath....

Feel your body giving up all the tension.... becoming relaxed.... and calm.... peaceful....

Feel a wave of relaxation flow from the soles of your feet, to your ankles, lower legs, hips, abdomen, chest, back, hands, lower arms, elbows, upper arms, shoulders, neck, back of your head, face, and the top of your head....

Allow your entire body to rest heavily on the surface where you sit or lie. Now that your body is fully relaxed, allow the visualization relaxation to begin.

Imagine you are walking toward the ocean.... walking through a beautiful, tropical forest....

You can hear the waves up ahead.... you can smell the ocean spray.... the air is moist and warm.... feel a pleasant, cool breeze blowing through the trees....

You walk along a path....coming closer to the sea....as you come to the edge of the trees, you see the brilliant aqua color of the ocean ahead....

You walk out of the forest and onto a long stretch of white sand.... the sand is a very soft powder.... imagine taking off your shoes, and walking through the hot, white sand toward the water....

The beach is wide and long....hear the waves crashing to the shore....smell the clean salt water and beach....

You gaze again toward the water.... it is a bright blue-green....
See the waves washing up onto the sand..... and receding back toward the ocean.... washing up.... and flowing back down..... enjoy the ever-repeating rhythm of the waves...

Imagine yourself walking toward the water.... over the fine, hot sand.... you are feeling very hot.... As you approach the water, you can feel the mist from the ocean on your skin. You walk closer to the waves, and feel the sand becoming wet and firm....

A wave washes over the sand toward you.... and touches your toes before receding...

As you step forward, more waves wash over your feet.... feel the cool water provide relief from the heat....

Walk further into the clear, clean water.... you can see the white sand under the water.... the water is a pleasant, relaxing temperature.... providing relief from the hot sun... cool but not cold....

You walk further into the water if you wish.... swim if you want to.... enjoy the ocean for a few minutes..... allow the visualization relaxation to deepen.... more and more relaxed... enjoy the ocean....

Now you are feeling calm and refreshed...you walk back out of the water and onto the beach...

Stroll along the beach at the water's edge.... free of worries... no stress... calm..... enjoying this holiday....

Up ahead is a comfortable lounge chair and towel, just for you...sit or lie down in the chair, or spread the towel on the sand.... relax on the chair or towel.... enjoying the sun.... the breeze.... the waves.....

You feel peaceful and relaxed.... allow all your stresses to melt away....

When you are ready to return from your vacation, do so slowly....

Bring yourself back to your usual level of alertness and awareness....

Keep with you the feeling of calm and relaxation.... feeling ready to return to your day....

Open your eyes, stretch your muscles... and become fully alert... refreshed... and filled with energy.
Guided Imagery Script: Forest Scene
(Adapted from Inner Health Studios, 2011)

Begin by finding a comfortable position sitting or lying down. Allow your body to begin to relax as you start to create a picture in your mind.

Imagine yourself walking on a path through a forest. The path is soft beneath your shoes, a mixture of soil, fallen leaves, pine needles, and moss. As you walk, your body relaxes and your mind clears, more and more with each step you take.

Breathe in the fresh mountain air, filling your lungs completely. Now exhale. Breathe out all the air. Feeling refreshed.

Take another deep breath in...revitalizing.... and breathe out completely, letting your body relax further.

Continue to breathe slowly and deeply as you walk through the forest.

The air is cool, but comfortable. Sun filters through the trees, making a moving dappled pattern on the ground before you.

Listen to the sounds of the forest.... Birds singing. A gentle breeze blowing. The leaves on the trees shift and sway in the soft wind.

Your body relaxes more and more as you walk. Count your steps and breathe in unison with your strides. Breathe in 2, 3, 4... hold 2, 3...exhale 2, 3, 4, 5.

Breathe in 2, 3, 4... hold 2, 3...exhale 2, 3, 4, 5. Breathe in 2, 3, 4... hold 2, 3...exhale 2, 3, 4, 5.

Continue to breathe like this, slowly and deeply, as you become more and more relaxed.

As you walk through the forest, feel your muscles relaxing and lengthening. As your arms swing in rhythm with your walking, they become loose, relaxed, and limp.

Feel your back relaxing as your spine lengthens and the muscles relax. Feel the tension leaving your body as you admire the scenery around you.

Your legs and lower body relax as well, feeling free and relaxed.

As you continue to walk through the forest, you begin to climb up a slight incline. You easily tread along smooth rocks on the path.

The breeze continues to blow through the treetops, but you are sheltered on the path, and the air around you is calm.
Around you is an immense array of greens. Some of the leaves on the trees are a delicate, light green. Some leaves are deep, dark, true forest green.

