

MACAR Workshop Track

Session 6: The Learning Different Child: Social Skills and Classroom Discipline



AMS Annual Conference, Orlando,
2013

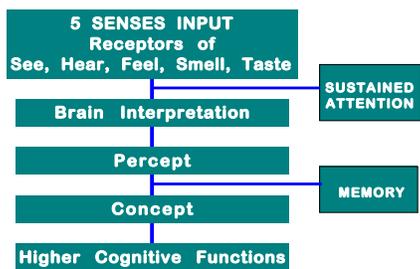
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Definition of Language Learning Differences

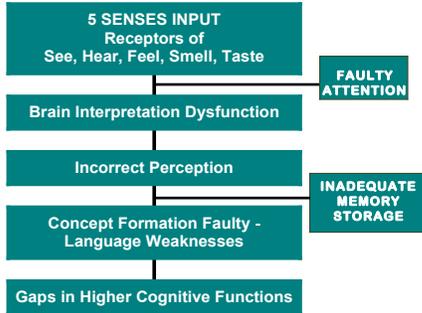
A language-learning different child shall be defined as a child with:

- average or above-average intelligence
- adequate vision and hearing
- without primary emotional disturbance
- who has failed or is at high risk to fail when exposed to school experiences using conventional educational techniques.

Processing Chart



Processing with Dysfunctions



A Few Thoughts:

“There is just much more self-centered behavior on the part of kids now. They cheat more, they kill one another more. They’re more sexually exploitive of one another.”
– *Kevin Ryan*

“In addition to the fact that Johnny still can’t read, we are now faced with the more serious problem that Johnny can’t tell right from wrong.”
– *William Kirkpatrick*

“Learning is more than literacy. Our children must be educated in reading and writing but also in right and wrong.”
– *President George W. Bush*

A Few More Thoughts:

“Social interventions are the new frontier in education.”
– *Rick LaVoie*

“Childhood and adolescence are critical windows of opportunity for setting down the essential emotional habits that will govern our lives.”
– *Daniel Goleman, Emotional Intelligence*

“Schools must unabashedly teach students about such key virtues as honesty, dependability, trust, responsibility, tolerance, respect, and other commonly held values.”
– *Breaking Rank: Changing an American Institution, National Association of Secondary School Principals*

What Is Social Competence?



Social Competence

Definition of Social Competence

- Analogous to intelligence
- Social competence is a higher-order construct made up of many components.



Social Competence

Includes:

- Positive relations with others
- Accurate and age appropriate social cognition
- Absence of maladaptive behaviors
- Effective social behaviors



Adapted from Vaughn and Hogan, 1990

Correlates of Peer Acceptance

Behavioral Correlates:

- Enjoyment of peer relationships
- Joining ongoing peer relationships
- Participating in peer activities
- Initiating peer contact
- Cooperation/taking turns
- Sharing
- Helping others
- Playing fairly
- Ability to give affection
- Resolving conflicts/differences



Correlates of Peer Acceptance

Personal Attributes:

- Physical Appearance
- Athletic Prowess
- Academic Ability
- Language/Communication Skill



Adapted from Table III, p. 158 of Learning Disabilities Spectrum: ADD, ADHD, & LD (1994). Edited by A. Capute, P. Accardo, and B. Shapiro. Baltimore: York Press, In "Social Deficits in Children with Learning Disabilities" by W. Stone and A. LaGreca.

Understanding Learning Differences



*Normal Brains
That Process
Differently*

Unexpected



In relation to:

- Age
- Exposure to social situations
- Cognitive abilities
- Academic abilities

Definition of Dyslexia

From the International Dyslexia Association® (IDA)

Dyslexia is a specific learning disability that is neurological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.

Adopted by the Board of Directors, November 12, 2002

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Essential Features:

- Persistent pattern of inattention and/or hyperactivity-impulsivity that is more frequently displayed and is more severe than is typically observed in individuals at comparable levels of development.
- Some hyperactive-impulsive or inattentive symptoms must have been present before seven years of age.
- Some impairment from the symptoms must be present in at least two settings.

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Essential Features, continued:

- D. There must be clear evidence of interference with developmentally appropriate social, academic or occupational functioning.
- E. The disturbance does not occur exclusively during the course of a Pervasive Developmental Disorder, Schizophrenia, or other Psychotic Disorders and is not better accounted for by another mental disorder.

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Three Subtypes:

- Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type
- Attention-Deficit/Hyperactivity Disorder, Predominantly Hyperactive-Impulsive Type
- Attention-Deficit/Hyperactivity Disorder, Combined Type

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Diagnostic Criteria for Inattentive Subtype

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

Inattention

- a) often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities.

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Inattention *(continued)*

- b) often has difficulty sustaining attention in tasks or play activity
- c) often does not seem to listen when spoken to directly
- d) often does not follow through on instructions and fails to finish schoolwork, chores or duties in the workplace (not due to oppositional behavior or failure to understand instructions.)
- e) often has difficulty organizing tasks and activities

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Inattention *(continued)*

- f. often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework)
- g. often loses things necessary for tasks or activities (e.g., toys, school assignments, pencils, books or tools)
- h. Is often easily distracted by extraneous stimuli
- i. Is often forgetful in daily activities

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Diagnostic Criteria for Hyperactive-Impulsive Subtype

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

Hyperactivity

- a) often fidgets with hands or feet or squirms in seat.
- b) often leaves seat in classroom or in other situation in which remaining seated is expected

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Hyperactivity (*continued*)

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

DSM-IV-TR Definition of Attention-Deficit/Hyperactivity Disorder

Impulsivity

- g) Often blurts out answers before questions have been completed
- h) Often has difficulty awaiting turn
- i) Often interrupts or intrudes on others (e.g., butts into conversations or games)

Proposed DSM-V Definition of Autism Spectrum Disorder

Must meet criteria A, B, C, and D:

A. Persistent deficits in social communication and social interaction across contexts, not accounted for by general developmental delays, and manifest by all 3 of the following:

1. Deficits in social-emotional reciprocity
2. Deficits in nonverbal communicative behaviors used for social interaction
3. Deficits in developing and maintaining relationships, appropriate to developmental level (beyond those with caregivers)

Proposed DSM-V Definition of Autism Spectrum Disorder

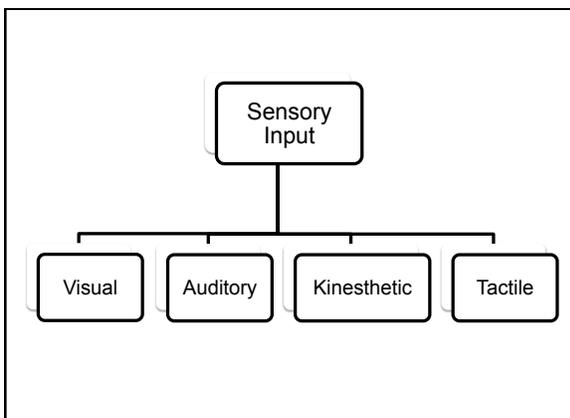
B. Restricted, repetitive patterns of behavior, interests, or activities as manifested by at least two of the following:

1. Stereotyped or repetitive speech, motor movements, or use of objects
2. Excessive adherence to routines, ritualized patterns of verbal or nonverbal behavior, or excessive resistance to change
3. Highly restricted, fixated interests that are abnormal in intensity or focus
4. Hyper- or hypo-reactivity to sensory input or unusual interest in sensory aspects of environment

Proposed DSM-V Definition of Autism Spectrum Disorder

C. Symptoms must be present in early childhood (but may not become fully manifest until social demands exceed limited capacities)

D. Symptoms together limit and impair everyday functioning



Developmental Dysfunctions and Possible Effects on Social Ability:

Memory

- Problems learning from experience
- Discrete recall of names faces, appointments
- Remembering steps in complex instructions

Adapted from *Developmental Variation and Learning Disorders* by Melvin Levine, M.D.

Developmental Dysfunctions and Possible Effects on Social Ability:

Language

- The communication and interpretation of feelings
- Code switching
- Topic selection and maintenance
- Conversational technique
- Perspective taking
- Lingo fluency

Adapted from *Developmental Variation and Learning Disorders* by Melvin Levine, M.D.

Developmental Dysfunctions and Possible Effects on Social Ability:

Higher-order Social Cognition

- Conflict resolution
- Problems assessing attributions
- Engaging in moral reasoning
- Monitoring
- Reading and acting on social information

Adapted from *Developmental Variation and Learning Disorders* by Melvin Levine, M.D.

Developmental Dysfunctions and Possible Effects on Social Ability:

Production capacities

- Self marketing and image development

Adapted from *Developmental Variation and Learning Disorders* by Melvin Levine, M.D.