Many trees have needles that look very soft and very green. The forest floor is thick, green moss.

Tall trees grow on either side of the path. Picture the variety of trees around you. Some have smooth, white bark. Others are darker, with coarse, heavy bark, deeply grooved. Enjoy the colors of the bark on the trees - white, tan, brown, red, black... many combinations of color. You admire the rough, brown bark of pine trees and enjoy the fresh pine scent.

Smell the forest around you. The air is fresh, and filled with the scent of trees, soil, and mountain streams.

You can hear the sound of water faintly in the distance. The gentle burbling sound of a creek.

As you continue to walk through the forest, you are gaining elevation and getting closer to the sound of a running stream.

Continue to enjoy the forest around you. Enjoy the forest visualization.

As you near the top of the mountain, you hear the stream, very close now. The path curves up ahead. You can see sunlight streaming onto the path.

As you round the corner, you hear the water, and see a clearing in the trees up ahead. A beautiful look out point awaits.

You are growing tired from your journey. Your body feels pleasantly tired and heavy.

Imagine yourself walking toward the clearing and the stream. Stepping stones make an easy path across the stream and toward the edge of the mountain. Step on each large flat stone to easily cross the small, shallow stream.

Up ahead is a large, smooth rock... like a chair waiting for you to rest. The rock is placed perfectly, high up on this beautiful vantage point.

Sit or lie down on the rock if you wish. It is very comfortable. You feel very comfortable and at ease. The sun shines down on you.

Looking around, you see mountains in the distance. Faint and blue.

You can look down from your vantage point into a valley with trees and a brilliant blue lake. Across from you is another mountain.
The clearing around you is made up of rocks, soil, pine needles, moss, and grass. The grass and mountain wildflowers around you blow gently in the breeze. A deer quietly emerges from the edge of the forest to graze in the clearing. As the deer raises its head to look at you, you can see its nostrils moving to catch your scent. The deer cautiously walks to the stream to drink before disappearing back into the forest.

Squirrels dart in and out of sight as they romp through the trees, and race across the clearing.

Feel the sun warming your body as you relax on the rock. Enjoy the majestic landscape around you and feel your body relaxing even more. Your body becomes very warm, and very heavy.

Continue to breathe the clean, fresh air. You feel so relaxed. Calm. At peace.

Enjoy the sights....sounds....and smells of the forest around you.

Feel the sun, warm on your skin. Feel the gentle breeze blow across your cheek.

Listen to the birds singing. Hear the stream flowing. The leaves rustling in the breeze. Squirrels chattering.

See the flowers, trees, valley, and mountains around you.

Lay back on the comfortable rock, and you can look up to see the blue sky. Small white clouds float gently across the sky. Watch them drift slowly by. Enjoy this peaceful place. (pause...)

When you are ready to leave this peaceful place, slowly begin to reawaken your body.

As you reawaken, keep with you the feeling of calm, peace, and relaxation.

Wiggle your fingers and toes to wake up your muscles. Shrug your shoulders. Stretch if you want to.

When you are ready, open your eyes and return to full wakefulness, feeling alert and refreshed.
Noncompliance

Noncompliance is a common characteristic exhibited by students with emotional disturbance. Noncompliance to teacher requests is often the catalyst to other problem and disruptive behaviors in the classroom. Research suggests that teachers often unknowingly reinforce student noncompliance. This occurs when teachers repeatedly ask for compliance and do not always reinforce or praise students when they do comply with requests. It appears there is an inverse relationship between compliance and disruptive behaviors. In other words, when students readily comply with teacher requests, disruptive behavior decreases and on-task behavior increases (Musser, Bray, Kehle, & Jenson, 2001).

Research suggests that teachers most frequently use aversive measures to attempt to gain compliance and control in the classroom, such as verbal reprimands, exclusion from activities/class, and teacher disapproval. However, these measures have not been proven to increase compliance or decrease disruptive behaviors. Therefore, teachers should focus on more positive strategies that have been proven to increase compliance and in turn decrease disruptive behaviors (Ducharme, & DiAdamo, 2005).

The following guides and worksheets will help teachers and other school professionals implement positive behavior interventions for use with individual students or for more effective use, class wide. Strategies such as precision requests, errorless compliance training, and token economies can help teach positive behaviors, compliance, and decrease off-task and disruptive behaviors. Information about precision requests and
errorless compliance training is provided below and instruction of the implementation of token economies can be found in the Classroom Strategies section of this resource binder.
**Strategies for Noncompliance: Precision Requests**

The use of precision requests in a classroom can be thought of as a behavior prevention technique. Positive Behavioral Supports and Interventions (PBIS), are preventive methods to support children at school. These interventions are implemented to create positive learning environments that help prevent behavioral problems from occurring. Precision requests are a type of PBIS that promotes cooperation between students and school staff. Although the primary desired outcome is cooperation, teachers and students also benefit from the calm environment that is created from the use of precision requests.