Common Social Skills Deficits in Children with Learning Differences

- Inappropriate Interactions
- Communication Difficulties
- Deficit Social Cognitive Skill
- Poor Emotional Regulation

Inappropriate Interactions

- Fewer active friendship making skills
- Initiate more negative, competitive statements
- Excessive talking
- Impulsive and unfocused
- Dominating or disruptive

Communication Difficulties

- Fewer positive and self-disclosing comments
- Poor reciprocity
- Difficulty monitoring discourse
- Less assertive verbally
- Difficulty giving and receiving criticism

Communication Difficulties



- Less responsive to other's initiations
- Inappropriate verbal exchanges
- Difficulty shifting between giving and receiving information

Deficit Social Cognitive Skill

- Less eye contact and affect
- Poor role-playing ability
- Poor social insight
- Poor comprehension of emotions and non-verbal cues

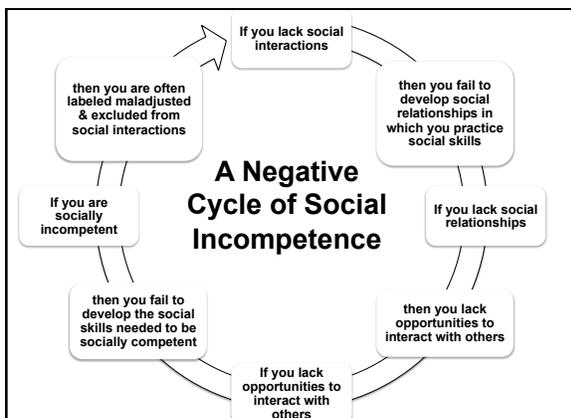
Deficit Social Cognitive Skill

- Limited self-awareness
- Fewer acquisition skills
- Poor social problem-solving skill
- Misinterpreting actions and words of others



Poor Emotional Regulation

- Moody, unpredictable
- Choose less socially acceptable behaviors
- Aggressive outbursts
- Excitability, silliness
- Poor transitioning from one activity to another



VICIOUS CIRCLE OF NEGATIVE BEHAVIOR



Adults have to help him break the circle.
How?

- A. Improve academic skills.
- B. Direct teach social skills/coping strategies.
- C. Provide success experiences in school and through areas of talent.

Why We Teach Social Skills

- Peer relationships are important
- Poor peer relationships place children “at risk” for long-term problems in adjustment
- Some children with learning differences are not accepted by peers

Why We Teach Social Skills

- Communication skills
- Problem solving
- Decision making
- Clarify abstract concepts and societal values

Why We Teach Social Skills

To improve behavior:

- Self-regulation
- Impulse control
- Understand cause and effect
- Acceptance of responsibility
- Practice appropriate roles

Why We Teach Social Skills

To improve feedback sensitivity:

- Social interaction skills
- Empathy
- Understand relationship requirements

How can we apply what we know from the research to interventions that improve social behavior?

What is *Choices*?

- Evolved from the Social Values work of Dr. Charles Shedd, clinical psychologist
- Intervention program which is structured, multisensory, taught daily for 30 minutes to grades 1 through 9
- Joyce S. Pickering added oral language development components
- Laure Ames rewrote Dr. Shedd's curriculum and related difficulties in development to the learning different child

Choices Four Levels

- Early Childhood – Kindergarten
- Lower Elementary (1st – 3rd Grades)
- Upper Elementary (4th – 6th Grades)
- Middle School (7th – 9th Grades)

Lessons

Skills for Success

- . Communication Skill
- . Decision Making Skill (Stop, Think, Choose)
- . Problem Solving Skill (PACT)

Lessons

Responsibility

- . At School
- . At Home

Self-Discipline

- . Courage
- . Respect
- . Integrity
- . Perseverance
- . Truth
- . Attitude

Lessons

Self-Control

- . Prudence
- . Communicating Feelings
- . Assertiveness, Not Aggressiveness
- . Handling Stress

Consideration of Others

- . Compassion
- . Tolerance
- . Cooperation
- . Manners

Direct Instruction of Social Skills: *Choices*



Choices

- Incorporates salient features of social skills training, problem-solving techniques, affective regulation, cognitive restructuring, and behavior modification
- Easy to use
- Involves parents
- Challenging and fun

A Four-Step Teaching Method

1. Introduce the concept
2. Read the story
 - ❖ Discuss the vocabulary
 - ❖ Analyze cause and effect
 - ❖ Discuss questions related to the story
3. Role play
 - ❖ Critique verbal and non-verbal communication using the Communication Checklist
4. Research activities

Lesson Format

- I. Thinking It Through
- II. Story
- III. Let's Talk
- IV. Let's Act
- V. Let's Investigate

Why We Teach Social Skills

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THINKING IT THROUGH

Habits

Habits are the behaviors you use in certain situations all the time. Habits become habits when you do the same thing over and over. There can be either good habits, like brushing your teeth, or bad habits, like slamming doors. Bad habits should be broken if they develop. Bad habits frequently bother other people or do not help you to be your best.