**What is a precision request?**

A precision request intervention plan places the teacher or other authority figure under the microscope and asks, “How are you making requests?” Unfortunately, without knowing, teachers often contribute to a child’s lack of cooperation by the way they deliver commands and requests. Precision requests strive to make the exchange of a request or command positive and successful. When this happens, both the student and the teacher win. A precision request intervention plan involves the delivery of a request, using “do” and “don’t” commands. The student’s response to the request is then enforced with either positive reinforcement or some type of reductive technique. The type of enforcement depends on whether the child cooperated with the request or not (Musser et al., 2001). The following guide can help teach and implement precision request.

1. “Guide to Precision Requests”
Guide to Precision Requests

Key Terms:

Cooperation: the act of yielding to an authority figure.

Noncompliance/Noncooperation: refusing to yield to an authority figure.

Reinforcer: validates/enforces the appropriate behavior and can be verbal or concrete.

Reductive Techniques: a technique used to reduce an undesired behavior, for example using a time-out or response cost system.

Response Cost: a type of reductive technique that involves losing a reinforcer due to inappropriate behavior. This can be the loss of an activity or an item.

Token Economy: a behavior management system that uses tangible/concrete reinforcers, (such as points or stickers) that students earn for appropriate behavior or academic achievement. This system is easily adaptable for group/classroom or individual reinforcement.

Behavioral Momentum: making requests where students are more likely to cooperate before making request where noncooperation/noncompliance is more likely.

How to Make a Precision Request:

1. Make a request using the word “please.”
   
   E.g. “Take out your homework please.”

1. If the student cooperates, reinforce the student.
   
   Ex. “Thanks for taking out your homework so promptly” and places a sticker on a chart on the student’s desk.

2. If the student does not cooperate, make a second request saying, “You need to.”
   
   Ex. “Bobby, you need to take out your homework.”

3. If the student cooperates, reinforce the student.
Ex. “Thank you for following directions” and places a sticker on a chart on the student’s desk.

4. If the student does not cooperate, use a reductive technique.

Ex. “Bobby, because you did not take out your homework, you will lose computer time at the end of the day.”

When giving precision requests **DO** the following:

- Establish eye contact with the student.
- Use a firm and unemotional tone of voice.
- Stand approximately three feet away from the student.
- Deliver the request in the form of a statement.
- Wait 3-5 seconds after your request.
- Use behavioral momentum.
- Be consistent.

When giving precision requests **DO NOT** do the following:

1. Don’t show frustration or anger when delivering the request.
2. Don’t give up on the intervention if it doesn’t work right away.
Strategies for Noncompliance: Errorless Compliance Training

Errorless compliance training is based upon the work of Ducharme and others in the field of developmental disabilities. These researchers noted several important aspects of the compliance process which were used to develop errorless compliance training. Ducharme notes that behaviors that occur may appear to be noncompliance, but may actually represent a skill or developmental incompetence. Additionally, some students do not have established response sets or a skill repertoire for following an adult’s or other authority figure’s request on demand. A student that has learned what a request or direction means, still may not fully understand what the adult or other authority figure is specifically asking them to do. Therefore due to confusion and frustration experienced by the student, the adult’s attempts to prompt compliance may inadvertently reinforced undesired behaviors. Additionally, due to increased frustration and the adult’s expectations that the student will comply, the adult’s communication with the student may be negatively affected and hinder compliance from the student (Ducharme, Sanjuan & Drain, 2007).

The following guide will help teachers and other school professionals implement an errorless compliance program in the classroom.

1. “Guide to Errorless Compliance Program Implementation”
Guide to Errorless Compliance Program Implementation

Steps to Implementing an Errorless Compliance Program:

1. Create a hierarchy of directions that the student follows. Designate each direction in the order of the probability to student will follow it. For example, “have a snack” is a direction a student is likely to follow almost 100% of the time it is asked. Directions in this category should be within the child’s repertoire, level of competence, and should be reinforcing.

2. Working with a team (teacher, aides, etc.), decide what the period of time where compliance is the focus will be called.

3. Make a visual icon for the activity and place it on the student’s personal visual schedule (if used) or add it to the classroom schedule.

4. Start the compliance activity by showing or pointing to the icon and saying, “It’s time for (compliance activity).”

5. Begin with directions/request that are 90 to 100% likely to be followed. Provide immediate praise each time the student complies with the direction. If the student does not follow the direction/request, try a different direction. The goal is to create positive behavioral momentum.

6. If the student has failed to comply to an easy direction/request, repeat that direction only after the student has succeeded and complied to three to five other directions in a row.

7. Always end an activity on a success, even if it requires that you drop back developmentally in order for the student to comply to a direction/request successfully.

8. Have the student check their visual schedule or the classroom schedule. Ensure that a highly preferred activity follows the compliance training (such as free time, computer use, etc.).

9. Once the student is following high probability directions/requests, begin to add in more difficult directions as was determined in the hierarchy of directions.

10. Introduce more difficult directions/requests after the student has complied with high probability items to create positive behavioral momentum.
11. During this time, start to generalize the high probably directions/requests to contexts other than the schedule/structured compliance activity time.

**Strategies for Generalizing Compliance:**

1. For most situations, it is useful to include a high probably compliance direction/request whenever a student is “stuck” due to resistance.

2. If an easier compliance tasks is introduced, make sure to eventually return to the original direction/request.

3. For some students, the original direction may be hard for them to follow due to multiple steps. Therefore it may be useful to break the original direction into multiple easy compliance tasks.

4. Make sure to phrase directions in a positive way so that the student can and wants to follow the direction.

5. Make sure the directions/requests are clear, concise and let the student know exactly what they need to do to successfully comply.
Classroom Strategies

Bibliotherapy has been described as “the process by which teachers, as informed decision-makers, select appropriate reading materials and match them to the needs of students to assist in the development of self-awareness, problem-solving skills, perspective-taking, and understanding of problems” (Johnson, Wan, Templeton, Graham, & Sattler, 2000). As a new-age technique, teachers are using books to cover a range of topics in class such as anger, bullying, and social skills to name a few. Coverage of these topics can be helpful in the classroom for all students, including students with emotional disturbance. The underlying premise of bibliotherapy is that students will identify with literary characters similar to themselves, creating an association that helps students release emotions, gain new perspectives, and explore new ways of interacting with others. It is a class wide strategy can bring serious topics to light through literature and offer an opportunity for discussion.

Another classroom strategy includes, “instructing teachers to use ‘do’ instead of ‘don’t’ commands to increase compliance rates” with students with emotional disturbances (Musser et al., 2001, p. 294). Another strategy that Musser et al. reported could benefit the classroom as well as the students’ home includes training the adult (teacher, parent, or aide) to give a 5-second wait period after an initial request is made before making a second request for compliance. Musser et al. continued that if the requests are complied with, immediately reinforce the student and if there is no compliance for the request, “a reductive technique, usually in the form of a time out”
should be delivered. To strengthen the delivery of the requests for compliance, they should be made in “a firm, but quiet tone of voice” (p. 295).

Research for additional classroom strategies include token economies paired with response cost (Musser et al., 2001), independent learning strategies, peer-mediated learning that includes reciprocal and class wide peer tutoring, and cooperative learning. “A structured learning environment” that provides “explicit, systematic, and highly interactive direct instruction delivered in learning-friendly, memorable ways” is another classroom strategy that can be used with students with emotional disturbances (Wagner et al., 2006, p. 13).

1. **“Bibliotherapy Resource”**

   This resource provides a list of books based on the current need for bullying prevention and intervention. This list of books has the name of the book, the author, and the grade it is best suited for. This resource provides an excellent opportunity to take a serious topic and make a classroom conversation and lesson from it with the use of the book.