Thinking It Through

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Story and Discussion





STORIES

LEVEL ONE

A Summary

The Berenstain Bears and the Bad Habit

Stan and Jan Berenstain

Sister Bear is in first grade. She and some of the other cubs have developed **nervous habits** that they use when they have to **concentrate**. Lizzy twirls her hair and Sister bites her nails. She nibbles them down so far that her fingers get sore. She tried putting tape over them, but that did not work. Mama Bear worries because "nail biting is a very difficult habit to break." Sister asks what a habit is and Mama tells her a habit "is something you do so often you don't even have to think about it. There are good habits, like brushing your teeth, but there are also bad habits." Papa Bear gets angry when he learns Sister is biting her nails, but Mama tells him getting angry will only make the habit worse. Mama Bear tries giving Sister ten pennies at the start of every day. She had to give back a penny every time she bit her nails. The plan worked and Sister felt so proud of breaking her bad habit and being responsible!



LET'S TALK!

LEVEL ONE

1. Why do you think Sister Bear started biting her nails? What do you do when you have to concentrate or are nervous in school?
2. How did Sister feel when the other children teased her? Have you ever been teased about a bad habit? How did it make you feel?
3. Use "Draw a Picture of the Story" found in the Appendix. Draw a picture of how Sister's nails looked when she broke her bad habit.

LEVEL TWO

1. What are some of this boy's good habits? Why is this a "boy we want?"

UNDERSTANDING CAUSE & EFFECT

Example Chart: *The Berenstain Bears and the Bad Habit*

The Problem

Sister Bear bites her fingernails.

The Cause

Sister Bear gets nervous at school when she has to concentrate, so she begins biting her nails. Nervous habits are easy to get into, but hard to break.

The Effect (What Happened?)

Biting her nails becomes a habit that Sister Bear has a hard time breaking. She works hard to break it, though, because it is hurting her fingers.



LET'S ACT!

After each role-play, use the "Communication Checklist" (Appendix).

LEVEL ONE

1. Jane is a first grader who still sucks her thumb. Another student should assume the role of an adult who explains to Jane that a lot of kids suck their thumb as babies but that her thumb sucking has now become a bad habit. The actors should discuss other things to do when Jane feels like sucking her thumb.
2. Billy does not like to hurry in the mornings so he lays his clothes out the night before so they are ready the next day when he gets dressed. His mother praises him for developing a good habit that will help him all his life.

Let's Act

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Let's Act

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✓ COMMUNICATION CHECKLIST

Facial Expression

- Interested
- Good eye contact
- Uninterested

Posture/Proximity

- Straight back
- Good personal distance between the two people communicating
- Inappropriate personal distance--too close or too far

Gesture

- Uses gestures that help the listener understand
- Inappropriate gestures that are confusing or uses no gestures at all

Tone of Voice

- Good feelings shown
- Confusing feelings shown



LET'S INVESTIGATE!

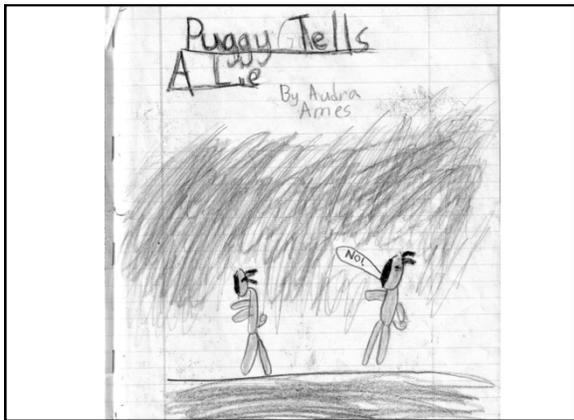
LEVELS ONE AND TWO

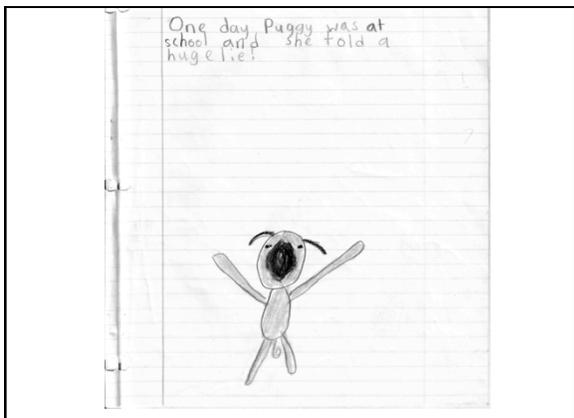
- * Have each student think about and then decide on a bad habit they would like to break or a good habit they would like to make stronger. Have them place a "Compliment Chart" on the corner of their desk. The student should put a small sticker (or smile) on the chart every time they are successful and the teacher compliments them.