2. **“Implementing a Token Economy”**

   The token economy worksheet is a resource for school professionals on how to implement the system.
<table>
<thead>
<tr>
<th>Book Title</th>
<th>Author</th>
<th>Grades</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arthur’s April Fool</td>
<td>M. Brown</td>
<td>Primary</td>
</tr>
<tr>
<td>Being Bullied</td>
<td>K. Petty &amp; C. Firmin</td>
<td>K-1&lt;sup&gt;st&lt;/sup&gt;</td>
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<tr>
<td>Benny Gets A Bully-Ache</td>
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<tr>
<td>Bootsie Barker Ballerina</td>
<td>B. Bottner</td>
<td>Primary</td>
</tr>
<tr>
<td>Bullies Are a Pain in the Brain</td>
<td>T. Romain</td>
<td>4&lt;sup&gt;th&lt;/sup&gt;-5&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Bully on the Bus</td>
<td>C.W. Bosch</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Bye, Bye Bully</td>
<td>J. S. Jackson</td>
<td>K-2&lt;sup&gt;nd&lt;/sup&gt;</td>
</tr>
<tr>
<td>Dealing With Bullying</td>
<td>M. Johnson</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Don’t Laugh at Me</td>
<td>S. Seskin &amp; A. Chamblin</td>
<td>K-1&lt;sup&gt;st&lt;/sup&gt;</td>
</tr>
<tr>
<td>Frankenbug</td>
<td>S. Cousins</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt;-5&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Hooway for Wodney Wat</td>
<td>H. Lester</td>
<td>Preschool-K</td>
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<tr>
<td>How to Be Cool in the Third Grade</td>
<td>B. Duffey</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Hugo and the Bully Frogs</td>
<td>F. Simon</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Jag</td>
<td>L. Rimes</td>
<td>K-2&lt;sup&gt;nd&lt;/sup&gt;</td>
</tr>
<tr>
<td>Jake Drake: Bully Buster</td>
<td>A. Clements</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Just a Bully</td>
<td>G. &amp; M. Mayer</td>
<td>Preschool-K</td>
</tr>
<tr>
<td>King of the Kooties</td>
<td>D. Dadey</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>King of the Playground</td>
<td>P.R. Naylor</td>
<td>1&lt;sup&gt;st&lt;/sup&gt;</td>
</tr>
<tr>
<td>Libby Meets the Bully</td>
<td>E. Connor &amp; M. Kinzer</td>
<td>4&lt;sup&gt;th&lt;/sup&gt;-6&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Loud Mouth George and the Sixth Grade Bully</td>
<td>N. Carlson</td>
<td>1&lt;sup&gt;st&lt;/sup&gt;</td>
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<tr>
<td>Martha Walks the Dog</td>
<td>S. Meddaugh</td>
<td>Preschool-K</td>
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<td>Mean Mean Maureen Green</td>
<td>J. Cox &amp; C. Fisher</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt;-5&lt;sup&gt;th&lt;/sup&gt;</td>
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<td>P. Polacco</td>
<td>1&lt;sup&gt;st&lt;/sup&gt;-3&lt;sup&gt;rd&lt;/sup&gt;</td>
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<td>Monster Mama</td>
<td>L. Rosenberg</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>My Name is Not Dummy</td>
<td>E. Crary</td>
<td>K-2&lt;sup&gt;nd&lt;/sup&gt;</td>
</tr>
<tr>
<td>My Secret Bully</td>
<td>T. Ludwig</td>
<td>Primary</td>
</tr>
<tr>
<td>Nobody Knew What to Do: A Story about Bullying</td>
<td>B.R. McCain</td>
<td>K-2&lt;sup&gt;nd&lt;/sup&gt;</td>
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<tr>
<td>Nothing Wrong with a Three Legged Dog</td>
<td>C. McNamee</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt;-5&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>One</td>
<td>K. Otosshi</td>
<td>Primary</td>
</tr>
<tr>
<td>Patrick and the Big Bully</td>
<td>G. Hayes</td>
<td>K-1&lt;sup&gt;st&lt;/sup&gt;</td>
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<tr>
<td>Pinky and Rex and the Bully</td>
<td>J. Howe</td>
<td>K-1&lt;sup&gt;st&lt;/sup&gt;</td>
</tr>
<tr>
<td>Radio Fifth Grade</td>
<td>G. Korman</td>
<td>Primary / Intermediate</td>
</tr>
<tr>
<td>Reluctantly Alice</td>
<td>P.R. Naylor</td>
<td>4&lt;sup&gt;th&lt;/sup&gt;-6&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Robbie and Ronnie</td>
<td>C. Kilphius</td>
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<td>Stand Tall Molly Lou Melon</td>
<td>P. Lovell</td>
<td>Preschool-2&lt;sup&gt;nd&lt;/sup&gt;</td>
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<tr>
<td>Star Girl</td>
<td>J. Spinelli</td>
<td>5&lt;sup&gt;th&lt;/sup&gt;-8&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Stick up for Yourself: Every Kid’s Guide to Personal Power and Positive Self-Esteem</td>
<td>G. Kaufman &amp; L. Raphael</td>
<td>4&lt;sup&gt;th&lt;/sup&gt;-8&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Stop Picking on Me: A First Look at Bullying</td>
<td>P. Thomas</td>
<td>K-2&lt;sup&gt;nd&lt;/sup&gt;</td>
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<td>Talking About Bullying</td>
<td>J. Powell</td>
<td>K-2&lt;sup&gt;nd&lt;/sup&gt;</td>
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<td>Telling Isn’t Tattling</td>
<td>K. Hammerseng</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt;-4&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Title</td>
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<td>-----------------------------------------------</td>
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<td>The Ant Bully</td>
<td>J. Nickle</td>
<td>K-2&lt;sup&gt;nd&lt;/sup&gt;</td>
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<td>The Berenstain Bears and the Bully</td>
<td>S.&amp; J. Berenstain</td>
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<tr>
<td>The Berenstain Bears and Too Much Teasing</td>
<td>S.&amp; J. Berenstain</td>
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</tr>
<tr>
<td>The Big Bad Bully Bear</td>
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<td>The Rat and The Tiger</td>
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<td>The Field of the Dogs</td>
<td>K. Peterson</td>
<td>Primary / Intermediate</td>
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<td>The Recess Queen</td>
<td>A. O’Neil</td>
<td>K-1&lt;sup&gt;st&lt;/sup&gt;</td>
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<tr>
<td>The Saturday Kid</td>
<td>E. Sorel</td>
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<td>The Secret Life of Hubie Hartzel</td>
<td>S. Rowan-Masters</td>
<td>4&lt;sup&gt;th&lt;/sup&gt;-7&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Too Smart for Bullies</td>
<td>R. Kahn &amp; S. Chandler</td>
<td>1&lt;sup&gt;st&lt;/sup&gt;-2&lt;sup&gt;nd&lt;/sup&gt;</td>
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<tr>
<td>Wendy and the Bullies</td>
<td>N. Robinson</td>
<td>4&lt;sup&gt;th&lt;/sup&gt;-6&lt;sup&gt;th&lt;/sup&gt;</td>
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<tr>
<td>Wonder Kid Meets the Evil Lunch Snatcher</td>
<td>L. Duncan</td>
<td>5&lt;sup&gt;th&lt;/sup&gt;-7&lt;sup&gt;th&lt;/sup&gt;</td>
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</table>
Implementing a Token Economy
(Adapted from Mitenberger, 2008)

Key Terms:

**Conditioned Reinforcer:** A previously neutral item that has been paired multiple times with an established reinforcer and eventually functions as a reinforcer itself.

**Backup Reinforcers:** Reinforcers used in a token economy. A student receives tokens for desirable behaviors and exchanges a specified number of tokens for a variety of backup reinforcers.

**Token:** A conditioned reinforcer used in a token economy. The token is something that can be given to a student and accumulated by that student. The token is a conditioned reinforcer because it is given to the person after a desirable behavior and is exchanged for established reinforcers called backup reinforcers.

**Response Cost:** A negative punishment procedure in which a specified amount of a reinforce is removed for displaying an undesirable behavior.

**Intermittent Reinforcement Schedule:** A schedule of reinforcement in which not every instance of the desired behavior is followed by the delivery of a token.

What is a Token Economy:
The purpose of a token economy is to strengthen a student’s desirable behaviors that occur infrequently and to decrease undesirable behaviors in a structured environment. Students receive points for desirable behaviors which are called tokens. A token is given to the student immediately after a desirable behavior is displayed. The tokens can then later be exchanged for backup reinforcers. Since the token is paired with other reinforcers, it becomes a conditioned reinforcer that strengthens the desirable behaviors it follows. Backup reinforcers are chosen because they are known to be successful and powerful reinforcers for the students in the classroom. Therefore, the students become motivated to display the desirable behavior and decrease undesirable behavior in order to obtain the reinforcer.

Basic Components of a Token Economy:
- There are identified desirable behaviors that are targeted to be strengthened.
- Some form of a token is used to reinforce desirable behaviors (should be tangible).
- There are backup reinforcers that can be earned through the exchange of tokens.
- There is a preset reinforcement schedule for delivering tokens to students.
- There is a preset rate at which tokens are exchanged for backup reinforcers.
- There is a preset time and place for exchanging tokens for backup reinforcers.
If a response cost component is included, the undesirable behaviors are identified to be eliminated and student loses tokens for each instance of the target behavior.

**Possible Tokens:**
- Poker Chips
- Pennies or other coins
- Replicas of money
- Stamps, stickers, or stars
- Check marks on an individual card
- Check marks on the board
- Printed cards or coupons
- Hole punches in a card

**Possible Back-up Reinforcers (Elementary School):**
- Listening to music
- Art time
- Visiting another class
- Getting first choice of recess equipment
- Choosing a class game
- Eating lunch with the teacher
- Extra free time
- Positive note home to parents
- Calling home
- Being teacher’s helper

**Possible Back-up Reinforcers (Adolescents):**
- Listening to music
- Writing a note to a friend
- Talking to a friend
- Choosing an activity for the class
- Helping a teacher
- Sitting out of an activity
- Homework pass
- Getting a snack
- Free time
- Being excused from a quiz
- Visiting another class
- Computer time
Choosing a Schedule of Reinforcement:

- Typically the program begins with continuous reinforcement where the student is reinforced with a token for each time they display the desirable behavior.
- Once the desirable behaviors are occurring more frequently and regularly, and intermittent reinforcement schedule can be incorporated to maintain the behavior.
- It is important that the student earns enough tokens in the beginning of implementation of a token economy so that they can exchange their tokens for backup reinforcers regularly. This way the tokens earn their value as a condition reinforce quickly and the student begins receiving reinforcement to displaying desirable behaviors.