COMPLIMENT CHART FOR HABITS

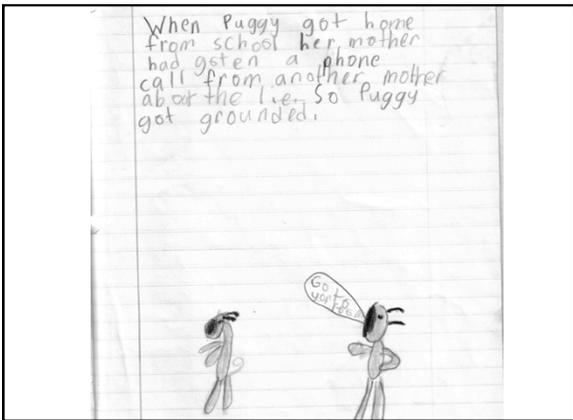


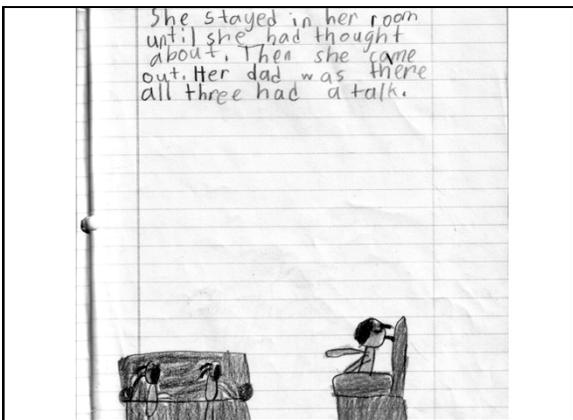
LEVELS ONE, TWO, AND THREE

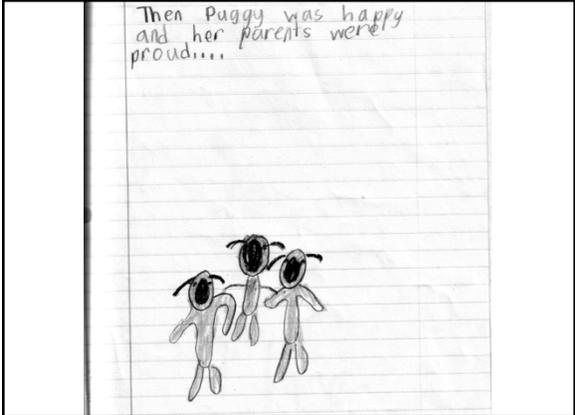


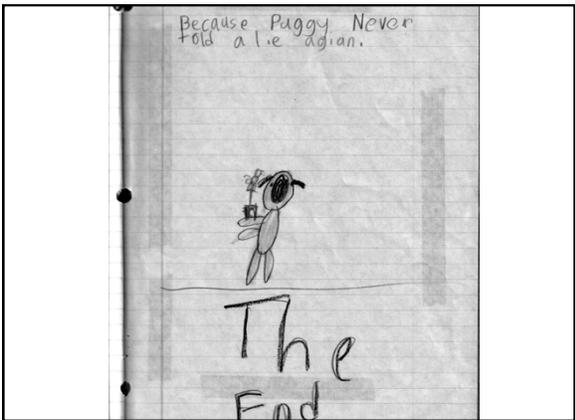













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Closing Remarks

To help students break out of the vicious cycle of social incompetence, students need:

- Direct specific instruction in therapeutic techniques which improve academic skills
- Mature adult direct teaching of a specific social skills program
- A comprehensive program which remediates weaknesses and celebrates strengths through success at school and through areas of talent

**Choices Become Habits
Habits Become Character
Character Becomes Destiny**



CHOICES
The Shelton Model for Teaching Social Skills and Social Values



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FOR LEARNING DIFFERENCES

MACAR

JULY 8-17, 2013
(no class on Sunday)

**MACAR is designed to assist the Montessori teacher
to serve students with learning differences in the
regular classroom.**

Materials include:

- ◆ ADMINISTRATION I/II
- ◆ PRACTICAL LIFE
- ◆ SENSORIAL
- ◆ MATH
- ◆ ORAL LANGUAGE/WRITTEN LANGUAGE
- ◆ CHOICES
- ◆ PERCEPTUAL MOTOR SKILLS

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