Establishing the Token Exchange Rate:
Backup reinforcers must be “purchased” with earned tokens for displaying desirable behaviors. Therefore, each backup reinforcer must have a set price or value to determine the amount of tokens necessary to “buy” the reinforcer.

- Smaller items are exchanged for fewer tokens
- Larger items are exchanged for more tokens
- The exchange rate should be set according to the maximum numbers of tokens that a student can earn in a day.
- Additionally, the exchange rate should be set so that a student can acquire some backup reinforcers for displaying a reasonable level of desirable behavior, but does not acquire so much of the reinforcers that it becomes less desirable (satiation occurs).
- Many times the exchange rate may need to be adjusted after the beginning of a token economy to produce the best results.

Establishing Time and Place for Exchanging Tokens:

- The time and place for exchanging tokens are planned in advance.
- In some cases there is a “token store” or other area where backup reinforcers are stored that students do not have access to except during designated times.
- At the designated time, the student is able to look in the “token store” at various backup reinforcers available to purchase.
- When a student decides to make a purchase they exchange the appropriate amount of tokens to receive the item.
- Creating structure in advance results in more consistent implementation of the program.

Deciding Whether or Not to Use Response Cost:

- If the goal of the token economy is to strengthen desirable behaviors and there are no competing problems behaviors, a response cost component should not be used.
If undesirable behaviors are competing with desirable behaviors, then a response cost component may be included in a token economy.

A response cost component should only be introduced after the token economy has been in place for a period of time.

The loss of tokens is only punishing if the tokens have already been firmly established as conditioned reinforcers for the students.

Response cost only works if the teacher or other school professional can get the tokens back from the students. If students resist or become aggressive when tokens are attempted to be taken away, it may be impossible to implement a response cost component.

If a response cost component is used, the undesirable behaviors must be identified and defined and the number of token that will be taken away must be determined. The number of tokens taken away is determined by the severity of the problem behavior, the number of tokens the client can earn in a day, and the cost of backup reinforcers.

If a student loses all of their tokens it results in less opportunity to purchase backup reinforcers. This can result in less positive reinforcement of desirable behaviors. Additionally, if a student loses all of their tokens problem behavior may continue because they do not have any more tokens to lose.

Staff Training:
Implementing a token economy requires staff training to ensure that all staff involved (including aides and anyone who may provide reinforcement) reinforce and implement the program appropriately and consistently. This means staff must fulfill the following responsibilities:

- Discriminate and notice each instance of the desirable or undesirable (is using response cost) behavior.
- Deliver tokens immediately after a desirable behavior occurs and according to the set schedule of reinforcement.
- If using a response cost component, take tokens away immediately after an undesirable behavior occurs.
- Preserve the integrity of the tokens and prevent theft or counterfeiting.
- Be aware of exchange rates and times and follows these rules of exchange.
Positive Behavior Support (PBS)

Another systematic approach to working with students with emotional disturbances includes positive behavior supports (PBS). Morrissey, Bohannon, and Fenning (2010) write that PBS is a support model that is gaining momentum as a successful method for “addressing school wide behavioral issues, classroom management, and individual support systems for students with and without special needs” (p. 27). Morrissey et al. (2010) explain the PBS system includes recognizing appropriate behaviors on a “prevention-orientated basis” instead of a reactionary basis (that includes consequences based on problem behavior. p. 27). The “prevention-orientated basis” can be the impetus for “safer schools designed for keeping students in school and experiencing success” (Morrissey et al., 2010, p. 27). Ideally, PBS includes teachers, students, parents, administrators, other staff members at school and community members and it is a three-tiered school wide model. Morrissey et al. (2010) explains that PBS is a school wide, proactive approach to dealing with discipline and includes the following:

- Committed to addressing behavior in the school.
- Forming a representative team.
- Examining behaviors at a school-wide level using data such as office discipline referrals and surveys.
- Choosing three to five behavioral expectations and generating specific examples of these for locations throughout the school.
Implementing a school-wide behavior support program is a huge task and typically takes a few years to fully implement. However, the following guide provides a brief description of the necessary components of effective school-wide positive behavior support programs.

1. “PBS Basics”

2. “Behavioral Expectations Across School Contexts Example”

3. “Example PBS Middle School Program”


PBS Basics  
(Adapted from Surfas, 2012)

What is a Positive Behavior Support (PBS) Program?

- Systematic approach to enhancing the capacity of schools to adopt and sustain the use of effective practices for all students. It is a team-based process of problem-solving.

- Teaches mastery of social competencies using effective instructional practices.

Common Approaches to PBS:

- One approach teaches three core skills/expectations to students:
  1. Be Safe
  2. Be Respectful
  3. Be Responsible
     Or
     The school can choose their own rules and define 3-5 school-wide behavioral expectations.

- Provide a defining rule for each expectation.

- Build a culture of competence by teaching school-wide expectations to all students.

- Teach behavioral expectations in various contexts.

- Teach specific social behaviors that are examples of behavioral expectations.
  - Ex. Being safe in the bus area means standing behind the line.

- Teach behavioral expectations with negative examples.
  - Ex. Punching someone means not being respectful or safe.

- Give opportunities to practice appropriate behaviors.

- Reward appropriate behaviors.

- Acknowledge appropriate behavior on a regular basis after the skill is learned.
## Behavioral Expectations Across School Contexts Example

*(Adapted from Surfas, 2012)*

<table>
<thead>
<tr>
<th>Core Skills</th>
<th>Class</th>
<th>Gym</th>
<th>Hallway</th>
<th>Playground</th>
<th>Bus Area</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Be Safe</strong></td>
<td>1) Follow Directions</td>
<td>1) Follow Directions</td>
<td>1) Walk</td>
<td>1) Only go Up Ladders</td>
<td>1) Wait Behind the Red Line</td>
</tr>
<tr>
<td></td>
<td>2) Keep Floors Clear</td>
<td>2) Wait for Turn</td>
<td>2) Open Doors Slowly</td>
<td>2) Only go Down Slides</td>
<td></td>
</tr>
<tr>
<td><strong>Be Respectful</strong></td>
<td>1) Raise Hand to Talk</td>
<td>1) Follow Rules of the Game</td>
<td>1) Keep Hands/Feet to Self</td>
<td>1) Use One-Minute Rule for Sharing</td>
<td>1) Keep Hands/Feet to Self</td>
</tr>
<tr>
<td></td>
<td>2) Keep Hands/Feet to Self</td>
<td>2) Return Equipment</td>
<td>2) Talk Quietly</td>
<td>2) Wait Your Turn</td>
<td>2) Use Appropriate Language</td>
</tr>
<tr>
<td><strong>Be Responsible</strong></td>
<td>1) Bring Books and Pencil to Class</td>
<td>1) Participate</td>
<td>1) Keep Books, Belongings, and Litter off the Floor</td>
<td>1) Stay within Recess Area</td>
<td>1) Keep Books &amp; Belongings with You</td>
</tr>
<tr>
<td></td>
<td>2) Do Homework</td>
<td>2) Wear Soft-Soled Shoes</td>
<td>2) Bring Equipment Back</td>
<td></td>
<td>2) Be on Time</td>
</tr>
</tbody>
</table>
Example PBS Middle School Program
(Adapted from Surfas, 2012)

Used Data-Based Decision Making:
- Tracked office referrals using a School-Wide Information System

Developed a simple set of behavioral expectations that staff agreed upon:
- Team selected 3 simple rules:
  1. Be Respectful of Self, Others, and Property
  2. Be Responsible and Prepared at all Times
  3. Be Ready to Follow Directions and Procedures
- Adopted a school motto, ex. “Do it the Wildcat Way!”
- Rules were posted in areas visible to students.

Taught Behavioral Expectations:
- Use surveys to determine the needs of the school
- Determined behavioral expectations for all students
- Determined that everyone needed to respond to students the same way

Acknowledged Appropriate Behavior:
- Developed a system for rewarding appropriate behaviors
- System involved using the “Gotcha System”
- Gotchas were tokens that could be redeemed for goodies/prizes for following behavioral expectations
- Students received a special pizza luncheon in the cafeteria and were praised for following behavioral expectations

Teacher Reinforcement:
- Teachers that consistently rewarded students for behavioral expectations could earn a GOOSE Pass (get out of school early pass).

Results:
- Prior to implementation office referrals totaled 1,252.
- After PBS implementation office referrals totaled 674 the following year.
- PBS implementation provided more time for teachers to spend on instruction rather than on office referrals and discipline issues.
RESOURCE BINDER REFERENCES


REFERENCES


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